☐ CSO Capacity Strengthening Workshop

☐ September 24-26, 2025

☐ Sarova Imperial Hotel, Kisumu

BACKGROUND INFORMATION

Organizational Capacity Assessment (OCA) is a structured tool for a facilitated self-assessment of an organization's capacity followed by Institutional Strengthening Plan (ISP) for capacity improvements. This self-assessment approach increases ownership of the ISP. The OCA format helps the organization to reflect on its processes and functions and score itself against benchmarks. Relevant staff reflects and builds consensus on current strengths and areas of improvements in order to identify and prioritize specific needs and agree on the type and level of intervention the CSOs needs to consider.

ORGANIZATIONAL CAPACITY ASSESSMENT TOOL (OCAT)

By design, the tool is inclusive and participatory and assists partner CSOs in examining their own organizational effectiveness. The assessment deals with a comprehensive and in-depth organizational review but for this capacity strengthening workshop purpose SGSI adopted the PACT's OCA for selected organizational pillars. The selected pillars are:

1. **Program/Project Management**
2. **Finance and Grants Management**
3. **Operations Management**

INPUTTING YOUR SELECTIONS

Each of these **the three pillars** is further broken down and total of 22 sub-measurement indicators are presented. For each indicator, you will select a explanation that best describes your organization's status or performance. Workshop participants will provide a score of 1 – 4 with 1 being the lowest and 4 the highest.

1= Clear need for increased capacity;
2 = Basic level of capacity in place;
3= Moderate level of capacity in place;
4=High level of capacity in place; **OR** **N/A (not applicable or does not apply to my organization)**

REASONS TO SUPPORT SCORING (JUSTIFICATION)

On the right side of the worksheet (table) you will find **justification section** for that capacity element topic. Use this column to justify your scoring by mentioning ***key strengths*** and ***areas of improvement.***

NAME OF ORGANIZATION _____

Staff Member Completing the OCAT	Title of Staff Member	E-mail Address of Staff Member	Phone number of staff Member

I. Project and Programs Management Practices and System: the availability of best structures, systems, qualified human capacity to provide comprehensive programs that meet beneficiaries' needs, meet requirements of different stakeholders , engagement of stakeholders in design and implementation, define and use of standards, and monitor performance.to successfully manage and learn from different programs/ projects

	1. Clear need for capacity	2. Basic level of capacity in place	3. Moderate level of capacity in place	4. High level of capacity in place	Scoring/ Sept 2025	Justification	
						Strengths	Areas of improvement
1.1 Organogram (organizational chart)	There is an informal idea of an organogram which is nothing formally agreed upon.	There is written organogram but not supported with clear reporting lines and supervisory relationships.	There is a written organogram, but reporting lines and supervisory relationships lucks clarity and partly functional	There is an organogram with clearly defined reporting lines and supervisory relationships of staff and it is functional.			
1.2. Service delivery	Quality standards for service delivery do not exist.	Quality standards for service delivery exist only informally Organization often falls short and beneficiaries are mostly dissatisfied with quality of service delivery.	Written quality standards exist for some aspects of service delivery but not all. They are not entirely clear and are not monitored regularly. Project beneficiaries somehow satisfied about the quality of service delivery	Written quality standards exist for most aspects of service delivery. Organization monitors its projects/programs against quality standards. Beneficiaries are satisfied with service delivery.			

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1.3 knowledge and skills on the project/program thematic Issue	There are no mechanisms to access new information on the project/program thematic issue.	The thematic issue is occasionally discussed internally. No written material for consultation and has limited access for none-project team members.	Knowledge and skills about thematic issue is discussed internally and some written materials are available. Inconsistently applied the learning for project/program improvement	Knowledge and skills on thematic issue is regularly discussed internally. Written information is available from a range of sources and applied consistently for project/program improvement			
1.4 Internal communication	Organization has no internal communication system.	Organization has a basic internal communication system which is not understood and accessible to every staffs. No staff meeting.	Organization in places internal communication system. It is not regularly used and no consequence attached to it. Interactions between individuals, units and programs pivots on personal relationships and voluntary based. When top leadership has a need, staff meeting held with or without agenda and minutes.	Organization has a functional internal communication system. Individuals, units and programs function effectively together and share information and resources. There are regular staff meetings with written agendas and minutes.			
1.5 Project/ program sustainability	No completed or existing projects/programs secured community ownership. No efforts are made to ensure sustainability.	Communities feel limited ownership towards programs and may make a minimal commitment/contribution.	Organization is starting to initiate skills transfer/capacity building activities. Communities feel some ownership of programs and express commitment/make contributions.	Organization is taking relevant steps to build community capacity to sustain projects and programs. Communities feel strong ownership of project/programs and demonstrated their commitment.			

