Organizational Capacity Assessment Tool

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Introduction

Digital technologies are transforming the health sector, and there is high demand from countries, implementing partners, and donors to accelerate the digital transformation of health. Strengthening digital health capacity across all levels of the health workforce is key to the effective implementation, scale-up, and long-term sustainability of digital health systems.

<u>Digital Square</u> at PATH is a digital health marketplace—or 'square'—where supply and demand come together to accelerate health equity through the development, adoption, scale, and delivery of digital health innovations. Digital Square brings partners together to improve how the global community designs, uses, and pays for digital health tools and approaches.

Digital Square promotes the development, adoption, and reuse of digital health global goods, and helps increase their availability, adaptability, and maturity. Digital Square defines global goods as digital health tools that are adaptable to different countries and contexts. Digital Square defines software global goods as tools that are free and open source (FOSS), standards-based, and adaptable to different countries and contexts to help address key health system challenges. Global goods can take several shapes and forms, often work in conjunction with other global goods, and can fulfill many of the technological needs of a health system.

Digital Square works with ministries of health and technology service providers around the world to implement digitally enabled health services to close the health equity gap, often using global goods. The Organizational Capacity Assessment Tool (OCAT) was developed to support Digital Square technical partners, and the broader digital health ecosystem of partners, assess their ability to implement relevant and innovative programming effectively, transparently, and sustainably. It provides a practical method for organizations to conduct self-assessments that can be used to identify strengths and develop plans to enhance capacity in priority areas.

While this tool is applicable to many types of organizations, it was designed to be used by technology organizations that seek to implement global goods and other digital health programming effectively, transparently, and sustainably.

Strengthening local capacity in Kenya

Digital Square developed an Organizational Capacity Assessment Tool (OCAT) for organizations that wish to localize, adapt, and implement global goods, and piloted the tool in partnership with the Digital Health Ecosystem (DHE) project. In partnerships with Medic and funding through the Bayer Foundation, Digital Square supported four African-based grantees --including IntelliSOFT to leverage the Community Health Toolkit to bring lifesaving interventions to mothers and children in Kenya while also providing concerted organizational strengthening and business support.

The OCAT is an important phase of the DHE project because it highlights strengths and areas of improvement around essential systems, policies, and procedures to ensure the grantees' relevance and long-term viability in the digital health ecosystem. This project aims not only to bring impactful interventions to the community, but also strengthen capacity to encourage localization.

"We were excited to learn how to approach organizational continuous improvement and more importantly we were able to determine the capacity and functional status of our organization.... The assessment and follow on business planning will allow us to make the necessary adjustments as an organization which could unlock new grant funding opportunities from bilateral, multilateral, and private philanthropic donors." – Steven Wanyee, Founder and CEO at IntelliSOFT.

Learn more on path.org.



Organizational development at Digital Square

Organizational development at Digital Square supports the vision of *building a more equitable world* by emphasizing transparent operations, mission-driven efforts, and accountability through strong, evidence-based service delivery. The Digital Square organizational development framework and process are borne from international best practices, while also taking into consideration the variety of partners Digital Square engages—local non-governmental organizations, international not-for-profits, businesses, and the public sector. Successful implementation of organizational development at Digital Square requires a holistic look at how those partners are managed and can adapt to changing situations.

The framework

To develop this tool, Digital Square commissioned a review of capacity assessments and analyzed leading and widely used assessment tools available in the marketplace. In developing the domains and subdomains, Digital Square aimed to take a straightforward, functional approach, using terms common across the variety of partners Digital Square engages and organizing the domains based on typical job functions. Digital Square also considered domains and subdomains that are particularly important for its partners, resulting in the development of a global goods technical capacity area.

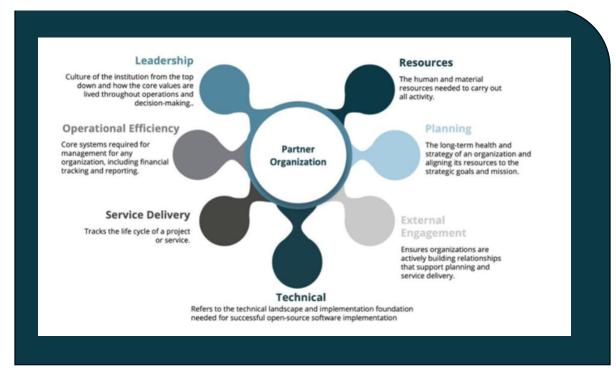
The framework focuses on seven main capacity areas and leverages terminology that crosscuts non-profit, public sector, and corporate divides.

This tool provides a practical approach to beginning or enhancing an organization's understanding of its capacity strengths and areas where its capacity might be enhanced. In organizational development, emphasis is placed on the connections between and around the capacity areas and how they work together and interrelate.

Aligning tools

USAID's Non-US Organization Pre-Award Survey (NUPAS) is an evaluation of an organization's current ability to fulfill the terms of a USAID award. The USAID NUPAS informed the development of the Digital Square OCAT. However, the OCAT is concerned with strong organizational and technical management and contains more indicators than the USAID NUPAS tool.

Figure 1: Seven main capacity areas of the OCAT.



Capacity Area: Leadership

Leadership speaks to the culture of the institution from the top down and how the core values are lived throughout operations and decision-making.

| 1. Capacity Are | 1. Capacity Area: Leadership | | | | | |
|---------------------------|--|---|--|---|---|--|
| | o <i>vernance Structure.</i> Th s that inform how this l | | | g and maintaining the o | organization and the | |
| 1.1.1 Composition | There is no connection between the areas of expertise of the members of the governing body and the activities of the organization. | 25% of the members of the governing body represent a connection between their areas of expertise and the activities of the organization. | 50% of the members of the governing body represent a connection between their areas of expertise and the activities of the organization. | 75% of the members of the governing body represent a connection between their areas of expertise and the activities of the organization. | 100% of the members of the governing body represent a connection between their areas of expertise and the activities of the organization. | |
| 1.1.2 Governance policies | The governing body operates according to the terms laid out in the legal founding documents. | The governing body operates according to basic guidelines on areas not included in the founding documents (i.e., conflicts of interest, voting rights, and compensation). | The governing body operates according to documented policies covering essential areas (i.e., term limits, conflicts of interest, compensation, and voting rights). | The governing body operates according to documented policies covering nearly all areas (i.e., term limits, conflicts of interest, compensation, committees, codes of conduct, and voting rights). | The governing body operates according to fully defined policies that are routinely reviewed (annually or otherwise). | |

| 1.2 Sub-category: Go within the organization | overnance Responsibili n. | ities. The overarching de | escription of why the gov | rerning body exists and v | what its overall role is |
|--|---|--|--|---|---|
| 1.2.1 Purpose | The role of the governing body is not clearly defined, and members are not aware of their responsibilities. | The role of the governing body is somewhat defined, but members are not aware of their responsibilities. | The role of the governing body is clearly defined, but members are not always sure about their roles and provide limited guidance or input. | The role of the governing body is clearly defined, and members provide useful and appropriate guidance or input. | The role of the governing body is clearly defined, and members regularly provide direction, guidance, and timely input. |
| 1.2.2 Interaction | Members of the governing body and relevant staff do not interact at all. | Members of the governing body and relevant staff seldom interact, and communication is poor. | Members of the governing body and relevant staff routinely communicate, with frequent misunderstandings. | Members of the governing body and relevant staff communicate well with one another, with occasional misunderstandings. | Members of the governing body and relevant staff work well together and communicate openly and effectively. |
| 1.2.3 Involvement | There are no guidelines clarifying the role of the governing body members versus the executive leadership. | Governing body guidelines clarify the role of the governing body members versus executive leadership. | Governing body guidelines clarify the role of the governing body members versus executive leadership and outline the levels of authority afforded to the governing body members. | Governing body guidelines clarify the role of the governing body members versus executive leadership, outline the levels of authority afforded to the governing body members, and lay out expectations regarding engagement with staff. | Governing body guidelines are updated regularly, annually, or otherwise. Guidelines clarify the role of the governing body members versus executive leadership, outline the levels of authority afforded to the governing body members, and lay out expectations regarding engagement with staff. |

