Affiliate Accreditation Tool

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Affiliate Resources Unit

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Principle	Standard Num.	Capacity Area	Priority	Compliance Measure
Accountability	4.10	Awards & Compliance	high	
Accountability	4.2	Awards & Compliance	medium	
Accountability	4.3	Awards & Compliance	medium	
Accountability	4.4	Awards & Compliance	high	
Accountability	4.5	Awards & Compliance	medium	
Transparency	5.2	Awards & Compliance	high	
Common Purpose	1.5	Communications/Advocacy	medium	
Local ownership	3.5	Communications/Advocacy	low	
Accountability	4.14	Communications/Advocacy	medium	
Mutual Learning	7.1	Communications/Advocacy	low	
Local ownership	3.7	Financial Mgmt	high	
Accountability	4.1	Financial Mgmt	high	
Accountability	4.6	Financial Mgmt	high	
Accountability	4.7	Financial Mgmt	high	
Accountability	4.8	Financial Mgmt	high	
Accountability	4.9	Financial Mgmt	high	
Common Purpose	1.1	Governance	high	
Common Purpose	1.3	Governance	high	
Common Purpose	1.4	Governance	high	
Good Governance	2.1	Governance	high	
Good Governance	2.2	Governance	medium	
Good Governance	2.3	Governance	medium	
Good Governance	2.4	Governance	high	
Good Governance	2.5	Governance	high	
Local ownership	3.1	Governance	high	
Local ownership	3.2	Governance	high	
Local ownership	3.6	Governance	high	
Good Governance	2.4.1	Governance	high	
Good Governance	2.4.2	Governance	high	
Good Governance	2.4.3	Governance	high	
Good Governance	2.6	H.R.	medium	
Local ownership	3.8	H.R.	high	
Accountability	4.11	H.R.	high	
Accountability	4.12	H.R.	medium	
Accountability	4.13	H.R.	medium	
transparency	5.5	H.R.	medium	
transparency	5.6	H.R.	medium	
transparency	5.7	H.R.	high	
Mutual Learning	7.2	H.R.	low	
Mutual Learning	7.21	H.R.	high	
Quality	6.10	IT	low	
Quality	6.11	IT	low	
Quality	6.12	IT	low	
Quality	6.3	M&E	medium	
Quality	6.5	M&E	high	
Quality	6.6	M&E	high	
Quality	6.7	M&E	low	
Quality	6.8	M&E	low	

Principle	Standard Num.	Capacity Area	Priority	Compliance Measure
Quality	6.9	M&E	medium	
Local ownership	3.4	networking	medium	
Partnerships	8.1	networking	low	
Partnerships	8.2	networking	medium	
Partnerships	8.3	networking	low	
Local ownership	3.3	organizational mgmt	medium	
Transparency	5.1	organizational mgmt	low	
Transparency	5.3	organizational mgmt	low	
Quality	6.2	organizational mgmt	low	
Common Purpose	1.2	Program Mgmt	medium	
Transparency	5.4	Program Mgmt	high	
Quality	6.1	Program Mgmt	medium	
Quality	6.4	Program Mgmt	low	

Date of Review:

Priority:	High					Medium					Low					
Compliance Measure:	Fully Compliant	Mostly Compliant	Nominally Compliant	Not Compliant	Not Applicable	Fully Compliant	Mostly Compliant	Nominally Compliant	Not Compliant	Not Applicable	Fully Compliant	Mostly Compliant	Nominally Compliant	Not Compliant	Not Applicable	TOTAL
Capacity Area																
Governance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Program Mgmt	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Organizational Mgmt	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HR	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Communications & Advocacy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Networking	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Awards & Compliance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Financial Mgmt	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
M&E	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
IT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	0

	TOTAL				
	Fully Compliant	Mostly Compliant	Nominally Compliant	Not Compliant	Not Applicable
Governance	0	0	0	0	0
Program Mgmt	0	0	0	0	0
Organizational Mgmt	0	0	0	0	0
HR	0	0	0	0	0
Communications & Advocacy	0	0	0	0	0
Networking	0	0	0	0	0
Awards & Compliance	0	0	0	0	0
Financial Mgmt	0	0	0	0	0
M&E	0	0	0	0	0
IT	0	0	0	0	0
Total	**0**	**0**	**0**	**0**	**0**

	TOTAL				
	Fully Compliant	Mostly Compliant	Nominally Compliant	Not Compliant	Not Applicable
High	**0**	**0**	**0**	**0**	**0**
Medium	0	0	0	0	0
Low	0	0	0	0	0