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1.6 Fundraising and resource mobilization	Generally weak fundraising skills and lack of expertise. The organization is at risk, downsizing recent years, dependent on volunteers, and is already at risk.	Main fundraising needs covered by few internal skills and expertise. It is not a team work and all depends on the one or two experts in the organization. Resource to survive the organization for 1 more year without new funding is secured.	Regular fundraising needs adequately covered by well-developed internal fundraising skills and expertise. No supporting policy to use external experts it the required skill is not internally available. Resource to survive the organization at least for 3 more years without new funding is secured.	Highly developed internal fundraising skills and expertise in relevant funding source types to cover all regular organizational needs. There is supporting policy to use external expertise if the required skill is not internally available. Resource to survive the organization at least for 5 more years without new funding is secured.			
1.7 Accountability and transparency for building trust	There is no accountability and transparency mechanism that can build on the relationship with their constituency and government	There is some level of accountability and transparency tools/mechanisms. But not known by majority of staff and regularly practiced.	Accountability and transparency mechanism are in place; constituencies and selected stakeholders are informed on critical project/program stuffs by selected personnel irregularly. Project and program staff luck confidence to communicate programmatic information in the absence of top leaders of the project/program/ or CEO.	Accountable and transparent management with staff and external stakeholders to both program and finance systems and process. Project/program team are equally aware on relevant stuffs and practicing smooth and regular interaction in all the project cycle management to constituency and other stakeholders in an exemplary fashion		-	

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1.8 Staff for GESI	The organization don't have any skilled staff working on GESI and focal person assigned	The organization assigns a focal person for GESI with some basic skills on gender mainstreaming supporting.	The organization has one full time skilled staff working on gender equalities and social inclusion mainstreaming organizationally. The expert supports project/programs to maintain GESI factors from design, through implementation to evaluation, but not to the expected quality and depth.	The organization has gender and social inclusion team that provides support in mainstreaming gender equality and social inclusion factors from project design, through implementation to evaluation. The team consistently works across the projects/programs.		-	

I. Finance and Sub-Grant Management: Updated and functional financial policy and procedures, qualified staff for application and meeting stakeholders' compliance, internal controlling system, readiness to sub-grant management and alignment to internal and external needs.

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2.1 Financial Policies	Organization does not have any financial policies and procedures.	Organization has informal financial policies and procedures but they are not in written format	Organization has written financial policies and procedures, but they are not entirely clear. Some sections and sub sections are unable to implement.	Organization has written financial policies and procedures in the form of a manual, which is readily available to staff. And which is fully executed.			
2.2 Finance staff levels and competency	Organization has no finance staff.	Organization has a bookkeeper with some experience and basic training.	Organization has a Finance Manager. Other finance team members only have some basic training and rely heavily on direction from the	Organization has a qualified Finance Manager. Most if not all finance staff have adequate training and certifications. Finance staff usually adheres to financial policies and procedures.			