| 1.3 Sub-category: M | anagement Team. The c | qualifications of the senic | r leadership to guide the | organization in its strate | egic direction. |
|---------------------------|---|---|--|--|--|
| 1.3.1 Experience | Management team has little to no experience in areas related to the core competencies of the organization. | Management team has limited managerial and technical experience related to the core competencies of the organization. | Management team has some experience in organizational management and the technical areas related to the core competencies of the organization. | Management team has significant experience in organizational management and the technical areas related to the core competencies of the organization. | Management team is highly experienced in organizational management and is a technical leader in the core competencies of the organization. |
| 1.3.2 Financial judgment | Management team has no experience with financial planning and oversight. | Management team doesn't account for medium- or long-term implications of decisions and prioritizes immediate financial needs. | Management team demonstrates a basic level of accounting for medium- or long-term implications of decisions and focuses mostly on immediate financial needs with some medium-range planning. | Management team demonstrates an intermediate level of accounting for medium- or long-term implications of decisions and focuses on mediumrange financial needs with some long-range planning. | Management team demonstrates an advanced level of accounting for medium- or long-term implications of decisions and focuses on mediumand long-range financial planning. |
| 1.3.3 External reputation | Management team does not participate in any external activities related to the core competencies of the organization. | Management team members attend conferences, publish materials, or are members of professional organizations related to the core competencies of the organization. | Management team members present or speak at national conferences, publish materials, and are members of professional organizations related to the core competencies of the organization. | Management team members present or speak at national or international conferences, publish materials, are members of professional organizations, and serve on boards/advisory groups related to the core competencies of the organization. | Management team members present or speak at national and international conferences, publish materials, hold leadership positions in professional organizations, and serve on boards /advisory groups related to the core competencies of the organization. |

| 1.4 Sub-category: Su executive director (ED) | | which an organization is | s planning for long-term | leadership beyond the fo | ounder or current |
|--|---|---|---|--|---|
| 1.4.1 Second-tier management | Management team consists of the CEO/ED who is the lone decision-maker. | Second-tier management exists in title only; CEO/ED doesn't delegate. | Second-tier management exists, but the immediate supervisor delegates tasks, not decision- making, to few a team members. | Second-tier management has distinct roles and some decision- making authority; immediate supervisor delegates regularly. | Second-tier management has distinct roles and autonomous decision-making authority; the immediate supervisor consistently delegates responsibilities. |
| 1.4.2 Dependence on CEO/Executive Director (ED) /Managing Director (MD) /Founder | Organization is fully dependent on the CEO/ED/MD/Founder and could not operate without that leader. | Organization is extremely dependent on the CEO/ED/MD/Founder and the future would be unclear without that leader. | Organization has strong dependence on the CEO/ED/MD/Founder but if that leader left, the organization would continue in a very different model. | Organization has reliance but not dependence on the CEO/ED/MD/ Founder; if that leader left, the organization would have staff who could fill the void and it would be able to sustain itself. | Organization proactively has a succession plan and expects a smooth transition to a new leader. |

| | anagement Culture. Mai nunicate, and ultimately | | to the norms and practic | es, often unspoken, that | dictate how staff |
|-------------------------------------|--|--|---|---|--|
| 1.5.1 Decision- making | There are no policies defining who has decision-making authority. | Basic guidance exists outlining who has decision-making authority for broad functional areas (i.e., finance, human resources). | Policies outline decision-making authority that individual staff can take on their own versus those that require collaboration with others in the organization. | Policies outline who can assign responsibility to other staff members and document decision-making authority that individual staff can take on their own versus those that require collaboration with others in the organization. | Policies define who is authorized to assign responsibility, the levels of authority within the organization, and document decision-making authority that individual staff can take on their own versus those that require collaboration with others in the organization. |
| 1.5.2 Inter-functional coordination | There is no coordination within or across programs or operations. | There is some coordination within programs, but not operations (or vice versa). | There is good coordination within programs, but operations are siloed (or vice versa). | There is strong coordination within program areas, and operations teams are engaged to solve problems. | There is constant and seamless integration between programs and operations, with staff coordinating to solve problems and achieve goals. |
| 1.5.3 Internal Communications | Internal communications are one-way (top-down), with content determined by the senior-most management. | Internal communications are both top-down and peer-to-peer, but content is ad hoc and driven by personality. | Internal communications include top-down, peer-to-peer, and employee-up streams, with some guidance in place on what or when to communicate information. | Protocols are in place for what and how frequently to communicate information across the organization, but they are not always practiced. | There are clear protocols and practices in place outlining what and how frequently information is to be communicated across the organization. |

Capacity Area: Operational Efficiency

Operational Efficiency refers to the core systems required in management for any organization, including financial tracking and reporting.

2. Capacity Area: Operational Efficiency 2.1 Sub-category: Financial Management. Detailed policies outlining how an organization and its programs are financially managed, including the controls in place to track and analyze income and spending and budget management. Physical controls are 2.1.1 Internal No documented Physical controls in Physical controls in Robust policies exist controls in place to safeguard place to safeguard place to safeguard outlining the type and internal controls for finances. cash (safes, locks on cash. Reconciliations cash. Reconciliation frequency of finance doors. are carried out to is carried out to verify reconciliationsverify expenditures. expenditures. cash, activity, desks). Policies exist to transactions, and outline the segregation of duty segregation of duties controls. for financial transactions. 2.1.2 Budget Budgets exist for Budgeting and Budgeting and Budgeting and Solid financial management projects. Budget-tospending planning planning occur planning occur planning and happen within actual comparisons regularly across regularly across budgeting is in place, are not carried out. projects, but budgetprojects, and budgetprojects, and budgetincluding quarterly to-actual and annual budgetto-actual to-actual comparisons are comparisons are comparisons are to-actual seldom carried out. occasionally carried carried out annually. comparisons. out. 2.1.3 Procurement Procurement policies No procurement Procurement policies Procurement policies Procurement policies policies policies or and procedures do and procedures do and procedures are and procedures are not meet the needs not meet the needs well documented and comprehensive, wellprocedures exist, and of all funding source documented. staff lack the of all funding source need modest knowledge to create requirements. Staff requirements. Staff revisions to meet the understood, and them. lack the training to are inconsistently requirements of all consistently followed adhere to policies. trained in policies funding sources. by staff. and inconsistently Staff are trained in follow them. and generally follow policies.

| 2.1.3 Procurement policies, procedures, and practices | No procurement policies or procedures exist, and staff lack the knowledge to create them. | Procurement policies and procedures do not meet the needs of all funding source requirements. Policies and procedures are inconsistently followed, and staff lack the training to adhere to policies. | Procurement policies and procedures do not meet the needs of all funding source requirements. Staff are inconsistently trained in policies and inconsistently follow them. | Procurement policies and procedures are well-documented and need modest revisions to meet the requirements of all funding sources. Staff are trained in policies and generally follow them. | Procurement policies and procedures are comprehensive, well- documented, understood, and consistently followed by staff. |
|--|--|--|---|---|--|
| 2.1.4 Compliance with Policies and Procedures: Reasonableness of Price | No policies or procedures exist showing how determinations of reasonableness are made. | Policies and procedures for how determinations of reasonableness are made are informal. | Some policies and procedures that cover competitive procedures, how determinations of reasonableness are made, and who is responsible are in place. | Adequate policies and procedures that cover competitive procedures, how determinations of reasonableness are made, and who is responsible are in place. | Well-documented policies and procedures that require competitive procedures and dictate how determinations of reasonableness are made and specify who is responsible are in place. |
| 2.1.5 Procurement and Sub-Awards | No procurement and sub-award management policies, procedures, and practices are in place. There are no effective policies and procedures to prevent or detect conflicts of interest. There is little to no mentorship or training for staff. | Policies and procedures covering sub-grant awards and management are weak or incomplete. Policies and procedures do not prevent conflicts of interest and ensure employees act in the organization's best interest. There is no formal training for staff. | Policies and procedures are in place that are adequately communicated and generally effective. Formal training is in place, employees are trained, and employees generally follow policies and procedures to ensure acting in the organization's best interest. | Policies and procedures are in place but are not always communicated or effective. Informal training is in place, but it is not enforced. Employees irregularly follow the policies and procedures. | Well-documented and communicated policies and procedures that are effective in practice, guiding appropriate sub-grant awards and management, are in place. Employees are well trained and consistently follow the organization's policies and procedures. |

