

NGO accreditation Manual

Prepared by

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Forward

Shared responsibility, result oriented systems and professional approaches are essential elements for effectively addressing any development issues. Kerala development scenario is in a transformation stage and has recognized the need of professional approaches and private public partnerships.

Such initiatives have been widely encouraged in HIV/AIDS, Water and sanitation and High way development programmes. However these initiatives are individual programme centric and multiple system oriented.

At this stage standardization of programme implementation and quality enhancement of programme management need to be seriously looked into. Systems, which may strengthen these processes, have to be developed and practiced.

The NGO accreditation system is one of the stepping-stones in standardizing the quality improvement mechanisms, which will result into quality enhancement of development initiatives.

This system aims to bring positive changes in three aspects

- Programme implementation practices
- Institutional Strengthening processes
- Productivity in partnerships

The accreditation manual is developed to support the accreditation process in the state. The manual is developed after series consultation meetings with experts, academicians, Govt. department heads, development management agencies and NGO partners. The state is open for giving it for replication in other places (national level) with appropriate adaptations.

This is a beginning and there will be certain limitations with the system. But over a period of time, the processes will be reviewed and necessary modifications can be done on a need-based manner.

This systems is developed by accepting the essence of the following quote

"Washing ones hands of the conflict between the powerful and the powerless means to side with the powerful, not to be neutral." - Paulo Freire

Thank you

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Acknowledgement

In the context of changing trends in development sector, standards need to be established for what is expected of service providers in relation to the quality and effectiveness of service provision. Accreditation is the process of evaluating performance and certifying that standards have been met to the level required.

Accreditation is an active process. While standards can exist independently of an evaluation system, an accreditation system must have explicit standards with which to assess performance. Together, standards and the accreditation process form a framework for the delivery and management of a service, and a means of assessing performance to ensure quality and accountability.

This document is a draft one and prepared for consultations and discussions. Many literature review has been done and many provisions have been adopted from the existing best practices. The inputs and shared views from the NGO functionaries and experts different consultation meetings also contributed to the preparation of this document.

The idea of true accreditation in the development sector is promoted by **KSACS** under the leadership of **Dr. Rajan Kobragade** and in partnership with Partners forum Kerala. This initiative is going to be one of the quality assurance and empowerment systems, which will enhance the effectiveness of development initiatives in achieving the desired changes. Sincere appreciations to those who paved the seed to strengthen the systems and processes.

The commitment and visions of **Dr. Rajan Kobragade, PD, KSACS** and the operational management of **Mr. Manilal, NGO adviser, KSACS** made this initiative a reality. The contributions of **Mr. Sibi Alex, Partnership Manager, PSU** and the functionaries of **PFK** helped the venture to make it more participatory and reality oriented.

This is shared responsibility to achieve development goals with convictions and commitment.

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Abbreviations

NGO	Non governmental Agency
KSACS	Kerala State AIDS Control Society
PSU	Project support Unit
PFK	Partners Forum Kerala
PSH	Partnerships for Sexual Health
DFID	Department for International Development
IIM	Indian Institute of Management
PD	Project director
CMC	Core Management committee
ACK	Accreditation Council Kerala
AB	Accreditation Board

Key words

Accreditation

Accreditation is an endorsement by one agency or body or committee officially approving an agency or institution or practice or a programme who satisfy specific standards and procedures.

Certification

A process of officially issuing a document and registering an institution with a system based on accreditation standards.

Qualification

The criteria for formally applying to accreditation body and standards for scrutinizing the individuals and institutions for accreditation, which is developed participatorily.

Exclusion

The criteria and terms, which doesn't qualify the individuals and institutions to get the accreditation or applying for accreditation

Termination

Disqualifying an individual or institution from the current accredited status based on certain criteria or guidelines or systems.

Amendment

Making certain need based changes in the accreditation document to update the provisions through some defined procedures.

Standards

A set of guidelines to practice, which enhances the effectiveness of the programme to achieve the desired outcomes

Complaints

Expression of disapproval/dissatisfaction/displeasure towards a process or procedure or decision/practices in terms of accreditation

Appeals

It is a request for reviewing and revising a decision or approval or agreement or standards or procedures related to accreditation

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1. Background

Kerala development initiatives are well supported by the NGO sector and could result in to productive changes in the social scenario. The practices in the partnerships for development – government and NGOs at multiple levels – is accepted and recognized as proven practices at national level.

The initiatives in health sector especially programmes related to HIV/AIDS under the leadership of Kerala State AIDS control Society (KSACS) has been recognized partnerships as one of the key strategies for effective programme implementation. Efforts have been taken to establish and support systems to strengthen the NGO partners in bringing desired changes in the field. The reports of monitoring and surveillance mechanisms also identified these as one of the effective practices.

Maintaining the quality of the programme implementation and recognizing partner contribution is the key motto of KSACS. As a system, which can maintain the quality standard practices in the programme implementation and recognize the credibility of the NGO partners, an accreditation system is proposed. Multiple level participatory consultations and discussion have been made to finalize the structure and functions of such a system in the state.

