Non-U.S. Organization Pre-award Survey

NUPAS PLUS 2.0

TRAINING MANUAL

ASAP II
ACCELERATING SUPPORT TO ADVANCED LOCAL PARTNERS II

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ASAP II
ACCELERATING SUPPORT TO ADVANCED LOCAL PARTNERS II

Table of Contents

ABBREVIATIONS AND ACRONYMS

AAPD	Acquisition and Assistance Policy Directives
AMELP	Activity Monitoring, Evaluation, and Learning Plan
AO	Agreement Officer
AOR	Agreement Officer Representative
ASAP	Accelerating Support to Advanced Local Partners
CDP	Capacity Development Plan
CFR	Code of Federal Regulations
COP	Country Operational Plan
COVID-19	Coronavirus Disease 2019
DOA	Delegation of Authority
EMMP	Environmental Monitoring and Mitigation Plan
FAR	Fixed Asset Register
FPD	Foundation for Professional Development
FY	Fiscal Year
G2G	Government-to-Government
GC	Global Communities
HR	Human Resources
IDIQ	Indefinite Delivery Indefinite Quantity
IT	Information Technology
M&E	Monitoring and Evaluation
MER	Monitoring, Evaluation, and Reporting
MOU	Memorandum of Understanding
MTDC	Modified Total Direct Costs
NICRA	Negotiated Indirect Cost Rate Agreement
NGO	Nongovernmental Organization
NUPAS	Non-U.S. Organization Pre-Award Survey
OVC	Orphans and Vulnerable Children
PEPFAR	President's Emergency Plan for AIDS Relief
RAAP	Required as Applicable Provisions
RDQA	Routine Data Quality Assessment
RMP	Resource Mobilization Plan
SO	Strategic Objective
TA	Technical Assistance

TOR	Terms of Reference
TASC	Technical Assistance Support Contract
USAID	United States Agency for International Development
USG	United States Government

SECTION I: INTRODUCTION

Purpose of this Training Manual

The NUPAS Plus 2.0 Manual and accompanying material are intended to reduce the level of effort needed to carry out a NUPAS Plus 2.0 Assessment.

Intended Audience

The NUPAS Plus 2.0 Manual is intended for those involved in assessing organizations to become prime to receive funding from USAID and other prime funders. The manual is not only intended for local organizations to understand the NUPAS process as they are being assessed by external assessors, but they can also use this manual to learn how to assess their sub-awardees.

Structure and Content

The following items constitute the basic training packet, available online at intrahealth.org/nupas-plus-training-manual-resources. The training plan assumes that participants have copies of these items:

- NUPAS Plus 2.0 Tool in Excel Format
- PowerPoint slide presentation on each module
- Training Agenda (see Appendices)
- Case Study for M&E and Gender and Social Inclusion

SECTION II: BACKGROUND

Accelerating Support to Advanced Local Partners II (ASAP II)

The Accelerating Support to Advanced Local Partners I and II mechanism (ASAP I and ASAP II) is a three-year contract (AID-OAA-I-14-00031) for the United States Agency for International Development (USAID), under the Technical Assistance (TA) Support Contract 4 (TASC4), African Indefinite Delivery/Indefinite Quantity (IDIQ) with a ceiling of $16 million. The ASAP II consortium is headed by IntraHealth International as Prime with partners: Development Alternatives Incorporated (DAI), Foundation for Professional Development (FPD), Global Community (GC), Pact, Sustainability Solutions, and Ona.

The overall purpose of ASAP I and ASAP II is to "Rapidly prepare Local Partners to have the capabilities and resources to serve as Prime Partners for USAID/PEPFAR programming, in compliance with USAID and PEPFAR procedures, for PEPFAR program implementation."

ASAP II has two strategic objectives:

1. Strengthen Local Partners as they transition to receive PEPFAR funding as a USAID Prime Partner to comply with regulations.

2. Prepare Local Partners to directly manage, implement, and monitor PEPFAR programs, and maintain consistent PEPFAR program achievement and quality.

The Non-U.S. Organization Pre-Award Survey

The Non-U.S. Organization Pre-Award Survey (NUPAS)[1] is a USAID assessment tool that provides the agency with the information needed to evaluate the ability of local partners to adequately fulfill the terms of an award (ADS 303 and 2 CFR 200.205). The results from the NUPAS can assist Agreement Officers (AOs) in determining a potential awardee's likelihood for compliance and whether special conditions may be required within the final award document.

USAID conducts NUPAS assessments to determine whether the organization's financial management and internal control systems are adequate to manage, control, account for, and report on the uses of potential USAID funds to protect the U.S. Government from fraudulent practices. USAID can delegate this responsibility to contractors.

The NUPAS has two main objectives:

1. Determine whether an organization has sufficient financial and managerial capacity to manage USAID funds in accordance with U.S. Government and USAID requirements.

2. Determine the most appropriate method of financing to use under the potential USAID award.

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[1] USAID's NUPAS tool is available at www.usaid.gov/sites/default/files/documents/1868/303sam.pdf

The NUPAS focuses on six domains:

1. Legal Structure
2. Financial Management and Internal Control Systems
3. Procurement Systems
4. Human Resources Systems
5. Project Performance Management
6. Organizational Sustainability

The Non-U.S. Organization Pre-Award Survey *Plus*

The ASAP I project developed the NUPAS Plus tool between May and August of 2019 to supplement the original NUPAS and identify root causes of deficiencies and significant weaknesses by adding modules that go beyond the original six areas of assessment. The NUPAS Plus tool was reviewed and validated by a technical working group with members from 15 international non-profit organizations with experience in the specific domains added to the NUPAS Plus. As of August 2023, the NUPAS Plus tool has been used to assess 81 local organizations in 14 countries.

The NUPAS Plus has the following objectives:

1. Determine whether the Non-U.S. Organization has sufficient financial and managerial capacity to manage USAID funds following U.S. Government and USAID requirements.
2. Provide recommendations to USAID on areas of support needed for the local partner to succeed as a prime recipient with increased funding.

The Non-U.S. Organization Pre-Award Survey *Plus 2.0*

In August 2023, the ASAP II project developed the NUPAS Plus 2.0 tool by consolidating the original NUPAS and NUPAS Plus.

The NUPAS Plus 2.0 has the following objectives:

1. Determine whether the Non-U.S. Organization has sufficient financial and managerial capacity to manage USAID funds following U.S. Government and USAID requirements.
2. Provide recommendations to USAID on areas of support needed for the local partner to succeed as a prime recipient with increased funding.
3. Provide baseline data for self and external reassessments.

The NUPAS Plus 2.0 includes the following domains:

1. Legal
2. Finance
3. Risk Management
4. Procurement
5. Property Management
6. Information Technology
7. Human Resources

8.   Monitoring and Evaluation

9.   Gender and Social Inclusion

10. Governance

11. Subaward Management

12. Communications

13. Key Population (KP)

14. Business Development

15. Award Management

16. Sustainability

17. Mandatory Standard Provisions

18. Required as Applicable Provisions

19. Environmental Mitigation and Monitoring

Scale of Assessment

Scoring	Scale	Description
1.0 – 1.5	Inadequate	Significant control weaknesses could expose the organization to significant financial or other losses or otherwise significantly impair its ability to manage USAID funds.
1.51 – 2.5	Weak	Significant control weaknesses exist that could expose the organization to unacceptable/inadequate levels of unmanaged risk.
2.51 – 3.5	Adequate	Although a control weakness was noted, compensating controls and other factors exist to reduce the residual risk within the organization to acceptable levels.
3.51 – 4.0	Strong	Overall, a strong control framework is in place. Some improvements may be recommended. No deficiencies or low risk.

Areas of Improvement Rating Criteria

Business Risk/Impact	High	Medium	Low
Financial: The actual or potential loss will impact the income statement or balance sheet.	Major impact at the Business Unit level. Basic financial controls are missing or not operating effectively, e.g., segregation of duties, lack of authorization limits, or no monthly key account reconciliations. Weakness identified results in significant potential for fraudulent activities.	• Significant impact at the functional level. • Weakness identified results in the potential for fraudulent activities.	• No material control weaknesses. Process improvement identified, which, if implemented, would enhance efficiency.
Reputational: The actual or potential impact on the reputation of the organization.	• Strong likelihood of sustained adverse media coverage. Potential for significant damage to the organization's reputation.	• Specific events that may result in limited negative media coverage. Potential to impact the organization's reputation over time.	Isolated incidents, resulting from manual control deficiencies, that may have a minimal impact on the reputation of the organization.
Legal/Regulatory: Actual or potential impact arising from non-compliance with regulations, legislation, or award conditions.	• Events/breaches resulting in a strong likelihood of fines, censure, or increased levels of supervision by the regulator/donor. Major non-compliance incident.	• Events that may damage the ongoing regulatory relationship and lead the regulator to consider increasing supervision. Significant, but limited non-compliance incident.	Isolated, limited-scope events from which the regulator would not consider the need for additional supervision activity.
Operational: The actual or potential impact results in failure to provide quality service to the stakeholders (staff, clients, regulators, donors, etc.).	• Material systematic errors, omissions, or delays in operational plans, processes, or systems. • Serious operation disruptions. • Non-compliance with established key policies. It impacts the availability and accuracy of critical management information. It impacts a significant project milestone.	• Non-material, systematic errors, omissions, or delays in operational plans, processes, or systems. • Some operation disruptions. • Non-compliance with specific, local policy. • It impacts non-critical or historical management information. It impacts a 'non-significant' project milestone.	• Small, isolated non-systematic errors, omissions, or delays in operational plans, processes, or systems. Minimal production disruption.

Special Award Conditions

If an organization does not meet certain minimum requirements (i.e., scoring a 1-1.5), and otherwise is found responsible, the Agreement Officer (AO) can use Special Award Conditions (SACs) to make the award and provide conditions that allow the organization to meet all of the minimum requirements during the award period. ADS 303.3.9.2 contains USAID's policy for using special award conditions for non-U.S. nongovernmental organizations (NGOs), supplemented by the guidance below.

Examples of SACs:

- The Board of Directors must comply with Professional Standards of Conduct within 30 days.
- Management must plan an organization-wide policy review for alignment and subsequent reform updates within 60 days.
- NGO must provide proof of reconciliation on top-up fuel cards in each quarterly financial report in the new award.
- NGO must hire a dedicated M&E Advisor at HQ and one for the Center of Excellence within 60 days of the new award.
- NGOs must develop and use a timesheet for the organization and provide training in timekeeping within 30 days.

SECTION III:
METHODS AND PROCEDURES

A team of multidisciplinary experts conducts the assessment, which includes:

- Document review
- Interviews (in-person or remote)
- Verification of systems and practices
- Observations
- Analysis of financial statements and records

Steps for Conducting a NUPAS Plus 2.0

1	Review the tool to familiarize yourself with all the domains and categories
2	Send the NUPAS Plus 2.0 tool to the organization so they can familiarize themselves with the assessment questions
3	Send a list of required documents to the local organization two weeks before starting the assessment
4	All assessors sign non-disclosure agreements (NDA) and send them to USAID mission and local organization
5	Create a Dropbox or other file for the local organization to store all the required documents
6	Conduct a desk review of the documents and score all applicable categories
7	Schedule a site visit (or virtual) to a local organization with USAID Mission
8	Hold an initial briefing with USAID without the local organization present
9	Hold an introductory meeting with the senior leadership of the organization, with USAID present
10	Have a discussion on the terms to be included in the Memorandum of Understanding (MOU) to state the expectations and roles of each party
11	Senior officials sign the MOU between assessors and the organization
12	Schedule staff interviews
13	Record all scores in NUPAS Plus 2.0 tool and add comments
Note	All assertions should be analyzed and scored with adequate remarks justifying the score given. If an assertion/assessment area is not applicable, please indicate **N/A in column 1 "Comments for Report"** and provide justification as to why it is not applicable. The overall rating represents the best judgments of those making the assessment after all evidence has been considered.
Note	Upon concluding that an assertion is not applicable, please adjust the formula to eliminate the rating from the average section rating. Otherwise, the average rating will be understated.
15	Hold a ground truthing meeting with local organizations, review scores, and provide an opportunity to clarify any matters they may disagree with. This step can lead to changing scores when additional information is provided

16	Prepare report
17	Submit the report within two weeks of the assessment
18	Schedule a time to reassess the organization and repeat the NUPAS Plus 2.0

Lessons Learned in Conducting Assessments

Experience with Local Organizations

- Generally, there is a lot of cooperation in providing documents and information. Senior management tends to be keenly involved in the review process.

- LIPs are eager to improve their systems to be ready to work with USAID. This includes the readiness to accept and implement recommendations from the review. Some recommendations were implemented during the review, even before the NUPAS report was shared with the organization and USAID.

- The more the LIPs are reviewed, the more efficient assessors become.

- Administering the tool is a learning process for LIP improvements identified and for making recommendations that aid in the efficient administration of USAID projects.

- The Sustainability Domain includes key criteria for rapid reassessments.

Experience with the Missions

- There is great cooperation for the smoothness of the review regarding administration and information requests.

- Missions appreciate recommendations on SACs and apply them to new awards.

- Missions show commitment to assisting the IPs to reach the acceptable standards to properly administer USAID programs.

- Mission staff are willing to provide relevant material for local country legal requirements.

- Mission staff are keen to learn about the NUPAS Plus 2.0 tool and how to manage local organizations.

SECTION IV: NUPAS PLUS 2.0 TOOL AND MODULES

Download the NUPAS Plus 2.0 Tool online at intrahealth.org/nupas-plus-training-manual-resources

The NUPAS Plus 2.0 domains:

1. Legal
2. Finance
3. Risk Management
4. Procurement and Logistics
5. Property Management
6. Information Technology
7. Human Resources
8. Monitoring and Evaluation
9. Gender and Social Inclusion
10. Governance
11. Subaward Management
12. Communications
13. Key Populations
14. Business Development
15. Award Management
16. Sustainability
17. Mandatory Standard Provisions
18. Required as Applicable Provisions
19. Environmental Mitigation and Monitoring

MODULE 1: LEGAL

Background:

This domain requires a lot of background reading, including the relevant legislation and internal registration and governance documents.

Estimated time for execution of this domain: 11 hours (including the background reading)

Skills and experience required for effective execution of this domain: an assessor with more than three years of experience in corporate governance or corporate governance reviews. Ideally, the assessor must have a fair understanding of the local corporate laws.

Overall Objective:

To assess if the organization complies with the local legal registration requirements and has adequate and effective management and governance structures in place.

NUPAS Legal Domain Categories:

1. **Local Organization Definition**
2. **Legal Requirements**
3. **Organizational Structure**
4. **Governance**
5. **Control Environment**

NUPAS Plus 2.0 Legal Domain Categories:

6. **Subawards**
7. **Pre-award Questionnaire**
8. **Agreement**
9. **Compliance**
   1. Monitoring
   2. Audit
   3. Tracking
   4. Taxes
   5. Delegation of Authority
   6. Lawsuits

Procedures to be undertaken for the Legal Domain:

- Document review (Estimated time required: 9 hours)
- Interviews (Estimated time required: 2 hours)

Documents to be requested for effective review of Legal:

- Refer to the "Documents list" tab in the NUPAS Plus 2.0 tool.

Members to be considered for Interviews:

- Executive Director/Chief Executive Director.

- Finance Director/Chief Financial Officer
- Head of Legal
- Company Secretary
- Board Chairperson or other Board Member(s)

NUPAS PLUS 2.0 LEGAL EXAMPLE

CATEGORY/SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Local Organization Definition	Confirm if the organization meets the PEPFAR definition of a local organization	Organization Registration Documents Management profiles and CVs Board member profiles and CVs
Legal Requirements	Confirm compliance with legal registration requirements and other material licenses, permits, laws, and regulations. Verify lawful registration by obtaining Deeds of trust/ Articles of association/ Memorandum of incorporation/ NPO certificate, and that appropriate permit is in place (for the type of industry NGO is working in).	Company registration documents Permits/Licenses for the type of industry (NGO) Tax registration documents Tax - letter of good standing? Environmental compliance, if applicable?
Organizational structure	Confirm that the organization's charter, by-laws, and other foundational/operational documents support its mission and goals. Confirm if departmental/functional roles and responsibilities and lines of communication are clearly defined.	Organization's Charter/By-laws/ Approved organizational chart. Mission Statement

Governance		Confirm that the organization emphasizes the importance of and practices good corporate governance in all key areas.	Governance Manual Board Charter Board subcommittee Terms of Reference
Control Environment		Confirm that adequate safeguards exist within the organization to ensure fidelity to fiduciary obligations and prevent officials from obtaining financial or non-financial benefits based on decisions made or actions taken in their official capacity.	Board member Conflict of Interest Declarations Governance Manual Board Charter
Subawards		Confirm whether there is a documented system for managing sub-grants.	Grants and Subaward Management Manual
Pre-award questionnaire		Confirm whether there is a pre-award questionnaire/process that the organization administers to select sub-awardees.	Pre-award Questionnaire/ Pre-award risk assessment
Agreement		Confirm whether there is a signed agreement/contract in place for each award and whether all program staff are oriented on the terms and conditions, and standard provisions.	Signed agreement(s)/contract(s) for all award(s)
Compliance	Monitoring	Confirm that there are documented procedures for monitoring local organizations and contractors that are consistently applied.	Documented procedures for monitoring local organizations and contractor
	Audit	Confirm that the organization fully complies with the terms and conditions of the awards.	Audit reports
	Tracking	Confirm that the organization has a tracking mechanism in place and a responsibility assigned for donor reports and award compliance.	Monitoring reports

	Taxes	Confirm if the organization complies with tax regulations.	Local Tax legislation documents Tax Clearance Certificates
	Delegation of Authority	Confirm if there is a policy on delegation of authority within the organization.	Delegation of Authority
	Lawsuits	Confirm that there are no disqualifying legal issues or risks relating to the organization, its partners, or project, through verifications in due diligence databases (where available), and those to determine any links to terrorism, tobacco, or arms industries.	Vetting Clearance Proof

1.1 Local Organization Definition

Objective(s): To confirm compliance with USAID's "local organization" definition [only applicable if the Mission intends to limit competition to local organizations].

Procedures:

- Review the profiles of management and Board members to verify if the organization meets the PEPFAR definition of a local organization.
- Review the organization's registration documents to verify if the organization meets the PEPFAR definition of a local organization.

1.2 Legal Requirements

Objective(s): To confirm compliance with legal registration requirements and other material licenses, permits, laws, and regulations.

Procedures:

- Review local legislation and understand the registration and permit/license requirements for the organization.
- Obtain and review the organization's registration documents to verify if the organization meets the local registration requirements.
- Obtain and review the organization's permits and licenses to verify if legislative requirements have been met.
- Verify lawful registration by obtaining Deeds of trust/ Articles of association/ Memorandum of incorporation/ NPO certificate, and that appropriate permit is in place (for the type of industry NGO is working in).

1.3 Organizational Structure

Objective(s): To confirm that the organization's charter, by-laws, and other foundational/operational documents support its mission and goals.

Procedures:

- Review the organization's mission statement and verify that it supports the accomplishment of the vision.

- Inspect the organizational charter for definitions of departmental/ functional responsibilities and the authority of project managers.

- Obtain the organizational chart and confirm, through a board resolution/board chairperson's signature, that the board approved it.

- Review the organizational charter and organizational chart to verify that there are no contradictions/inconsistencies.

1.4 Governance

Objective(s): To confirm that the organization emphasizes and practices good corporate governance in all key areas.

Procedures:

- Interview relevant senior management officials to understand the organizational structure; then obtain the organizational chart.

- Review the organization's Board Charter/Terms of Reference (TOR) and verify that it aligns with the legal requirements.

- Verify if the roles and responsibilities of the board and its terms are clearly defined in the charter.

- Review the charter to determine if it addresses the ethical behaviors of the board, including the requirement for Declarations of Interest or Conflict of Interest.

1.5 Control Environment

Objective(s): To confirm that adequate safeguards exist within the organization to ensure fidelity to fiduciary obligations and prevent officials from obtaining financial or non-financial benefits based on decisions made, or on actions taken in their official capacity.

Procedures:

- Review the Board Charter or Terms of Reference and test for adequacy.

- Review the charter and verify if fiduciary obligations are addressed.

- Verify if the board's terms and election/appointment and removal of board members are addressed in the charter.

- Obtain the Declarations of Interest for Board Members and verify if they have been appropriately completed and signed.

1.6 Subawards

Objective(s): To confirm that the organization has a documented system in place for managing sub-grants.

Procedure:

- Inquiry with management.

1.7 Pre-award Questionnaire

Objective(s): To confirm that the organization has a pre-award questionnaire/process for selecting sub-awardees.

Procedure:

- Inquiry with management.

1.8 Agreement

Objective(s): To confirm whether there is a signed agreement/contract in place for each award and all program staff are oriented on the terms and conditions, and standard provisions.

Procedures:

- Sign agreements for the existing awards.

1.9 Compliance

Objective(s): To confirm that the organization complies with the terms and conditions of award(s), including payroll tax, VAT, and other applicable tax regulations; and has documented procedures for monitoring local organizations and contractors, a policy on delegation of authority, and a tracking mechanism for donor reports and award compliance.

Procedures:

- Contract management - inquiry with management.
- inquiry with management and audit reports.
- Inquiry with management and monitoring reports.
- Checking compliance with the terms and conditions of the award(s).

1.9.1 Monitoring

Objective(s): To confirm that there are documented procedures for monitoring local organizations and contractors that are consistently applied.

Procedure:

- Contract management - inquiry with management.

1.9.2 Audit

Objective(s): To confirm that the organization fully complies with the terms and conditions of the awards.

Procedure:

- Audit reports, and inquiry with management.

1.9.3 Tracking

Objective(s): To confirm that the organization has a tracking mechanism in place and a responsibility assigned for donor reports and award compliance.

Procedure:

- Inquiry with management and monitoring reports.

1.9.4 Taxes

Objective(s): To confirm that the organization consistently complies with payroll tax, VAT, and other applicable tax regulations.

Procedure:

- Inquiry with management on regulations for income/payroll taxes.

1.9.5 Delegation of Authority

Objective(s): To confirm that there is a policy on delegation of authority in place and is implemented.

Procedure:

- Inquiry with management.

1.9.6 Lawsuits

Objective(s): To confirm that there are no disqualifying legal issues or risks relating to the organization, its partners, or project, through verifications in due diligence databases (where available), and to determine any links to terrorism, tobacco, or arms industries.

Procedure:

- Vetting process.

Key Risks to be Considered

1. Lack of proper registration to comply with all relevant legal requirements.

2. Noncompliance with legal and governance requirements.
   (Noncompliance with some governance requirements is a common gap identified from reviews.)

Criteria and Possible Client Responses: Delegation of Authority

1	2	3	4 (Highest Score)
INADEQUATE CAPACITY Key Deficiencies and Significant Weaknesses Not Remediable Before Award	**WEAK CAPACITY** Some Deficiencies and Significant Weaknesses Not Easily Remediable Before Award	**ADEQUATE CAPACITY** No Deficiencies, Significant Weakness Remediable Before Award	**STRONG CAPACITY** No Deficiencies or Significant Weaknesses
High Risk	Moderate to High Risk	Low to Moderate Risk	Low Risk
ASSESSMENT CRITERIA			
There is no policy on Delegation of Authority within the organization.	A policy on Delegation of Authority is in place, but it is not followed at all.	A policy on Delegation of Authority is in place, but it is not implemented consistently.	The organization has a policy on Delegation of Authority, and it is consistently implemented.
CLIENT'S RESPONSE			
There is no documented Delegation of Authority policy in the organization, and there are no plans in place to implement it.	A Delegation of Authority is not in place	A Delegation of Authority Policy was recently approved by the board but is not being consistently implemented. A review of the procurement documents revealed that some approvals were not aligned with the Delegation of Authority and policy requirements.	An approved Delegation of Authority is in place. A review of the procurement, payroll, and payment transactions, as well as recruitment activities and a review of board meeting minutes, revealed that the delegation of authority is consistently implemented.

In some instances, it may not be accurate to assign a full integer score (1, 2, 3, or 4). Below are examples with suggested scores:

- A Delegation of Authority (DOA) is in place, but it is in draft form and has not yet been implemented. **Appropriate rate: 1.5**
- The Delegation of Authority is in place and is mostly implemented. We identified one scenario from the Procurement review where approval of procuring a motor vehicle was done by the Finance Director instead of the Executive Director, as required by the DOA. As per the DOA requirements, the other ten sampled transactions were approved. **Appropriate rate: 3.75**

Assessor: Do you have an approved Delegation of Authority (DOA) in place?

Management: Yes, we do have a DOA in place.

Assessor: It is not among the documents that you have shared with us. May we please request you share the DOA?

Management: They are in the policies and procedures that we have already shared with you.

Assessor: Which policies and procedures should we refer to?

Management: There are approval thresholds in the Procurement, Policy, Finance, Payroll, HR, and Travel policies. These were reviewed by the Statutory Auditors last month, and they were happy with the delegation of authority.

Assessor: But a DOA should be approved by the board.

Management: Yes, the board approved all our policies and procedures, and we can show you the approved copies.

Assessor: Do your policies set out the following:
- o Matters reserved explicitly for determination by the Board and those matters delegated to management.
- o Matters reserved for specific roles in the organization.
- o Expense approval limits by role?

Management: Not really, but our different policies cover most of what you are referring to in your question.

Assessor: We understand that there are approval thresholds in the various policies and manuals, but a DOA is a document specifically established or approved by the board for the matters that I have addressed above. It is one document with all approvals (financial and non-financial) that are assigned to different roles or bodies (like committees) in the organization. It is usually reviewed annually and approved by the board. The approval limits in the DOA are then included in the relevant policies as thresholds.

Management: Oh, ok. No, we do not have the DOA that the board approves. But we still have some approval thresholds covered in various policies.

Assessor: The DOA as a governance document is not replaced by the different policy approvals. Therefore, we will assign a score of 1, as the DOA is not currently in place.

Management: We understand. We will make sure that we prepare the DOA for review and approval by the board.

MODULE 2: FINANCE

BACKGROUND:

This domain requires a review of the Finance Policy and procedures, to assess the adequacy of the policy, the design of the internal controls, and whether they are implemented as designed.

Estimated time for execution of this domain: 45 hours (including the background reading)

Skills and experience required for effective execution of this domain: an assessor with more than three years of experience in accounting and financial management.

OVERALL OBJECTIVE:

To assess the adequacy of financial management policies and procedures and determine if internal controls are in place.

NUPAS Financial Management and Internal Controls Categories:
1. **Banking Relationship and Accounts**
2. **Accounting/Bookkeeping System**
3. **Chart of Accounts, General Ledger, and Financial Statements**
4. **Variance Analysis (Budget to Actual Cost)**
5. **Allowable and Unallowable Cost**
6. **Direct and Indirect Cost**
7. **Payments – Segregation of Duties**
8. **Accounting Cycle – Segregation of Duties**
9. **Financial Records Management**
10. **Sources of Funding**
11. **Financial Reporting**
12. **Audit and Review of Financial Statements**
13. **Financial Management Personnel**

NUPAS Plus 2.0 Finances
14. **Budget**
    1. Annual Budget
    2. Staff involvement
    3. Planned Activities
    4. Budget Notes
    5. Donor Budgets
    6. Board Approval
    7. Budget Manager
    8. Adequately Funded

15. **Cost Allocations**
    1. Indirect Costs
    2. Cost Allocation Policy
    3. Authorized Payments

16. **Documentation**
    1. Documentation
    2. Pre-Numbered Receipts
    3. Records
    4. Cross Referencing
    5. Monthly Updates

17. **Advance Payments**
    1. Reconciliation
    2. Proof of Payment
    3. Financial and Narrative Reports

18. **Petty Cash**
    1. Vouchers
    2. Petty Cashbox
    3. Daily Reconciliations
    4. Monthly Reconciliations
    5. SOPs
    6. Requests
    7. Documentation

NUPAS PLUS 2.0 FINANCE EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Banking Relationship and Accounts	Confirm that the organization has a banking relationship with a registered commercial bank in-country and that the organization has adequate policies, procedures, and practices in place to ensure regular reconciliation of bank accounts with the accounting records.	Financial Management Policies/Procedure Manuals Bank Reconciliations
Accounting/ Bookkeeping System	Confirm that the organization has an accounting/ bookkeeping system and that financial transactions are entered into the system consistently per applicable standards, policies, and procedures.	Financial Management policies/procedures/ manuals Chart of Accounts
Chart of Accounts, General Ledger, and Financial Statements	Confirm that the organization has a chart of accounts and a corresponding general ledger used to prepare financial statements on a regular and consistent basis (unallowable costs).	Financial Management Policies/Procedure Manuals Chart of Accounts Financial Reports

Variance Analysis (Budget to Actual Cost)	Confirm that the organization has adequate policies, procedures, and practices in place to ensure regular variance analysis (budget to actual cost) of the program and operating financial data, consistently review financial reports and take corrective action, and <u>Appropriate</u> financial reports are accompanied by budget data and variance analysis (budget to actual cost) reports.	Financial Management Policies/Procedure Manuals Financial Reports
Allowable and Unallowable Cost	Confirm that the organization has adequate policies, procedures, and practices in place to segregate allowable and unallowable costs and to otherwise satisfy donor requirements.	Financial Management Policies/Procedure Manuals
Direct and Indirect Costs	Confirm that the organization's accountants/bookkeepers understand direct costs and indirect costs (including cost allocation principles).	Financial Management Policies/Procedure Manuals
Payments - Segregation of Duties	Confirm that the organization has policies, procedures, and practices in place regarding the segregation of duties to ensure that funds above a certain threshold can only be disbursed with dual signatures and are supported by documentation.	Financial Management Policies/Procedure Manuals
Accounting Cycle - Segregation of Duties	Confirm that the organization has adequate policies, procedures, and practices in place to ensure proper segregation of duties associated with the accounting cycle	Financial Management Policies/Procedure Manuals
Sources of Funding	Confirm that the organization has other activities/programs and/or potential sources of funding adequate for the continuity of operations during the period of the award and for long-term sustainability.	Financial Reports
Financial Reporting	Confirm that the organization has adequate written policies, procedures, and practices in place to produce reliable monthly and year-to-date financial	Financial Management Policies/Procedure Manuals

		statements (income and expenditure report and balance sheet).	
Audit and Review of Financial Statements		Confirm that the organization has adequate policies, procedures, and practices in place to ensure that its financial statements are audited or reviewed regularly by a third party recognized under the laws of the country, such as a chartered accounting firm or regulatory body, or both.	Financial Management Policies/Procedure Manuals Audit Reports
Financial Management Personnel		Confirm that the individuals responsible for discharging accounting and other financial management functions within the organization have the requisite accounting and other financial management qualifications and experience.	Curriculum Vitae (CV) and Qualification Certificates
Financial Records Management		Confirm that the organization has adequate policies, procedures, and practices in place to ensure proper filing and management of financial records and their ease of access.	Financial Management Policies/Procedure Manuals Contingency Plan
Budgeting & Budgetary Controls	Annual Budget	Confirm that there is a documented guide for budgeting and that the annual organizational budget is prepared, reviewed, and approved on time.	Financial Management Policies/Procedure Manuals Budget(s) and Board review and approval
	Staff involvement	Confirm that both finance and program staff are involved in budget preparation.	Budgeting procedure/process documentation
	Planned Activities	Confirm that project activities are always based on the costs of planned activities as budgeted.	Annual budget(s)
	Budget Notes	Confirm that budgets include budget notes and clear calculations.	Annual budget(s)

	Donor Budgets	Confirm that separate budgets are always prepared for each donor and project.	Annual budget(s) Project budget(s)
	Board Approval	Confirm that organizational annual budgets are always reviewed and approved by the Board of Trustees.	Documentation of Board approval of the annual budget(s)
	Budget Manager	Confirm that there is an assigned individual (budget manager) who is responsible for implementing and managing each budget.	Documented budgeting and budgetary process
	Adequately funded	Confirm that all planned operational costs are adequately funded.	Annual operational budget(s)
Cost Allocations	Indirect Costs	Confirm that there is an approved negotiated indirect cost rate agreement/10% de minimis supported by the issuing agency's letter of approval, for indirect costs being charged to the project.	Approved negotiated indirect cost rate agreement/10% de minimis The issuing agency's letter of approval
	Cost Allocation Policy	Confirm that a Cost Allocation Policy is in place and consistently applied when allocating shared costs.	Cost Allocation Policy Supporting documents for a sample of shared costs
	Authorized Payments	Confirm whether the Finance Manual/Policy provides guidance on the organization's financial transactions, whether the signatories authorize payments and checks as per the policy, and whether there are adequate controls for receiving and depositing cash.	List of payments and approvals for the past 6 months
Documentation	Documentation	Confirm that every payment has sufficient and appropriate supporting documentation.	List of payments/transactions and supporting documents for the past 6 months
	Pre-numbered Receipts	Confirm that all cash or checks received are recorded on pre-numbered receipts.	Pre-numbered payment receipts/checks

	Records	Confirm that all payments and receipts are recorded in cashbooks (date, description, amount).	Cashbook
	Cross Referencing	Confirm that every entry into the cashbook is cross-referenced to a supporting document.	Cross-referenced documentation of payments on the cashbook for the last 6 months
	Monthly Updates	Confirm that all cashbooks are updated at least once a month.	Cashbook for the last 6 months
Advance Payments	Reconciliation	Confirm that all expense claims for staff advances are checked against the advance amounts and reconciled.	Advances Reconciliation Documentation/Reports
	Proof of Payment	Confirm that there is documentation proving the staff members have actually received the requested advances.	Proof of advance payments
	Financial and Narrative Reports	Confirm the preparation of quality financial and narrative reports to the donor and AFS regularly.	Financial and narrative reports
Petty Cash	Vouchers	Confirm that the supporting documentation for petty cash disbursements has a Payee.	Petty cash vouchers issued in the past 6 months
	Petty Cashbox	Confirm that the cash is kept safely in a locked cashbox or safe in the custody of one specific individual.	Inspection of cashbox
	Daily Reconciliations	Confirm that the physical petty cash count is made regularly (weekly/monthly) and is checked by a senior staff member and documented.	Supporting document
	Monthly Reconciliations	Confirm that a reconciliation of petty cash is done at least monthly.	Supporting document
	SOPs	Confirm that all disbursements are made within the predetermined maximum amount for petty cash disbursements.	Petty cash policy & SOP

	Requests	Confirm that the supporting documentation for disbursements contains the description of disbursements.	For a sample of payment disbursements, inspect the supporting documents
	Documentation	Confirm that the supporting documentation for disbursements shows the date of disbursement.	For a sample of payment disbursements, inspect the supporting documents

2.1 Banking Relationship and Accounts

Objective(s): To confirm that the organization has a banking relationship with a registered commercial bank in the country and has adequate policies, procedures, and practices in place to ensure regular reconciliation of their bank accounts with the accounting records.

Procedures:

- Review the Finance Manual/Policy to confirm whether there is an adequately documented process for opening and closing bank accounts, and the requirement for frequent reconciliations of all bank accounts.

- Confirm that the organization's bank accounts are "free and clear" of board members, officers, or employees' personal funds.

- Confirm whether the bank accounts are with a registered commercial bank and in the name of the organization.

- Confirm the preparation, review, and approval of bank reconciliations per the Finance Manual/Policy guidance.

- Inquire into the organization's action on reconciling outstanding items and confirm that all have been reconciled.

2.2 Accounting/Bookkeeping System

Objective(s): To confirm that the organization has a reliable double-entry accounting/ bookkeeping system that meets its needs and is otherwise appropriate; that financial transactions are entered into the system consistently, per applicable standards, policies, and procedures on a daily basis; and that system has functionalities to automatically reconcile subsidiary ledger to the main ledger.