2.2 Sub-category: Reporting & Compliance. Reporting is required at the funder and government levels to ensure compliance and maintain the ability to operate legally. 2.2.1 Financial Financial reports Some elements of Financial reports Monthly financial Monthly financial reports are not produced. financial reports (i.e., balance sheets. reports (i.e., balance (i.e., balance sheets. reporting (expenses by activity) income statements. sheets, income income statements. are produced but not expenses by activity) are expenses by statements, expenses reviewed for activity) are produced and reviewed by activity) are inconsistently produced, reviewed for for accuracy by accuracy. produced and management, with clear accuracy by reviewed for management, but follow-up plans for dealing with accuracy. action is not consistently taken on discrepancies. discrepancies. 2.2.2 Finance Finance staff have Finance staff have Finance staff have Finance staff have Finance staff is highly staff skills experienced in finance little to no limited experience in some experience in significant experience experience in finance management. finance in finance management and seen as a resource to the rest finance management. management. of the organization. management. Organization has bank Organization plans to 2.2.3 Banking Organization has Organization has a Organization has a establish a bank bank account with a accounts with a relationships no banking bank account or relationship (i.e., account with a registered banking accounts as may be registered commercial uses the account of registered banking institution. Bank necessary (i.e., local banking institution that a senior employee) institution prior to an currency account. Euro are accurately accounts are or policies related award. There is little reconciled monthly account, USD account) reconciled monthly with to banking. Bank full documentation to documentation in with minimal in a registered banking accounts are never institution. Bank support reconciliations. support of account documentation to reconciled. reconciliation. accounts are reconciled Policies stipulate sound support Overall, the reconciliation. monthly and have most requirements covering organization's Policies do not of the required regular bank policies, procedures, documentation. Policies reconciliation and stipulate and practices in this stipulate adequate appropriate action is requirements for area are not regular bank requirements covering taken on anv reconciliation. Less regular bank outstanding item over 60 adequate. than adequate reconciliation. days. action is taken on Adequate action is outstanding items taken on outstanding over 60 days. items over 60 days.



| 2.2.4 Travel policies | There are no travel policies or procedures. **Accounting Systems.** | There are some travel policies as required by donors, but not for the organization as a whole. | There are some travel policies, but they are inadequate for all scenarios. | There are adequate travel policies and procedures that cover common scenarios. | policies and procedures that cover all scenarios. |
|-------------------------|--|--|--|--|---|
| managed within an | | a system of cost centers | | | and where money is spent, |
| 2.3.1 Labor tracking | There are no labor tracking tools or procedures. Staff are paid according to their agreement or understanding with management. | There are basic labor tracking tools or procedures that are often based on rough estimates. Staff payments do not correspond to verifiable information provided by employees. | There are basic labor tracking tools or procedures that are not consistently completed or approved by supervisors. Staff are paid according to their labor, though there are often errors. | There are good labor tracking tools or procedures that report time, activities, and costs and are approved by supervisors. Staff are paid according to their labor, with few errors. | There are strong, comprehensive, and well-documented labor tracking tools or procedures that report time, activities, and costs and are approved by supervisors. Staff are paid according to their labor, without issue. |
| 2.3.2 Payroll system | There is no payroll system. Payroll records are incomplete and unreliable. They are not reconciled to the General Ledger. There are no policies or standards for compensation. | There is an incomplete or weak payroll system. Payroll records often contain errors. Payroll is infrequently reconciled to the General Ledger. There is limited documentation on compensation standards. | There is a payroll system that meets some organizational needs. It is irregularly reconciled with the General Ledger. There are policies on compensation standards (salary scales, increases, and benefits) but they are incomplete. | There is a payroll system that meets key needs. Payroll is regularly reconciled to the General Ledger. Policies exist on compensation and benefits for different job types (salary scales, increases, and benefits). | There is a well-thought-out, well-documented, and effective payroll system (either in electronic or hard copy format) founded on sound payroll policies and procedures that are consistently followed. It is accurately reconciled with the General Ledger on a monthly basis. There are well-documented policies on compensation (salary scales and increases) and benefits for the different types and levels of employees. |

| 2.3.3 Chart of accounts, general ledger, and financial statements | There is no chart of accounts or general ledger. Financial statements are not produced. | The chart of accounts and general ledger do not meet basic accounting standards. Financial statements are produced separately from the general ledger. | The chart of accounts and general ledger meet basic accounting standards, like allowable costs, with some revision required. Financial statements are not consistently prepared but are created from the general ledger. | The chart of accounts and corresponding general ledger meet generally accepted accounting standards, including allowable and unallowable costs. Financial statements are derived from the general ledger and are prepared in accordance with national standards. | The chart of accounts and corresponding general ledger meet local and generally accepted accounting requirements, including allowable and unallowable costs. Financial statements are regularly derived from the general ledger and are prepared in accordance with national and international standards. |
|---|---|--|--|--|---|
| 2.3.4 Bookkeeping system | The bookkeeping system is incomplete or doesn't exist. | The bookkeeping system is weak and cannot automatically reconcile transactions. Financial transactions are inconsistently entered into the system. | The bookkeeping system is adequate, but it cannot automatically reconcile transactions. Financial transactions are entered into the system on a regular basis, with some errors. | The bookkeeping system is a strong double-entry system that can automatically reconcile subsidiary ledgers to the main ledger. Financial transactions are entered into the system on a regular basis. | The reliable double-entry bookkeeping system can automatically reconcile the subsidiary ledger to the main ledger. Financial transactions are entered into the system daily. |

Capacity Area: Service Delivery

Service delivery tracks the life cycle of a project or service, from implementation and monitoring and evaluation to replication, expansion, and adaptation as necessary. A strong system integrates a continuous feedback loop at each phase.

| 3.1 Sub-category: Pla | a: Service Delivery anning. The design proc and opportunities in coll | | | sing evidence-based ap _l | proaches that identify |
|--|---|---|--|--|--|
| 3.1.1 Program alignment with the mission | Projects are not directly linked to mission, goals, or even each other. | Some projects can be linked to broad missions and goals, but projects operate independently from one another. | Most projects can be linked to more focused mission and goals, but projects operate independently from one another. | Most projects are clearly integrated into mission-driven programming and programs collaborate with one another. | All programs are well-defined and fully aligned with the mission and goals. Programs are integrated with one another and operate in consultation with one another to maximize effectiveness. |
| 3.1.2 Program need at the target population/client level | Needs assessments are not carried out at the population/ client level. | Basic needs assessments are carried out with some key audiences at the population/client level but aren't used to inform program design. | Needs assessments are carried out with some key audiences at the population/client level and are sometimes used to inform program design. | Needs assessments are carried out, collecting information from all key audiences, especially those that will benefit the most from the program. Results are used to adjust or refine the program design. | Needs assessments are routinely carried out to collect and analyze population/client-level-based findings that will inform the ultimate project design or adaptation to outdated designs. |

| 3.2 Sub-category: Im way. | plementation. Implemer | ntation speaks to the skil | lls within an organization | to carry out and report o | on activities in a timely |
|---------------------------------------|---|---|--|---|---|
| 3.2.1 Staff project management skills | Program management staff have little to no experience in project management. | Program management staff have limited experience in project management. | Program management staff have significant experience in project management. | Some program management staff are certified in project management by an external group. | Program management staff are certified in project management by an external group. Staff are highly experienced in project management and are recognized as leaders and influencers. |
| 3.2.2 Staff technical skills | Staff have little to no experience in technical areas related to the project. | Staff have limited experience in technical areas related to the project. | Staff have significant experience in technical areas related to the mission. | Staff are certified by an external group as experts in key technical areas related to the mission. | Staff are recognized as technical leaders and influencers. |
| 3.2.3 Reporting | Reporting templates provided by the donor (or created by the organization) are not submitted regularly. | Reporting templates provided by the donor (or created by the organization) are submitted, but they are often late and incomplete. | Reporting templates provided by the donor (or created by the organization) are submitted on time but often with missing information. | Reporting templates provided by the donor (or created by the organization) are submitted on time and with all the required information. | Reporting templates provided by the donor (or created by the organization) are always submitted on time or early with all the required information and additional relevant information from the organization (as needed). |

| 3.3. Sub-category: Monitoring and Evaluation. Monitoring and evaluation speak to the methods used by an organization to determine if |
|--|
| project goals are being (or are going to be) met and what level of impact the project will have on key users. |

| project goals are being (or are going to be) met and what level of impact the project will have on key users. | | | | | | |
|---|---|--|---|---|--|--|
| 3.3.1 Influence of evaluation | Organization has no resources for reflection and learning. There is no expectation that evidence will lead to improved strategy and practice. | Organization has very few resources for reflection and learning. There is little expectation that evidence will be used to refine strategy and practice. | Organization is interested in reflection and learning, but there are few resources available to ensure they occur regularly. Improvements in strategy and practice based on evidence occur, but inconsistently. | Organization is interested in reflection and learning and has some resources available to ensure they occur regularly. Improvements in strategy and practice based on evidence occur with regularity, and lessons are shared internally. | Organization has a culture of reflection and learning. Resources are available to ensure that learning from evidence and experience occurs. Learning leads to improvements in strategy and practice, and these lessons are shared externally and internally. | |
| 3.3.2 Program monitoring and evaluation (M&E) plan | Organization does not monitor or evaluate programs. | Organization only monitors and evaluates programs as required by the donor. | Monitoring and evaluation of programs is inconsistent and not linked to organizational priorities, theories of change, or learning objectives. M&E results do not guide decision-making or organizational learning. | Monitoring and evaluation of programs occurs but is not clearly linked to the organization's priorities, theory of change or learning objectives. M&E results may or may not be used to guide decision-making or organizational learning. | Systematic monitoring and evaluation of programs occurs and is generally defined by the organization's priorities, theory of change, or learning objectives. M&E results inform decision-making and organizational learning. | |
| 3.3.3 Program M&E data collection and analysis | Donor-required project data is collected but not reviewed. | Donor-required project data is collected and reviewed at least annually. | Donor-required and organization strategic data is collected for each project and reviewed at least annually. | Donor-required and organization strategic data is collected for each project and reviewed at least every six months. | Donor-required and organization strategic data is collected for each project and reviewed at least every quarter. | |

