**Annual Organizational Assessment**

# Field

* 1. ***How many clinics? Where are they located? What services does each one have? What villages/areas are in their catchment area, and what is the target population? When are services available (by clinic)? Attach chart if already exists***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| District | Township | # facilities/teams | # villages | Target pop | Fixed or mobile | Services | | | | | | Days facility open/week, avg. | Max travel time, on foot |
| PHC | Lab | ?? | ?? | ?? | ?? |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |

* 1. ***What is the ratio of providers to population? Break down by kinds of providers, including medics and level of training, TBAs, VHWs, etc. Explain levels of skill/experience of HC providers.***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| State | # medics, total | #  L1/ CHW | # L2 | # L3 | # TBA | # VHW | # VHV | Target population | Ratio providers (medics, TBAs,VHW)/1k pop |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

* 1. ***Have there been stock-outs? (refer to unit narratives for this) If so, how many and why and what steps taken to resolve/prevent in the future?***
  2. ***Are logbooks reviewed? How, and what is the follow-up for this?***
  3. ***Has the organization been assessing client satisfaction? Please summarize.***
  4. ***How are vital records (births, deaths) managed by the organization?***
  5. ***Which kinds of cases are referred, and to where?***

# Main office

## Office staffing

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Level** | **# Continuing** | **# New** | **# Left** | **Total** |
| **Director** |  |  |  |  |
| **Coordinator/Manager** |  |  |  |  |
| **Assistant Coordinator** |  |  |  |  |
| **Staff** |  |  |  |  |
| **Interns** |  |  |  |  |
| **Other:** |  |  |  |  |

* 1. **Office staff benefits**

Stipend/salary? Yes No Mean: Median:

Standard work hours? Yes No Start: End: Days/week:

Room and board? Yes No

Child care? Yes No

Papers? Yes No

Language classes? Yes No

Other classes (non-GHAP)? Yes No

Comments:

## Staff capacity

**3.1 % of people who demonstrate a satisfactory amount of skills to perform their job duties**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **# assessed** | **Not satisfactory (#/%)** | **Satisfactory (#/%)** | **Very satisfactory (#/%)** |
| **Coordinators/Managers** |  |  |  |  |
| **Assistant Coordinators** |  |  |  |  |
| **Staff** |  |  |  |  |
| **All staff** |  |  |  |  |

**Notes/trends:**

**3.2 % of people who show improvement in amount of skills to perform their job duties**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **# assessed** | **Decreased (#/%)** | **No change (#/%)** | **Some improvement (#/%)** | **Significant improvement (#/%)** |
| **Coordinators/Managers** |  |  |  |  |  |
| **Assistant Coordinators** |  |  |  |  |  |
| **Staff** |  |  |  |  |  |
| **All staff** |  |  |  |  |  |

**Notes/trends:**

**3.3 #/% of people who can explain their program area**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **# assessed** | **Not satisfactory (#/%)** | **Satisfactory (#/%)** | **Very satisfactory (#/%)** |
| **Coordinators/Managers** |  |  |  |  |
| **Assistant Coordinators** |  |  |  |  |
| **Staff** |  |  |  |  |
| **All staff** |  |  |  |  |

**Notes/Trends:**

**3.4 #/% of people who can explain the key technical recommendations for their program areas**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **# assessed** | **Not satisfactory (#/%)** | **Satisfactory (#/%)** | **Very satisfactory (#/%)** |
| **Coordinators/Managers** |  |  |  |  |
| **Assistant Coordinators** |  |  |  |  |
| **Staff** |  |  |  |  |
| **All staff** |  |  |  |  |

**Notes/Trends:**

**3.5 % of people who show improvement on an assessment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **# assessed** | **Decreased (#/%)** | **No change (#/%)** | **Some improvement (#/%)** | **Significant improvement (#/%)** |
| **Coordinators/Managers** |  |  |  |  |  |
| **Assistant Coordinators** |  |  |  |  |  |
| **Staff** |  |  |  |  |  |
| **All staff** |  |  |  |  |  |

**Notes/trends:**

## Financial systems

**4.1**

**Petty cash and advances tracking system?** Yes No

**Tracked using:** Ledger Spreadsheet Other:

**Reconciliation and receipt storage?** Yes No

**Chart of accounts?**  Yes No

**Co-signing for large purchases/payments?** Yes No

**Is there an organizational budget?** Yes No

**4.2 Were there cash flow issues (e.g., regularly running out of funds, having to borrow from one budget line to temporarily cover another, etc.)? Describe**

**4.3 Do financial staff routinely monitor expenditures and communicate with coordinators concerning shortfalls/less than 3 months’ operating expenses left?**

## Human resources

**5.1 Are there enough staff to do the work?**  Yes No

Comments (Prompts: What is considered an appropriate workload? Do staff hold more than one position or area of responsibility?):

**5.2 Do job descriptions exist that are relevant and used by organization to delegate work responsibilities?** Yes No

**5.3 Are there regular performance evaluations conducted with supervisors?** Yes No

If yes, describe process

**5.4 Are there individual staff development plans?** Yes No

If yes, describe process

## Organizational management

**6.1 Document any changes to the organization’s mission or vision**

**6.2**

**Is there a strategic plan that is being regularly followed and consulted?** Yes No

**Can staff explain parts of it?** Yes No

**Are plans linked to the organization’s mission and vision?** Yes No

**Overall, do units work together to solve issues pro-actively?** Yes No

**When there have been unexpected situations, have they been solved in a sustainable manner and led by the unit coordinator?** Yes No

**Are there plans or systems in place in case of emergency situations or outbreaks?** Yes No

**Is there regular (annual) review of program activities and progress, then modifications made to improve quality, accountability, access, etc?**  Yes No

**6.3 How do partner leadership and organization support capacity-building? For example, do they encourage staff to take responsibility of their area of work, ensure staff have time to participate in GHAP capacity-building events, and/or follow up on recommendations made by GHAP staff?**

**6.4 How do units within the organization communicate and collaborate?**

## Funding and support

**7.1 List organizations that support this organization:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Organization name** | **Type** | **Direct or indirect** | **Financially** | **Technically** | **Capacity-building** | **Advocate** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

*7.2 What is their mix of unrestricted and restricted funding (by such categories as private fdn, bilateral, etc.)? Pie chart works well here.*

|  |  |
| --- | --- |
| Unrestricted % | Restricted % |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Private foundation % | Bilateral organization % | Multilateral organization % | Private individual % |
|  |  |  |  |

**7.3 Unmet funding needs**

|  |  |  |  |
| --- | --- | --- | --- |
| Area/Budget line | Total proposed | Approximate amount still needed | % unmet in this line |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Comments: