

# AFFILIATE ACCREDITATION TOOL

## Instructional Guide

Affiliate Resource Unit  
Global Business Planning

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## Introduction

The Foundation Affiliate Accreditation Tool was developed by the Foundation as a means to assess its Affiliates for compliance with the Principles and Standards for Affiliation. The review process also serves as an organizational development activity for the Affiliates to enable them to assess strengths and weaknesses and develop capacity building plans to address weaknesses.

The accreditation reviews are administered by the Foundation annually or biannually, depending on the accreditation status of the Affiliate. This review is designed to be led by the Foundation as an external review, but will involve significant participation from the Affiliates, which aims to facilitate accuracy and validity of the results as well as ownership of the process. Affiliates are also encouraged to use the tool for periodic self-assessments to prepare for the accreditation reviews and facilitate ongoing organizational strengthening.

Instructions for use of the tool are provided in this document, along with the tool itself. Note that the tool is designed for implementation using Microsoft Excel, which includes programming for the compilation and reporting of data from the assessments. The excel templates for the tool can be obtained from the Affiliate Resource Unit (ARU). The tool is also available in French and Portuguese.

The accreditation tool was first developed and implemented in 2011. Feedback from the initial reviews will be incorporated into regular reviews of the tool and review process by the Foundation ARU to ensure that it continues to serve as a useful resource and process for both the Foundation and the Affiliates. We encourage the Affiliates to provide input on the tool throughout the review process to aid in its continuous improvement.

If there are questions or comments about the tool or process, please contact Stephanie Cálves, STO, Affiliation and Organizational Development, at [scalves@pedaids.org](mailto:scalves@pedaids.org).

## Instructions For Use Of The Tool

### Structure of the Tool

The indicators and measurements in this tool are aligned with the Foundation's Principles and Standards for Affiliation. This tool provides a structure to assess and document compliance with the Affiliation standards, as well as to facilitate capacity building and improvement where weaknesses are found.

The tool is structured to correspond to the Principles and Standards for Affiliation. However, in order to facilitate use of the results for organizational development and capacity building, the indicators are distributed among ten separate tabs that correspond to the capacity areas which are covered by the various standards for Affiliation:

Capacity Areas	# Indicators
Governance	14
Program Management	4
Organizational Management	4
Human Resources	10
Communications & Advocacy	4
Monitoring & Evaluation (M&E)	6
Financial Management	6
Awards & Compliance	6
Information Technology (IT)	3
Networking	4
<b>TOTAL</b>	<b>61</b>

This structure maximizes opportunities to compare results within capacity areas and to use the data to develop capacity building plans.

On each tab, guidance is provided on the required documentation to collect and review to gather required data. Guidance is also provided regarding individuals who should be interviewed during the review process. Note that based on the individual circumstances of the Affiliates and availability of staff and documentation, additional documentation should be collected or staff should be interviewed in order to ensure the accuracy of the assessment.

Each tab also includes a list of suggested probing questions for the reviewers to ask during the on-site review or when conducting the document review. Additional queries should also take place as necessary to elicit the appropriate information to allow for a full and well informed assessment of the

relevant indicator. Note that these questions aim to ascertain what processes, policies, and other structures are in place that shows compliance with the relevant accreditation standards.

Where an Affiliate is found not to be in full compliance with the accreditation standards, the review team should complete the column for an action plan to clearly define next steps to work towards achievement of full compliance. Action plan items should be specifically defined, with a listing of the timeline for completion of items and persons responsible. The proposed action plan should be based on the recommendations of the review team and the input of the Affiliate, which is provided during the on-site debriefing. This action plan will serve as the basis for follow-up by the Foundation and decision-making on the accreditation status of the Affiliate by the Affiliate Review Committee (ARC).

In order to ensure proper documentation of the review process, in the relevant column, each member of the On-Site Review Team should provide a listing of the documentation gathered and individuals interviewed. Where possible, this should be recorded as specifically as possible to ensure that results could be validated if additional reviews are necessary.