| 3.3.4 Performance measurement | Organization has little to no performance tracking, and most of the evaluation is based on anecdotal evidence. | Organization has very limited measurement and performance tracking, and most of the evaluation is based on anecdotal evidence. | Organization partially tracks performance and measures progress, but pays little attention to impact measures. | Organization measures performance and tracks progress in multiple ways several times a year. | Organization has a comprehensive, integrated system for measuring performance and impact on a continuous basis. |
|--|--|--|---|---|---|
| | arning and Adaptation. on of current implementa | | | ram performance with a | n eye on the |
| 3.4.1 Knowledge management | Organization does not document internal knowledge beyond oral histories. | Organization documents internal knowledge on a project-by-project basis. | Organization documents internal knowledge on an organizational basis. | Organization documents internal knowledge and disseminates organization-level learnings annually. | Organization documents internal knowledge and disseminates organization-level learnings quarterly. |
| 3.4.2 Performance analysis and adjustments | Internal data is not consistently gathered; there are no external project reviews. | Internal performance data is rarely used to improve programs; few external performance reviews are made. | Internal performance data is used annually to improve programs; some efforts are made to benchmark activities and outcomes against the outside world. | Effective internal and external benchmarking occurs; learnings are used to adjust and improve at least semi-annually. | Comprehensive internal and external benchmarking is part of the culture and is used by staff quarterly to adjust and improve. |
| 3.4.3. Program growth and replication | No discussion of scaling up or replicating existing projects (project mindset). | Limited ability to scale up or replicate existing projects based on performance data (project mindset). | Some ability either to scale up or replicate existing programs based on performance data (department/sector mindset). | Fully able to scale up or replicate existing programs based on performance data (department/sector mindset). | Efficiently and effectively able to grow existing programs based on performance data (institutional mindset). |



Capacity Area: External engagement

External engagement assures organizations do not exist in a vacuum. In fact, they are actively building relationships that support planning and service delivery.

| 4. Capacity Area | 4. Capacity Area: External Engagement | | | | | | |
|---|--|---|--|---|--|--|--|
| 4.1 Sub-category: Outreach. Outreach speaks to the organization's ability to engage with targeted groups to ensure program activities are | | | | | | | |
| relevant, necessary, a | | | | | | | |
| 4.1.1 User engagement | Organization does not seek user input. | Organization seeks user input during one of the following: project design, implementation, or evaluation. | Organization seeks user input during two of the following: project design, implementation, or evaluation. | Organization seeks user input during project design, implementation, and evaluation. | Organization seeks user input at any point, not just related to a particular project cycle. | | |
| 4.1.2 Stakeholder engagement strategy | There is no engagement strategy; organization does not communicate with external audiences. | There is no engagement strategy; organization rarely communicates with external audiences. | There is no engagement strategy; organization can identify key stakeholders and regularly communicate basic information with them. | There is a basic engagement strategy, but organization doesn't tailor messaging to target audiences or situations. The organization communicates broadly with key stakeholders, but messages are not always timely. | Organization has a clearly defined engagement strategy outlining distinct messaging for key stakeholders that is delivered in a timely and accessible way. | | |
| 4.1.3 Staff external communications capacity | There are no dedicated external communications staff. Staff have little to no experience in communication. | Organization assigns external communications responsibilities to existing staff. Organization staff tasked with communications have limited experience. | Organization assigns external communications responsibilities to existing staff. Organization staff tasked with external communications have competent skills in basic communications. | Organization hires dedicated external communications staff with strong external communications skills. | Dedicated external communications staff are highly experienced in communications and annually evaluate the external communications strategy, messaging to key targets, and communications tools. | | |

| | ortnerships and Network agements to advance the | | | t add value to project im | plementation at all |
|--------------------------------------|--|---|---|---|--|
| 4.2.1 External relationship building | Organization is not engaged in any external partnerships or alliances. | Organization has limited use of partnerships and alliances with public sector, nonprofit, or for-profit entities. | Organization is in the early stages of building relationships and collaborating with other for-profit, nonprofit, or public sector entities. | Organization has effectively built and leveraged some key relationships with a few relevant forprofit, nonprofit, or public sector entities. | Organization has built, leveraged, and maintained strong, high-impact relationships with forprofit, nonprofit, or public sector entities. |
| 4.2.2 Network capacity | Organization is not active in any networks. | Networks in which the organization participates have no clear strategy and are inconsistent in communications and advocacy. | Networks in which the organization participates have a strategy that is indistinguishable from that of its member organizations, but the networks are active when reacting to important events. | Networks in which the organization participates have a clearly articulated strategy that is distinct from but sometimes overlaps with its member organizations; networks are consistently active. | Networks in which the organization participates/leads have a compelling and clearly articulated strategy that is distinct and complementary to member organizations, and the networks are consistent and highly effective. |
| | e dia. Organizations that o eir own needs, as well as | | | | y and protocol for both |
| 4.3.1 Media relations skills | Organization has no experience working with the media. | Organization has limited experience working with the media but doesn't have a media strategy. | Organization has some experience working with the media and has the frame of a media strategy with several gaps to be filled. | Organization has a media strategy that is reflected in its ongoing engagement with the media through a variety of approaches (public speaking, writing, events, and social media). | Organization has a media strategy that is constantly analyzed and updated, allowing for routine engagement of media through a variety of approaches (public speaking, writing, events, and social media). |

| 4.3.2 Media relationships | Organization has no media contacts. | Organization has a list of media contacts who cover their field but has had little contact with them. | Organization has a list of media contacts who cover their field and has built good working relations with a small number of them. | Organization has a list of media contacts who cover their field and has built good working relationships with them. | Organization maintains strong relationships with the media and is often approached by the media for comment or background on |
|------------------------------|-------------------------------------|---|---|---|--|
| | | | them. | | or background on |
| | | | | | events happening in |
| | | | | | their field. |

Capacity Area: Planning

Planning refers to the organization, not just specific programs or services. This looks at the long-term health and strategy of an organization and aligning its resources with its strategic goals and mission.

| 5. Capacity Area | a: Planning | | | | |
|---|---|--|---|--|--|
| 5.1 Sub-category: Le benefit users. | egal Obligations. This ad | ddresses the most basic | legal obligation of regist | ration status that allows | an organization to |
| 5.1.1 Legal Obligations | Organization is not legally registered. | Organization is reviewing the legal registration requirements. | Organization is in the process of registering. | Organization is legally registered. | Organization is legally registered and actively monitors changes in compliance with relevant laws. |
| | rategic Vision and Long priorities. Setting short- a | | | | |
| 5.2.1 Strategic plan | No written strategic plan; the work of the organization can be described as unfocused. | A written strategic plan, but it does not provide guidance for daily activities, and it is rarely referred to. | A strategic plan that serves as a general guide for programmatic work but does not regularly guide decision-making. | A strategic plan that serves as a general guide for programmatic and operational work and guides decisionmaking. | A strategic plan with a clear focus on outcomes and impact guides decisionmaking. Programs are regularly reviewed and adjusted to ensure plan alignment. |
| 5.2.2 Analytical and strategic thinking | Organization relies mainly on intuition rather than strategic analysis. Organization is uncomfortable with complexity or ambiguity. | Organization can analyze strategies but does not generate them. Organization can cope with some complexity or ambiguity. | Organization develops strategies and can cope with some complexity or ambiguity. | Organization develops robust strategies and quickly breaks down complex information to the core issues. Organization welcomes ambiguity and is comfortable with the unknown. | Organization develops robust strategies and strategic alternatives to minimize risk. Organization can synthesize complexity and make informed decisions in ambiguous situations. |