Capacity Area: Governance

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
1.1	high	The Affiliate has defined its organizational mission, goals and vision.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Mission Statement 2. Vision Statement 3. Organizational goals as set out in the strategic plan. Interview the following individuals: 1. Executive Director 2. Chairperson of the Board of Directors 2. Technical Director	1. Does the organization have a mission statement? 2. Does the organization have a vision statement? 3. Has the organization devised programmatic and organizational goals, that are translated into activities and work plans?			
		The Affiliate's organizational mission, goals and vision are aligned with those of EGPAF		Review the following documents: 1. Mission Statement 2. Vision Statement 3. Organizational goals as set out in the strategic plan. Interview the following individuals: 1. Executive Director 2. Chairperson of the Board of Directors 2. Technical Director	1. Does the mission incorporate the elimination of pediatric HIV? 2. Are other public health related issues included in the mission/vision/goals? If so, are they aimed at achieving the elimination of pediatric HIV?			
1.3	high	Up to 49 percent of the members of the principal governing body for the Affiliate may be individuals appointed by the EGPAF President and Chief Executive Officer.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Constitution & Bylaws 2. List of the Members of the Governance Body	1. Does the Constitution/Bylaws provide for the appointment of up to 49% of the members of the governance body by EGPAF? 2. Of the whole governance body, how many are appointed by EGPAF? Is this number less than 49%?			
		EGPAF appointments of Board members are reflected in each Affiliate's Constitution and/or Bylaws.		Review the following documents: 1. Constitution & Bylaws 2. List of the Members of the Governance Body	1. Are the appointments of Board members by EGPAF the same as what is reflected in the language of the Bylaws/Constitution or other governance documents?			
		EGPAF review from the Affiliate Review Committee (ARC) was obtained for the appointment of Board Members.		Review the following documents: 1. ARC Review Decision on Board composition/appointment	1. Are the appointments of Board members by EGPAF the same as what is reflected in the ARC review decision?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
1.4	high	The President and Chief Executive Officer of EGPAF must concur on the appointment, retention and removal of the senior operating officer (ex. Executive Director, Director General, or Chief Operating Officer) for the Affiliate.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Letter of concurrence from EGPAF President & CEO Interview the following individuals: 1. Chairperson of the Governance Body or other individual on the hiring committee for the ED.	1. Did the EGPAF President & CEO provide concurrence for the ED appointment? 2. Has the ARC and EGPAF President & CEO been consulted in the performance review process for the ED?			
2.1	high	The Affiliate has an active board of directors, executive committee, general assembly or other governing body.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following Documents: 1. Constitution & Bylaws 2. Minutes of the last 3 meetings of the Governance Body 3. List of members of the Governing Body Interview the following individuals: 1. Executive Director 2. Chairperson of the Governance Body 3. At least one other member of the Governance Body	1. Has the Board met in the last 6 months? 2. What role has the governance body played in the management and strategic direction of the organization? 3. Are the members of the governance body being active contributors?			
		The governing body is independent of the management of the organization.			1. Are the members of the executive management of the organization voting members of the governing body? 2. Does the governing body exercise oversight over the executive management of the organization, in practice and as described in the bylaws?			
		The governing body exercises oversight according to the letter and spirit of the Affiliate's Constitution and Bylaws.			1. For the last 3 Board meetings, have all procedural requirements set out in the bylaws been adhered to and documented?			
		The governance body holds regular general assemblies and elections, in accordance with the bylaws/constitution.			1. In the last year, has the governing body held meetings that at a minimum meet the requirements set out in the bylaws?			
2.2	medium	Governance bodies of the Affiliate is comprised of individuals with a diverse set of skills and backgrounds, and are representative of the stakeholders participating in the achievement of the mission, goals and vision for the Affiliate in the host country.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. List of members of the Governance Body 2. Bios for members of Governance Body	1. Does the professional and personal profile of the Board incorporate a broad set of skills and backgrounds that is consistent with the EGPAF Criteria for Governance Bodies?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
2.3	medium	The Affiliate's governing body must supervise and evaluate the Executive Director (ED) and oversee program activities, budgetary matters, and financial management.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Job Description for the ED 2. Minutes of the ED hiring/oversight committee 3. Performance review for ED Interview the Following Individuals: 1. ED 2. Chairperson of the Governance Body 3. HR Manager	1. Has a performance review of the ED been performed in the last year? 2. Was the performance review documented? 3. Were members of the governance body substantially involved in the performance review process?			
		The Affiliate's governing body must define the overall organizational strategy, consistent with the organizational mission.		Review the following documents: 1. Organizational Strategic Plan 2. Minutes of Last 2 Board Meetings Interview the following Individuals: 1. Executive Director 2. Chairperson of Board of Directors and/or Board Secretary	1. Has the organization developed a strategic plan? 2. How was the governing body involved in the development of the strategic plan?			
		The Affiliate's governing body must ensure that resources are used efficiently and appropriately, performance is measured, financial integrity is assured, and public trust is maintained.		Review the following documents: 1. Minutes of last 3 Board meetings 2. Audit report Interview the following individuals: 1. Executive Director 2. Chairperson of the Board of Directors 3. Chairperson of the Audit Committee/Treasurer 4. CFO or equivalent	1. Does the governance body review reports on programmatic activities and finances at each meeting? 2. Does the Board review reports from the auditor? If there have been any findings, has the Board ever intervened to require more detailed reporting to oversee activities?			
2.4	high	Affiliates must each have a written Constitution and Bylaws which are consistent with best practices and legal standards for good governance. The Constitution and Bylaws must be accepted and approved by the governing body and must not contravene the Foundation's Articles of Association and Bylaws or any applicable laws or regulations. The Constitution and Bylaws must include the following Provisions:	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following Documents: 1. Constitution & Bylaws 2. Any resolutions related to the acceptance or amendment of the Constitution/Bylaws 3. Conflicts of Interest Policies	1. Was the Constitution/Bylaws approved by the governance body, in accordance with the procedural requirements set forth in the document? 2. Is the Constitution/Bylaws consistent with host country law?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
2.4.1	high	Written procedures for defining the responsibilities of the members of the governing body or bodies;	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable		Does the document or any associated resolutions set out procedures to define the responsibilities of the governing Body/bodies?			
2.4.2	high	Written procedures for the appointment, responsibilities and terms of office for members of the governing body or bodies, which require elections to take place at regular intervals and define the voting rights of members;	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable		Do the governance documents or any associated resolutions set out: 1. term limits for offices and members of the governance body 2. elections for replacement of members of the governance body 3. voting rights of members of the governance body			
2.4.3	high	Written procedures for preventing and managing conflicts of interest among the members of the Governing Body or Bodies and amongst its staff, which are no less restrictive than the EGPAF Conflicts of Interest Policy.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable		1. Does the organization have a conflicts of interest (COI) policy that requires disclosure of conflicts and recusal from participation in decision-making where a conflict is present? 2. Are conflicts disclosure forms for all staff and members of the Governance body kept on file? 3. Does the COI policy limit the acceptance of gifts to less than $25?			
2.5	high	Each Affiliate must hold a general meeting with authority to appoint and replace members of the governing body on at least an annual basis.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Constitution and Bylaws 2. Minutes of the last 3 meetings of the Governance Body 3. Book of Minutes of all meetings of the governance body.	1. Does the organization have a general meeting on at least an annual basis? 2. Can members of the governance body be elected at the general meeting?			
		Minutes of the General Meetings are recorded and held in the Affiliates records for the life of the Affiliation relationship.			1. Are the minutes of the meetings recorded and kept on file?			
3.1	high	At least 51 percent of the individuals represented in the governing body of the Affiliate must be host country citizens or permanent residents.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Passport or other identification cards or certifications from members of governance body 2. Host Country Registration documents for Affiliate Interview: 1. Executive Director 2. Chairperson of Governance Body	1. Are the members of the govenance body a permanent resident or citizen of the host country?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
3.2	high	The Executive Director of the Affiliate must be a citizen or permanent resident of the host country.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Passport or other identification cards or certifications from ED Interview: 1. Executive Director	1. Are you a permanent resident or citizen of the host country?			
3.6	high	All Affiliates must be registered with the government of the host country, as required by host country law.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Registration certificate or other documentation Interview: 1. Executive Director 2. Legal Counsel	1. Has the organization submitted their request for registration? 2. Has the registration been approved? 3. Have annual reporting requirements been adhered to?			

