CI Management Standards Assessment Guidelines

A.   Introduction

What are the CI MS?

The CI Management Standards are a set of four standards, each consisting of eight articles. They describe *good practices* of governance, management, accountability and adherence to ethical codes considered essential for Caritas Members.

They are a tool for each Member to check its own organisational 'well-being' and identify areas for improvement, and to help Members in their own institutional development. In addition they serve as a point of reference for strengthening the Caritas confederation as a whole.

How do the CI MS help a Caritas organisation?

Implementing the CI MS helps:

- the development and improvement of sound governance and effective management systems, which are among the fundamental conditions for an organisation's capability to access and maintain sustainable support both within the Caritas confederation and with other institutional donors.
- promote transparency, which builds trust in our organisation among our stakeholders, ensuring that decisions are shared and understood and emphasis is placed on a common 'one family' approach to professionalization. It will be the base for a healthy and equitable relationship with the people the organisation is working for and with.

We live in a time that sets high standards for transparency with respect to governance and accountability within the Church and its development activities. Strengthening the transparency capacity of the Caritas confederation is urgently needed in order to maintain and enhance its reputation and reliability. Church leadership is therefore encouraged to actively engage itself in institutional development and to stimulate continuous learning of their organisations and support these processes for the benefit of our beneficiaries.

Meeting the standards

Members are invited to use the CI MS *structurally and cyclically* in all their organisational development efforts, in particular:

a. Members are encouraged to run, from time to time, a self-assessment in their organisation, and based on the findings to work on addressing their weaknesses

b. Members are requested to submit their accountability framework (CI MS appendix 3) and supporting documentation *by July 2016* (and then every four years)[1]

c. The General Secretariat will then assign the task to assess the Member against the CI MS to an assessor, who will review the documents submitted by the Member. On the basis of the assessment s/he will draft a report to the CI Review Committee in which s/he will indicate whether the Member is meeting the minimum level requirement set by the CI Representative Council.
The Member is invited to respond in writing to the report. The assessment report and the Member's response will be examined by the Review Committee, who is called to confirm the assessment conclusions.

d. In case the Member is not meeting the standards they will be requested to develop an improvement plan, if need be with the assistance of partners, the Region and/or the CI Director IDCS.

Note: The Representative Council decided that non-compliance with the standards will not lead to disaffiliation of the Member.

CI MS documentation: their use by the Member in self-assessments

Appendix 1 of the CIMS document is the short presentation of the four Management Standards with each eight articles.

Appendix 2 (the auditor's checklist), could be filled in by the Member's finance manager (together with the finance team) and used as supporting document for the scores in the self-assessment tool for standard 3 (Finance & Accountability).

Appendix 3 is the reporting format for the MO to its board (preferably annually updated) and once every four years (starting 2015) to CI.

Appendix 4 the self-assessment questionnaire is an automated tool in Excel. The four standards in the CI MS each consist of eight articles. For each of the 32 articles the self-assessment tool contains a number of questions, worded as good practices. The first worksheet of the Excel sheet gives an introduction on the scoring, the next one shows the questions and space for the scores and explanatory notes, the final two worksheets automatically present the scores per article.

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[1] Members are requested to submit their documents in accordance with the following guidelines:
- Provide documents as much as possible in one of the official confederation languages (English, French, Spanish)
- No need to translate documents that are available only in the national language, but a table of contents in one of the confederation languages will be appreciated
- For ease of translation it is requested to provide documents as far as possible in Word, not in pdf.
- It is advisable to give every document a file name in one of the official confederation languages, and use the same name when completing the accountability framework (appendix 3). If possible add the CI MS article reference in the file name.

B.   Assessment process

Attitude of the assessor

Assessors should be highly aware of the diversity of MOs. Their own experience should not automatically be considered applicable when assessing a MO. The size of the MO and the local context, such as the relation with the Church (hierarchy) and society may require the assessor to adapt her/his perspective . Therefore the attitude of an assessor should be one of a 'research minded practitioner' who will have to read first and try to acquire an in-depth familiarization with the MO's environment before switching to assessment mode. Our aim is: accompanying rather than judging, suggesting rather than prescribing, questioning rather than assuming, helping the MO rather than deciding for the MO.

The temptation for the assessor may be that the MO wants to use or request the assessor to do the improvement work for them, but that is not the objective. The MO should remain in the driver's seat and own the way forward instead of being 'told' how to move forward. If the MO needs further assistance with the improvement plan there are other ways and option for them, like contacting existing partners, the Regional office or the CI Director for IDCS.

Language

Language used by the assessors when explaining (low) scores should be worded in such a manner that it encourages the MO to engage in improvement. The assessor is not a judge, delivering verdicts, but an accompanier who from a confederation perspective wants to assist the MO in moving forwards. Wording should preferably be 'solution-focused' rather than 'problem-focused', uplifting rather than condemning, affirming and adding rather than just pointing at what is missing.

Steps in the assessment process

1. The Programme officer CI MS contacts the assessor and her/his national director and requests the availability of the assessor for an assessment.

2. After reaching an agreement regarding the timeline and financial aspects a standard CI engagement letter is signed stipulating acknowledgement of the accepted procedure for the assessment including a confidentiality clause.

3. The Programme officer CI MS sends the MO's documentation to be assessed to the assessor together with appendix 3 accountability framework and appendix 2 (auditors checklist). Even if the MO sends their completed self-assessment (appendix 4) to the Programme officer CI MS, it will not be forwarded to the assessor in order to assure his/her neutrality in their assessment.

4. The assessor will take appendix 3 as leading document to guide him/her through the MO's material. The assessor will first study the MO's documents. On that basis s/he can fill in the basic tool, appendix 4 (now used as assessment questionnaire!) by scoring each of the good practice

statements (irrespective of their order in the CI MS, but on the basis of the existing knowledge the assessor has of the relevant good practices)[2].

The assessor enters the scores in the input sheet of appendix 4, while using the comments column to note where information was found and possibly what (draft) improvement to be considered. Later more info may be found to be taken into consideration.

5. When all documents have been read and considered and some good practices are not yet dealt with (after considering whether they were not over-looked) a written summary should be sent to the Programme officer CI MS requesting her to ask the MO for additional material in order to assess the missing good-practises. The assessor will not approach the MO directly, in fact the MO should not be aware who the assessor is and his/her identity and organisation is to be kept confidential.

6. When all good practices in appendix 4 have been assessed and the final Excel sheet has summarised the overall results per article and standard, the assessor is to write the accompanying summary report. In this report, for which a standard template is available, the assessor will report:
    a. in general terms how the overall documentation is appreciated
    b. what standards (and 'must-articles') do not meet the minimum requirements and what are the major reasons for this score.
    c. What major recommendations can be summarised for the MO to address the outcomes above.

    The summary report is to be sent to the Programme officer CI MS who will perform: a quality check on the assessment, compare (when available) with the self-assessment and where great discrepancies are noticed contact the assessor for clarification.

7. The Programme officer CI MS will send the draft assessment and the summary report to the director of the MO and give them time to respond to the outcome regarding factual mistakes. When comments are returned the Programme officer CI MS will contact the assessor once more and ask him/her to (re)consider the comment and assessment outcome. The assessor will return his/her comments to the Programme officer CI MS.

8. The Programme officer CI MS will ask the Secretary General to sign the final assessment outcome letter to the board of the MO specifying that this was based on a desk-research.

9. The MO is requested to send a response letter stating their improvement plan (mandatory in case of not meeting the standards; else recommended) and/or disagreement on the assessment.

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[2] It is not advisable to go the other way: checking the good practices one-by-one as per the order of their numbering and then search whether the documents provided cover that statement. This procedure is in general much more time-consuming.

10. Together with the final report of the assessment, the response of the MO will be sent to the Review Committee.

In case the MO has opted for an on-site assessment or in case of a re-assessment (decided by the RevCom after serious objections by the MO), the process is different.
The steps as described above up to number 4 are still to be executed first, the numbers 9 and 10 remain, but the numbers 5 – 8 change as follows:

5. Where the document research has not found clearly evidence of the MO's compliance with the good practice, the assessor, once on-site in the MO's office, will ask through the MO's director the respective staff for further information. What the assessor needs to keep in mind is that the assessment should always be based on existing documents (approved by the proper authority) which cannot be replaced by oral description of procedures. When an undocumented good practice is in place the assessor can write in appendix 4 the suggestion to record them in the relevant policy document of the MO. The assessor may consider to make use of the self-assessment outcomes in order to get a better understanding of the MO's own interpretation of compliance with the good practices.

6/7. See number 6 above. The assessor can draft the summary report and discuss it on-site with the director of the MO. It is therefore considered to entail what is written under 7 above.

8. The Programme officer CI MS will ask the Secretary General to sign the final assessment outcome letter to the board of the MO specifying that this was based on a combined desk and on-site assessment.

C.   Assessment scoring guidelines

How to score
In both the (self-)assessment tool (appendix 4) and the auditor's checklist (appendix 2) five scores can be given (1, 2, 3, 4 or 5), or alternatively the response can be left empty when the question is not applicable for the MO. In this last case the question will not be taken into account and (negatively) affect the average score. Every individual 'good practice' needs to receive a score as follows:

1. **Not existing**: the good practice described in the appendices 2 and 4 is relevant for the MO but is lacking or not in place at all, or just exists verbally and has not been recorded into written and officially approved documentation. The good practice is not applied at all;

2. **Rarely or insufficient**: the good practice described is in a partial or very rudimentary manner documented but to be considered inadequate for the size and complexity of the MO either because important elements are absent or described on a substandard manner or the documentation has not been approved by the proper authority of the MO. The good practice is rarely or incidentally applied;

3. **Normally or sufficient:** the good practice described is documented and approved by the proper authority within the MO to a degree which at present could be considered appropriate or satisfactory for the time being. The good practice is normally applied;

4. **Mostly or good:** the good practice described is well documented and more than adequate for the size and complexity of the MO even if its activities would expand or grow. The good practice is mostly applied, but not always, exceptions do occur;

5. **Always or exemplary:** the good practice is extensively documented and of the highest quality and more than adequate for the MO now and prepared for future growth of the MO. It includes suitable explanations with substantiation and can serve training purposes for (new) staff. The good practice is transparently made available for all (stakeholders). It could serve as an example for comparable MOs. The good practice is always without exception applied.