| 5.2.3 Operational planning | Organization runs on a day-to-day basis with no short- or long-term planning. | Organization has developed an operational plan that reflects daily activities, not strategic plan activities. | Organization has developed an operational plan that is loosely linked to the strategic plan and is inconsistently used to guide operations. | Organization has developed and refined a concrete operational plan that reflects the strategic plan and is used consistently to guide operations. | Organization has developed and refined a concrete, realistic, and detailed operational plan that is tightly linked to the strategic plan and is systematically used to direct operations. |
|----------------------------------|---|--|---|---|---|
| 5.2.4 Planning systems | Organization plans on an ad hoc basis; no data is collected to inform planning. | Organization regularly plans by using some existing data. | Organization regularly plans by using existing and collected data. | Organization routinely plans and can plan ad hoc when necessary. Data is regularly collected in support of planning efforts. | Organization planning is complemented by ad hoc planning as needed. Data is used systematically to support and improve planning efforts. |
| 5.2.5 Absorptive capacity | Organization's staffing, physical infrastructure, and financial management structures are operating at full capacity and cannot expand. | Organization's staffing, physical infrastructure, and financial management structures are open to up to 25% expansion of activities. | Organization's staffing, physical infrastructure, and financial management structures are open to up to 50% expansion of activities. | Organization's staffing, physical infrastructure, and financial management structures are open to up to 75% expansion of activities. | Organization's staffing, physical infrastructure, and financial management structures are open to any level of expansion of activities. |
| 5.3 Sub-category: Fit resources. | nancial Planning. These | e help match planned out | tlays and income to both | current program activitie | es and future budget |
| 5.3.1 Fund analysis | Funds raised do not meet the current administrative, HR, or programmatic needs. | Funds raised meet current programmatic needs, but funds are tight and administrative and HR needs are not met. | Funds raised meet current programmatic and administrative needs, but funds are tight and HR needs are not met. | Raised funds are sufficient to meet immediate administrative, HR, and programmatic needs, but there is no cushion. | Raised funds meet current needs, and there is sufficient cushion to allow for increased human resource investments or programmatic expansion each year. |

| 5.3.2 Cash flow analysis | Organization does not develop cash flow budgets and lacks the capacity to do so. | Organization has weak discipline in developing, monitoring, and using cash flow budgets. | Organization has adequate discipline in developing, monitoring, and using cash flow budgets. Sometimes payments are late due to cash fluctuations. | Organization has adequate discipline in developing, monitoring, and using cash flow budgets. | Organization has good discipline in developing, monitoring, and using cash flow budgets. |
|-------------------------------|--|--|--|---|---|
| 5.3.3 Funding alignment | Organization's work is determined by donor interests. | Organization's work is largely determined by donor interests, but there is core support for strategic plan initiatives. | Organization receives core support for the strategic plan initiatives but also takes on donor- driven projects to help cover costs. | Organization receives general operating and project support consistent with its strategic plan but struggles to secure funding for organizational priorities. | Organization receives sufficient funder support to realize the organizational priorities outlined in the strategic plan and acquires funds from profit-making goods or services. |
| 5.3.4 Funding diversification | Organization is dependent on one or two donors who provide short-term support. There is no business development strategy or effort to find new donors. | Organization is dependent on a few donors of the same type (e.g., government, foundations, private individuals). There is no business development strategy or effort to find new donors. | A few key donors of the same type (e.g., government, foundations, private individuals) support the organization year to year. There is no long-term plan for business development strategy and modest effort to find new donors. | Business development strategy leads to multiple types of donors (e.g., government, foundations, private individuals) who provide some flexible multi-year support. New sources are occasionally approached. | Highly developed long-term business development strategy leads to sustainable and diverse support for core work from multiple types of donors (e.g., government, foundations, private individuals). New sources are regularly approached. |

5.4 Sub-category: Business Development. Business development challenges organizations to look at assets that can be leveraged to close funding gaps using means beyond traditional proposal writing. 5.4.1 Revenue There are no internal There are some There are significant There are some There are several internal revenueaeneration revenue-generation internal revenueinternal revenueproven internal activities. generation activities generation activities generating activities revenue-generating that yield substantial vielding marginal vielding substantial activities that yield substantial financial financial financial financial contributions. contributions. contributions. contributions. 5.4.2 Staff capacity Organization assigns Organization assigns Regular business Highly developed There are no dedicated staff for business business development needs internal business business development development are well covered by development skills development. responsibilities to responsibilities to qualified staff, whose are carried out by Organization staff existing staff. existing staff or iob descriptions qualified and have little to no Organization staff external experts. include resource experienced staff, experience in tasked with resource Organization staff mobilization. whose performance fundraising. mobilization have tasked with resource reviews include limited experience. mobilization have resource mobilization competent skills. goals. 5.4.3 Donor relations Communication with Relations with Organization holds a Communication with Communication with current or current or current or current or strong and positive prospective donors is prospective donors is prospective donors is reputation with prospective donors extremely limited; insufficient, and are generally good, adequate, and current or communication that donors approach the donors' questions are but sometimes prospective donors, exists is always organization with matters of communication is not includina beina initiated by the questions. clarification of past as timely as it could known for clear. communications. proactive, and donors. be. responsive communications.

5.5 Sub-category: Staffing Planning. Staffing planning requires understanding the full set of skills available through existing and prospective staff and leveraging skills to meeting the goals of the strategic plan. It also requires an understanding of time management within existing funding mechanisms.

| funding mechanisms. | | | | | , and the second se |
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| 5.5.1 HR planning | No human resources plan exists, and there are no staff to oversee it. | Simplified human resources plan exists but is overseen by staff without formal training. | Human resources plan exists but needs updating and alignment with the mission and strategic plan. Dedicated staff oversee the plan but could use more training or resources. | Well-developed human resources plan exists and is aligned to the mission and strategic plan, but it is seldom reviewed or updated. Dedicated staff oversee the plan but could use more training or resources. | Well-developed and regularly revised human resources plan reflects the organizational mission and strategic plan. Formally trained, qualified staff oversee the plan. |
| 5.5.2 Staffing needs analysis | Organization does not maintain a skills inventory of existing staff or a review of programs to determine gaps to be filled by new staff. | Organization maintains resumes or basic skills data on all staff but seldom accesses this data in support of program needs. There is no needs assessment of current or future program gaps. | Organization surveys staff to collect skills data but seldom accesses this data in support of program needs. Organization surveys existing programs for their current staffing gaps but does not necessarily fill those gaps. | Organization carries out an assessment of staffing needs to meet the program needs of existing and planned activities. Staff skills are collected and occasionally accessed in support of identified needs. | Organization routinely carries out assessments of staffing needs to meet the program needs of existing and planned activities. A thorough inventory of existing staff skills is maintained and accessed to develop new programs. |
| 5.5.3 Staff turnover | Organization does not analyze staff-related trends like turnover rates. | Staff turnover is significantly greater than is typical for the field, and the organization is not addressing the issue. | Staff turnover is somewhat higher than what is typical for the field, especially for high performing staff; the organization recognizes the issue but does not have a plan to address it. | Staff turnover rates are typical for the field; the organization does not have a proactive plan for the retention of high-performing staff. | Staff turnover rates are low for the field, and the organization takes a proactive role in seeking to retain high-performing staff. |

Capacity Area: Resources

Resources refer to the human and material resources needed to carry out all activities. Resources looks at the systems in place to identify, onboard, and maintain resources in support of service delivery.

6. Capacity Area: Resources 6.1 Sub-category: Human Resources. Human resources policies document the responsibilities, benefits, processes, and standards associated with personnel activities and govern the activities of all staff. 6.1.1 HR policies There are no human Human resources Human resources Human resources Human resources resources policies. policies are outdated policies exist but do policies are complete policies are complete and incomplete. not reflect best and reflect best and reflect best Policies are neither practices. Policies practices. Policies practices. Policies are typically followed. well-known by staff are not well-known are consistently and most staff are nor consistently by staff and are not followed, and staff are familiar with consistently applied. familiar with relevant applied. pieces. relevant pieces. 6.1.2 Recruiting, No system in place to Some efforts to Focused initiatives to Focused initiatives to Proactive initiatives retention, and staff identify and train identify new staff identify new talent. identify new talent. to identify new talent. development staff. Positions are (i.e., job fairs, Ad hoc staff Staff development Staff development is typically filled by networking, development. opportunities are prioritized, with offered and friends of existing informational opportunities linked staff. interviews). Few occasionally linked to to performance training, coaching, or performance reviews reviews and or organizational feedback organizational needs. needs. opportunities. 6.1.3 Job No documented job Job descriptions exist Job descriptions exist Job descriptions exist Job descriptions are and are accurate and descriptions and but don't speak to and are occasionally descriptions or accurate and appraisals performance actual staff roles and updated. Staff updated. Staff updated routinely. Staff receive appraisals. responsibilities. sometimes receive receive regular Appraisals are appraisals that offer appraisals but wish constructive seldom carried out. no insights on roles for greater clarity on feedback, regular roles and and responsibilities. appraisals, and are clear on roles and responsibilities. responsibilities.