At the end of the accreditation review, the information contained within the tool is used by the ORT to generate a written report of the assessment, which will be shared with the ARC. The report will also contain recommendations for capacity building where weaknesses are identified.

### Priority Ratings

Each standard is given a priority rating, which is germane to the nature of the standard and used to inform the development and implementation of action plans, accreditation decisions by the ARC, and assess progress in future accreditation reviews. Priority ratings for the standards are as follows:

<b>PRIORITY RATING</b>	<b>DEFINITION</b>
<b>High</b>	Standards which relate to systems, processes, practices, or outcomes which may result in non-compliance with contractual or other legal requirements or are deemed as critical to organizational survival and functionality.
<b>Medium</b>	Standards which relate to systems, processes, practices, or outcomes which are priority areas of concern because they are critical to effective and efficient functioning of the organization.
<b>Low</b>	Standards which relate to systems, processes, practices or outcomes which are strong contributors to organizational sustainability and excellence but will not impact legal compliance or organizational survival in the short-term.

## Compliance Measures

Since the accreditation tool is assess compliance with the Foundation's Affiliation Standards, results are evaluated using compliance measures. Compliance measures have been broken down based on the degree of organizational development necessary to achieve full compliance with the standards. This structure aims to facilitate the use of the data to document compliance, measure improvements from previous reviews, and generate capacity building plans.

The "Compliance" column on each tab provides the space for the reviewer to document compliance with the standard by the Affiliate. Compliance measures are as follows:

COMPLIANCE MEASURE	DEFINITION
<b>Fully Compliant</b>	During the review, the ORT was able to gather all relevant documentation and interview key personnel. Based on all information gathered, the Affiliate meets or exceeds the requirements set forth for the relevant Affiliation standard.
<b>Mostly Compliant</b>	During the review, the ORT was able to gather all of the relevant documentation and interview key personnel. Based on all information reviewed, the Affiliate: (1) meets most of the requirements set forth in the standards; (2) has no areas of material non-compliance that would violate applicable law or donor requirements or contravene the Foundation's Affiliation standards; and (3) has established a clear action plan for next steps to address areas of non-compliance within the accreditation period, OR
	During the review, the ORT was able to gather most of the relevant documentation and interview key personnel. Based on the information reviewed, the Affiliate: (1) meets the requirements set forth in the standards; (2) has no areas of material non-compliance that would violate applicable law or donor requirements or contravene Foundation's Affiliation standards; and (3) has established a clear action plan for next steps to provide additional documentation to show full compliance with the standards.
<b>Nominally Compliant</b>	During the review, the ORT was able to gather all of the relevant documentation and interview key personnel. Based on all information reviewed, the Affiliate: (1) shows a minimal set of formal structures or capacity development activities in place to achieve compliance with the requirements set forth in the standards; (2) has no areas of material non-compliance that would contravene the Foundation's Affiliation standards but not violate the applicable law or donor requirements; and (3) has established a clear action plan for next steps to address areas of non-compliance within the accreditation period.
<b>Not Compliant</b>	During the review, the ORT was not able to gather a substantial amount of documentation or interview key personnel. Further review visits or document submissions will be required to conduct a full review of compliance with the standard, OR
	During the review, the ORT was able to gather most or all of the relevant documentation and interview key personnel. Based on the information reviewed, the

	reviewers found one or more areas of material non-compliance that would violate applicable law or donor requirements.
<b>Not Applicable</b>	Based on the scope and nature of the accreditation review, the standard is not applicable. In such cases, the ORT should document the rationale.

Reviewers should select the appropriate compliance measure for the standard based on these definitions. Where reviewers have difficulty deciding between measures, they should consult with other members of the ORT to develop consensus on the appropriate result.

## On-Site Review Team (ORT)

### Composition

The ORT team should be comprised of individuals with backgrounds and expertise in a variety of programmatic and operational areas that are reflected in the Foundation's Affiliation Standards. The team should consist of three to four persons, including the roles/expertise described below. Note that any one person may meet the requirement for more than one of the roles or areas of expertise described below.

- Individual who serves as an Executive Director or Board Member for another Foundation Affiliate
- Individual with technical expertise in a broad range of programmatic activities which are implemented by the Affiliate.
- Individual with strong experience with organizational management and NGO governance.
- Individual with strong knowledge and understanding of the host country context.
- Individual who has expertise in the implementation of HIV-related monitoring and evaluation systems.
- Individual with operations expertise, that includes implementation of Foundation administrative, financial and other operations policies and procedures in their daily work.

At least one ORT member should be conversant in the host country language. For any ORT members who are not conversant in the host country language, steps should be taken in advance of the review to ensure that relevant documents are translated and translators are present for key interviews.

Where necessary, an additional team member may be included to serve as a coordinator of activities.

### Roles of ORT Members

One team member will serve as the leader and coordinator of activities. Responsibilities will include the following:

1. Liaising with the Foundation's Headquarters representatives on planning and logistics of the assessment
2. Coordinating the planning of the on-site review visit with the other member of the team and making sure that all participants have all of the relevant information and documentation
3. Coordinating the on-site review visit, agreeing on roles and responsibilities, organizing meetings/presentations.
4. Ensuring that the final report is completed and submitted to the ARU
5. Responding to any follow-up issues.

The other team members are responsible for:

1. Preparing for the on-site review by reviewing any relevant information in advance and supporting documentation provided by the Affiliate.
2. Having meetings and discussions with the relevant staff from the Affiliate for each component area during the on-site review visit.
3. Writing up summary issues for the assigned components of the on-site review assessment and making recommendations for action items.
4. Responding to any queries or follow-up issues.

### **Affiliate Staff Participation**

Throughout the assessment process, a number of Affiliate staff from both operations and programmatic teams may be called upon for participation. The assessment process is specifically designed to include such cross-functional participation in order to ensure that accurate and robust information is collected to ensure that results are valid. Additionally, such participation in the process will also facilitate organizational learning and the development of strong action plans for follow-up in the case of identified weaknesses. Staff participation may range from serving as part of the key informant interviews for data collection, gathering documentation required for the review process, or planning and coordinating review activities.

In advance of the assessment, the Affiliate should identify a focal person who will be the primary liaison with the ORT. This individual will be the key contact for purposes of collecting documentation required for the review and planning and coordinating on-site interviews and meetings.

The focal person will also have a role following the completion of the assessment. As action plans are developed, the focal person will be responsible for overseeing the implementation of action plans and liaising with the ARU to provide feedback and updates on accomplishments.



## Accreditation Review Process

### Pre-Review Activities

#### *Collection and Compilation of Documents for Review*

Prior to the on-site review, the ORT leader, in collaboration with the ARU, will reach out to the Affiliate's Accreditation Review Focal Person to notify them of the required documents for review. Where appropriate, these documents will be gathered via email in advance of the on-site review to permit the review team to conduct an advance review to familiarize themselves with the structure of the Affiliate, context, and begin some of the analysis of indicators. For documents that cannot be produced in advance on the on-site review, the Affiliate Focal person should ensure that they are compiled and available for the ORT upon arrival in-country.

#### *Document Review*

The ORT Leader will disseminate the documents to the ORT membership and request review of the relevant documents for each member of the ORT. All ORT members should review the documents in advance of the assessment to ensure adequate familiarity with the Affiliate's structure, operations, and programs, prior to arriving in country. This will also ensure efficiency in the review process on-site.

### On-Site Activities

Activity	Description	Participants
<b>In-Briefing</b>	Meeting with key Affiliate Staff to discuss the objectives of the review, go over the review process, review the agenda for the on-site review, confirm participation for all meetings.	ORT, Executive Director, Affiliate Review Focal Person, Other key Foundation or Affiliate Personnel
<b>Interviews</b>	The ORT will conduct meetings with key personnel, as defined throughout the review tool. Interviews may be scheduled on a one-on-one basis or in groups, depending on the staff structure and relevant participants. All interviews will be scheduled at times which are mutually convenient to all parties, during the on-site review.	ORT, Executive Director, Affiliate Review Focal Person, Other key Affiliate Personnel