Capacity Area: Program Management

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
6.1	medium	The Affiliate must ensure high quality in the services that it supports.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Policies related to quality assurance (ensuring activities uniformly implemented per protocol) 2. Proof of data use for decision making (ex. program reports, meeting notes) Interview: 1. QI Manager/M&E manager 2. Executive Director or other senior technical manager 3. Partner organizations 4. Technical director	1. Describe how staff are oriented to their specific job functions (best to ask about specific positions most likely to impact quality of interventions carried out). 2. Are there SOPs for key tasks (pre-select a list of programmatic and operational functions to request SOPs for)? 3. How do you ensure staff have easy access to relevant technical resources? 4. Is there a systemic process to identify staff training needs? 5. Does the affiliate implement quality improvement activities with its partners?			
		The Affiliate implements programs which are consistent with applicable standards of care, as defined by international organizations and national guidelines in the host country.		Review the following documents: 1. Key international/national/ organization standards documents kept in easy to access location (hard copies and/or electronic) staff are aware of 2. SOPs for specific tasks (i.e. supportive supervision visits) Interview: 1. QI Manager/M&E manager 2. Executive Director or other senior technical manager 3. Partner organizations 4. Technical director	1. What processes are in place to ensure that technical staff have access to the latest national guidelines and standards of care? 2. Which sets of national guidelines are implemented by the program? 3. If there are deviations from national guidelines or standards of care, why? 4. When national guidelines and standards of care are changed, what systems are in place to update SOPs?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
6.4	low	The Affiliate must establish and utilize a comprehensive structure for program management, which includes work planning, award management, project budgeting, and sub-grant management.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Project workplans/Results Frameworks 2. Project staff plans 3. Latest project budget to actual analysis Interview: 1. Project Directors 2. Grant Managers 3. Technical Directors	Ask for all or select projects if too many: 1. Does the workplan: - Reflect a clear, project structure with distinct objectives and activities? - Reflect the current scope of the project? - Indicate timeline? - Indicate persons responsible? 2. When was the project workplan last reviewed to check progress? 3. When was the last budget to actual comparison? 4. Are grant and sub-grantee management responsibilities clearly divided among appropriate staff? Who is responsible for carrying out each task?			
1.2	medium	The scope of the Affiliate's programs are consistent with the priorities set forth in EGPAF's Program Intervention Framework.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Workplans 2. Progress reports to donors Interview: 1. Technical Director 2. M&E Director 3. Project Directors 4. Partner organizations	1. Describe the scope of progam activities. 2. How do you ensure the activities the organization engages in are consistent with EGPAF's Intervention Framework?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
		The Affiliate implements high quality programs		Review the following documents: 1. Quality Management Framework (if available) 2. Reports on programmatic indicators Interview: 1. Technical Director 2. M&E Director 3. Partner organizations	1. What types of systems are in place to ensure high quality programs? 2. Are mechanisms in place to look at quality of activities?			
5.4	high	Affiliate must maintain programmatic records, supporting documents, statistical records, and all other records pertaining to the implementation of program activities in accordance with best practices for program monitoring and evaluation.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. M&E Framework for all projects 2. Program monitoring tools 3. Project results/logic framework and/or workplan Interview : 1. Project Director/s 2. Technical Director	1. Compare Program results/logic framework and/or worklan to the M&E Framework. Does M&E framework contain clearly defined and organized process, output and outcome indicators for all interventions? 2. Is progress made on implementation of project activities captured in writing (qualitative) on a regular basis? 3. Is there an up to date M&E data compiled as designated in the M&E Framework?			
		Affiliate must maintain programmatic records, supporting documents, statistical records, and all other records pertaining to the implementation of program activities in accordance with donor requirements.		Review the following documents: 1. Donor reporting guidelines/templates 2. Donor reports 3. Donor communication regarding reports Interview: 1. Project Director or 2. Grant Manager	1. Do the donor reports contain the information the donor requested? 2. Are donor reports presented per donor specifications? 3. Does the organization have a system to archive reports and other program documentation per donor requirements?			

Capacity Area: Organizational Management

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
3.3	medium	The organization has a written strategic plan that reflects its mission, goals and vision.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Reivew the following documents: 1. Strategic plan document 2. Review all project workplans Interview: 1. Executive Director or other senior manager	1. Does the strategic plan reflect the mission of the organization? 2. Are programmatic workplans linked to the Strategic Plan?			
		The strategic plan is updated on a regular basis ▯		Review the following documents: 1. The last two strategic plans. 2. Documentation showing strategic plan was consulted in the last 2 years. Interview: 1. Executive Director 2. At least one other senior manager	1. When was the last time the strategic plan was comprehensively reviewed and revisions considered/made? 2. In the last two years, how often was the strategic plan reviewed to check progress or ensure activities undertaken can be directly linked to the strategic plan? 3. Has there been a comprehensive review & revision of strategic plan every 2-3 years?			
		The strategic plan is developed through a consultative process with internal and external stakeholders		Review the following documents: 1. Documentation of outreach to and participation of internal and external stakeholders in strategic planning process. Interview: 1. Executive Director or other senior manager 2. Partner organizations	1. Was a cross functional group of internal staff consulted during the strategic planning process? 2. Were external partners and/or beneficiaries consulted during the strategic planning process? 3. Was a review of the external environment (sector analysis) conducted during the strategic planning process?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
5.1	low	The Affiliate must establish a clear organizational structure.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Organizational Chart 2. Descriptions of departmental responsibilities/scope Interview: 1. Executive Director 2. HR Manager	1. Does the organizational chart clearly demonstrate the organizational structure? 2. Is each department's scope clear and distinct from the others?			
		The Affiliate must establish clear communication and coordination among departments and divisions.		Review the following documents: 1. Written internal communications policies describing regularly held cross-departmental meetings Interview: 1. Operations Director 2. Programs Department Directors/Managers	1. What standing meetings are planned between departments? 2. Are the meetings held as planned? 3. Select a two key functions (budgeting, contracts, etc.) requiring collaboration across departments and ask interviewee/s to describe how they are carried out.			
5.3	low	Affiliates must establish transparent reporting requirements, policies and procedures concerning the operations of the organization and the progress of programs, which are made available to stakeholders.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Regular submission of reports, 2. Regular audits 3. Regular meetings with stakeholders. Interview: 1. Partner organizations 2. Communications Director 3. Technical Director 4. Operations Director	1. How are stakeholders appraised of the organization's progress? 2. What types of financial reports are prepared and to whom are they submitted outside the organization? 3. What types of programmatic reports are regularly prepared and to whom are they submitted? 4. Do members of the organization meet regularly with key stakeholders? 5. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
6.2	low	Affiliates must implement a quality management (QM) program for programmatic and operations functions, which is consistent with EGPAF's quality management standards.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Quality Management Committee/s Members List 2. Quality Management Plans Interview: 1. Quality improvement (QI) manager, 2. Executive Director or other senior manager	1. Do all departments of the organization have a QM initiative in place (committee or staff dedicated to quality improvement) or is there a single organization wide initiative involving all departments? 2. Are there active QI projects currently? If yes, please describe. 3. Does the QM plan reflect the current status of QI activities? 4. Are there funds dedicated to quality improvement activities?			