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2.3 Budgeting	The organization's budgeting is fully based on project budget which are not realistic, clear, and aligned with the organizational reason for existence/strategic plan.	The organization describes annual budget weakly like to fulfill stakeholders demand such as reporting of government stakeholder or donors. Majority of project costs as well as organizational core costs are not directly aligned with strategic plan. Non-budgeted expenses are common, and mostly challenged to get approval.	The organization describes its annual master budget, but it is collection of project budgets and some of strategic plan are covered, but not some others. Core cost budgeting is somehow good and may lack inclusive and transparent budgeting process. Documentation may not be clear and needs external assistance. Non-budgeted expenses are observed, and sometimes get approval by senior managers and from the donor side.	The organization uses its annual master budget which is aligned with the strategic plan and project budgets. Core cost budget management is good. Applies inclusive and transparent budgeting process which is realistic, clear, and well documented without external assistance. Non-budgeted expenses are infrequent, approved by senior managers, and by donors as required.			
2.4 Internal Controls	The organization implements without considerable sigrigation of duties and needs critical intervention.	The organization implements some of the following, authorized check signers are not involved check preparation; never issued blank checks, and designated good enough counter-signatories for range	The organization implements majority of the following met, authorized check signers are not involved check preparation; never issued blank checks, and designated good enough counter-signatories for range of amounts; functional responsibilities such as recording of the transaction;	The organization implements (at the least) authorized check signers are not involved check preparation, never issued blank checks, and designated good enough counter-signatories for range of amounts. Functional responsibilities such as recording of the transaction; custody of assets involved in the transaction; reconciliation of bank accounts			

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		of amounts; functional responsibilities such as recording of the transaction; custody of assets involved in the transaction; reconciliation of bank accounts and subsidiary ledgers, functions of ordering, receiving, accounting for, and paying for goods and services etc are properly segregated. (4-6 of any of the lists above might be missed)	custody of assets involved in the transaction; reconciliation of bank accounts and subsidiary ledgers, functions of ordering, receiving, accounting for, and paying for goods and services etc are properly segregated. (up to 3 of any of the lists above might be missed)	and subsidiary ledgers, functions of ordering, receiving, accounting for, and paying for goods and services etc are properly segregated.			

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2.5 Audit Experience	The organization implements external audits for the sake of meeting minimum standards by government and donor compliance.	The organization understands the importance of implements external audits of the entire organization on an annual basis, but challenged to administer regularly. Findings are rarely addressed, so getting similar queries in subsequent years is common.	The organization implements external audits of the entire organization on an annual basis but challenged to entertain project specific audit requests from different donor. The management tries to address audit queries and recommendation, but not sufficiently. As a result, similar queries and recommendation may reoccur in subsequent years.	The organization implements external audits of the entire organization on an annual basis and has sufficient room to run project specific audits if it becomes compliance to any donor. The audit queries and recommendations are addressed promptly and sufficiently. No similar queries in the subsequent years observed as management is a learning entity.			
2.6 Grants Management System	Organization does not have sub-grants policies and procedures.	Organization has informal grants management policies and procedures	Organization has written Grants Management Manual, but the policies and procedures are unclear and not in use.	Organization has written and functional Grants Management Manual which is readily available to staff and contains relevant roles, responsibilities, policies and procedures for grants management. Most content of the manual are aligned with donors requirement and usually			
2.7 Grant Management Staff	Organization has no grants staff.	Organization has a Grants Officer with some relevant experience	Organization has a Grants Manager. Other grants team members only have some basic training	Organization has a trained Grants Manager with experience managing donor-funded grants. Some grants team staff have adequate training, financial and administrative background.			
2.8 Grant management	Organization has little to no relevant	Organization has limited experience, with some	Organization has some relevant experience with at	Organization has extensive relevant experience with			

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experience and capacity	experience or unsuccessful project history.	challenges in grant management or partially met expectations.	least one successful grant and demonstrating capacity.	successful grant management and multiple proven donor funded grants that exceeds expectations.			

3. Operations Management: capacity of managing procurement and availability of relevant policies, office facilities and accessibilities, inventory management, travel and vehicle use policy and adherence in the organization.

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						Strengths	Areas of improvement
3.1 procurement management policies and procedures	The organization has no written policies on procurement of goods and services. The practice is guided orally by the leadership team and some concerned/key staff.	The organization has written policies and practices on procurement of goods and services, but it needs urgent revision as outdated and not comprehensive as needed such as CoI declaration and corruption with appropriate procedures and consequences.	The organization has written policies and practices on procurement of goods and services, property records, and asset inventory management but not fully functional and needs revision to meet the current market. There are efforts from leadership to protect organization and staff from unlawful, unfair, and biased procurement practices, but not supported by written reporting procedure and templates to action against the procedure.	The organization has an updated written and functional policies and practices on procurement of goods and services, property records, and asset inventory management. It addresses and provides reporting procedures for instances/allegations of conflicts of interest (COI), bias, unfair competitive advantage, fraud, and corruption.			

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3.2 Capacity to procurement management	The organization has not designated staff to procurement and asset management. Committee established when the need arises, and it is highly inconsistent and influenced by the leadership or staff.	The organization combines procurement and asset inventor responsibilities to other tasks such as finance, admin, or HR. No compressive policy and sometimes faces difficulties in procurement management, and gaps observed in the practice.	The organization has designated staff responsible for management of procurement and maintaining property inventory system, majority of procurement standards and donor requirements are met. However, there are cases in in adherence such as lacking competitive, open and transparent vender procedures and compliments coming from stakeholders such as donor, suppliers/ potential venders etc.	The organization has a designated and capable unit (or individual) that is principally responsible for management of procurement and maintaining a property inventory system; meets its procurement standards and donor requirements including practice of competitive, open, transparent and documented vendor selection procedures, adherence to the value for money.			
3.3 Property management	The organization has no property management policy, no asset inventory practice or only done when it becomes mandatory requirements by government or donor.	The organization has property management policy but needs revision to the capacity and/or to the need of the organization, Asset inventory practiced irregularly over years.	The organization has property management policy, inventory management applied and conducted annually. However, it lacks use of system-based inventory; report is not regularly generated and presented for decision making.	The organization has well-crafted property management policy, practices regular detailed property inventory (at least annually), apply systematic inventory records supported by physical checking, inventory report generated, presented to concerned bodies including top leadership and board followed by use of the report for decision			

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				making.			
3.4 Office facilities and Infrastructure	The organization has no office or uses different mechanisms such as own houses, share others office space or get from volunteers for free/small contribution. The facility and equipment are not good enough to run office business.	The organization has office, but significant gaps are observed in terms of fulfilling required facilities and equipment. Office location is unable to be stable (at least for the previous 4 years), and in accessible to staffs and stakeholders for majority of these times.	The organization has functional office that includes some of the required facilities and equipment but has some gaps. It is somehow accessible to staff and stakeholders. The office faces some challenges from externals such as landlords, market price, development/reconstruction run by concerned bodies.	The organization has a functional office that includes facilities and equipment required to support its projects and service delivery as well as administration task. Office is accessible to staff and stakeholder, and has no concern from external environment.			
3.5 Clarity and adherence to travel policy and procedures	The organization doesn't have written travel policy and procedure. Irregular and inconsistent guidance from leadership, or key staffs.	The organization doesn't practice the travel policy and procedure; it misses relevant sections/sub-sections/matters to travel; it is outdated and needs significant update.	The organization practices the travel policies and procedures, governing staff travel in some of the terms on types of allowable travel, criteria and rates for per diem, loading, transportation, re-settlement, but not comprehensive at least to the lists. Needs updating to the current organizational needs and	The organization practices the travel policies and procedures, governing staff travel in terms of types of allowable travel, criteria and rates for per diem, lodging, transportation, re-settlement etc. It helps to adherence of rules and procedures including addresses the organizational situations (such as travel to conflict prone sites) and market price (such as hotel and fuel			

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			market prices.	related).			
3.6 Understanding and adherence to vehicle management	The organization has no vehicles or parked due to major maintenance need, or budget issues.	The organization has vehicles (head and filed office) but utilization to day-to-day operation is not consistent due to lack of proper management such as frequent problem, and run out of fuel	The organization has vehicles for the day-to-day operation of its work (both in head and field offices). Insurance and service maintenance are irregular, mileage and fuel consumption are not system based.	The organization has vehicles for the day-to-day operation of its work (both in head and field offices); The vehicles are insured, go for regular services, logbook system is consistently used to monitor mileage and fuel consumption.			