<b>Partner Meetings (ex. donor, districts, provinces, sites, CBOs)</b>	<p>The ORT may conduct meetings with organizational partners of the Affiliate, as defined throughout the review tool. A key partner will be the Foundation country office. There, interviews will include meeting with the Country Director, Associate Director of Operations, Technical Director, and other relevant staff.</p> <p>For all partner meetings, the Accreditation Review Focal Person for the Affiliate will be responsible for conducting outreach to the partners and scheduling the meetings. The Affiliate Executive Director and other key personnel will also participate in these meetings to ensure effective communication.</p>	<p>ORT, Executive Director, Affiliate Review Focal Person, Other key Affiliate Personnel, Foundation Key Personnel, Relevant staff from partner organizations</p>
<b>De-Briefing</b>	<p>Meeting with key Affiliate Staff to review the activities which took place during the review process, report back on key findings, and collaboratively develop action plans for follow-up.</p>	<p>ORT, Executive Director, Affiliate Review Focal Person, Other key Foundation or Affiliate Personnel</p>

## Annex 1 - Accreditation Process: Stakeholders, Steps and Timeline

STEPS		ACTIONS	STAKE-HOLDERS	OUTCOME	TIMELINE	
SELF-ASSESSMENT PHASE	1 - Initiating the process	Send letter to Affiliate to initiate the accreditation assessment process Send organization Accreditation Assessment Tool and outline the process	ARU to Affiliate		At least 3 months before projected On-Site Review	1 month
		Organize conference call with Affiliate	ARU and Country Officer to Affiliate	Clear and shared understanding of the process; defined timeline for next steps	Within 10 days after sending the Accreditation Assessment Tool	
	2 - Self-Assessment exercise	<u>OPTIONAL</u> Complete the Self-assessment tool Identify the areas for improvement and draw-up action plan Send completed documents to the Foundation	Affiliate to ARU	Note: Modified for new Affiliates in start-up mode	Self-assessment exercise completed within 1 month	
		Send the Affiliate the On-Site Review Plan	ARU to Affiliate	Note: Modified for new Affiliates in start-up mode	10 days after the Conference Call or at an agreed upon date	
ON-SITE REVIEW PHASE	3 - On-Site Review preparations	Confirm On-Site Review Plan	Affiliate to ARU		2 weeks from dissemination of plan	1 to 2 months
		Put together a On-Site Review Team (ORT) Agree on convenient date	ARU		2 weeks from finalization of On-Site Review Plan	
		Coordinate Logistical arrangements	ARU and Affiliate		2 -3 weeks	

DECISION PHASE		Brief On-Site Review Team members (send documents, organize conference call)	ARU ⇒ ORT members (involves relevant Country Officer)	Clear and shared understanding of On-Site Review process and deliverables		up to 2 months
		Prepare On-Site Review Visit liaison for Affiliate (schedule, labor division, etc)	ORT Affiliate Foundation	Detailed schedule for the visit Clear roles and responsibilities among ORT members		
	4 - On-Site Review and conclusions	On-Site Review Visit and Debrief for Affiliate	ORT Affiliate		~5 days	
		Send Foundation On-Site Review Report and other deliverables	ORT to ARU	Report from On-Site Review	Within 10 days after visit	
		Schedule Conference Call with ORT	ORT to ARU	Discuss and clarify findings; Agree upon concrete next steps	Within 1 week of receipt of Report	
	5 - Decision on Accreditation	Send ARC Review Packet to Full ARC	ARU to ARC	ARC Review Packet	Within 1 month of ORT call	
		Discuss the findings and recommendations and decide if the organization should be accredited	ARC	Decision to accredit or to defer accreditation	Within 2 weeks of ARC Review	
	6 - Post-Decision	Inform the organization and the geographical team of the Accreditation Committee decision	ARU & ARC Chairperson	Accreditation awarded	Within 1 week after ARC meeting	
		If not accredited: Follow up on action plan and inform ARU Staff when organization ready for another assessment	ARU, Country Officer, Affiliate			