1.1 Purpose

- To provide guideline for setting standards in organizational and programme governance and management practices
- To provide official recognition/approval for standard practices and systems of the organizations engaged in development initiatives in Kerala

1.2 Principles

- Accreditation should be voluntary and should not be on compulsion.
- Organizations need not be required accreditation status as a mandate for practice in the development sector. However organizations will be encouraged to accredit themselves to the system through the provision of incentives.
- Accreditation system should be based on quality improvement and good practice systems to achieve desired changes
- Support to the organizations need to be provided so that the organizations can be strengthened to achieve accreditation or improve their accredited grades.

2. Overview of accreditation

2.1 Definition of accreditation

Accreditation is a transparent process by which the practicing NGOs/development organizations in various social sector fields are recognized and certified by a body represented by various stakeholders and experts involved in development sector, as quality service providers based on certain standards and procedures set up participatorily and followed.

In the present context it is applicable to Kerala and the development organizations working in the field of social/development sector.

2.2 Practices in accreditation

Accreditation systems/processes are widely recognized, accepted and practiced in the development and social sector as a quality assurance and maintenance mechanism. Various governments, bilateral and multilateral agencies have established their own accreditation mechanisms based on their programme and mission requirements. Some of the multilateral accreditations are accepted and used by many donor/resource agencies as a standard for identifying and engaging partners in initiating and managing programmes at multiple levels.

KSACS will own the accreditation system partnering with planning and local administration departments and Partners forum Kerala. Any organizations working in the development sector can apply for the accreditation and after a set of procedures accreditation shall be awarded or rejected.

2.3 Scope of accreditation

The scope of accreditation is limited to the state of Kerala by legal and functionally opens for all and can be taken as a standard for quality control mechanism.

Accreditation is applicable to organizations and its core functioning areas. For each functioning areas there should be different technical standards. The management and infrastructural standards will remain the same for all the organizations and grading will be done based on that. Technical standards vary from programme to programme and issue to issue. Experts in concerned areas will be developing minimum technical standards for each theme.

2.4 Benefits of accreditation

- The status of being accredited through official government recognition of NGOs
- Structured approach in NGO selection

- The chance to take a fresh look at the organization
- The opportunity to get some external perspectives on the organization and its work
- Provide new directions to expand the scope or intensity of work
- Team building and an increase in working together with a common vision
- Increased focus on communities to work with
- A means to be accountable to tenants, community and funders
- A chance to improve areas that need to be tackled
- The capacity to identify training and other developmental needs through data collection
- A means to assess how effective an organization is
- More acceptance by other resource supporting agencies
- Increase in the credibility of NGOs

2.5 Limitations of accreditation

- Initially the scope work is limited to the state of Kerala
- The technical standards may change according to the change in the issues and its programmes

2.6 The Accreditation Council Kerala (ACK)

ACK is a joint venture of KSACS and PFK. KSACS and PFK will develop a MoU and sign an agreement on the management of the accreditation council. The ownership of the accreditation and its processes are vest with the council.

2.6.1 Core Management Committee (CMC)

A CMC consists of PD, KSACS, NGO adviser KSACS, President PFK, Secretary PFK and special invitees shall be responsible for management of the council. The nodal officer is responsible for the executive functions of CMC. Ongoing facilitation and support to the accreditation board and processes will be the key functions of CMC.

There will be one board to manage the accreditation and redresser procedures

2.6.2 Accreditation board (AB)

The accreditation board will be set up by KSACS partnering with PFK. The NGO adviser will be the nodal officer for liaisoning with the partnering agencies and the accreditation board. The NGO adviser will be an ex-officio member of the accreditation board.

The accreditation board will be represented by a group of technocrats drawn from various areas based on their proven track records. The composition of the body is as follows

- Two national level accreditation/development experts
- Two development sector experts
- One management expert – preferably from IIM
- One legal expert
- One finance expert
- One social scientist
- One media expert

The term of the accreditation board will be for two years and will be reconstituted periodically. The same members can be reinstated based on their availability and acceptance. There should be women – minimum two representatives - representation in the accreditation board. Any decisions with regard to accreditation taken by the accreditation board are final. Any appeal with regard to the accreditation processes need to be submitted to the accreditation board with in 10 days time of decision making. In such cases, accreditation board has the freedom to accept or reject the appeal with giving reasons.

2.6.2.1 Nominations to the board

The CMC of accreditation council will do the nominations to the accreditation board. A list of such experts will be prepared by the nodal officer in consultation with PFK office bearers and SACS officials and will be submitted to the CMC. The CMC will nominate the members from the list. The nominated members will elect one chairperson for the board. He/she will be in charge of the office for two years. If any change in the position is needed 2 third of the members with the consent of the CMC can put forward the agenda in the board meeting and can elect another person for the same position. Notices for such things have to be forwarded to the appellate board 10 days in advance.

2.6.2.2 Functions

- Review the list of NGO partners for accreditation
- Set up teams to appraise the NGO partners
- Selection of NGO partners for accreditation
- Grading of NGOs for accreditation

- Providing accreditation to the NGOs
- Suggesting strategies for capacity building of the accredited partners
- Supporting government and private in developing policies related to development
- Act as a redresser system for accreditation processes
- Liaison between government and private for effective coordination of accreditation process
- Periodically review the policies and progress of the accreditation systems
- The frequency of the meeting of the board is once in 6 months. If needed based on the request of the CMC, special meetings can be organized.

3. Qualifications to accreditation

3.1 Minimum Norms:

- The organization has been in existence for a minimum of 3 years from date of registration
- The physical address given by the organization is verifiable.
- The organization is registered as Trust/Society/Section 25 Company
- Registration documents of the organization are available on request
- A shared vision/purpose/objective is articulated beyond the registration documents
- The organization has defined indicators, which will measure its performance against its stated objectives.
- The organization has a Governing Board, by whatever name called.
- The organization discloses name, age, sex, work experience, and position of Board members.
- Not more than half the Board members have remunerative roles.
- The Board meets at least twice a year with quorum as stipulated in its own Memorandum of Association.
- All remuneration and reimbursements to Board members are to be disclosed
- Minutes of Board meetings are documented and circulated
- The Board approves programmes, budgets, annual activity reports and audited financial statements
- The Board has a policy on purchases, disposal, sale of assets, investments etc. to gain comparative advantage to the organization, which also assures transparency
- The Board ensures the organization's compliance with laws and regulations
- Activities to be in line with the vision/purpose/objective of the organization
- Appropriate systems be in place for periodic programme planning/ monitoring/ review
- Appropriate systems be in place for Internal control

- Appropriate systems be in place for Consultative decision-making
- Clear roles and responsibilities for personnel (including volunteers) exist
- All personnel are issued a letter of contract/ appointment
- Appropriate Personnel Policy is in place
- Signed audited statements are available: balance sheet, income & expenditure statement, receipts and payments account, schedules to these, notes on accounts and the statutory auditors' report
- The organization's Annual Report be disseminated/ communicated to key stakeholders and available on request every year

3.2 Desirable norms:

- At least 2/3 of Board members are unrelated by blood or marriage
- A Board Rotation Policy exists and is practiced
- The distribution of staff according to salary levels must be disclosed in the annual report

4. Levels of accreditation and its norms

The accreditation or level fixation should not be perceived or viewed as a faultfinding mechanism. It should be identifying the strengths and gaps and to fill the gaps and improving the strengths or utilizing the strengths

The accreditation will be done on three levels:

Grade 1	Highly competent
Grade 2	Competent
Grade 3	Average competence

4.1 Criteria for grading

- At present only NGOs implementing PSH/other projects shall be considered for accreditation.
- Proportionate significance shall be given to different criteria in the first phase of accreditation which may be as shown in the table below.

No.	Criteria	Score
1	Infrastructure (Own land, building and other assets – Fixed Deposits etc.)	10
2	Managerial capacity (Personnel management, transparency in planning and implementation)	20
3	Technical Resources (Expert personnel in project and NGO, human resource)	20
4	Quality of project implementation (Based on evaluation, audit report)	20
5	Empowerment and involvement of community in PSH project	10
6	Innovative and best practices in the project/NGO.	10
7	Support system (organizational link up etc)	10
Above 70		Grade 1
69-50		Grade 2
Less than 50		Grade 3

5. Rights and responsibilities

5.1 Responsibilities of accredited NGOs

The accredited organizations are responsible for

- Providing information on the progress of their programmes and new initiatives to the council in the month of January every year.
- Providing information to the council on any changes in their byelaw, registration status, tax status, FCRA status, governing board, management committees and other items related to the legal entity of the organizations every year.
- Submitting audited statements and report of activities on a yearly basis to the council
- Providing support to the council in organizing and conducting capacity building programmes for the partner organizations or other civil society organizations on a need based manner
- Providing mentoring support to other weaker organizations to improve their organizational capacities
- Attending all the meetings organized by the council
- In case of voluntary withdrawal from accreditation systems, informing the council one month in advance in writing about the same

5.2 Rights of accredited NGOs

- The accredited organizations have the right to produce the certificate to any of the agencies/institutions as a proof of credibility
- The accredited organizations have the right to participate in the capacity building programmes or coordination meetings organized for the accredited members by the accreditation council.
- The accredited organization has the right to access the periodic information services provided by the accreditation council or any other resource agencies referred by the council.
- The accredited organizations have the right to access any information or guidelines pertaining to programme planning, programme development and programme management available with the council.
- The accredited organizations have the right to use the council as a reference for their resource mobilization processes (technical and financial resources). In such cases the organization should apply and or inform the council 10 days in advance about the programme and agency which they approach.

6. Standards of accreditation

Suggested that the standards for accreditation should be fixed at three levels:

6.1 Technical:

- Vision in development/health related programmes
- Availability of resource pool
- Capacity of the organization in providing technical support
- Proven practices in the domain
- Technical competency in the present programmes
- Coverage of the support
- Documentation capacity

6.2 Management:

- Organizational governance systems
- Organizational management systems
- Project/programme governance systems
- Project management systems
- Efficiency of the systems
- Transparency of the systems
- Human resource management

6.3 Infrastructure:

Separate accreditation standards for organizations in the urban and rural sector

- Availability of infrastructural facilities
- Organizational support to the programmes
- Involvement of volunteers in the programme
- Communication and other office operation facilities
- Affiliations to national and international organizations
- Awards and recognitions from authentic and reputed institutions/bodies

6.4 Indicators and means of verification

Standards	Indicators	Possible means of verification
6.4.1 Technical		
<p>a. Vision in development/health related programmes</p>	<p>The organization has adopted the principles that they work only in one or two specific areas/themes</p> <p>Action plan reflects the vision of the organization</p> <p>Their track record is more on the areas specified in the mission statement</p> <p>Successfully completed projects externally funded in the said areas for the last two years.</p> <p>The board members have clarity on the mission and vision of the organization</p>	<p>Vision and mission statement of the organization</p> <p>Programme reports of the organization</p> <p>Discussions with some of the board members</p>
<p>b. Availability of resource pool</p>	<p>The availability of technically competent people with the organization and they periodically (once in a month) involve in the work of the organization</p> <p>The nature of people associated with the organization in various assignments are nationally accepted and recognized</p> <p>The technical competency of the people in the programme teams are widely accepted by the resource agencies and technical support seeking agencies</p>	<p>The list of governing board members</p> <p>The list of staff members</p> <p>The list of consultant panel who worked for the organization</p>

	<p>There are technically competent people available with the organization and can utilize them on a need based manner.</p>	
<p>c. Capacity of the organization in providing technical support</p>	<p>The organization has taken up similar assignments which provide technical support in</p> <p>International level National level State level District level Organizational level</p> <p>The nature of assignments taken up by the organization are accepted at the respective levels and recognized by the concerned agencies.</p> <p>Organization providing technical support to other organizations and agencies on a regular agencies for the last two years</p>	<p>The reports on technical support to other organizations</p> <p>The acceptance letters of the agencies who received support form the organization</p> <p>The ideas and programmes, which is replicated by the resources agencies or other governmental and non-governmental agencies.</p> <p><i>If the year of support is more than two years, the score will increase according to the number of years of support</i></p>
<p>d. Proven practices in the domain</p>	<p>Innovative practices developed and successfully practiced in specific areas – as a special programme or part of a project</p> <p>Specific programmes, initiatives have been taken up to address the issues for the last two years and it is accepted and widely recognized at</p> <p>International National State Local levels</p>	<p>Proven practice documents</p> <p>Programme reports</p> <p>Acceptance letters from the donor agencies</p> <p>Replication of proven practices</p> <p><i>The score depends on the years and levels of operations – multiple levels and more than two years leads to more score.</i></p>

<p>e. Technical competency in the present programmes</p>	<p>The organization follow scientific project management practices – e.g. Project cycle management process</p> <p>Organization has thee following systems Planning Monitoring Capacity building Staff welfare</p> <p>The progress rate of the project/programme is as per the proposals and action plans</p> <p>The rate of acceptability and accessibility of the programmes/projects by the primary and secondary stakeholders is as per the proposals or higher than that.</p>	<p>The evaluation reports of the programmes</p> <p>The documents on the successful running of the programme</p> <p>Discussions with various stakeholders</p>
<p>f. Coverage of the support</p>	<p>There are systems to assure the issue based coverage of the programme/projects</p> <p>Monitoring systems which regularly analyze the progress of the coverage and extend of support</p> <p>Coverage and support at various levels</p> <p>Local project level District level State level National level International level</p> <p>Geographical and population coverage – direct and indirect but benefits the beneficiaries for the last two years</p>	<p>The documents related to the reach and converge of the programmes</p> <p>Acceptance letter or contract copies of programmes implemented at various levels.</p> <p>Discussions with various stakeholders</p> <p>The score varies according to the presence of the organization at multiple levels.</p>

	The systems are established to increase accessibility of beneficiaries to the programme/project	
g. Documentation capacity	<p>The documentation systems in practice – one person or persons assigned for documentation</p> <p>All the team members trained in documentation and trained in computers and they have access to computer and other documentation facilities.</p> <p>Review systems and planning systems are in place and written documents on its management are kept in the office</p> <p>The documents are often utilized for programme streamlining</p>	<p>The list of documents kept and its purpose</p> <p>The documents available on each programme</p> <p>Interviews with the team members</p>
6.4.2 Management		
a. Organizational governance systems	<p>The functions of the governing board of the organization are clearly demarcated and performed</p> <p>The meetings and working set up of the governing board are regularly monitored.</p> <p>There is system to make policies at organizational level</p> <p>There is a participatory system in developing programmes at organizational level</p>	<p>Reports on the governing board meetings – print or electronic</p> <p>Interviews with governing board members and key team members</p> <p>The process documentation of policy development and programme assignment.</p>

	<p>There are systems, which interface with management of the programmes.</p> <p>Transparency is kept in the board governance functions</p> <p>The board meetings and annual general body meetings are regularly organized and reports and other required documents are submitted to the government authorities.</p>	
<p>b. Organizational management systems</p>	<p>There is a written document on Planning systems</p> <p>There is a systems for Decision making and persons are assigned for specific process in decision making</p> <p>The organization follows a</p> <ul style="list-style-type: none"> • Annual budgeting • Annual operational financial plan • Annual auditing • Monthly financial plans • Monthly internal auditing • Midterm internal auditing • Transparency in budgeting • Transparency in financial planning and monitoring • Participatory programme planning – annual, quarterly and monthly • There are systems for monitoring and facilitation of plans • Transparency in sharing of 	<p>Annual action plans</p> <p>Annual budgeting</p> <p>Auditing systems – booth internal and external</p> <p>Accounting systems practiced</p> <p>Guidelines on the management systems</p> <p>Discussions with team members</p>

	<p>information</p> <ul style="list-style-type: none"> • Systems for documentation and reporting • Transparency with donor agencies • Written systems for administrative procedures in the organization • Written staff welfare systems and procedures 	
<p>c. Project/programme governance systems</p>	<p>There should be a written document on the nature and structure of the project governance systems</p> <p>There is governance board/committee for each project of the organization and it is functioning. Regular meetings have been organized once in 3 months and review of the programme being done.</p> <p>The policies and decisions are taken in consultation with the governing board and the team members</p> <p>The project team members and the functionaries have clarity in the governance and management functions</p>	<p>The meetings of the project governance systems</p> <p>Guidelines on project governance systems</p> <p>Discussions with team members and functionaries</p> <p>The minutes or reports of governance committee meetings</p>
<p>d. Project management systems</p>	<p>Project has a written planning system. For each programme develop proposal and prepare</p> <ul style="list-style-type: none"> • Annual plans • Operational plans • Biannual plans with indicators • Quarterly plan with indicators • Monthly plans with 	<p>Process document of planning</p> <p>Guidelines on planning and financial management</p> <p>Guidelines on accounting</p> <p>Discussions with the team members and beneficiaries of the project</p>

	<p>indicators</p> <ul style="list-style-type: none"> • Weekly planning • All the planning are participatory • Involvement of various stakeholders are assured • Plan document is transparent <p>There are specific written down guidelines in project management at organizational level, which includes the human resource management.</p> <p>Project follows clear finance and accounting systems which is written and transparent</p> <p>The organization follows</p> <ul style="list-style-type: none"> • A accounting system which is acceptable by the donor agency and transparent • Most off the transactions are done through cheque • Weekly/monthly closing of accounts • The project manager is involved in the finance management • Early budget planning • Participatory planning of budget • Developing annual operational financial plan • Internal midterm auditing is practiced • Annual external auditing • The accounts are transparent 	<p>Guidelines on project management systems</p>
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<p>e. Efficiency of the systems</p>	<p>There is a proper monitoring on the systems established and discussed and revised in organizational and project governance board.</p> <p>At least for the last 3 years systems are in place and functioning efficiently</p> <p>The systems are developed in a consultation process and known to all the people associated with the project</p>	<p>The minutes of the meetings of the staff</p> <p>Minutes of the meetings of the programmes</p> <p>The contractual agreements</p> <p>Perceptions of the team members on the systems and its functioning</p>
<p>f. Transparency of the systems</p>	<p>Community or primary stakeholder consultations are regularly done and their participation in programme management is assured</p> <p>There is a systems of participatory</p> <ul style="list-style-type: none"> • Programme planning • Programme management • Budgeting • Costing • Accounting • Finance management <p>There are systems for sharing the information on the progress of the project at multiple levels, which includes various stakeholders of the project.</p> <p>The delegation of responsibilities are done on the basis of project proposal and The team members have been given training on their roles and they have clarity on their roles and responsibilities.</p>	<p>Web based systems available with the organization</p> <p>The guidelines on planning and implementation management</p> <p>Guidelines on contract management</p> <p>Some discussion with the team members and beneficiaries</p>

	Web based systems to keep the transparency of the organization and the programmes are established	
g. Human resource management	<p>There are written Staff recruitment policies and there is no discrimination in staff recruitment.</p> <p>There is an employee welfare policy and it is adopted for the project.</p> <p>There is a systems for internal Staff capacity building</p> <p>The team members are consulted on various aspects of the project. The decisions and plans are developed on a participatory manner.</p>	<p>Relation with the staff members</p> <p>Schemes for the staff</p> <p>Programmes for the staff members</p> <p>Satisfaction of the team members</p>
6.4.3 Infrastructure		
a. Availability of infrastructural facilities	<p>The number or adequacy of office equipments and space available with the organization</p> <p>The organization has</p> <ul style="list-style-type: none"> • An office – rented or owned for the last three years • Telephone • Fax • Computer • Internet facilities • Furniture • AV materials • Minimum of three staff and active organizational functionaries <p>The availability of land/building/fixed deposits</p>	<p>Asset register</p> <p>Documents related to fixed assets</p> <p>Audited statements</p>

