



PROVIDING COMPREHENSIVE OVC CARE IN RESOURCE LIMITED SETTINGS

*A Tool for Assessing and Building Capacity for Providing Comprehensive Care
to Orphaned and Vulnerable Children (OVC)*

BANTWANA INITIATIVE

Bantwana is dedicated to helping children orphaned and made vulnerable by AIDS, and their care givers, access the full range of support and comprehensive care they need to grow into healthy adults. Bantwana partners with promising community based organizations to develop, test, document and support models of comprehensive OVC care for scale-up and replication. Bantwana is supported by JSI and World Education.

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World Education is known for its work around the globe in environmental education, community development, maternal and child health, school governance, integrated literacy, small enterprise development, HIV and AIDS education and prevention and care, and refugee training. World Education also works to strengthen literacy and adult basic education programs in the United States.

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RECOMMENDED CITATION

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Bantwana Initiative

44 Farnsworth St.
Boston, MA USA
Phone: 617-482-9485
Fax: 617-482-0617
[bantwana@worlded.](mailto:bantwana@worlded.com)

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ACKNOWLEDGEMENTS

The capacity assessment framework utilized for the tool is based on a composite framework for assessing the capacity of organizations which draws from a number of available capacity assessment tools, e.g., IRS (Institutional Self Reliance), DOSA (New Directions in Organizational Capacity Building), TTAP (Training and Technical Assistance Plan), OCAT (Organizational Assessment Capacity Tool), ART Site Program Readiness Tool etc. The tool also draws from the experience of a number of other organizations such as USAID, FHI, MSH, AIDS Alliance and NSPPI-Ministry of Gender, Labour and Social Development Uganda in the field of monitoring and evaluation (M&E) and OVC services.

SECTION I. INTRODUCTION

Although HIV has reached nearly every part of the world, sub-Saharan Africa has been hit the hardest, and the region is home to nearly two thirds of the world's people living with HIV. It is also home to 48 million orphans, 12 million of them orphaned as a result of the AIDS pandemic. By 2010 researchers predict that of the 53 million anticipated orphans from all causes in this region, an estimated 15.7 million will have lost one parent due to AIDS.¹

While nearly 80 percent of all orphans live in sub-Saharan Africa, the situation is rapidly worsening in Asia and Eastern Europe. Millions of other children will be made “vulnerable” by the epidemic – vulnerable referring to children whose survival, well-being, and/or development is threatened by HIV and AIDS. Given the overwhelming scale of the OVC crisis, one of the most difficult challenges of the HIV and AIDS epidemic is how to effectively support such children in resource-limited settings,

Oftentimes OVC are cared for by relatives or guardians already overburdened by poverty and ill-equipped financially or emotionally to provide support. Such children, especially girls, often drop out of school to care for sick parents, go to work to

replace the income their parents can no longer generate, or are forced to stay at home to take care of their siblings. Other OVC live in child-headed households – where a child under the age of 18 (and often as young as eight years old) takes on responsibilities usually carried out by parents, including the care of other children. Without the protection of their parents or the structure of a family, OVC are likely to be out of school, suffer from abuse and discrimination, and forced into exploitative work in order to survive. Despite their extraordinary resilience, children without adequate support will have little chance of becoming productive future citizens. Their course – and the development, economic and political security of countries around the world – will largely be determined by our collective ability to address the OVC crisis now.

Many people, organizations, and governments have invested time, money and energy to address the issue of OVC. However, much of the funding and many of the policy efforts have been driven from the top-down, never quite reaching the communities who shoulder the ultimate responsibility for raising these children. Funding and programming is often erratic and fragmented despite best intentions. There are limited mechanisms to assist communities to develop the skills, resources and networks they need to care for OVC over the long term; and to help identify best

¹ UNICEF, UNAIDS, PEPFAR
Africa's Orphaned and Vulnerable Generations Children Affected by AIDS. August 2006

practices and efforts that should be considered for replication and scale up.

There are, however, existing community-based efforts that show promising results using small amounts of financial support as well as non-financial community resources. These initiatives tend to be small in scale, and managed by committed men and women who support local guardians, provide a familial environment and/or enable children to have their basic needs met. In these settings, OVC are recognized as “belonging” to a community, and community members are actively involved in supporting, nurturing and caring for them.

Yet many of these promising organizations are only able to offer fragmented support. For example, they may offer school lunches to improve OVC nutrition or financial support for school supplies or uniforms; others offer livelihoods training, or access to social service grants. Few are aware of the need for, or are able to offer, an integrated approach to supporting OVC. Even fewer address the fact that these children are particularly vulnerable to HIV infection themselves. Evidence suggests that programs offering comprehensive or integrated services – both in terms of direct service delivery and/or offering referrals and linkages to existing

community resources – for OVC generate the best results over the long-term.

Comprehensive OVC services² are defined as an approach to care that views the child holistically and is comprised of eight components³:

- Health (including HIV and AIDS prevention and treatment)
- Shelter
- Education
- Nutrition
- Child protection
- Livelihoods and economic security
- Psychosocial support
- Legal rights

² This is also often referred to as ‘comprehensive OVC services – in this document we use the term ‘comprehensive OVC care’ to refer to the range of support for OVC.

³ These eight components are identified in a number of documents as essential for comprehensive OVC care, although none specify these eight components as a package. Among others, we cite UNICEF’s Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World With HIV and AIDS, 2002; *A Family is for a Lifetime: A Discussion of the Need for Family Care for Children Impacted by AIDS*, John Williamson, The Synergy Project/USAID, March 2004; *Children on the Brink 2004: A Joint Report on New Orphan Estimates and Program Strategies*, UNAIDS, UNICEF, USAID.

WHAT IS THIS TOOL?

This tool is designed to help organizations assess their capacity to provide OVC services. It was originally developed for community-based organizations, but can also be used by local, district, and national stakeholders engaged in community-level work. The tool enables groups to identify gaps in service delivery, highlights areas for possible expansion, and provides a framework for monitoring and evaluating the impact of OVC support.

There are two related but distinct possible uses of this tool:

- As an **internal** capacity building tool or evaluation tool for community organizations providing or looking to provide OVC care (program readiness) or assessing their organization (organizational capacity); and
- As an **external** assessment tool to evaluate an organization's program readiness or capacity to deliver OVC care

This tool can also be used for assessing different areas of an organization's capacity:

- For a particular area of the organization's work (e.g., health, livelihoods or financial management): note this entails using the 1 – 10 scale within each domain.
- For the overall organizational capacity of an organization: (note this entails using the 0-130 scale via totaling each domain in this area) or for overall technical capacity to deliver integrated care (using the 0-110 scale

totaling each technical domain and tallying the overall score).