Procedures:

- Confirm that the organization has a double-entry accounting/bookkeeping system and that financial transactions are entered into the system consistently in accordance with applicable standards, policies, and procedures.
- Is the system consistently used, as well as in accordance with GAAP?
- Are transactions recorded timely and consistently?
- Does the system have the functionality to automatically reconcile summaries of transactions to detailed transactions (or is it done manually)?

- Are entries adequately cross-referenced to source documents?
- Are subsidiary ledgers reconciled to the main ledger (manually/automatically)?

Note: For very small organizations and awards, a manual (handwritten in books) double-entry accounting system may be acceptable provided it is established and used regularly and consistently in accordance with acceptable accounting principles, standards, policies, procedures, and practices and is regularly kept up to date, reconciled and reviewed by appropriately trained, experienced, and otherwise competent personnel.

2.3 Chart of Accounts, General Ledger, and Financial Statements

Objective(s): To confirm that the organization has a chart of accounts and a corresponding general ledger used to prepare financial statements on a regular and consistent basis (unallowable costs).

Procedures:

- Review the adequacy of the organization's Chart of Accounts.

- Confirm whether the organization's Chart of Accounts corresponds to the general ledger.

- Confirm whether the general ledger numbering system follows (if any) statutory requirements.

- Confirm whether the organization prepares regular financial statements using an acceptable (national /international) accounting standard.

- Ask the organization about their understanding of unallowable costs and how they keep track of them.

2.4 Variance Analysis (Budget to Actual Cost)

Objective(s): To confirm that the organization has adequate policies, procedures, and practices in place to ensure regular variance analysis (budget to actual cost) of the program and operating financial data, consistently review financial reports and take corrective action, and Appropriate financial reports are accompanied by budget data and variance analysis (budget to actual cost) reports.

Procedures:

- Verify that the organization has appropriate policies, procedures, and practices in place to ensure appropriate regular variance analysis (budget to actual cost) of the program and operating financial data.
- For funds transferred to other programs, verify that these are made in compliance with award conditions/ internal rules if award conditions are not applicable.
- Review the organization's Finance Manual/Policy for the requirement of frequent budget vs. actual analysis of financial reports.
- Confirm preparation of the budget vs. actual analysis financial reports per the Finance Manual/Policy guidance for both program and operating activities.
- Review the adequacy of the budget vs. actual financial reports.
- Verify that program managers consistently review financial reports and take corrective action, including reporting in agreement with existing reward conditions.
- Confirm the discussion of the budget vs. actual financial reports during frequent management meetings.

2.5 Allowable and Unallowable Cost

Objective(s): To confirm that the organization has adequate policies, procedures, and practices to segregate allowable and unallowable costs, and to satisfy donor requirements.

Procedures:

- Ask the organization's management about their understanding of allowable, allocable, and reasonable costs.

- Inquire with the organization's management about the procedures in place to avoid duplicate payments.

- Verify whether a sample of the project expenditure transactions was confirmed to be allowable before processing against a project.

- Confirm whether the program teams receive induction training at inception, including training on allowable and unallowable costs.

- Verify whether the organization, especially the finance team, receives frequent training on the USG Rules and Regulations, including the Cost Principles.

2.6 Direct and Indirect Cost

Objective(s): To confirm that the organization's accountants/bookkeepers understand direct and indirect costs (including cost allocation principles).

Procedures:

- Review the adequacy of the organization's Cost Allocation Policy/ Section in the Finance Manual, which guides cost allocation.

- Confirm whether the organization's accounting unit clearly understands direct costs, indirect costs, and cost allocation principles.

- Check a sample of shared costs to confirm fair allocation to the cost objectives.

- Review the finance team's resumes to assess whether they are sufficiently qualified and experienced for project accounting.

2.7 Payments – Segregation of Duties

Objective(s): To confirm whether the organization has policies, procedures, and practices regarding the segregation of duties to ensure that funds above a certain threshold can only be disbursed with dual signatures and are supported by documentation.

Procedures:

- Review the adequacy of the payment process per the Finance Manual/Policy. (Thresholds for payments, authorized signatories, payment request and approval process, audit trail.)

- Check a sample of payments to see if they were made per the Finance Manual/Policy.

- Confirm the segregation of duties between procurement, accounting, and payment (different employees responsible for purchases, receiving merchandise and services, approving payment vouchers, preparing checks, signing checks, and reconciling bank accounts).

2.8 Accounting Cycle – Segregation of Duties

Objective(s): To confirm that the organization has adequate policies, procedures, and practices to ensure proper segregation of duties associated with the accounting cycle.

Procedures:

- Review the adequacy of the accounting cycle per the Finance Manual/Policy (segregation of duties between preparing, reviewing, and approving financial transactions, and capturing and posting financial transactions).

- Obtain an understanding of the organization's accounting cycle.

- Review a sample of transactions to determine the trail of segregation of duties for the accounting cycle (documents showing preparer, reviewer, approver, etc.).

2.9 Financial Records Management

Objective(s): To confirm that the organization has adequate policies, procedures, and practices to ensure proper filing and management of financial records and ease of access to those records.

Procedures:

- Review the adequacy of the organization's records retention policy.

- Verify whether the record retention period per the organization's policy aligns with the legislation and other regulatory requirements in the region.

- Confirm that the organization has procedures in place for the backup and recovery of important documents.

- Confirm that the organization's documents are available in their storage/archiving facilities for the records retention policy period.

- Ask the organization what controls are in place to keep track of the documents in storage.

- Confirm whether the organization has a contingency plan in place for financial and operational continuity.

- Verify a sample of transactions selected for testing during the review to determine whether sufficient and appropriate documents support them.

2.10 Sources of Funding

Objective(s): To confirm that the organization has other activities/programs or potential funding sources adequate for the continuity of operations during the award period and for long-term sustainability.

Procedures:

- Ask the organization about their funding sources and how they keep track of the various sources, if applicable.

- Confirm whether the organization has a documented business development process (Resource Mobilization Strategy) that guides the organization's resource mobilization efforts.

- Confirm whether business development is an active responsibility of a specific unit/team/individual in the organization.