Capacity Area: Human Resources

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
2.6	medium	Affiliates must, to the maximum extent possible, promote diversity and gender balance in staff composition.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Gender & diversity policy; 2. Staff Roster for leadership team; 3. Check for existence of training plans or programs concerning workplace divesity / inter-cultural awareness, harassment etc; Interview: 1. HR Manager	1. How is gender & diversity considered in the recruitment process? 2. How do you address cultural / ethnic differences or sensitivities in the workplace? 3. How have you addressed incidents of harassment or discrimination in the workplace? 4. Review the composition / gender balance of the leadership team - are there marked imbalances? 5. Are deliberate efforts are made to foster inclusivity on working teams, e.g. do all recruitment interview panels have at least 1 female?			
3.8	high	Affiliates must develop and adhere to clear written human resources policies and procedures for staffing, recruitment, retention, performance management, employee relations, compensation and individual development.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Check for existence of employee handbook / terms & conditions of service; 2. Check for existence of formal policies in the applicable areas (staffing, recruitment etc); 3. Check for adherence to policies through HR audit of a random sample of files. Interview: 1. HR Manager.	1. Does the organisation follow its policies, e.g. is there a formal structured recruitment process? 2. Is there a formal performance management processs? 3. Is evidence on file to support these implementation of performance management processes? 4. Do all staff have access to the policies? 5. Does every staff member have an employee handbook? 6. Were the policies and procedures updated or reviewed within the last year?			
		HR policies and procedures are consistent with national labor laws, donor requirements and established best practices.		Review the following documents: 1. HR policies and procedures in relation to compliance checklists; 2. Any reports from legal counsel or consultants regarding the scope of HR policies/procedures and applicability of local law; 3. Employee Handbook. Interview: 1. HR Manager.	1. Is local legal counsel or a local labor consultant regularly consulted for the development and updates of HR policies and procedures? 2. Does the HR director have access to updated information in the HR field to ensure that policies are consistent with best practices? 3. Are HR policies consistent with policies and procedures applied by other NGOs in the host country? 4. Is the employee handbook consistent with local labor law?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
4.11	high	Affiliates must promote and enforce clear policies to avoid conflict of interest, nepotism, favoritism and corruption, which are no less restrictive than EGPAF's Conflict of Interest Policies.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Conflict of interest policies and business ethics policies 2. Conflict of interest forms on file for staff. Interview: 1. HR Director 2. Operations Director	1. Have there been any instances of unethical behaviour or conflicts of interest, and how were these handled? Were thees correctly documented? Was the action taken appropriate? 2. What steps have been taken to educate staff regarding ethical behaviour? 3. Have staff received training in these areas, and is this documented? 4. Are applicable policies and procedures reviewed and/or updated on at least an annual basis? 5. Do all staff have conflict of interest forms on file?			
		Affiliates must promote and enforce clear policies that provide protection for whistle-blowers, which are no less restrictive than EGPAF's Conflict of Interest Policies.		Review the following documents: 1. Whistleblower policy; 2. Conflict of interest forms on file for staff. Interview: 1. HR Director 2. Operations Director	1. Does the affiliate have a whistleblower policy? 2. Does the affiliate have a system in place to allow for anonymous reports of ethical violations? 3. Are applicable policies and procedures reviewed and/or updated on at least an annual basis? 4. Do all staff have conflict of interest forms on file?			
4.12	medium	Affiliates must establish clear disciplinary and grievance procedures, and open communication channels.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Written disciplinary & grievance procedures in employee handbook or elsewhere; 2. Schedules of regular meetings, and sample minutes of meetings. Interview the Following persons: 1. HR Director 2. ED 3. Operations Director	1. Have employees brought forward any grievances, and how were these handled? 2. Were any disciplinary issues handled appropriately and properly documented? 3. Is there sufficient interface between management & staff through regular meetings? 4. Are disciplinary actions documented in employee files as necessary?			
4.13	medium	Affiliates must strive to create a healthy work environment, where mutual respect is fostered and there is zero tolerance for sexual harassment and other actions that violate the basic safety or dignity of staff.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the Following: 1. Harassment / sexual harassment policy; 2. Training plans & investment concerning harassment. Interview: 1. HR Director	1. Have there been any reported cases of sexual harassment, and how were these handled? 2. What steps have been taken to educate staff regarding appropriate behavior in the workplace?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
5.5	medium	Affiliates must manage staff salaries and benefits in a fair and transparent manner, providing an appropriate compensation package that adequately compensates staff and maintains market competitiveness, while respecting limited financial resources.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Compensation policy; 2. Salary scale & job grading structure; 3. Personnel files for adequate documentation on file concerning salaries & salary increases; 4. Evidence of salary benchmarking studies. Interview: 1. HR Director 2. Executive Director	1. How are salaries reviewed & adjusted each year? 2. What is the approval process for salary adjustments? Are all salary increases approved by the CEO? What role does the Board play in compensation issues? 3. How is the organization ensuring market competitiveness? What benchmarking studies have been conducted? How were these utilized? 4. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			
5.6	medium	Affiliates must provide all employees with clear information regarding their work responsibilities and employment rights and obligations.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Employee Orientation Program Documents/Procedures 2. Sample of HR Files to Check that all employees are in possession of a valid, up-to-date, comprehensive job description, contract of employment, and employee handbook; 2. Staff performance management plans to check that they have clear performance goals. Interview: 1. HR Director/Manager 2. Interview random sample of staff to verify.	1. Does the organization have a formal, structured orientation program? 2. How does the affiliate systematically ensure job descriptions are updated on a regular basis, and what efforts are made to ensure full employee understanding of their responsibilities?			
5.7	high	Affiliates must promote fair, transparent and effective management of employees, and establish policies that protect the rights of employees and ensure fair treatment in all matters at all times.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Relevant employee policies & disciplinary procedures; 2. Formal performance management system with documented appraisals; 3. Evidence that all management staff have received training in supervisory skills. Interview: 1. Focal group of staff members to probe their perceptions of equity, staff morale, etc.	1. How does the Affiliate monitor staff morale? 2. What steps or processes has the HR Manager put in place to ensure fair treatment of staff? 3. Does the performance management system require documentation of appraisals and are they on file for staff? 4. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
7.2	low	Affiliates must actively promote organizational and staff learning and development, and foster a culture of learning from mistakes, openness, creativity and innovation.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. A sample of individual development plans integrated into performance management; 2. Staff training plan; 3. Evidence of financial support for training, evidence of organization-wide training initiatives, staff retreats etc; 4. Use of Ariel Academy. Interview: 1. HR Manager 2. Staff Managers	1. How does the Affiliate foster a learning culture & encourage innovation? 2. How are employee suggestions and creative ideas fostered? How is open communication promoted? 3. Give examples of how the leadership team have personally promoted learning, e.g. what training has the Executive Director undertaken in the past 12 months? 4. Is there funding in the budget allocated to staff development?			
7.21	high	For professional staff and positions which require licensure and continuing education, the Affiliate will ensure that all continuing education requirements are met.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Sample of HR files for documentation of professional licensures Interview: 1. HR Manager	1. Are staff who have professional licensures required to submit documentation for HR files? 2. Does Ariel support the completion of continuing education requirements? 3. How are completion of continuing education requirements documented for HR files to ensure updated licensure?			

Capacity Area: Communications and Advocacy

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
1.5	medium	The Affiliate must not make public statements, publish any information for distribution outside EGPAF or the Affiliate, participate in any public events or otherwise use the Affiliate or EGPAF Name or Logo in any manner which contravenes the Afiliate or EGPAF Mission.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Press releases from the Affiliate from the past year 2. Collateral materials developed for external distribution 3. Website Interview: 1. Communications Director/Officer 2. ED	1. Were all printed and online materials approved by the Publications Steering Committee prior to release? 2. Were all press releases and media advisories shared with and approved by EGPAF media team prior to release?			
3.5	low	The Affiliate has an advocacy strategy.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Advocacy strategy. Interview: 1. Communications/Advocacy Director or ED	1. Does the Affiliate have a documented advocacy strategy? 2. If not, can key personnel articulate actions taken to support formal or informal advocacy activities? 3. Are there staff trained in public policy and advocacy work? 4. Are there sufficient resources and staff dedicated to advocacy activities?			
		The advocacy strategy is aimed at promoting policies in the host country that support strengtnening and expansion of programs that are consistent with the Affiliate's mission.		Review the following documents: 1. Advocacy Strategy 2. Advocacy tools (ex. position papers, templates for press releases and other media materials, policy briefings, lists of contacts). Interview: 1. Communications/Advocacy Director or ED	1. Are advocacy messages consistent with the organizational mission? 2. Do advocacy activities support a broader policy change and do they complement the Affiliate's programmatic activities?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
4.14	medium	All advocacy activities must be conducted in accordance with all applicable laws, regulations, and donor requirements.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Affiliate finance and/or accounting guidance on how to account for expenses for advocacy time and activities 2. Lobbying policy Interview the following persons: 1. Advocacy Director 2. Director of Operations 3. Executive Director	1. Is there clarity around who is responsible for advocacy activities? 2. Is there a process in places for determining the appropriateness of advocacy activities? If so, what is it? If not, are there resources available to determine legality/ appropriateness under funding agreements? 3. Is there clear instruction for staff on how to bill time and expenses to advocacy activities, in accordance with national laws and current funding agreements? 4. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			
7.1	low	The Affiliate documents programmatic results, best practices, and lessons learned	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Reivew the following documents: 1. At least 2 examples of documented results, lessons learned or best practices (internal or external audience). 2. Project workplans Interview: 1. Technical director 2. M&E director 3. Communications Director or equivalent personnel.	1. What practices in place to ensure regular documentation of best practices, lessons learned, and programmatic results? 2. Do programmatic workplans include documentation activities? 3. What practices are in place to ensure staff easily access and apply past experiences to current/future projects?			

	Priority	Standard	Compliance Measure	Proposed Evidence for Verification	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
		Affiliates share their results, best practices, and lessons learned with EGPAF and other interested stakeholders.		Review the following documents: 1. At least one substantive example of best practices and lessons learned from the past year that were shared externally (different editions of same report format counts as one). Interview: 1. Technical director 2. M&E director 3. Communications Director or equivalent personnel	1. What practices are in place to ensure results, best practices and lessons learned are shared with external stakeholders? 2. When was the last time results were shared with external stakeholders and by whom? 3. How were they shared, via email, meeting, conference, etc?			

Capacity Area: Networking

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
3.4	medium	All programmatic activities are planned with involvement from all relevant stakeholders, including governmental partners, donors and beneficiaries.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Review meeting notes from planning sessions. 2. Review annual work plan and M&E Framework (if needed) for all or random sample of projects. Interview: 1. Project Director/s 2. Executive Director	1. Were meetings held with beneficiaries (ex. PLWHA, sub-grantees, national/regional/district health authorities) and other partners to discuss activities prior to drafting the initial project workplan? 2. How often are stakeholder meetings held to discuss progress on activities and future plans? 3. Does the workplan and/or M&E Framework specify the role of relevant partners in implementing activities requiring collaboration?			
8.1	low	The Affiliate must develop effective, collaborative, and well coordinated partnerships with other organizations in order to pursue its mission.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. MOU/formal agreement 2. M&E reports 3. Evaluation reports/technical reports 3. Evidence of monitoring visits and meetings Interview: 1. Project Directors 2. Technical Director 3. Executive Director	1. Have there been benchmarks set to determine a successful partnership? 2. Was a landscape analysis (or other mechanism) conducted to survey the types of organizations operating in the country to ensure that the best possible organization was selected for partnership? 3. Is there designated staff who will manage the partnership agreement? 4. Does the partnership fill a gap in the Affiliate's work? 5. Does the partnership assist the affiliate in achieving its mission? 6. Are there regular monitoring visits and meetings with the partner?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	Notes
8.2	medium	All partnerships between Affiliates and other organizations must be transparent and based on clear selection criteria.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Selection criteria 2. Landscape analyses 3. MOU/formal agreement 4. Needs Analysis 5. Communication from regular meetings Interview: 1. Project Directors 2. Technical Director 3. Executive Director	1. Have the needs of both the organizations been identified? 2. Is there a written SOW for each partner? 3. Are there targets and goals laid out for each partner?			
8.3	low	Partnerships must be selected and prioritized based on the objectives set forth in the EGPAF Partnership Framework.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Selection criteria based on EGPAF Partnership Framework Interview: 1. Project Directors 2. Technical Director 3. Executive Director	1. How were your partnerships selected? 2. Why were these organizations prioritized?			