HOW TO USE THIS TOOL

An organization is considered a system of related components that work together to achieve an agreed-upon mission. The areas ('domains') selected for the tool represent the different elements relevant to the majority of organizations involved in OVC services. However, there may be some variation according to the type of organization and the context in which it operates, and questions may be adapted to suit the local context.

The tool begins with an organizational profile which can be completed with the help of members at different levels of the organization. In each capacity area a set of questions has been provided to help get at relevant information to score the area. For organizations with very low or very high capacity, the answers to certain questions may be obvious. These questions may be able to be completed without asking an organizations' staff or the community, to minimize the potential of discouraging groups with low capacity, and/or to maximize time.

The qualitative information gathered is then converted to a scale to show the stage of development in each area of a particular

domain and collectively for all domains, in the organizational and technical realms respectively, to show the overall stage of development.

Each area in a given domain should be scored in light of the collected information and through discussions between the evaluators. The rating scale for each area goes from 1-10, depending upon the stage of development of organization in that particular area (*Figure 1*).

At the end of each domain a total score is calculated, and upon completion of the exercise a total score can be calculated for the organizational capacity or technical areas of development of an organization (*Figure 2: Stages of Readiness*). While these overall scores provide a broad view of the organization's stage of readiness, the more specific domain scores may be most helpful due to their specificity.

Please note that there are two different scoring scales, depending on whether a particular activity (scale 1-10) or the broad organizational capacity (0-130) or technical capacity of an organization (scale 0-110) is being assessed.

Depending on the purpose, information can be extracted through group discussions or key informant interviews between representatives of community organizations, the communities and individuals they serve, and external evaluators. Brief interviews with community members, beneficiaries and some other stakeholders may also be required. A review of relevant documents and materials such as workplans and reports is important, as are site visits.

This tool is not intended to be used judgementally, but rather, in partnership with the organization as a joint institutional and technical assessment. Evaluators should put interviewees at ease by being careful to explain the purpose of the tool. Organizations are easily intimidated into giving answers they think the evaluator wants to hear if they do not trust the process.

The community assessment skills of the evaluation team are critical for appraising each situation, and adaptations to the questions and other areas of the tool are encouraged. Evaluators are strongly encouraged to document their anecdotal observations, as often these observations capture information that is difficult to measure by any way other than observationally. This tool purposely has extra space to write notes, and a feedback form is

provided at the end. Sample completed scoring sheets are included as models (see pages 50-51).

It is recommended that the organization has an opportunity to review and comment on this feedback, and an agreement reached on the final documentation of the organization before a final copy is agreed upon and signed.

The interview process can take up to two hours and for convenience can be conducted in more than one visit.

Figure 1: Rating Scale for Each Domain

Score		
1-2	Focus on establishing and improving services	Nascent
3-6	Focus on improving and expanding basic services	Young and Emerging
7-8	Focus on expanding services, with attention to increased depth of programs	Expanding
9-10	Focus on maintaining, deepening and strengthening current programs. Focus on offering support and building linkages to more nascent organizations. Focus on influencing and informing policy for OVC care.	Mature

Figure 2: Stages of Readiness



1	Nascent Organization	2	3	Young and Emerging Organization	6	7	Expanding Organization	8	9	Mature Organization	10
<p>Organization is planning/mobilizing resources to deliver OVC-related services. There is insufficient internal management and/ or technical capacity at the moment to move towards a model of comprehensive care. Major support/ improvements are needed to deliver OVC services.</p>		<p>Organization has limited capacity and resources. Infrastructure maybe rudimentary.</p> <p>Organization provides some services. It has potential and capacity to grow in all areas. Can be considered a good candidate to deliver comprehensive OVC services, but will need considerable support and improvements to deliver comprehensive care.</p>		<p>Organization has an established track record delivering OVC services. It is working in some of the areas covered by a comprehensive OVC services model. Has capacity and potential resources, but still there is a room for improvement and will need some support.</p>		<p>Organization is strengthening its services and working to achieve sustainability. It has strong capacity and a solid resource base. It will need support and encouragement to sustain and represent itself as a learning/ role model for comprehensive care.</p>					

SECTION II. ORGANIZATIONAL PROFILE

1. Name/title of organization
2. Contact details
3. Background (history/when established etc.)
4. Location(s) where the organization works
5. Brief work profile

SECTION III. STAGES OF PROGRAM READINESS / CAPACITY ANALYSIS

Criteria For Stages of Development - A Continuum									
	1	2	3	6	7	8	9	10	

Domain 1: Leadership, Governance and Strategy

<p>1. Governing Body (board, executive committee)</p>	<p>Governing body partially identified. Roles and responsibilities are documented but lack specificity and may overlap.</p>	<p>Governing body has well defined roles and responsibilities but the board is not particularly effective or active.</p>	<p>Governing body active (e.g., contributes and pursues resources) with well-defined roles and responsibilities.</p>	<p>Governing body helps advance organization and assist with securing access to resources, establishing or running OVC services.</p>	<p>Evidence</p>
<p>Questions</p> <ul style="list-style-type: none"> a. Do you have a governing body (board, executive committee) that oversees the organization? b. Are the roles and responsibilities defined? c. Do the governing body play any role in policy setting, planning, fundraising etc.? d. Do members have some experience in OVC services? If yes, give a brief description. 				<p>Score:</p>	

Criteria For Stages of Development - A Continuum									
	1	2	3	6	7	8	9	10	

Domain 1: Leadership, Governance and Strategy

<p>2. Vision, Mission, and Goals</p>	<p>Organization has vague idea of its mission, goals and the contribution it is attempting to make towards delivering comprehensive OVC services.</p>	<p>Vision, mission and goal statements understood by few members of the board or senior management. Vision, mission and goal statements not widely understood (by staff and/or communities) and/or reflected in planning or service delivery.</p>	<p>Clear vision, mission and goal statements which are generally understood and mostly consistent with the services delivered.</p>	<p>Clear vision, mission and goal statements which are well understood and reflected in the services delivered.</p>	<p>Evidence</p>	
<p>Questions</p> <ul style="list-style-type: none"> a. Are there documents that define the organization’s vision, mission and goals? b. Are the vision, mission, and/or goal statements clearly understood by the board members and staff? (Either all three, or some of the three) c. Are your OVC programs in line with the organization’s vision, mission, and/or goals? 					<p>Score:</p>	

Criteria For Stages of Development - A Continuum									
	1	2	3	6	7	8	9	10	

Domain 1: Leadership, Governance and Strategy

3. Organizational Leadership	Has leadership at top levels or only at one particular level of the organization.	Leadership comes from executive director and a few members of the governing body, with little staff participation or leadership. Leadership has some experience managing OVC programs.	Leadership has vision and experience in OVC programming. Staff have training in OVC programming and management.	Governing body members and staff contribute to the leadership and development of the organization. Leadership and vision is institutionalized among key staff.	Evidence
<p>Questions</p> <ul style="list-style-type: none"> a. Is there shared leadership, i.e., from a director, governing body members, staff, and any others? b. Is the current leadership important for the survival of the organization? What if some transition has to be made? c. Does the staff have any role in decision making? If yes, can you explain the process for routine decision making? d. Do staff have any training in OVC programming and management? 				Score:	

Criteria For Stages of Development - A Continuum									
	1	2	3	6	7	8	9	10	

Domain 1: Leadership, Governance and Strategy

4. Legal Status	<p>Organization is not registered.</p> <p>Organization is under process of registration.</p>	<p>Organization is registered and can access local grants (government /district) and from local donors.</p>	<p>Organization is registered and is in the process of integrating benefits from financial and legal status permissible under local law. Is in compliance with local reporting requirements and also reports to its own membership.</p>	<p>Organization is properly registered according to local regulations and benefits from financial and legal status permissible under local law. Is in compliance with local reporting requirements and belongs to broader network or umbrella group of CSO/NGOs.</p>	Evidence
<p>Questions</p> <p>a. Is the organization registered under local/national regulations?</p> <p>b. If there are financial and legal benefits to registration, what are they and are they incorporated into the organization?</p> <p>c. Is the organization in compliance with local reporting requirements?</p>				<p>Score:</p>	

Domain 1: Leadership, Governance and Strategy

Domain Score = Maximum score =

Actual Total Score =

Area	Score
Governing Body (board, executive committee)	
Vision, mission and goals	
Organizational leadership	
Legal status	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10	
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Domain 2: Program and Financial Management

<p>1. Organizational Structure</p>	<p>Organization has a basic organizational structure.</p> <p>Has no management policy.</p>	<p>Organization has a defined organizational structure.</p> <p>Management policies are not regularly implemented, followed or reviewed.</p> <p>Management functions practically confined to a few members.</p>	<p>Organization has defined organizational structure with clear lines of authority and responsibility.</p> <p>Management policies are in place; however they may not be regularly followed and reviewed.</p>	<p>Organization has defined organizational structure with clear lines of authority and responsibility. Policies are implemented, followed and reviewed.</p> <p>Management policies are implemented; regularly followed, implemented and reviewed. .</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Do you have any documents that describe the organizational structure? If yes, can we review it?</p> <p>b. Are there management policies and are they implemented?</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10	
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Domain 2: Program and Financial Management

<p>2. Financial Management</p>	<p>Accounting is based on available cash each day.</p> <p>Financial reports are incomplete and difficult to understand.</p> <p>Budgets are made on a temporary basis.</p> <p>Vague procedures for handling payables and receivables.</p> <p>Irregular/occasional internal audits.</p> <p>Funds are not separated for different projects within the program.</p> <p>No system to record receipts or financial expenditure.</p> <p>No financial controls or review of finances.</p>	<p>Organization produces some financial reports/balance sheets but they are often incomplete.</p> <p>Budgets are developed but are not based on proper needs assessment.</p> <p>Internal audits conducted regularly but no external audits.</p> <p>Project funds are separated, but some temporary cross-project financing may occur.</p> <p>Reviews of finances not systematized.</p>	<p>Financial reports are clear and complete.</p> <p>Budgets are based on needs assessment.</p> <p>Financial control systems exist. Board reviews financial condition annually.</p> <p>Irregular external audits are performed.</p> <p>Standard procedure is to avoid cross-project financing and most funds are separated.</p>	<p>Reports and data systems provide accurate, relevant and timely information.</p> <p>Procedures are transparent and regularly reviewed.</p> <p>Audits are done periodically in accordance with governance policy of the organization.</p>	<p>Evidence</p>	
<p>Questions</p> <p>a. How do you manage funds? Are they separate for each project?</p> <p>b. Does the organization produce any financial reports (e.g., balance sheet, statement of operations, etc.)?</p> <p>c. Does the organization have any budgeting process? If yes, is this reflected in workplan?</p> <p>d. Is there a regular financial audit? Is this done internally or externally?</p>					<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 2: Program and Financial Management

<p>3. Administrative Systems</p>	<p>Administrative procedures are informal (personnel, filing, audit and stock taking, other administrative procedures).</p> <p>No formal filing system exists.</p>	<p>Some administrative procedures but nothing is formalized to guide staff, volunteers and board members.</p> <p>Informal hiring practices. Hiring is based on informal trust/social networks rather than an established process.</p> <p>Files are maintained but are not comprehensive.</p> <p>Some effort to formalize hiring procedures due to donor demand.</p>	<p>Some administrative procedures are followed with limited consultation of administrative manual.</p> <p>Formal hiring procedures in place but not always followed.</p> <p>Files are systematic and accessible, but gaps exist.</p>	<p>Administrative manual regularly consulted and used.</p> <p>Formal hiring procedures are followed.</p> <p>Files are comprehensive, systematic and accessible.</p> <p>Policies to govern financial and program management developed and in use.</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Do you have a system for administrative procedures, and is this system followed? (e.g., a manual?)</p> <p>b. How does hiring work?</p> <p>c. Do you have a filing/recording system? Is this regularly maintained?</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 2: Program and Financial Management