| 6.1.4 Employee compensation | There is no internal standard for setting salary and compensation packages. | Salaries, benefits, and raises are well below what similar organizations offer, making it difficult to retain existing staff and attract new members. | Salaries, benefits, and raises are on the low end for the field, affecting its ability to attract and retain staff. | Salaries, benefits, and raises are competitive with similar organizations. | A leader in the field and offers salaries, benefits, and raises that are higher than peer organizations. |
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| 6.1.5 Volunteer management | Volunteers are used ad hoc. | Volunteers are occasionally used, but not strategically. | Volunteers are sought to fill general gaps and have general guidelines for how to do their activities. | Volunteers are actively sought to fill very specific gaps and report to a volunteer coordinator. | Volunteers are sought who bring complementary skills to the organization. Volunteer coordinators and policies ensure volunteers are well-managed. |
| 6.2 Sub-category: An relations. | lministrative Structure. | Describes the operating | environment for all person | onnel as well as the stru | cture of office inter- |
| 6.2.1 Organizational structure | There is no organization chart. | A basic organization chart shows the relationships within the organization and between entities (e.g., headquarters, field office, subsidiaries), but it is outdated or unclear. | The organization chart shows the relationships within the organization and between entities (e.g., headquarters, field office, subsidiaries), but it needs to be updated. | The comprehensive organization chart shows relationships within the organization and between entities (e.g., headquarters, field office, subsidiaries) with all roles and responsibilities defined as they should be. | The comprehensive organizational chart clearly shows all roles and responsibilities of all organizational entities and reflects how things work. |
| 6.2.2 Administrative policies and procedures | No documented administrative procedures. | Partially documented administrative procedures explain key office functions but are not consistently applied or known to staff. | Well-documented administrative procedures are mostly followed, but gaps remain; systems are periodically reviewed but seldom updated. | Well-documented administrative procedures are followed; systems are periodically reviewed but need updating. | Administrative procedures are clearly documented, followed throughout the organization, regularly reviewed, and updated. |

| 6.3 Sub-category: Safety & Security. Having a comprehensive security plan is the easiest way that organizations can plan for and deal with challenges if and/or when they occur. | | | | | | |
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| 6.3.1 Safety and security assessment | Risk to the organization or to others is not considered. | Risk to staff, programs, and constituents are discussed informally but not analyzed. Emergency contact information is collected from staff. | Risk analysis exists for risks to staff, programs, and constituents, but the recommendations are not fully communicated or followed. Incomplete data is collected on staff but not updated. | Risk analysis process exists for capturing risk for staff, programs, and constituents, but recommendations for external constituents are not consistently communicated. Full data is collected from staff but not regularly updated. | A comprehensive analysis of risk to staff and potential harm to constituents (partners, community members, volunteers) is routinely carried out. Staff contact data is continuously updated. | |
| 6.3.2 Security plan and training | There is no security plan, no training for staff on risk issues, and no documentation of security incidents. | Some security policies are in place but not closely followed. Some staff are trained on basic risk management (personal, organizational, and digital security). Security incidents are not documented but rather shared by word of mouth. | A basic security plan framework exists with significant gaps and inconsistent compliance. Staff are sporadically trained on basic risk management (personal, organizational, and digital security). Security incidents are sometimes documented with no follow-up. | A comprehensive security plan is in place. Staff are occasionally trained on risk management (personal, organizational, and digital security). Security incidents are documented with inconsistent follow up or policy changes. | A regularly updated and comprehensive security plan is consistently followed. Staff are regularly trained on risk management (personal, organizational, and digital security). Security incidents are documented and reviewed, and lessons learned are reflected in updated policies and best practices. | |

6.4 Sub-category: Technology Solutions. Technology solutions should match the size, needs, and technological capacity of an organization. Solutions should be user-friendly and properly maintained, with clear protocols for maintenance. 6.4.1 Technology and Hardware and Hardware exists for Hardware exists for Staff have access to Staff have access to information systems software solutions do some staff but is all staff and is the necessary the necessary not meet the basic outdated or slow. periodically updated hardware to optimally hardware to optimally with no system for IT needs of the or refreshed by an IT function and are function and are organization. support. Software support solution. supported by a supported by a solutions perform Software solutions reliable IT solution. reliable IT solution. basic functions and exist for financial Software solutions for Software solutions for aren't used reporting and basic data management, data management, consistently by all data tracking. reporting, and reporting, staff. Sharing of Information-sharing financial communicating, and software or hardware technologies for data management are financial storage and access updated occasionally. management are is common practice are being developed. (i.e., one org. e-mail Information sharing updated, staff are Sharing software or technologies for data trained, and they are account; one storage and access regularly used by all. computer that has hardware sometimes exist but aren't Information sharing certain programs on occurs (i.e., one org. technologies for data it). e-mail account; one consistently used by computer that has staff. Staff have their storage and access own e-mail accounts. systems are up-tocertain programs on date and used for it). timely decision-

| 6.4.2 | |
|----------------|--|
| Communications | |
| tools | |

There are no tools to communicate with target audiences (internal or external) and no staff capacity to develop tools.

Basic but outdated tools are available to communicate with some target audiences (internal or external). Staff lack the capacity to develop new tools.

Basic tools are available to communicate with some target audiences (internal or external). Staff are capable of using and adapting these tools and creating new ones.

A variety of tools are available to optimally communicate with target audiences (internal and external). Staff have the capacity to analyze tool effectiveness and adjust or adapt as needed.

making.

A full array of tools is available to optimally communicate with all target audiences.
Staff have the capacity to analyze tool effectiveness and adjust or adapt as needed.

6.5 Sub-category: Asset Management. The organization has the appropriate physical infrastructure and technology solutions to carry out its core competencies and takes care to maximize the performance life of these assets. 6.5.1 Physical Inadequate physical **Physical** Adequate physical Fully adequate Physical infrastructure (space, infrastructure (space. infrastructure infrastructure (space, infrastructure (space, physical furnishings, vehicles) furnishings, vehicles) furnishings, vehicles) furnishings, vehicles) infrastructure (space, to meet the needs of can be made to work is needed to meet the furnishings, vehicles) well-tailored to the the organization. well for the needs of needs of the for the current needs organization's current the organization, organization, with of the organization. and anticipated provided significant some improvements needs. improvements are to be made. made. Some office policies A regularly updated 6.5.2 Maintenance A basic office There are no A comprehensive procedures to or procedures are in handbook exists to office handbook is in and comprehensive place to safeguard provide guidance on place to provide office handbook is in safeguard organizational assets organizational assets how to safeguard quidance on how to place to provide (physical organizational assets safeguard guidance on how to (physical infrastructure and infrastructure and (physical organizational assets safeguard infrastructure and (physical technology technology organizational assets solutions). solutions), but they technology solutions) infrastructure and (physical infrastructure and are not closely with significant gaps technology solutions) followed. and inconsistent and is usually technology compliance. followed. There is solutions). Policies

little review of these

policies once they are written down.

are reviewed, and lessons learned are

reflected in updated policies and best

practices.

Capacity Area: Technical/Global Goods

Global goods are the technical landscape and implementation foundation needed for successful open-source software development.

| 7. Capacity Area: | 7. Capacity Area: Technical/Global Goods | | | | | | | | |
|---|---|---|---|---|---|--|--|--|--|
| 7.1 Sub-category: And design, and develop. | 7.1 Sub-category: Analysis Methods & Architectural Design. The methodologies, practices, and tools an organization uses to analyze, design, and develop. | | | | | | | | |
| 7.1.1 Business analysis | There are no dedicated business analysts and no other staff with business analysis skills. | Some staff with business analysis skills are available within the organization but are not regularly utilized on projects. | Staff with business analysis skills are available within the organization, but the development process is developer-driven, and these skills may not be utilized to their full potential. | Business analysis staff are available and actively maintain the appropriate level of knowledge. | Business analysis staff are available at both the management and product delivery levels, and they maintain advanced levels of knowledge to possibly include relevant certifications (e.g., CBAP) or follow a recognized methodology (e.g., BABOK). | | | | |
| 7.1.2 Systems analysis | There are no dedicated systems analysis staff. | Some systems analysis staff exist but are not regularly utilized. | Systems analysis staff exist but are developer-driven, or another standard process is in place to achieve this skill. | Systems analysis staff are available and actively maintain the appropriate level of knowledge. | A well-structured systems analysis team and methodology exist. The organization has the full resources needed to implement the work. | | | | |
| 7.1.3 Productivity for software development practices and process use | DevOps is not currently used, and/or another method is. | DevOps is currently being considered to be used inconjunction with other methods (depending on the project tasks), but no decision has been made. | It has been determined that DevOps' philosophy and framework will be actively used, but only in the planning stages. | DevOps is actively in use, but with minimal practices and not for the entire pipeline. | DevOps has been fully adopted by the organization for the maintenance of current products and the more efficient deployment of new open-source software. | | | | |

| 7.1.4 Enterprise-level software design | There are no dedicated enterprise-level software design staff. | Some enterprise- level software design staff exist but are not regularly utilized. | Enterprise-level software design staff exists but is developer-driven, or another standard process is in place to achieve this skill. | Enterprise-level software design staff are available and actively maintain the appropriate level of knowledge. | A well-structured enterprise-level software design team and methodology exist. The organization has the full resources needed to implement the work. |
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| 7.1.5 User interface (UI)/user experience (UX) | There are no dedicated UI/UX staff. | Some UI/UX staff exist but are not regularly utilized. | UI/UX staff exist but are developer-driven, or another standard process is in place to achieve this skill. | UI/UX staff are available for enterprise solutions and actively maintain the appropriate level of knowledge. | A well-structured UI/UX team and methodology exist. The organization has the required resources needed to implement the work. |
| 7.1.6 Software architecture | The organization has no software architect staff in the organization. | The organization has one or more technical staff with some relevant experience and training that can perform some of the required tasks of a software architect. | The organization has one or more software architect(s) that is heavily required to prioritize projects, resulting in the minimum efficient solution(s) but may result in some risk(s). | The organization has multiple software architect(s) that are heavily required to prioritize projects, resulting in above-average efficient solution(s), with minimal risk(s). | The software architect(s) lead decision-making while managing complexity and architectural integrity. The organization's software architect(s) also provide input on other critical topics of risk, adaptability, scalability, etc. |
| 7.1.7 Enterprise architecture | No staff have training or experience in enterprise architecture. | Some staff members have education or experience in single-product or small-suite enterprise architecture. | Multiple staff members have education or experience in single- product/small-suite or enterprise-level software architecture. | Multiple staff members have conducted multiple implementations of enterprise-level architecture. | Some staff are certified in TOGAF (The Open Group Architecture Framework) or a similar certification and have demonstrated experience in enterprise architecture. |

| 7.2 Sub-category: Software Development. The resources, languages, stacks, and systems involved in creating and maintaining applications, frameworks, or other software components. | | | | | |
|---|--|--|--|--|---|
| 7.2.1 Team structure 7.2.2 Tools | The team dynamics and roles do not follow any process for creation. Please share the types of s | The team was structured based on the needs and projects necessary at any given time. | The team has been restructured to fill gaps and include roles that are most relevant to project needs. | The team is regularly assessed for skill gaps, level of effort, and time allotments for fairness towards staff output. | Human resources, management, and other appropriate departments thoroughly communicate and evaluate the resource needs and status to swiftly allocate resources and skills appropriately at any given time. This is a documented process. |
| 7.2.3 Front-end and back-end development skills | The organization does not have full-stack developers. | The organization has some front-end and back-end developers with very little practical experience. | The organization has a few front-end and back-end developers, but those few team members regularly compete with other organizational priorities. | The organization has few team members with the appropriate practical front-end, back-end, and other skills to achieve project goals. | The organization has multiple developers with the appropriate frontend, back-end, and other skills to achieve project goals. The team also includes specialty-certified individuals in different technologies (e.g., Java, Oracle, etc.). |
| 7.2.4 Programming languages | Please share the software of development. | development programmi | ng language skills that o | exist within your organi | zation for tool |

| 7.3 Sub-category: Im | nplementation. The skil | lls, processes, and exper | rience within an organiza | tion to roll out software | for use. |
|--|--|---|--|--|--|
| 7.3.1 Implement open-source software(s) at scale (community, district, national) | No staff have experience implementing software. | Staff has limited experience implementing software on a community, district, or national-level scale. | Staff has implemented software at all levels while aligning with country strategies and proper international standards, but with minimum experience. | Staff has ample experience running implementations at all levels with full preparation for system sustainability. | Staff has experience running multi-national implementations with measurable outcomes and successful adoption from relevant stakeholders. |
| 7.3.2 Addressing open-source software (OSS) knowledge gaps | No experience with OSS technology and limited or no involvement in OSS communities. Only experience with proprietary software. | Becoming familiar with open-source software by downloading and deploying it, but not involved in OSS communities. | Some experience with OSS and beginning to participate in opensource software communities and technical working groups. | Vast experience with OSS, regular/active community participation, and implementation experience. | The team represents originators, creators, and managers of opensource software and implementation guidance documentation who are actively involved in sharing solutions with larger communities. Has conducted multiple OSS implementations at various levels of scale. |
| 7.3.3 Upgrading tools that are implemented | Staff has no experience with upgrading tools that are running in implementation. | Staff has limited experience upgrading tools outside our organization but have not had a need-to within the organization yet. | Staff has upgraded tools regularly, but only when adding new features. | Staff has ample experience upgrading tools regularly for multiple reasons (to include new features, security, and bug fixes) and has a documented process for migration. | Staff has experience upgrading tools across multiple major versions to also enhance compatibility and functionality, regularly shares new versions, has a clearly documented and tested standard operating procedure for upgrades and maintenance, and is clearly able to plan and articulate the LOE required to do so. |

| 7.4 Sub-category: Tra | sining Deploying softwa | are alone is not sufficient. | There must be adequa- | to canacitation of target (| reare |
|--|--|--|--|--|---|
| 7.4.1 Training of OSS for external beneficiaries and users | No product training offered to beneficiaries; no training services established. No training resources exist. | Some training is provided to beneficiaries, but not yet for OSS. | There are standard training resources and opportunities, depending on the approval and need of the skill(s). Documentation is the main training source. | Training resources exist, with options of external training support mechanisms as well. In-person, virtual, and/or hybrid options exist. | Training resources exist, are maintained, and have a dedicated team to deliver customizable methods to the beneficiaries. |
| 7.5 Sub-category: Su | pport. The services prov | vided by an organization | that deliver technical pro | oduct help and advice to | registered users. |
| 7.5.1 Support services for software product (i.e., provide technical support and advice related to the product's value proposition, product features, installation and use, log and provide fixes for bugs). | No experience or resources for providing technical support services exist. | Some support services resources exist but are not regularly utilized. | Support services resources exist that are driven by team members who have minimal technical skills. | Support services resources are available for enterprise solutions with an escalation process. | Robust support services exist, including documentation, guides, a community, and a support desk where more advanced services can be rendered. Support services are kept up- to-date by dedicated staff. |
| 7.5.2 Support services for implementation (i.e., provide technical support and advice related to active implementations, including how to configure for specific use case, available tools and resources, etc.). | No experience or resources for providing technical support services exist. | Some support services resources exist but are not regularly utilized. | Support services resources exist that are driven by team members who have minimal technical skills. | Support services resources are available for enterprise solutions with an escalation process. | Robust support services exist, including documentation, guides, a community, and a support desk where more advanced services can be rendered. Support services are kept up-to-date by dedicated staff. |

| 7.6 Sub-category: Quality Assurance. The processes, methods, and tools an organization uses to ensure quality in software. | | | | | | |
|---|---|---|--|---|--|--|
| 7.6.1 Quality | No quality assurance | Some testing and | There is a routine | A well-documented | A well-documented | |
| assurance | processes exist. There is no or limited understanding of why, how, and when software testing should be performed. | quality assurance processes exist but are not consistently applied, and there is no or limited documented evidence of the testing process or results. | quality assurance process using a basic set of tools and templates (test plans, checklists, test cases, etc.) that provides documented evidence of testing for high priority software features and functions only. | quality assurance process using a set of tools and templates (test plans, checklists, test cases, etc.) that provides documented evidence of testing for high- and medium-priority software features and functions. | quality assurance process using a standardized set of tools and templates (QA strategy, checklists, test cases, test data, etc.) that provides documented evidence, including detailed reports, of thorough testing for all software features and functions to support operational efficiencies and high system utilization. | |
| 7.6.2 Deployment (i.e., the process of making an application work on a target device, including a test server, production environment, users' desktop, tablet, or mobile device). | The organization has no deployment experience. | The organization has some deployment experience, but not for working environments. | The organization has few projects that have been deployed, but not in accordance with any standard protocol. | The organization has multiple projects that have been deployed according to IQ, OQ, PQ, or other qualification protocols. | The organization has multiple projects that have been deployed according to IQ, OQ, and PQ standards with a dedicated deployment team of advanced-level staff. | |
| 7.7.1 Assess inventory | There is no security inventory. | There is awareness that the organization's security inventory exists, but are unaware of what is included. | Security inventory exists and awareness of where to find the documentation exists, although not reviewed. | All inventory is internally shared and updated regularly. Selected departments have access to the documentation and review it regularly. | All inventory is internally shared and updated regularly. All departments have access to the documentation, as well as notifications of any upcoming maintenance or changes. | |