Capacity Area: Awards & Compliance

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
4.10	high	The Affiliate must ensure that the requirements of any funding agreement with donors, including EGPAF are met in full, and on time.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1.Incoming agreements from donors for required deliverables 2. Copies of required deliverables 3. Reports from internal audits or compliance reviews Interview: 1. Project Directors/agreement managers for donor funded projects 2. Awards and Compliance director, or equivalent 3. Director of Operations	1. How does the Affiliate track donor deliverables and ensure they are submitted on time? 2. What quality control measures are in place to ensure that reports submitted to donors are complete and accurate per the donor requirements?			
		The Affiliate must submit required reports to donors in accordance with donor guidelines.		Review the Following Documents: 1. Proof of submission of required documents (to check submission dates) 2. Donor reports for the past 2 years Interview: 1. Project Directors/agreement managers for donor funded projects 2. Awards and Compliance director, or equivalent 3. Director of Operations	1. Are the deliverables and reports submitted on-time? 2. Do the deliverables meet the donor requirements?			
4.2	medium	The Affiliate must maintain a system to manage incoming awards from donors.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. System for budget tracking and target tracking 2. Any applicable award management SOPs Interview: 1. Key Project Staff that are responsible for agreement management, including Project Directors and A&C staff.	1. Have SOPs or other policies been instituted to govern donor award management? 2. Are applicable policies and procedures reviewed and/or updated on at least an annual basis? 3. Are applicable SOPs and policies made available to staff? 4. Is there evidence of the use and implementation of the applicable policies and procedures for existing donor awards? Ex. completed tracking sheets, templates, etc.			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate's donor award management system must include roles and responsibilities for agreement management.		Review the following documents: 1. Incoming award summary 2. Job descriptions of responsible Agreement Manager, Finance Manager and other key project personnel 3. Organizational authority matrix 4. Any applicable award management SOPs Interview: 1. Key Project Staff that understand the division of responsibilities for award management, including Project Directors and A&C staff.	1. Has an incoming award summary been completed that outlines key responsibilities of team members as well as key deliverables and compliance issues of the project? 2. Do job descriptions of key personnel adequately describe their agreement management responsibilities? 3. Are the division of responsibilities are clear and known to the team (i.e. ask staff who obtains prior approvals from the donor, how is the appropriate data collected and compiled for report submission to the donor, etc.)?			
		The Affiliate's donor award management system must have the ability to track, estimate, and report on performance targets, budget levels, and other deliverables.		Review the following documents: 1. Incoming Award Summary 2. System for budget tracking 3. System for target tracking. 4. The most recent donor report for all donor awards 5. Any applicable award management SOPs Interview: 1. Key Project Staff that understand the division of responsibilities for award management, including Project Directors and A&C staff.	1. Is progress on the achievement of program targets reviewed regularly with key staff? 2. Is progress on the budget routinely reviewed with key staff? 3. Do donor reports include the accurate budgetary and target information?			
4.3	medium	The Affiliate must maintain a system to monitor and support sub-recipients.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Sub-recipient management policies and procedures 2. Monitoring and support plan for sub-recipients 3. 30% of all sub-recipient files Interview: 1. Key Awards and Compliance Staff 2. Director of Operations	1. Do the sub-recipient management polices and procedures meet EGPAF standards and donor regulations? 2. Is a clearly documented risk-based approach to monitoring being used? 3. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate's subrecipient monitoring system includes a sub-award tracking system.		Review the following documents: 1. Sub-recipient management policies and procedures 2. Monitoring and support plan for sub-recipients 3. 30% of all sub-recipient files 4. Documents that describe the sub-recipient tracking system and associated templates Interview: 1. Key Awards and Compliance Staff 2. Director of Operations	1. Is there a tracking system in place to monitor subgranting? 2. Is the tracking system for sub-recipients adequate to ensure that sub-recipients are not overpaid and that sub-agreements are renewed prior to their expiration? 3. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			
		The Affiliate's subrecipient monitoring system includes supportive supervision to monitor sub-recipients' compliance with the terms and conditions and build their capacities to improve results.		Review the following documents: 1. Sub-recipient management policies and procedures 2. Monitoring and support plan for sub-recipients 3. 30% of all sub-recipient files 4. Documents that describe the sub-recipient tracking system and associated templates Interview: 1. Key Awards and Compliance Staff 2. Director of Operations	1. Is a clearly documented risk-based approach to monitoring being used? 2. Is the monitoring and support plan being followed and re-evaluated periodically based on changing risk-levels and sub-recipient performance? 3. Are issued identified in compliance visits being followed up on and resolved as evidenced by documentation in sub-recipient files? 4. Are sub-recipients complying with the reporting requirements per the terms and conditions of their sub-agreements as evidenced by the documentation in the sub-recipient files? 5. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			
4.4	high	The Affiliate has a system in place to manage and track procurements.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Affiliate Procurement Policy and Procedures Interview: 1. Key Awards and Compliance Staff 2. Director of Operations	1. Are the policies and procedures being followed and enforced as evidenced by the documentation found in the procurement files? 2. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate's procurement management system complies with host country and U.S. Government regulations.		Review the following documents: 1. Affiliate Procurement Policy and Procedures 2. 30% of all Affiliate procurements. Interview: 1. Key Awards and Compliance Staff 2. Director of Operations	1. Do the local procurement policies and procedures meet EGPAF host country and donor laws, regulations and policies? 2. Are the policies and procedures being followed and enforced as evidenced by the documentation found in the procurement files?			
		The Affiliate's procurement management system has strong internal controls to ensure appropriate best value/lowest price purchases.		Review the following documents: 1. Affiliate Procurement Policy and Procedures 2. 30% of all Affiliate procurements. Interview: 1. Key Awards and Compliance Staff 2. Director of Operations	1. Do the policies and procedures have appropriate internal controls to ensure transparency and accountability in all procurements? 2. Are the policies and procedures being followed and enforced as evidenced by the documentation found in the procurement files?			
4.5	medium	The Affiliate must maintain a system to foster compliance with applicable laws, regulations, and policies.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Compliance policy (if one in place) 2. Evidence of staff training and orientation 3. Copies of past audits/compliance reviews and documentation of the follow-up of any findings Interview: 1. Executive Director 2. Internal Auditor 3. Director of Operations 4. Staff responsible for compliance reviews	1. What types of systems/procedures are in place to ensure donor compliance (i.e. for tracking and obtaining donor prior approvals)? 2. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate's risk management system includes staff orientation and periodic training.		Review the following documents: 1. Affiliate compliance policy (if one in place) 2. Evidence of staff training and orientation 3. Copies of past audits/compliance reviews and documentation of the follow-up of any findings Interview: 1. Executive Director 2. Internal Auditor 3. Director of Operations 4. Staff responsible for compliance reviews	1. Are staff provided with training on compliance and risk management? 2. How often are trainings on donor compliance delivered to staff? 3. Are agreement management staff provided with opportunities for enhanced training?			
		The Affiliate's risk management system includes regular consultations with local legal counsel on matters relating to local host country law.		Review the following documents: 1. Policy on enagement of legal counsel 2. Retainer agreement with local legal counsel Interview: 1. Executive Director 2. Director of Operations 3. Chairperson of the Board	1. Has the Affiliate identified local legal counsel? 2. Are local host country laws routinely reviewed for updates and to ensure compliance with these laws? 3. Does the Affiliate regularly seek the advice of local legal counsel for updates on host country law?			
		The Affiliate's risk management system includes regular audits and assessments.		Review the following documents: 1. Compliance policy/procedures (if one in place) 2. Copies of past audits/compliance reviews and documentation of the follow-up of any findings 3. Internal audit or compliance review tools Interview the following persons: 1. Executive Director 2. Internal Auditor 3. Director of Operations 4. Staff responsible for compliance reviews	1. Are regular internal audits conducted? 2. Are regular compliance reviews conducted? 3. Are the recommendations of past audits and compliance reviews resolved appropriately and documented clearly? 4. Is there a system for follow-up on audits and compliance review findings that is in place and includes regular follow-up on action items?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
5.2	high	Affiliates must comply with relevant governance, financial accounting, and reporting requirements in the host country.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Local labor laws; 2. Local tax laws; 3. Proof of participation in local trainings regarding local rules and regs. Interview: 1. Legal counsel 2. Operations Director 3. Executive Director	1. Have there been any significant changes in the local legal environment that have impacted the organization? 2. When was the last time local legal counsel was consulted and for what? 3. How do key staff obtain updates in regards to legal changes in their functional areas? 4. When was the last time staff participated in local trainings concerning the local policies affecting their functional area?			