<p>4. Human Resources</p>	<p>Have few people who are filling too broad a range of managerial, admin and technical skills. Need more staff in key technical areas.</p> <p>No existing or nascent volunteer structure which needs improvement.</p>	<p>Has reasonable staff strength to deliver present services. Has a plan to recruit more if resources permit.</p> <p>Staff possesses technical skills required for their positions.</p> <p>Volunteer framework exists but structure is contributing only slightly to program goals.</p>	<p>Core skill areas are covered with staff. Able to implement but not expand comprehensive care program. Has clearly outlined staff needs and plan or proposal to fill them.</p> <p>Staff possess broader analytic, communication and managerial skills</p> <p>Effective volunteer structure exists with committed volunteers, but need more/less volunteers. Volunteers contribute to program goals.</p>	<p>Required skill areas are covered and capacity exists to contract out for other needed skills.</p> <p>Staff recognized for excellence and provides expertise and assistance to outside organizations.</p> <p>Effective volunteer structure exists with committed volunteers, have the right number of volunteers for completing activities.</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Do you think your present staff strength is sufficient to support your present operations? Why?</p> <p>b. What specific OVC program skills do your staff possess if any?</p> <p>c. Do you use volunteers? If so, do you have a formal volunteer structure? Do you have enough/too many/too few volunteers? Do volunteers add to the organization's goals?</p> <p>d. How do you mentor volunteers and monitor their activities?</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10	
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Domain 2: Program and Financial Management

<p>5. Workplanning</p> <p>Work planning Including staff meetings</p>	<p>Planning is informal but with little or no input from staff and stakeholders</p> <p>Meetings do occur but are irregular and do not have a predetermined agenda.</p>	<p>Plans are made without assessing resource requirements or are only partially aligned with a budget.</p> <p>Workplans are drafted by leadership alone with little or no staff consultation. Workplans are often not followed or reviewed.</p> <p>Staff meetings held irregularly and no notes taken or follow up recommendations made.</p>	<p>Work plans are developed with staff consultation.</p> <p>Plans are mostly aligned with budget.</p> <p>Workplans are used to implement, to track and to regularly review progress of programs.</p> <p>Staff meetings held regularly, minutes taken and follow up action taken.</p>	<p>Workplans are comprehensive and specific enough to permit accurate budgeting, and flexible enough to be modified.</p> <p>Workplans are implemented and frequently revisited and used to track progress. Beneficiaries and staff contribute to planning and decision making.</p> <p>Staff meets regularly and have input into workplan development. Staff follow up on recommendations made in staff meetings and report back on follow-up actions</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Does the organization develop annual workplans? How does this happen?</p> <p>b. Does staff participate or have input into the finalization of workplans?</p> <p>c. Are the workplans useful, implemented, reviewed and used to track accomplishments?</p> <p>d. Do you follow up recommendations from staff meetings?</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 2: Program and Financial Management

<p>6. Skills Development (staff training)</p>	<p>Very informal staff development occurring.</p> <p>Staff has some formal training or experience in service delivery.</p> <p>No on-site access to educational and resource materials.</p>	<p>Informal or ad hoc staff development occurring.</p> <p>Staff has some training with limited experience in practical aspects of integrated comprehensive OVC services.</p> <p>Limited on-site access to educational and resource materials</p>	<p>Organization understands development needs of staff. Action plans for staff development exists.</p> <p>Small number of staff has received some training in OVC services.</p> <p>Organization is developing on-site access to resources and educational materials.</p>	<p>Professional development opportunities part of organization.</p> <p>Has adequately trained staff in most positions.</p> <p>On-site resources and educational materials exist and are accessible to staff.</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Does the organization have any strategy for skill development/training of its staff, especially technical staff?</p> <p>b. If yes, what type of training is offered? Formal training or informal (e.g., participation in workshops and seminars etc including organizational capacity building e.g. financial skills and proposal writing)</p> <p>c. Have many staff been trained in OVC-related services? Give examples.</p> <p>d. Does the staff have access to relevant educational and resource materials? If yes, where?</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 2: Program and Financial Management

<p>7. Financial Sustainability</p>	<p>Narrow funding source; there no obvious alternative funding sources and no earned income strategies.</p> <p>Funding insufficient to run the present services.</p> <p>No developed contacts or relationships with local resource base.</p>	<p>Operating funds come from various sources but are still raised for short-term projects.</p> <p>Organization has begun to understand the need to develop alternative resources but has limited capacity to develop project funding proposals or respond to tenders.</p>	<p>Financing comes from more than one source and organization has planned to generate new resources.</p> <p>Developing relationships with government and private sector.</p> <p>Begun to diversify funding base.</p> <p>Able to develop project funding proposals, but may not have ready access to the funder community.</p>	<p>Organization has identified a resource base.</p> <p>Has ability to access diversified resources.</p> <p>Has fundraising strategy and capacity to implement it. Has capacity to develop proposals and respond to tenders.</p>	<p>Evidence</p>	
<p>Questions</p> <ul style="list-style-type: none"> a. What is the organization’s funding sources? Single or multiple (local and international)? Does the organization look within the country for donors? b. Does the organization look to the private sector for funding? (e.g., big companies, supermarkets, other) c. Has the organization identified potential sources for future funding? If yes how many? d. What are your future plans for funding i.e. short term, medium term and long term? e. Does the organization have enough technical skills to write proposals? f. Who coordinates fundraising? g. If there is a board, what role does it play in fundraising? 					<p>Score:</p>	

DOMAIN 2: PROGRAM AND FINANCIAL MANAGEMENT

Domain Score = Maximum Total =

Actual Overall Score =

Area	Actual Score
Organizational structure	
Financial Management	
Administrative systems	
Human resources	
Workplanning	
Skills development	
Financial sustainability	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 3: Monitoring and Evaluation

1. Monitoring	<p>Organization has no monitoring plan or procedures.</p> <p>Organization does not report on results of activities to stakeholders (including donors or membership)</p>	<p>Organization has a basic monitoring plan and/or procedures. No system to collect or analyze information/data. Data may be collected randomly and manually.</p> <p>Organization shares information on activities only when asked by donors.</p> <p>No use of monitoring to inform management/ program interventions.</p> <p>Informal channels for beneficiary/client feedback exist.</p>	<p>Organization has defined monitoring plan. Monitoring staff collects information/data. A regularized information system is operational and accessible.</p> <p>Use of monitoring to inform management/ program interventions is weak.</p> <p>There is no organized strategy for dissemination of project monitoring.</p>	<p>Organization has strong monitoring system with a clear monitoring function. A regularized system exists to collect, analyze and report information.</p> <p>Monitoring is used to inform management/program interventions.</p> <p>Organization regularly disseminates monitoring information.</p> <p>Continuous feedback from beneficiaries/ clients included in monitoring.</p>	Evidence
<p>Questions</p> <p>a. What specific information do you collect on OVCs?</p> <p>b. Does the organization have a monitoring plan?</p> <p>c. If yes, who is responsible for it and how it is done (ask about data collection, tools, analysis)</p> <p>d. Do you prepare any reports? If yes can you show some? Do you share these with community, government/ stakeholders, donors etc?</p>				Score:	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 3: Monitoring and Evaluation