	<p>with the organization The organization has fixed assets like</p> <ul style="list-style-type: none"> • land, building • Fixed deposits more than three lakhs • Vehicles • And other immovable assets 	
<p>b. Organizational support to the programmes</p>	<p>The organization functionaries provide need based support to the organizational programmes</p> <p>Functionaries support the project team members in trouble shooting for the successful implementation of the projects</p> <p>Financial or other infrastructural support to the programmes by the organization on a need based manner.</p> <p>The organization mobilizes resources locally and utilize it for supplementing the ongoing programmes</p>	<p>The reports of the programmes</p> <p>The minutes of the meetings</p> <p>The team members perception on involvement of the functionaries</p>
<p>c. Involvement of volunteers in the programme</p>	<p>The number of volunteers associated with the organization</p> <p>The organization has a network of volunteers – minimum of 20 based on the nature of the programmes</p> <p>The organizations having a network of technical consultants and individuals who provide support to programmes on a need based manner.</p>	<p>The documents on volunteers</p> <p>The report on volunteer involved programmes/projects</p>

	The technical skills of the volunteers and they are available for programme support.	
d. Communication and other office operation facilities	<p>Communication infrastructure facilities available with the organization – minimum of</p> <ul style="list-style-type: none"> • Telephone • Fax • Computer • Internet facilities <p>Any other form of facilities may be an added advantage for the accreditation processes.</p>	The physical availability of the equipments in the organization
e. Affiliations to national and international organizations	<p>Organization affiliated to other networking bodies – minimum of one</p> <p>Organization affiliated to other professional organizations – state , national and international levels will carry more waitage.</p> <p>Organizations’ partnerships with other organizations in other places – minimum one partnership existing (live) with either a government agency or any other donor agency.</p>	<p>Certificates of affiliations</p> <p>Partnership MoUs</p> <p>Contractual agreements</p>
f. Awards and recognitions from authentic and reputed institutions/bodies	<p>Government awards received</p> <p>Other reputed donor agency awards received</p>	<p>The copy of the awards</p> <p>Letter of appreciation of the donor agencies</p> <p>Optional and carry waitage</p>