Capacity Area: Financial Management

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
3.7	high	Administrative and financial transactions are conducted in a manner which is in full compliance with relevant legislation and regulations, including tax and labor laws.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documentation: 1. Review external audit reports 2. Internal audit reports, 3. Compliance review reports, 4. Capacity assessment reports 5. Reports to host country government. Interview: 1. Operations director, 2. Member of Board Audit Committee, 3. Internal audit/risk management staff 3. Accounting staff	1. Does the Affiliate have designated legal counsel, who is consulted for key legal questions to ensure compliance? 2. Does the Affiliate have policies and procedures in place which provide for regular internal and external audits (at least annually)? 3. Are internal staff, responsible for administrative and financial transactions, properly trained in applicable laws, policies and procedures? 4. Are there any material findings in the audit reports from the last 2 years (if available)? If so, are plans in place to remediate findings?			
4.6	high	All financial transactions within the organization and with others must be completely and accurately accounted for in accordance with either accounting principles generally accepted in the United States of America or in accordance with International Financial Reporting Standards, as determined by EGPAF.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Unqualified annual audit report, completed by an accredited audit firm. 2. Accounting for expenses that benefit the Affiliate are recorded as per the prevailing Affiliate Accounting Guidance, as per review of the Affiliate's general ledger. 3. Review balances in all payable and receivable accounts to see if they reconcile. Interview: 1. Accountant 2. Operations/Finance Director	1. When was your last statutory financial statement audit? Did the auditors render an opinion? Was it unqualified? 2. How do you account for in-kind contributions in the Affiliate's books? 3. Do you have unreconciled balances in any of your receivable or payable accounts? If so, what is the balance and what is being done to reconcile these balances? 4. What month end and year end adjustments do you make in the books? 5. Is the accounting maintained on an accrual basis?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
4.7	high	Financial accounting and management policies and procedures must be no less restrictive than those contained in the EGPAF Operations Manual and in accordance with the terms of applicable funding agreements, with a particular focus on documentation requirements and ethical standards.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Policies on Cost allowability, Asset Capitalization, Depreciation, Signatory Authority, Travel, Procurement, Time Reporting, Revenue Recognition and Fund Raising/Bid and Proposal Costs. 3. Affiliate's General Ledger Interview: 1. Accountant 2. Operations/Finance Director	1. What accounting and management policies does the office maintain? 2. Are applicable policies and procedures reviewed and/or updated on at least an annual basis? 3. Have the policies been approved by the ED and distributed to staff? 4.Does the Affiliate have the following policies in place: Cost allowability, Asset Capitalization, Depreciation, Signatory Authority, Travel, Procurement, Time Reporting, Revenue Recognition and Fund Raising/Bid and Proposal Costs? 5. Are the above mentioned policies consistent with EGPAF's policies? 6. Are the policies applied appropriately as evidenced in the Affiliate's general ledger?			
		Within the financial accounting and management policies, segregation of duties and other internal controls must be present to the extent that the organization has a reasonable assurance that the risk of fraud, waste or abuse is mitigated.		Review the following documents: 1. Policies on Cost allowability, Asset Capitalization, Depreciation, Signatory Authority, Travel, Procurement, Time Reporting, Revenue Recognition and Fund Raising/Bid and Proposal Costs. 3. Affiliate's General Ledger Interview the following persons: 1. Accountant 2. Operations/Finance Director	1. Are the policies consistent with EGPAF and international standards/GAAP to the extent that they provide for appropriate segregation of duties and internal controls?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
4.8	high	The Affiliate has developed annual financial statements, which conform to the relevant laws and practices and are accompanied by an audit report.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Most recent annual financial statement, and corresponding audit opinion. Interview: 1. Operations Director 2. Executive Director 3. Treasurer or Audit Liaison on Board of Directors	1. Does the Affiliate have an annual financial statement that is available from the last 3 financial years (if applicable)? 2. Were the financial statements audited? 3. Does someone at Affiliate office maintain a current copy of local laws and requirements as they pertain to development of audited financial statements?			
		The Affiliate's annual financial statements are audited by a qualified independent public accountant.		Review the following documents: 1. Most recent annual financial statement, and corresponding audit opinion. 2. Credentials of public accountant selected to perform annual audit. Interview: 1. Operations Director 2. Executive Director 3. Treasurer or Audit Liaison on Board of Directors	1. Was a specific action plan developed in response to the previous audit, particularly with respect to any potential audit findings?			
		The Affiliate's auditor is approved by EGPAF.		Review the following documents: 1. Correspondence from EGPAF approving auditor 2. Credentials of public accountant selected to perform annual audit. Interview: 1. Accountant/Director of Operations 2. Executive Director	1. Was the Affiliate's auditor approved by EGPAF? 2. Has the choice of the auditor been reviewed in the past 3 years?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
4.9	high	Affiliates must prepare an annual budget for the organization prior to each fiscal year approved by the Affiliate's governing body.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Finalized annual budget and budget narrative. 2. Minutes from governing body meeting related to discussion and approval of annual budget. Interview: 1. Executive Director 2. Board Chairperson 3. Operations Director	1. When does the annual budget development process for the next fiscal year begin? 2. Did the Affiliate's governing body have ample time to perform a detailed review of the proposed annual budget? 3. How often during the fiscal year is the annual budget formally revised? 4. Does the annual budget link to the annual work-plan for the Affiliate?			
		Affiliates must track the progress of spending compared to the annual budget during the year and make adjustments in spending and/or revisions to the budget, as necessary.		Review the following documents: 1. Operational policies and procedures related to corporate budget development process. 2. The most recent budget-to-actual report. Interview: 1. Interview unit directors 2. Senior management.	1. How often is the corporate budget revisited / formally revised? 2. How often are budget-to-actual analyses conducted during the year? 3. Do individual departments have their own budget, and a designated focal point to help track that budget?			
		The annual budget is developed through a collaborative process involving a cross-functional group of internal stakeholders.		Review the following documents: 1. Correspondence with stakeholders in various units vis-à-vis annual corporate budget development. Interview: 1. Executive Director 2. Operations Director 3. Technical Director.	1. Was a cross functional group of internal staff consulted during the planning process? 2. Has each unit named a focal point to be responsible for tracking his/her unit's specific annual budget? 3. Does each unit's budget align with its corresponding annual work-plan?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
4.1	high	Affiliates must maintain financial records, supporting documents, statistical records, and all other records pertaining to the Agreement in accordance with the Affiliate's documentation standards, which at a minimum would include enough information for an independent third party to discern the purpose, allowability, and propriety of any given transaction.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. A sample of the lesser of 50 randomly selected non-salary expense transactions or 20% of the total number of non-salary expense transactions as well as the lesser of 50 randomly selected payroll transactions or 20% of the total number of payroll transactions. 2. Any management letter comments produced by external auditors pertaining to documentation to ensure that the minimum standards are met. Interview: 1. Operations Director 2. Accountant	1.Has a transaction ever been processed without all of the documentation present at the time of processing? If so, was it later gathered and filed with the documentation present at the time?			
		The Affiliate's documentation standards must, at a minimum, include maintenance of files and other information for an independent third party to discern the purpose, allowability, and propriety of any given transaction.		Review the following documents: 1. File management policies and procedures 2. Records retention policies 3. Filing system Interview: 1. Operations Director 2. Accountant	1. What are the minimum documentation standards that staff adhere to when processing a payment? 2. Are checklists used to ensure that all documentation is present at the time a transaction is being processed?			