<p>2. Evaluation</p>	<p>Organization does no informal assessments or formal evaluations.</p>	<p>Organization does some informal assessments but does not undertake formal evaluations.</p> <p>Organization does not report on the results of evaluations.</p> <p>No use of evaluation results to inform management/ program interventions.</p>	<p>Organization conducts regular evaluation.</p> <p>Organization does not systematically disseminate results (reports) of evaluation activities.</p>	<p>Organization has strong evaluation program. With an established system to collect, analyze and report data and information.</p> <p>A regularized system exists to collect, analyze and report data and information.</p> <p>Evaluation is used to inform management interventions.</p> <p>Organizations regularly disseminate the evaluation results.</p> <p>Continuous feedback from beneficiaries/ clients informs evaluation.</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Does the organization evaluate its programs? How is this done?</p> <p>b. Do you prepare any reports? Do you share these with community, government/ stakeholders, donors etc? How is this done?</p> <p>c. Do you have any feedback mechanism for your results/ achievements/ client satisfaction? If yes, what mechanisms?</p>				<p>Score:</p>	

DOMAIN 3: MONITORING AND EVALUATION

Domain Score = Total Maximum Score =

Actual overall score =

Area	Actual score
Monitoring	
Evaluation	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>1. Health⁴</p> <ul style="list-style-type: none"> • Preventive or health care services • Linkages and networks 	<p>Organization has no or very limited prevention and/or health care related services and no linkages to other organizations providing these services.</p>	<p>Organization has limited prevention and/or health care related services. Are working to build linkages to other organizations providing these services.</p>	<p>Organization may provide some on-site prevention (VCT) and primary health care related services e.g. routine immunization, routine medical checkups, basic care for common illnesses etc. and covers others through strong linkages and networks.</p>	<p>Organization provides or provides linkages to a number of preventive and health care related services like VCT, PMTCT, ART and treatment for opportunistic infections to AIDS infected children, child immunization, growth monitoring and treatment of common illnesses etc.</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Does the organization provide health care and/ or prevention related services?</p> <p>b. If yes, what kind of services? Ask both about curative and preventive services.</p> <p>c. How are these services provided i.e. on-site or through linkages/ networks and referrals?</p> <p>d. Does the organization have linkages/ networks for improving access of OVC to these services?</p>				<p>Score:</p>	

⁴ Interventions related to health care and prevention can include; (1) primary health care of OVC; basic assistance (care and referral); free preventive care (VCT); health-facility based referral (ART, treatment of opportunistic infections & STIs etc.); fee payment and drug provision, hospice care for chronically ill, short-term health care for OVC and households in need (2) Training and education e.g. information on health, hygiene, and ART; posters and pamphlets about HIV/AIDS and caring for OVC, training of health-care workers for special needs of OVC.

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>2. Nutrition</p> <ul style="list-style-type: none"> Provision of enough nutritious food, safe water and sanitation OR linkages to essential services 	<p>Availability of food is unreliable.</p> <p>No interventions for ensuring access to safe water and sanitation.</p>	<p>Organization provides food directly or links to programs that support adequate daily food intake.</p> <p>Food supply is predictable.</p> <p>Organization provides information on good nutrition. There are not always services to ensure safe drinking water and sanitation.</p>	<p>Safe drinking water and good sanitary services are available on site to OVC.</p> <p>OVC receive at least one regular nutritious meal per day.</p> <p>Organization makes an effort to provide food from internal/community sources such as gardens, poultry or other income generating initiatives.</p>	<p>Organization provides food directly to OVC or links to programs that support adequate food intake.</p> <p>Organization provides information on good nutrition and measures growth and development of OVC.</p> <p>There is special emphasis on the nutritional support of those who are on ART. Sanitary services are good and safe drinking water is available.</p> <p>Organization successfully involves the community in providing food to OVC from internal/community sources.</p>	<p>Evidence</p>
<p>Questions</p> <p>a. Does the organization provide any kind of nutritional support to OVC and/ or households with OVC?</p> <p>b. If yes, explain the services (Look whether they are on-site or through linkages/ networks e.g. school based food programs)</p> <p>c. What about the quality of nutritional support services i.e. quantity, nutritional value, hygiene etc? What about safe drinking water?</p> <p>d. How does your community participate in mobilizing to ensure that OVC have enough to eat?</p> <p>e. Do you provide food for OVC from community sources? Explain.</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>3. Education⁵:</p> <ul style="list-style-type: none"> • Access to formal education • Access to non-formal education (vocational training/ building hands-on skills etc) 	<p>Organization does not support education and has no links to organizations that do.</p> <p>Has no direct links with guardians or care givers of OVC attending school.</p>	<p>Organization helps to access formal education (e.g. provides fees etc.), but cannot ensure uniforms and supplies for OVC.</p> <p>There is weak supervision of OVC attending school and no mechanisms to ensure attendance. Has a weak relationship with guardians.</p> <p>Organization provides few services/weak linkages for vocational training/ building hands-on skills.</p>	<p>Organization ensures accessibility to formal education and provides uniform, school meals and books etc. There is regular feedback to ensure attendance and participation.</p> <p>Well defined vocational training/linkages to build hands on skills for OVC, although limited market analysis for ensuring skills built have a market post-training.</p> <p>Organization has ongoing relationship with guardians or care givers of OVC.</p>	<p>Organization has well established program to ensure OVC stay in school and have necessary support.</p> <p>May have provision to support higher education for successful learners.</p> <p>Well defined vocational training/building hands on skill initiative or linkages to other service providers. Appropriate skills being taught based on needs of the local market.</p> <p>Strong and established relationship with guardians Mentorship and out of school support for OVC graduates</p>	<p>Evidence</p>
<p>a. Does the organization provide any educational support to OVC? What is this? (Ask about basic assistance e.g. fees, school materials, boarding facilities etc.)?</p> <p>b. What about monitoring i.e. ensuring attendance, participation, minimizing drop-out etc.?</p> <p>c. Are there some interventions for training the teachers in psychosocial care and special needs of OVC?</p> <p>d. What about non-formal education or vocational training services, please explain?</p> <p>e. How is the organization linked to other education programs?</p>					<p>Score:</p>

⁵ Education refers to formal and informal education systems, skill building and technical training. It may include; (1) Basic assistance (access to educational services and support) e.g. short-term assistance with tuition fees, scholastic materials and uniforms etc., vocational training, adult basic education for caregivers (2) Training for teachers in psychosocial care and support of school going OVC to reduce stigma and discrimination and (3) Monitoring of children at risk of dropping out from schools; working with PTAs or School Management Committees to keep OVC in school; outreach programs for out -of-school youth.