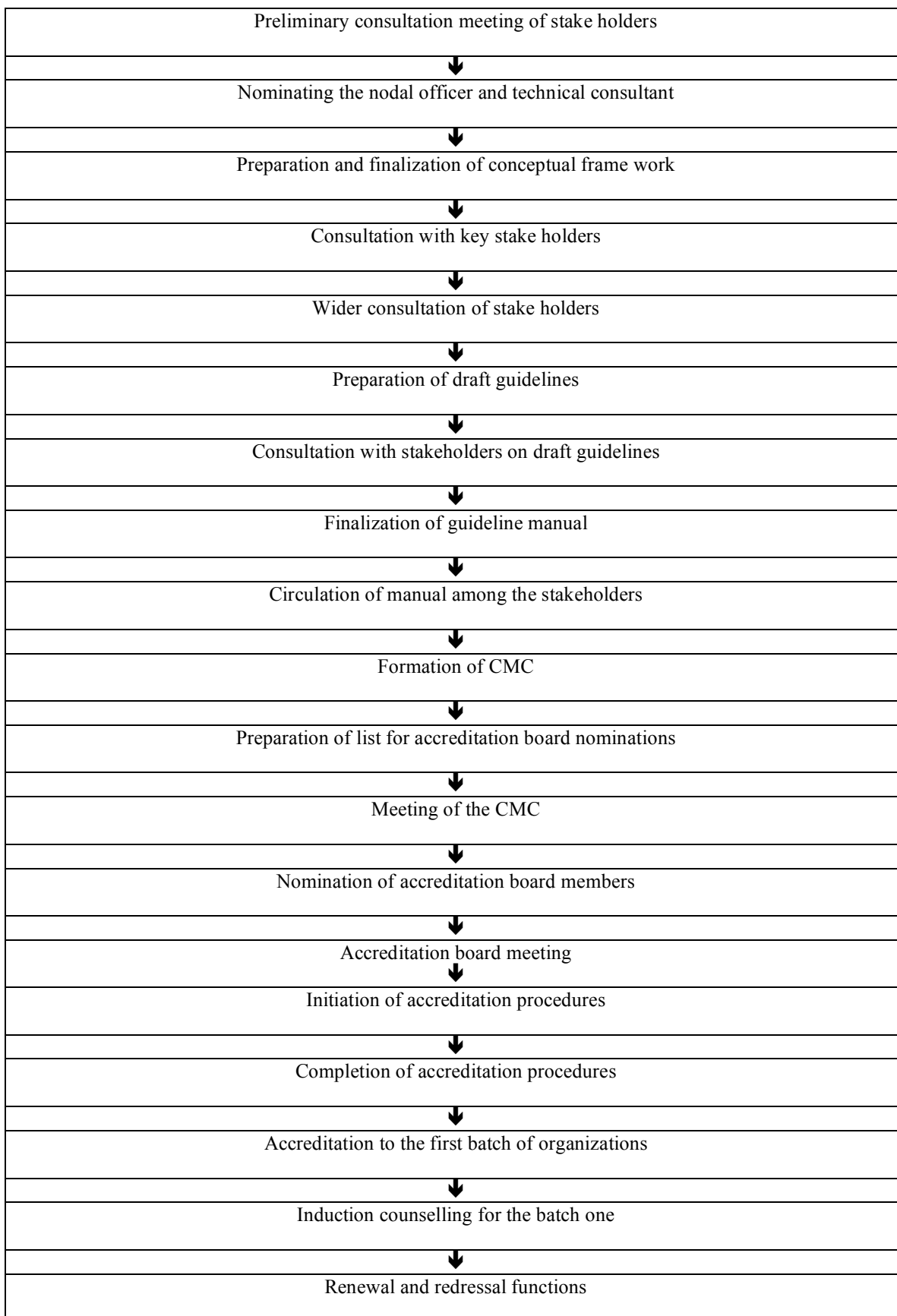
7. Accreditation period & procedures

In the initial stages accreditation will be done once in a year. Applications will be invited in the month of June and procedures will be completed in the month of July and accreditation will be given on August. Accreditation is given for two years and every two years the organizations need to renew the accreditation. Accreditation will be on merit basis. The major processes involved in accreditation are as follows:

1. Advertisement/invitation
2. Letter of Interest (LOI) and submission of application
3. Initial screening.
4. Intake counselling
5. Institutional Counselling
6. Post-visit Counselling
7. Screening by the board
8. Admission/rejection.

The advertisement/invitation would be sent through printed media and also posted on web site. Intake counselling would follow initial screening of all LOIs and applications. At this stage, it would be verified whether the information furnished by organizations is authentic. The next is visit to the institution for appraisal, followed by a post-visit counselling for discussions with NGOs for exploring ways for improving standards. At this stage, NGOs have the right to decide whether to go for post-visit counselling or not. There would be a screening by a Board following which the NGOs would be granted or denied accreditation as the case may be.

8. Accreditation Processes Flow Chart



9. Accreditation renewal formalities

Once in two years all the organizations have to be renew the accreditation. The organizations need to undergo the same procedure as initial accreditation to renew the accreditation. During the renewal the grading will be given as per the existing status.

NGOs will be given a 6-month grace period to rectify drawbacks and enhance performance before the next appraisal is due. Before applying for the next round, the NGO can find ways to identify the agencies who provide the capacity building programmes under go training. This will help the NGOs to rectify their drawbacks and become eligible for accreditation. How ever the NGO will be able to apply for the accreditation status review in the next round only.

10. Redressal systems

The accredited members and other agencies have the right to suggest/appeal on the accreditation process or the accredited organizations or the proceedings involved in the accreditation process.

10.1 The process

Such appeals/suggestions has to send to the nodal officer designated by the accreditation board. The officer will be consulting with the board members of the accreditation board in the meeting and decisions taken will be informed to the plaintiff. In such cases the concerned party will be informed about the decisions with 15 days time. Decisions taken by the accreditation board will final in this regard.

10.2 Principles in managing the redresser mechanisms

The mechanism is committed to deal with the appeals/suggestions in fair and meritorious manner up to the satisfaction of the appealing party with in the limits of the accreditation guidelines

The process should be transparent and accountable and accessible to the appealing party

The mechanism is committed to complete the process on a time bound basis

The confidentiality will be maintained

The complaints/appeals/suggestions will be used as an opportunity to improve processes and policies related to accreditation

10.3 Liability

Any complaints/appeals related to accreditation processes or procedures or decisions will bound to the guidelines developed by the accreditation body. The appellate board is the final authority to make any decisions in this regard. The board or any authorities related to the accreditation are not liable for any of the legal sanctions or procedures related to accreditation processes. All the complaints/appeals related to accreditation need to be settled in front of the appellate body.

11. Termination of accreditation

Any organization found violating the rules and regulation of accreditation board will be sent a show cause notice for the same and invited for a counseling. A team of experts consisting a development and management persons, designated by the board of accreditation will do the counseling. Based on the reports of the designated team of counselors, decision will be made on termination of accreditation status.

12. Amendment of accreditation Procedures

Any amendments in the accreditation formalities shall be done on a consultative and participatory process. The partnering agencies along with the experts will sit periodically (once in a year) and review the existing procedures and guidelines for accreditation based on the feedbacks from accredited organizations and the outside agencies. After the initial discussions the board of accreditation will be consulted and final draft of the proposed change will be prepared. The draft will be presented in a consultative workshop consists of various stakeholders and finalized. The final document will be presented in a joint meeting of accreditation board members and partnering agency representatives. Once the formalities are completed the document will be presented to the CMC and final consensus will be sought.

However once in two years the accreditation manual and formalities have to be reviewed and necessary modifications need to be done periodically. With the consent of the CMC, support of some external agencies and experts can be accessed for this purpose.

13. Systems to support

13.1	Nodal Officer	<p>A nodal officer (preferably the NGO adviser of KSACS) should be identified and linked to the council. The nodal officer will act as the executive officer of the council.</p> <p>The responsibilities include</p> <ul style="list-style-type: none"> • Documentation of all the minutes of the meetings • Preparing plans and follow up of all the decisions • Facilitation for all the decision implementation taken by the council • Management of the council office team • Liaison with different stakeholders
13.2	Support team	<p>A support team consists of one coordinator and one accounts/administrative assistant will be placed in the office of the council.</p> <p>The council will develop the salary and other norms of working.</p>
13.3	Office and its operation support	<p>There should be an office space for the functioning of the council. This can be either in the premises of KSACS or any other place, which is acceptable for the council.</p> <p>Adequate infrastructure facilities need to be set up in the office. Office operational expenses need to be budgeted annually and resources have to be mobilized.</p>
13.4	Meetings	<p>All the meetings of the accreditation council will be organized in the KSACS office. In certain cases it can be organized in the concerned board chairperson's office.</p> <p>Accreditation board will meet once in 6 months and CMC will meet once in 3 months.</p> <p>All the board members will be provided with sitting fees. The accreditation council will meet their travel and other logistics expenses.</p>

13.5	Institutional appraisal support	<p>Joint appraisal team (JAT) consists of one development sector expert, one management expert and one finance expert will be visiting each organization and appraising the capacities based on the defined standards</p> <p>The accreditation board will approve the teams and resource support for the team will be internally or externally mobilized.</p> <p>The members of the JAT will be hired on a professional basis.</p>
13.6	IT support	<p>Each and every process of the council operations will be documented electronically. Systems for effective communications with the support of a IT team also will be set up in the council office and other necessary units.</p> <p>The IT team will be hired on a contract basis and finance for the same can be either budgeted internally or mobilized externally.</p>
13.7	Systems for transparency	<p>A web-based system should be developed to make the council functions transparent. This system can also be utilized for effective communications and information dissemination.</p> <p>Expenses for developing and maintained of such a systems need to be budgeted and resources have to be mobilized.</p>
13.9	Technical support	<p>The technical support for the functioning of the council has to be identified and mobilized. The council has all the right to explore and mobilize resources both externally and internally.</p>
13.10	Financial support	<p>The financial support for the functioning of the council has to be identified and mobilized. The council has all the right to explore and mobilize financial resources both externally and internally.</p>

14. Application form

NGO accreditation/appraisal format

1	Name, address, contact person and other contact details	Give complete details including the email ID.
2	Number and date of registration	Three years registered existence and grading can be done based on the functioning aspects Produce the registration certificate
3	Status of registration	Whether registered as society/trust/company/CBO/others
4	Income tax/FCRA status	Give details of government registrations done – income tax (12A and others), FCRA. Attach copies of the certificates
5	Governance system	Give a brief note on how the governance system functions in the organization – e.g. The nature of board meetings, General council meetings, roles and responsibilities of board members and office bearers, democratic selection process of board members, whether relatives are in the board etc. Attach a copy of the MoA and Bye law of the organization
6	Management systems	The name and experience of CEO, the management structure in the organization, the roles and responsibilities, the monitoring and evaluation systems, The administrative systems, the financial management systems Give a list of team members and their qualifications and their years of association with the organization.

7	Track record	<p>Details of 3 years annual reports, audited statements, infrastructure details, volume of funds handled etc.</p> <p>Attach a copy of last three years programme reports, audited statements and Renewal certificates from the registration office.</p>
8	Areas of expertise	<p>Give a brief note on strengths and proven expertise of the organization – consists of nature of work done in concerned areas/sectors, geographical area of work, outputs achieved, assistance provided to other organizations</p>
9	Human resource	<p>Give a description of all the human resource expertise available in the organization.</p>
10	Research, documentation and capacity building expertise	<p>Proven initiatives by the organization and the clients who accessed the services.</p>
11	Sources of funding for the last three years	<p>Give a list of funding agencies who assisted the organization and nature of funding. E.g. GOK, GOI, Bilateral, UN organizations, other private funding agencies.</p>
12	Credibility of the organization.	<p>Provide external evaluation reports/appraisal reports of any other funded projects.</p> <p>Also give a self-declaration, signed by the chief functionary of the organization saying that the organization not faced any disciplinary/default actions from any organization.</p> <p>Also give details of other accreditations the organization has with other government departments or other organizations.</p> <p>Attach a copy of the certificates for affiliations/awards.</p>

13	Vision, Mission and objectives of the organization	Give a brief note on the vision, mission and objectives of the organization.
14	Future programmes	Give a brief note on next three years organizational plan. If possible produce a copy of the annual plan and budget
15	Organizational support/input provided to the project	Give a brief description on the following points
A	Planning	
B	Setting up	
C	Advocacy	
D	Networking	
E	Capacity building	
F	Implementation	
G	Financial	
H	Other technical support	
16	SWOT analysis of the organization	Give a detailed report of the SWOT analysis.
17	Any other relevant information	If the organization wants to attach any information relevant to the context can provide the information.