Capacity Area: Monitoring and Evaluation

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
6.3	medium	Achievements and progress towards the mission, goals and vision must be monitored by the Affiliate through clearly defined indicators, measurements and targets.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. M&E framework - project and/or organizational 2. Annual program report or annual/semi-annual donor reports 3. Organizational strategic plan 4. Indicator lists from M&E systems 5. Strategic plan document 6. Document outlining the strategy for monitoring progressive accomplishments towards the goal and mission of the organization -- "results framework" 7. Findings of periodic quarterly/semi-annual/annual program review sessions. Interview: 1. M&E Director 2. Technical Director	1. Does the organization have a defined indicator list? 2. Is the indicator list incorporated into the M&E framework? 3. Are programmatic targets set for all program activities and monitored on a regular basis? 4. Are specific indicators identified which are consistent with the organizational mission? 5. Is there a strategic plan document? If yes, when was it revised? 6. How do you monitor ther progress towards reaching your goals and accomplishments of the mission? 7. What indicators and methodologies for the measurment of these indicators are used? 8. What are the major achievements and drawbacks of your program implementation vis-a-vis your strategic plans?			
6.5	high	Affiliates must have effective systems in place to monitor and evaluate their programs and to demonstrate whether they are achieving their objectives, which are governed by a monitoring and evaluation plan.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. M&E framework 2. M&E Data collection, reporting and analysis tools 3. Organizational strategic plan Interview: 1. M&E Director 2. Technical Director	1. Does the Affiliate have a M&E system in place? 2. Is the M&E system paper based or electronic? 3. Does the Affiliate have an M&E plan? 4. Are reports regularly generated from data within the M&E system that are used for evaluation?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate's M&E plan must describe data collection, data management, monitoring and evaluation capacity building, data quality assurance, and data use strategies.		Review the following documents 1. M&E framework 2. M&E Data collection, reporting and analysis tools 3. Data use plan 4. Evidence of data use in program reports and other technical documents 5. Data quality assurance tools and reports 6. Availability of an M&E plan 7. Reports of regular program monitoring and evaluation activities 8. List of core programmatic indicators used as part of the M&E plan Interview: 1. M&E Director 2. Technical Director	1. Does the M&E plan describe data collection, data management, monitoring and evaluation capacity building, data quality assurance, and data use strategies? 2. Are the strategies consistent with best practices? 3. Is there evidence of implementation of the plan in the form of templates, tools, and reports?			
6.6	high	The Affiliate submits reports to EGPAF on core programmatic indicators, which are established by EGPAF.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Indicator List 2. Data reports to EGPAF Interview: 1. M&E Director 2. Technical Director	1. Are there reports submitted by the Affiliate to EGPAF which include these core indicators? 2. Are the reports submitted in a timely fashion?			
		The Affiliates' monitoring and evaluation systems must include the collection of core programmatic indicators, as established by EGPAF.		Review the following documents: 1. M&E framework 2. M&E Data collection, reporting and analysis tools 3. Indicator List 4. Data reports to EGPAF Interview: 1. M&E Director 2. Technical Director	1. Do the M&E tools include collection of core programmatic indicators, as established by EGPAF? 2. Are data quality assurance tools applied to these core indicators?			
6.7	low	Affiliates must establish data quality standards.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Data quality standards 2. Data quality assurance tools and templates 3. Reports from data quality assessments Interview: 1. Technical director 2. M&E Director	1. Has the affiliate defined data quality standards? 2. Are the standards consistent with best practices? 3. Are the standards reviewed on at least an annual basis to ensure consistency with best practices? 4. Are the standards reflected in data quality assurance tools and templates?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate's data quality standards must be measured on at least an annual basis.		Review the following documents: 1. Reports from data quality assessments Interview: 1. Technical director 2. M&E Director	1. Are data quality assurance assessments conducted on at least an annual basis? 2. Are the results of assessments communicated to individuals involved in M&E activities? 3. Are results of assessments followed-up on to ensure that recommendations are properly implemented?			
		The Affiliate must establish clear protocols or develop standard operating procedures and other tools to help attain data quality standards.		Review the following documentation: 1. Data quality assurance protocols/procedures 2. Data quality assurance tools and templates Interview the following persons: 1. Technical director 2. M&E Director	1. Are data quality assurance procedures and protocols documented? 2. Are applicable policies and procedures reviewed and/or updated on at least an annual basis? 3. Are the protocols and procedures communicated to and available for all staff that work with program data? 4. Are staff that work with program data trained on applicable protocols and procedures?			
		Affiliates must establish programmatic quality standards.		Review the following documents: 1. Program quality standards 2. Program quality assurance tools and templates 3. Reports from program quality assessments Interview: 1. Technical director 2. M&E Director 3. Quality Improvement Officer	1. Has the Affiliate defined program quality standards? 2. Are the standards consistent with best practices? 3. Are the standards reviewed on at least an annual basis to ensure consistency with best practices? 4. Are the standards reflected in data quality assurance tools and templates?			
		The Affiliate's programmatic quality standards and must be measured on at least an annual basis.		Review the following documents: 1. Reports from program quality assessments Interview: 1. Technical director 2. M&E Director 3. Quality Improvement Officer	1. Are programmatic quality assurance assessments or evaluations conducted on at least an annual basis? 2. Are the results of assessments communicated to individuals involved in program activities? 3. Are results of assessments followed-up on to ensure that recommendations are properly implemented?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The Affiliate must establish clear protocols or develop standard operating procedures and other tools to help attain programmatic quality standards.		Review the following documents: 1. Program quality assurance protocols/procedures 2. Program quality assurance tools and templates Interview: 1. Technical director 2. M&E Director 3. Quality Improvement Officer	1. Are program quality assurance procedures and protocols documented? 2. Are applicable policies and procedures reviewed and/or updated on at least an annual basis? 3. Are the protocols and procedures communicated to and available for all staff that work with program data? 4. Are staff that work with program data trained on applicable protocols and procedures?			
6.8	low	For any and all data collected by the Affiliate, it must be stored in a data storage system which is fully functional.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following: 1. Affiliate's data storage system 2. Reports from the data storage system Interview: 1. M&E Director 2. M&E Officer	1. Is the data storage system electronic or paper-based? 2. Are the M&E staff able to provide reports from the data storage system? 3. Are the M&E staff able to demonstrate, at the time of the review, the input and analysis of data in the system? 2. Can the M&E officer demonstrate how to produce a report from the system?			
		The data stored in the Affiliate's data storage system which must be kept up to date up to date.		Review the following documents: 1. Affiliate's data storage system 2. Reports from the data storage system Interview: 1. M&E Director 2. M&E Officer	1. Are there backlogs of data to be input into the data storage system? If so, how long is the backlog?			
		The data storage system must be designed to facilitate efficient data transformation and use.		Review the following the documents: 1. Affiliate's data storage system 2. Reports from the data storage system Interview: 1. M&E Director 2. M&E Officer	1. Is the data storage system used to produce reports to analyze program activities and progress? 2. Can the storage system produce reports on core programmatic indicators? 3. What types of analyses is the system capable of performing?			

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
		The data storage system must be managed in accordance with appropriate data security standards.		Review the following documents: 1. Data security policies and procedures 2. Password Login screens for electronic systems 3. Storage of paper-based tools Interview: 1. M&E Director 2. M&E Officer 3. IT Manager	1. For electronic systems, can the M&E officer demonstrate the use of password protections for the system? 2. For electronic systems, are there different levels of security for different types of users? 3. For paper-based systems, are the materials stored in locked cabinets? How many people have access to the paper-based tools?			
6.9	medium	Affiliates must systematically use monitoring and evaluation data to inform decision making, and to adjust programs where necessary to continuously improve performance.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Data use plan 2. Data Use Protocols/Standards 3. Program Reports 4. Donor Reports 5. Publications resulting from analysis of monitoring data -- as part of the data use plan. Interview: 1. Technical Director 2. M&E Director 3. M&E Officer 4. Technical Officer	1. Does the Affiliate have a data use plan? 2. Do program and donor reports reflect the use of up to date M&E data? 3. Are communication mechanisms in place to regularly report on and review data produced from program activities (ex. reports in regular staff meetings)?			

Capacity Area: Information Technology

	Priority	Standard	Compliance Measure	Proposed Evidence	Probing Questions	Action Plan if not in Compliance	Documentation Gathered	NOTES
6.10	low	Affiliates must follow EGPAF IT policies and industry standards and best practices relative to physical and system security, installation and maintenance (including back up).	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. File server back up log 2. Presence of tapes or back-up drives in server 3. Log of who has keys to secure server location 4. Presence of surge protectors and uninterruptible power supply 5. Network diagrams and data recovery instructions or plans Interview: 1. IT Manager	1. Explain your data back up process. 2. What is your password format? 3. How often are passwords changed on key systems? 4. How often do you test your data recovery plan? 5. Review with me your network diagram; identify key components including firewalls and anti-virus used			
6.11	low	Affiliates must hire appropriate staff and establish vendor relationships to ensure timely support, availability of IT products and additional assistance when necessary.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. Staff CVs on file 2. Staff certifications and/or training plans 3. List of preferred vendors 4. Sample quotes on a recent purchase Interview: 1. IT Manager	1. Who do you purchase equipment from most frequently? 2. If your IT person is out on leave, who handles support? 3. What certifications does your IT person have?			
6.12	low	For EGPAF systems shared with the Affiliate, the Affiliate must adhere to EGPAF policies and procedures.	□ Fully Compliant □ Mostly Compliant □ Nominally Compliant □ Not Compliant □ Not Applicable	Review the following documents: 1. User accounts are kept up to date (departed employees are not still in the systems) 2. User laptops are password protected (to prevent access by non-employees) 3. Users are trained in data privacy policies (reports are internal use only, etc) Interview: 1. IT Manager	1. How often do you update user accounts? 2. How are employees trained on IT policies? How is this documented? 3. Check a user's laptop to prove it is password protected. 4. Are applicable policies and procedures reviewed and/or updated on at least an annual basis?			