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>4. Psycho-social Support⁶</p> <ul style="list-style-type: none"> • Psycho-social support to infected and affected children and their caregivers 	<p>Psychosocial support not recognized as an essential component.</p>	<p>Psychosocial support interventions are a recognized component of integrated OVC care.</p> <p>Some interventions to address psychosocial needs.</p> <p>Some effort made to initiate training in counseling for staff.</p> <p>Some effort to involve competent adults in the community to provide psychosocial support to OVC.</p>	<p>Well defined program for psychosocial services which is tailored to local needs. Psychosocial support is considered as an integral component of programs.</p> <p>Staff trained in counseling.</p> <p>Some attempt to monitor psychosocial support services to OVC.</p> <p>Training initiated to identify psychosocial needs of OVC and to provide basic support.</p>	<p>Psychosocial support program which involves participation of teachers, health care workers and community and is integrated with other social welfare programs.</p> <p>Counseling support for children on ARVs.</p> <p>Effective monitoring of psychosocial services.</p>	<p>Evidence</p>
<p>Questions</p> <ol style="list-style-type: none"> What do you understand about psychosocial support? What training has your staff received in counseling? Describe. What strategies / interventions have you put in place to address the psychosocial needs of OVC? What special support if any do you provide to children on ARVs? Support for adherence to ARV drugs, counseling for care-givers/parents etc? Describe. 				<p>Score:</p>	

⁶ Addressing psychosocial needs of OVC does not necessarily require separate or complex programs. Some of the elements that have been identified as key to the success of psychosocial support interventions are keeping children in families; having one adult as a constant for the child; normalizing children’s environment so that they feel comfortable in their peer group; opportunity to play; to engage in sport and recreation activities. Group approaches, peer support and individual counseling can be offered and also incorporated into other activities. Linkages with schools, other social welfare programs and faith-based organizations can be helpful. Teachers, health care workers and others can be trained to identify signs of distress and to take appropriate actions. Elements that have been identified as key to the success of psychosocial support interventions are community support, engaging young people and children in planning and implementing activities, and tailoring activities to local cultural practices and beliefs.

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>5. Livelihoods⁷/ Economic Security</p> <ul style="list-style-type: none"> OVC and/or household economic capacity for a sustainable livelihood 	<p>Organization has no interventions to improve OVC and/or household economic capacity and is not linked to other community efforts in this area.</p>	<p>Organization has few interventions/linkages to improve OVC and/ or household economic capacity. Interventions are on limited scale and contributing very minimal to the economic need.</p> <p>Integrates income generation schemes with basic vocational training.</p>	<p>Organization has established interventions or linkages to improve OVC and/or household economic capacity. (Examples include micro-credit programs, saving schemes etc). Strong community mentors apprentice youth in specific skills.</p>	<p>Organization has multiple interventions to improve economic capacity including, micro financing to attain a sustainable livelihood for care-givers or OVC. Vocational development and or income generating programs are linked to local markets and have potential for sustainability.</p>	<p>Evidence</p>	
<p>Questions</p> <ol style="list-style-type: none"> Are there any programs/ interventions to ensure socio-economic security of OVC and/ or vulnerable households? If yes, please explain the programs/ interventions? Specifically ask about the interventions to improve economic capacity? Do you think that the efforts have achieved sustainable livelihood? If yes, how? Do you support or have links to any micro financing/small credit/self-help groups or similar schemes for OVC and/or households? If yes, explain. 					<p>Score:</p>	

⁷ Critical to OVC survival is the ability of OVC and/or their caregivers to sustain their livelihood. This can include a variety of interventions including links to microfinance and small credit services, conditional cash transfers, insurance mechanisms, direct subsidies and material assistance of different kinds. Long-term interventions include introducing members to self-managed savings groups, facilitating access to financial services offered by micro-finance institutions, creating linkages between micro enterprises and more profitable markets or more economic sources for purchasing raw materials and improving agriculture efficiency. Interventions to improve agricultural knowledge and skills can be very helpful in agriculture-based communities. However the specific strategy employed to support household economic activities will depend upon the local need and context.

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>6. Child Protection⁸:</p> <ul style="list-style-type: none"> Child protection (sexual abuse, exploitation, violence) 	<p>Organization has no initiatives to address child protection issues.</p> <p>Organization is taking some initiatives on child protection.</p> <p>There is awareness of children’s legal rights but there are no initiatives to translate this awareness into preventive action.</p>	<p>There are efforts to sensitize local officials to the special needs of the OVC in terms of child protection.</p> <p>Works with local guardians to de-stigmatize OVC and avoid abuse.</p> <p>Some linkage with district service providers.</p>	<p>Organization is actively working on child protection issues and provides basic assistance to OVC who need protection.</p> <p>Organization participates in referral networks to support abused children.</p> <p>Has provided the community with training and information to prevent stigma and OVC abuse.</p> <p>Has established links with district services.</p>	<p>Organization is actively working on child protection issues. Beside basic assistance organization is working on other areas like training and advocacy to address child protection issues.</p> <p>Organization works closely with established district or government service providers.</p>	<p>Evidence</p>
<p>Questions</p> <ol style="list-style-type: none"> Is the organization aware of child protection issues? What are some important child protection issues in your community? Are you aware of the legal rights of the child? Are there initiatives/ programs to address child protection, including linkages with other organizations? Does your organization involve itself in advocacy to influence laws on child protection? 				<p>Score:</p>	

⁸ Means response to circumstances and conditions that create gross violation of the rights of children, subjecting them to serious risks and hazards. Interventions may include (1) Basic assistance e.g. removal from dangerous situation and temporary settlement, legal aid with legal issues, improvement of fostering, adoption and guardianship etc. (2) Vital registration e.g. birth and death registration system, health and school records etc. and (3) Training and advocacy e.g. information targeted to children and other vulnerable groups on domestic violence, abuse and neglect, training of local leaders in child protection issues, including child labor and trafficking of children. .