The above meaning will always be relevant for scoring all good practices in each article and will not be repeated all the time in the individual scoring guidelines.

Exceptions when there are not 5 scoring options
There are some good practices which do not have 5 options for scoring but only 3. In these cases the possible scores are 1,2 and 4. Normally these are rather simple and straightforward practices and in support of the good practice the score of 4 can provide some compensation for other good practices with a score below 3.

Explaining low scores by the assessor
Every good practice which is getting a score of 1 or 2 must be accompanied by an explanatory comment and preferably a recommendation regarding applicable good practice or another consideration. For scores of 3 (and higher) recommendations **_may_** be given but are not compulsory

due to the expected additional work since this may be a frequent scoring outcome. A comment is advisable in case explanation is needed in order to understand the score given (see next paragraph).

Guideline for scoring by assessors.

Some scoring guidelines mention for a certain score more than one argument or condition. If the MO is not meeting all but only some of these conditions, the previous lower score applies. So if in order to get a score of 3 three requirements are needed and 'only' two are met, the assessor cannot give the score of 3 but will have to give a score of 2. In case an argument or condition for the next higher score is in place (e.g. from score 4), while one is missing in score 3, the score 3 may be considered. Likewise if the requirement for scores 3 and 5 are met but not the requirement for score 4, the score can be 4. A frequent case are the good practices where 4 or 5 are scored either for being transparent or for providing the good practice in trainings. In those cases, the score should be 4 when either transparency OR training is in place, while the score can be 5 only if both transparency AND training are in place.

The assessor has some leeway to act differently depending on the degree of proper application and fulfilling of the argument or condition.

Guideline for SMOs

Rather than developing separate Management Standards for Smaller Member Organizations, it is preferred to allow these MOs more time to develop written documentation describing the agreed policies and procedures indicated in Appendix 4 by (Exception SMO) .

Of course, when a "manual, policy, procedure, handbook, etc.", is required, the size and scope of the documentation should be in line with the size and activities of the MO. They could have one manual with most guidelines: Finance, HRM and operations in one document. What is evident is that 'written guidelines' is the required norm and that we do not deviate from this point of view for SMOs. SMOs may respond by stating when they realistically expect to have developed their internal guidelines. The CI CIMS/IDCS team will give special attention to the SMOs, facilitate sharing of existing good practice and link SMOs with each other with the aim to encourage the improvement of the SMOs activities.

In case no written documentation exists, appendix 3 with the accountability framework becomes more important because it will give an insight into what the SMO wants to develop and when, in order to comply with the CI MS. The MOs are the drivers and determine the local priorities.

SMOs have certain good practices waived because of their size and activities. However if they voluntarily have developed the good practice they are to follow the scoring guidelines.

Good Practice Reference material

On BAOBAB in the CIMS/IDCS working group the official CI reference documents are available for each article where applicable, as well as examples of good practices by MOs and at times helpful

material from other (international) organizations. The assessor is required to have a good insight in these documents in order to assist him/her in supporting the assessment itself and for making recommendations in case of a score below 3. A separate summary document is made available listing all good practices per article and where the assessor can find them on BAOBAB.

Literature References

In the scoring guidelines always some short General Guidance is presented, which can all be found in a separate summary document listing all literature references per article and where the assessor can find them on BAOBAB or on the Internet.

Duplication of good practices

Assessors dealing with several MS will notice that at times there are duplications of good practices occurring in the same or between MS. This cannot be avoided since some issues cross borders and therefore only imply their importance. The scoring guideline may therefore also match another good practice or differ at times when more aspects are relevant.

Importance of transparency

Often the assessor will find that a score of 4 or 5 can only be reached if the material is transparently available for all (stakeholders) to see. In the assessment process for the CI MS we continually stress the importance of making policies and procedures of the organization transparently available for the wider public because of the following reasons:

1. By being transparent about the intentions and ways of work of our organization we show our desire to be accountable to our stakeholders.
2. By being accountable to our stakeholders we also show our willingness to be questioned or critiqued in our operations and in case we may have been acting differently from our intentions.
3. By being critiqued we show our willingness to continuously learn and as a result are stimulated to further improve our actual operations.

Importance of staff induction and training

Often the assessor will find that a score of 4 or 5 can only be reached if e.g. staff is (continuously) trained on the issue. The emphasis on training is given because of the importance of staff in meeting the aspect discussed and the high staff turnover, requiring training to be constantly updated or given to new staff. Induction programs are equally important for this purpose. The MO can 'prove' compliance with this requirement by showing their training syllabus for new and present staff.