| 7.7.2 Conduct a security assessment | No security assessment has been conducted. | A security assessment is indiscussion/being planned, but it has yet to be conducted. | A security assessment has been conducted, but it is completed only when there is a need. | Security assessment has been conducted, and results reviewed by the security team and leadership to address the issues identified. Security assessments are conducted on a regular basis, regardless of past results. | Security assessments are regularly conducted, and the responsible department maintains active communication with all appropriate entities for minimizing risks on a regular schedule as well. |
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| 7.7.3 Regulation(s) being followed | No regulation(s) is being followed within the organization. | One or more regulation(s) have been considered or are in discussion but have not been adopted within the organization. | One or more regulation(s) are being followed within the organization, but staff are not required to be aware of security measure(s). | One or more regulation(s) are being followed within the organization, and staff has been notified of where to find documentation and related training. | One or more security regulation(s) are being followed for security within the organization, and all staff are trained and well-aware of what constitutes as improper access, vulnerabilities, breaches, and other risks to data. The security team has the appropriate security certifications. |
| 7.7.4 Security framework (i.e., defines policies and procedures for establishing and maintaining security controls). Frameworks clarify processes used to protect an organization from security risks. | No security framework(s) is being followed within the organization. | One or more security framework(s) have been considered or are in-discussion but have not been adopted within the organization. | One or more security framework(s) are being followed for security within the organization. | One or more security framework(s) are being followed for security within the organization, and staff has been notified of where to find documentation and related training. | One or more security framework(s) are being followed for security within the organization, and the security team is also trained, certified, and well-aware of what constitutes as improper access, vulnerabilities, breaches, and other risks to data. |

| 7.8 Sub-category: Data. Interoperable digital health systems help get the right data into the right hands at the right time for better decision-making. | | | | | | | |
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| 7.8.1 Data visualization (not applicable is acceptable for this indicator) | The organization has no dedicated data visualization resources (including software, hardware, and staff). | The organization has some data visualization resources (including software, hardware, and staff) that exist but are not regularly needed. | Data visualization resources (including software, hardware, and staff) exist but are developer-driven, or another standard process is in place to achieve this skill. | Data visualization resources (including software, hardware, and staff) are available and actively maintain the appropriate level of knowledge. | A well-structured data visualization team and/or methodology exist. The organization has the required resources (including software, hardware, and staff) needed to implement the work. | | |
| 7.8.2 Data querying, manipulation, and mining | No technical method for information retrieval and discovery is conducted within the organization. | The data querying, manipulation, and mining process has only been discussed and defined but is yet to be documented. | The data querying, manipulation, and mining process is limited to ad hoc needs for information retrieval and analysis. | The data querying, manipulation, and mining process continues to be enforced but is not regularly utilized. | There is a robust and enforced data querying, manipulation, and mining process that regularly enables the organization to perform advanced data analysis. | | |
| 7.8.3 Data management | The organization has no formal data management process. | The data management process is limited to accessibility, but other factors (such as privacy and limitations) are not in place. | The data management process has only been discussed and drafted but has yet to be documented. | The data management process has been enforced within the organization. | There is a robust and enforced data management process within the organization that includes training, validation, and accountability for data use. | | |

7.9 Sub-category: Standards and Interoperability. Fragmentation occurs when digital health programs have been implemented as vertical, siloed applications that can't usefully exchange data. Interoperability and the use of standards allow multiple systems and software applications to communicate with one another by accessing, exchanging, and making use of data in a coordinated manner to achieve health goals.

| goals. | | | | | |
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| 7.9.1 Experience with digital health interoperability standards (e.g., HL&, FHIR, IHE profiles, etc.) | No team members are experienced or aware of digital health interoperability standards. | The organization is in discussions about digital health interoperability trainings being planned for staff. | A few team members are already experienced or aware of digital health interoperability standards but do not readily participate in related community engagement. | Majority of team members are experienced or aware of digital health interoperability standards but do not readily participate in related community engagements. | Multiple team members are experienced or aware of digital health interoperability standards and actively participate in regular, sustained interoperability community engagement, including connectathons. |
| 7.9.2 FHIR implementation | There has been no review, development, or FHIR implementation. | The organization is investigating the use of FHIR and understanding how it fits into the work. | The organization is utilizing FHIR in some projects. | The organization is active in FHIR communities and has a go-to health standard for use. | The organization is active in the development and design of FHIR resources and working with FHIR Implementation Guides (IGs). |
| 7.9.3 Data standards (e.g., LOINC, ICD- 10, ICD-11, etc.) | The organization is unaware of data standards. | There is an awareness of data standards, but the organization has not established governance to enforce its usage. | Some of the deployed projects have utilized relevant data standards. | Multiple deployed projects have utilized relevant data standards. | The adoption of relevant data standards is a requirement for accountability and best practices within the organization. |

| 7.9.4 OpenHIE architecture specification | The organization is unaware of OpenHIE Architecture Specification. | The organization has awareness of OpenHIE Architecture Specification but has not deployed any software using its framework or community foundation. | Some staff have completed foundational OpenHIE Architecture Specification trainings and can articulate architecture and application. | Multiple team members have deployed OpenHIE Architecture Specification with minimum experience. | Multiple team members are actively engaged in OpenHIE Architecture Specification, leading architecture and communities. Staff are certified in OpenHIE by the OpenHIE Academy. |
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| 7.10.1 Health domain knowledge | No staff have health domain knowledge or experience (and/or?) the organization has no health projects. | The organization has the minimum health domain knowledge or experience needed for the implementation of open-source software. | The organization has several health projects, and the current health skills of team members are above average. | The organization is actively implementing multiple health projects across various disease verticals/program areas with multiple staff members who have advanced skills. | The organization has multiple staff who are dedicated health officers with advanced knowledge and experience in the health domain. |
| 7.10.2 Health care software deployment experience | The organization has no health care software development experience. | The organization has some health care software development experience, but not for software development projects. | The organization has few projects that require health care software development experience, and the skills utilized are minimal. | The organization has multiple projects that require health care software development experience, and a few team members even have advanced-level knowledge to achieve the outcomes. | Health care software development experience is plentiful throughout the organization, with many team members having the appropriate specialties and certifications to complement their experience. |

| 7.11 Sub-category: Management. The processes and tools used for the process of planning, developing, launching, and managing products, projects, and/or services. | | | | | | | |
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| 7.11.1 Technical project management (e.g., Gantt chart, RACI, work plan) | The organization does not have a structured approach or documentation for technical project management. | The team has an ad hoc tracking structure with basic tools but is not regularly utilized. There are no dedicated project management staff. | The organization has a few dedicated project managers who are often competing with other organizational priorities. | The organization regularly maintains appropriate resource allocation measures for the mid-level project managers to remain efficient with investments in their skills, when approved. | Advanced technical project management structures and patterns exist, with dedicated project management tools, reports, and project managers. | | |
| 7.11.2 Product management (e.g., software roadmap) | The organization does not have a structured approach or documentation for product management. | The team has an ad hoc tracking structure with basic product management experience, mainly for discovery and initial planning discussions. | The organization has a few dedicated product managers who are focused on most elements of the product development lifecycle, with some documentation. | The organization regularly maintains appropriate product management procedures, with dedicated staff conducting controls at most stages of the product development lifecycle. | The organization regularly maintains a robust product development lifecycle process with consistent communication, documentation, and implementation (to also include impact, features, delivery, beneficiary feedback, etc.). | | |

7.12 Sub-category: External Engagement. The organization's ability to productively interact with various stakeholders in relation to software development, deployment, and implementation.

| acvelopinent, | development, deployment, and implementation. | | | | | | |
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| 7.12.1 Experience working with external stakeholders | There has been no experience working with external stakeholders. | The experience working with external stakeholders has not been direct, but through a partner organization as the intermediary entity. | There has been indirect experience with external stakeholders for technical implementations (open source and non-open-source software), mostly by way of observation. | There has been direct, but limited, experience with external stakeholders for technical implementations (open source and non-open-source software). | There has been direct experience with external stakeholders for the implementation of open-source software, and their involvement and support have been consistent. | | |
| 7.12.2 Digital health community engagement (e.g., HELINA, AeHIN, OpenHIE) | No staff has experience engaging in open-source communities or OSS. | No staff has experience engaging in open-source communities but have some experience deploying OSS. | Staff have limited experience engaging in open-source communities. | Staff have relevant experience engaging in communities and have deployed OSS. | Regularly active in multiple open-source software technology communities (license impact, software development, and library selection). | | |