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10	
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Domain 4: Comprehensive Services (Essential Care)

7. Shelter	No initiatives to address shelter for OVC directly or through linkages.	Organization is actively working on setting up shelter initiatives or linkages to provide shelter for OVC.	<p>Organization provides basic assistance to OVC who need shelter and/or refer clients to appropriate programs in the community.</p> <p>Organization is in process of building linkages to government resources to address shelter issues.</p>	<p>Organization actively working on child shelter issues. Besides basic assistance, organization is working on other areas such as training and advocacy to address child rights issues around shelter.</p> <p>Organization is an active member of a network that addresses OVC shelter needs.</p>	Evidence
<p>Questions</p> <p>a. Are there some initiatives / programs to address shelter needs of OVC?</p> <p>b. Does your organization work with care givers or child headed households to provide shelter for OVC? Describe these initiatives?</p>				Score:	

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>8. Legal Rights</p>	<p>Organization is not in any way involved in addressing child rights issues.</p>	<p>Organization is aware of child rights issues but actions are limited.</p>	<p>Organization is actively working on child rights issues. There are efforts to sensitize local officials to the special needs of OVC in terms of their legal rights.</p> <p>Organization is helping OVC access social welfare grants where they exist.</p> <p>Organization is in process of building linkages to government resources that assist with legal rights.</p>	<p>Organization is actively working on legal rights of the child and is building linkages with government resources that assist with legal rights.</p> <p>Organization also works on training and advocacy to address child rights issues.</p> <p>Organization works with partners to influence government policy on child rights</p>	<p>Evidence</p>
<p>Questions</p> <ul style="list-style-type: none"> a. Is the organization aware of children’s’ legal rights? What are you doing to address/promote children’s rights? b. Do you have any linkages with other organizations that promote and protect children’s rights? c. What about legislative efforts? (Work with local or national government)? d. Is your organization aware of or actively involved in accessing or assisting OVC to access social service grants provided by the government? 				<p>Score:</p>	

DOMAIN 4: COMPREHENSIVE SERVICES (ESSENTIAL CARE)

Domain Score = Maximum Total Score =

Actual overall score =

Area	Actual Score
Health	
Nutrition	
Education	
Psychosocial support	
Livelihoods/Economic security	
Child Protection	
Shelter	
Legal rights	

Criteria For Stages of Development - A Continuum									
	1	2	3	6	7	8	9	10	

Domain 5: Creating an Enabling & Sustainable Environment

<p>1. Community Support Systems</p>	<p>Organization has no or very weak links with the local leadership.</p> <p>Has no services to mobilize community based support systems. (e.g., women’s groups, community school, youth club and recreational program etc.)</p> <p>Organization isolates its program from other community activities.</p>	<p>Organization has links with the local leadership but has no formal agenda to promote the needs of OVC.</p> <p>Has taken some initiatives to sensitize local community to the needs of OVC.</p> <p>Have begun to develop community support systems</p>	<p>Organization has good relations and accessibility to local leadership. Local leadership involved in supporting interventions that care for OVC.</p> <p>Organization works to sensitize local community to the needs of OVC.</p> <p>Organization has ensured that basic community support systems are in place.</p>	<p>Organization has excellent relations and accessibility to local leadership. Local leadership actively supports interventions that care for OVC.</p> <p>Strong community support systems are in place and expanding.</p>	<p>Evidence</p>
<p>Questions</p> <ul style="list-style-type: none"> a. Does the organization have community support structures? Are these supported by community leadership and members? b. Are there services to mobilize community services? What activities are communities contributing to? How are they involved in OVC care and support? c. How does the community participate in decisionmaking? 				<p>Score:</p>	

Criteria For Stages of Development - A Continuum									
1	2	3	6	7	8	9	10		

Domain 5: Creating an Enabling & Sustainable Environment

2. Stigma and Discrimination	No work addressing issues around HIV/AIDS stigma and discrimination, for OVC and/or PLWA in particular. No work to address stigma/discrimination internally (within organization).	Some work on HIV/AIDS related stigma and discrimination, for OVC and/or PLWA in particular. Some work to address stigma/discrimination within the organization, but no formal policy.	Several identifiable stigma and discrimination activities are integrated into programs benefiting OVC. Formal policy in place to address stigma/discrimination within the organization.	Organization’s work addresses stigma and discrimination and monitoring of these activities is in place. Formal policy in place to address stigma / discrimination within the organization.	Evidence
<p>Questions</p> <p>a. What initiatives or activities does your organization undertake to reduce stigma of OVC? (at community level, internally and with the children themselves?)</p>				<p>Score:</p>	

Criteria For Stages of Development - A Continuum									
1	2	3	6	7	8	9	10		

Domain 5: Creating an Enabling & Sustainable Environment

<p>3. Government Guidelines and Norms</p>	<p>Organization is not aware of national policies, strategies and action plans related to their work.</p> <p>The organization has heard of the policy on OVC but they do not see a link with their own program.</p>	<p>Organization is aware of national policies, strategies and action plans related to their work but there is a minimum of coordination.</p> <p>There are occasional meetings with various representatives from local and national government.</p>	<p>Organization is aware of national policies and strategies and is making efforts to synchronize its programs with national objectives.</p>	<p>Programs are in line with national policies, strategy and action plan. The organization has good links with local and national programs with frequent exchange of information with district/national level ministry staff.</p> <p>Organization makes input into policy formulation and review.</p>	<p>Evidence</p>
<p>Questions</p> <ul style="list-style-type: none"> a. What do you know about national HIV/AIDS and OVC policies and strategies? b. What coordination do you have with government service providers? (e.g. with ministries of health, education, gender and labour) c. Do you exchange any information with local/ national HIV or OVC programs or with policy makers and planners? If yes, please explain d. How does your current program relate to the national policy for OVC? 				<p>Score:</p>	

DOMAIN 5: CREATING AN ENABLING & SUSTAINABLE ENVIRONMENT

Domain Score = Maximum Total Score =

Actual Overall Score =

Area	Actual Score
Community support systems	
Stigma and discrimination	
Government Guidelines and Norms	

Maximum Score for Organizational Capacity Domain = **130**

Actual Overall Score for Organization Capacity Domain =

Please note that the overall score for organizational capacity is arrived at by adding the scores from the following domains:

Domain 1: Leadership, Governance and Strategy

Domain 2: Program and Financial Management

Domain 3: Monitoring and Evaluation

Figure 2: Scoring scale for Organization Capacity

1	Nascent Organization 32	33 65	Young Organization	66	Expanding Organization 98	99	Mature Organization 130
	Focus on improving services. Organization is planning/mobilizing resources to deliver OVC related services. There is insufficient internal management capacity or systems to move towards a comprehensive care paradigm. Major organizational support/improvements are needed to deliver OVC services.		Focus on expanding and improving services. Organizational systems are beginning to emerge and there is capacity to develop these. Some basic systems including an M&E plan and program strategy in place. Considered a good candidate to deliver comprehensive OVC services, but will need considerable organizational development support.		Focus on expanding services, with some attention to increasing depth of programs. Organization has an established track record delivering OVC services. It has established internal management systems, a strategic plan for programming and operations and undertakes some M&E. Has capacity and potential funding/community resources, but there is still room for improvement.		Focus on maintaining and strengthening current programs. Focus on building linkages to more nascent organizations. Ability to advocate with government to inform and influence policy. Organization is strengthening its services and working to achieve sustainability. Organizational systems are well-established and fully utilized. Organization has solid resource base and is expanding in all areas. It will need support and encouragement to sustain and represent itself as a learning/ role model for effective organizational management and M&E.

Figure 3: Overall Scoring Scale for Technical Capacity

110

Maximum Score for Technical Capacity Domain =

Actual Overall Score for Technical Capacity Domain =

Please note that the overall score for technical capacity is arrived at by adding the scores from the following domains:

Domain 4: Comprehensive Services (Essential Care)

Domain 5: Creating an Enabling and Sustainable Environment

Nascent Organization 1	Young Organization 28	Expanding Organization 56	Mature Organization 84
27	55	83	110
<p>Focus on improving services. Organization is planning/ mobilizing resources to deliver OVC related services. There is insufficient internal management and/ or technical capacity to move towards comprehensive care paradigm. Major technical support/ improvements are needed to deliver OVC services.</p>	<p>Focus on improving and expanding services. Organization is beginning to emerge. It has potential and capacity to learn in all areas. Can be considered a good candidate to deliver comprehensive OVC services, but will need considerable technical support.</p>	<p>Focus on expanding services, with some attention to increasing depth of programs. Organization has an established track record delivering OVC services. It is working in some of the areas covered by a comprehensive OVC program. Has some technical capacity and potential resources, but still there is room for improvement.</p>	<p>Focus on maintaining and strengthening current programs, with limited expansion. Focus on building linkages with more nascent organizations. Ability to advocate with government to inform and influence policy. Organization is strengthening its services and working to achieve sustainability. It has strong technical capacity and a solid resource base. It will need support and encouragement to sustain and represent itself as a learning/ role model for comprehensive care.</p>

SECTION IV. CAPACITY ASSESSMENT REPORTING SHEET

External evaluators should fill out this form and include their observations. Organizations should receive a copy for their feedback and review.
Internal evaluators should use this form to review the outcomes of this assessment.

Name of Organization
Date
Assessment Team
Stage of Readiness/Organizational Capacity
Observations

Evaluator #1 Signature and Title: _____

Date: _____

Evaluator #2 Signature and Title: _____

Date: _____

Organization Representative Signature and Title: _____

Date: _____

Appendix 1: Sample Completed Scoring Sheets

Criteria For Stages of Development - A Continuum									
1	2	3	6	7	8	9	10		

Domain 1: Leadership, Governance and Strategy

1. Governing Body (board, executive committee)	Governing body partially identified. Roles and responsibilities are documented but lack specificity and may overlap.	Governing body has well defined roles and responsibilities but the board is not particularly effective or active.	Governing body active (e.g., contributes and pursues resources) with well-defined roles and responsibilities.	Governing body helps advance organization and assist with securing access to resources, establishing or running OVC services.	Evidence <i>A seven member board exists, but it does not meet regularly. A few board members participate in activities of the organization. Only one board member fundraises for the organization. Most members of the board do not have experience in OVC service areas.</i>
Questions <ol style="list-style-type: none"> a. Do you have a governing body (board, executive committee) that oversees the organization? b. Are the roles and responsibilities defined? c. Do the governing body play any role in policy setting, planning, fundraising etc.? d. Do members have some experience in OVC services? If yes, give a brief description. 					Score: 5

Criteria For Stages of Development - A Continuum

	1	2	3	6	7	8	9	10
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Domain 4: Comprehensive Services (Essential Care)

<p>3. Education⁹:</p> <ul style="list-style-type: none"> • Access to formal education • Access to non-formal education (vocational training/building hands-on skills etc) 	<p>Organization does not support education and has no links to organizations that do.</p> <p>Has no direct links with guardians or care givers of OVC attending school.</p>	<p>Organization helps to access formal education (e.g. provides fees etc.), but cannot ensure uniforms and supplies for OVC.</p> <p>There is weak supervision of OVC attending school and no mechanisms to ensure attendance.</p> <p>Has a weak relationship with guardians.</p> <p>Organization provides few services/weak linkages for vocational training/ building hands-on skills.</p>	<p>Organization ensures accessibility to formal education and provides uniform, school meals and books etc. There is regular feedback to ensure attendance and participation.</p> <p>Well defined vocational training/linkages to build hands on skills for OVC, although limited market analysis for ensuring skills built have market post-training.</p> <p>Organization has ongoing relationship with guardians or care givers of OVC.</p>	<p>Organization has well established program to ensure OVC stay in school and have necessary support.</p> <p>May have provision to support higher education for successful learners.</p> <p>Well defined vocational training/building hands on skill initiative or linkages to other service providers. Appropriate skills being taught based on needs of the local market.</p>	<p>Evidence</p> <p><i>The organization only provides non- formal education services. The organization has links with a number of local schools and school committees. The organization monitors school attendance indirectly by talking to parents/guardians and makes occasional visits to schools to check on attendance and on general well-being of enrolled OVC. Some nascent linkages to vocation schools.</i></p>
<p>Questions</p> <p>a. Does the organization provide any educational support to OVC? What (Ask about basic assistance e.g. fees, school materials, boarding facilities etc.)?</p> <p>b. What about monitoring i.e. ensuring attendance, participation, minimizing drop-out etc.?</p> <p>c. Are there some interventions for training the teachers in psychosocial care and special needs of the OVC?</p> <p>d. What about informal education or vocational training services, please explain a bit?</p> <p>e. How is the organization linked to other education programs?</p>				<p>Score: 6</p>	

⁹ Education refers to formal and informal education systems, skill building and technical training. It may include; (1) Basic assistance (access to educational services and support) e.g. short-term assistance with tuition fees, scholastic materials and uniforms etc., vocational training, adult basic education for caregivers (2) Training for teachers in psychosocial care and support of school going OVC to reduce stigma and discrimination and (3) Monitoring of children at risk of dropping out from schools ; working with PTAs or School Management Committees to keep OVC in school; outreach programs for out -of- school youth.