- Review the finance team's resumes to assess whether the team is sufficiently qualified and experienced for project accounting.

2.11 Financial Reporting

Objective(s): To confirm that the organization has adequate written policies, procedures, and practices in place to produce reliable monthly and year-to-date financial statements (income and expenditure report and balance sheet).

Procedures:

- Review the adequacy of the Finance Manual/Policy procedures related to financial reporting and verify the frequency of different reports (e.g., donor reports, management reports, financial statements, etc.).

- Review management meeting minutes to confirm the discussion of the financial reports and the actions taken on agreed-upon points.

- Verify with management what procedures are in place for the timely submission of project financial reports.

- Review the sufficiency of management's financial reports.

2.12 Audit and Review of Financial Statements

Objective(s): To confirm that the organization has adequate policies, procedures, and practices to ensure that its financial statements are audited or reviewed regularly by a third party recognized under the country's laws, such as a chartered accounting firm, regulatory body, or both.

Procedures:

- Confirm whether the Finance Manual/Policy requires an annual audit of the organization's financial statements by an independent external auditor.

- Verify that the auditor is registered with the auditors' regulatory board of the country.

- Review the audit reports for the auditor's opinion (Qualified/Adverse/or Disclaimer Opinions in the past three years) and any findings raised.

- Confirm the timely implementation of the auditors' recommendations for findings raised during the audit(s), and documented guidance in the organization's Finance Manual/Policy.

2.13 Financial Management Personnel

Objective(s): To confirm that the individuals responsible for discharging accounting and other financial management functions within the organization have the requisite accounting and other financial management qualifications and experience.

Procedures:

- Review the resumes of the finance team members to assess their qualifications and experience.

- Confirm the ability of the finance team/accountant to monitor operational and project budgets.

- Compare the relevant qualifications on the finance team members' resumes to the copies of their qualification certificates and ensure a match.

- Confirm whether the finance team/accountant can prepare cash flow projections and statements.

2.14 Budget

Objective(s): To confirm that the organization sufficiently documents budgeting procedures and budgetary controls, which it consistently applies during operations.

Procedures:

- Review the adequacy of the budgeting process and budgetary controls as per the Finance Manual/Policy, including the following:
  - Preparation, review, and approval process
  - Frequency of budget and budgetary controls
  - Timelines for preparation, review, and approval of the budget
  - Consideration of cost objectives in the budgeting process

- Confirm whether the most recent budget was reviewed and approved per the Finance Manual/Policy.

- Confirm the implementation of the budget monitoring procedures, including the following:
  - The organization confirms the availability of budget line items before making a transaction.
  - Budget vs. actual expenditure reports, which management discusses.

2.14.1 Annual Budget

Objective(s): To confirm that the annual organizational budget is prepared, reviewed, and approved on time.

Procedure:

- Documented budgeting and budgetary process.

2.14.2 Staff involvement

Objective(s): To confirm that both finance and program staff are involved in budget preparation.

Procedure:

- Either based on the documented business process or inquiries with management.

2.14.3 Planned Activities

Objective(s): To confirm that project activities are always based on the costs of planned activities as budgeted.

Procedure:

- Annual Budget(s).

2.14.4 Budget Notes

Objective(s): To confirm that budgets include budget notes and clear calculations.

Procedure:

- Annual Budget(s).

2.14.5 Donor Budgets

Objective(s): To confirm that separate budgets are always prepared for each donor and project.

Procedure:

- Inquiry and inspection of annual budgets.

2.14.6 Board Approval

Objective(s): To confirm that organizational annual budgets are always reviewed and approved by the Board of Trustees.

Procedure:

- Evidence of Board approval of the annual budget(s).

2.14.7 Budget Manager

Objective(s): To confirm that there is an assigned individual (budget manager) who is responsible for implementing and managing each budget.

Procedure:

- Inquiry with management / Documented budgeting and budgetary process.

2.14.8 Adequately Funded

Objective(s): To confirm that all planned operational costs are adequately funded.

Procedure:

- Annual operational budget(s).

2.15 Cost Allocations

Objective(s):

- To determine whether shared costs are allocated equitably across funded activities.
- To determine if the organization receives the 10% de minimis.
- To determine if Negotiated Indirect Cost Rate Agreement (NICRA) applies, and whether it is calculated correctly.

Procedures:

- Recalculate allocation per the Cost Allocation Policy guide to establish a sample of shared costs.

- Confirm whether the award agreement for financial reports that have 10% de minimis or NICRA includes that 10% de minimis or NICRA.

- Review the calculation for the modified total direct costs (MTDC) to confirm the accuracy of the inputs.

- Review the organization's Cost Policy statement for the donor's approval.

- Review the indirect costs of the NICRA for alignment with the approved Cost Policy Statement.

2.15.1 Indirect Costs

Objective(s): To confirm that there is an approved negotiated indirect cost rate agreement/10% de minimis supported by the issuing agency's letter of approval, for indirect costs being charged to the project.

Procedure:

- Inquiry with management.

2.15.2 Cost Allocation Policy

Objective(s): To confirm that the Cost Allocation Policy is consistently applied when allocating shared costs.

Procedure:

- Inquiry with management.

2.15.3 Authorized Payments

Objective(s): To confirm whether the Finance Manual/Policy provides guidance on the organization's financial transactions, whether the signatories authorize payments and checks as per the policy, and whether there are adequate controls for receiving and depositing cash.

Procedures:

- Confirm whether at least two signatories authorize check payments or wire transfers.
- If the organization receives cash receipts, inquire about the procedures for receiving and banking the cash to confirm the documentation of the process in the organization's Finance Manual/Policy, as well as with a sample of receipts.

2.16 Documentation

Objective(s): To confirm whether the Finance Policy requires sufficient documentation for all financial transactions.

Procedures:

- Verify if there are sufficient and appropriate supporting documents to support a sample of payments/transactions from the general ledger.
- Confirm the transaction reference in the general ledger to the supporting documents.
- For a sample of cash receipts, confirm the recording on the pre-numbered receipt book.

- For a sample of transactions from the bank statement, verify the timely recording in the cashbook, including the accurate description and amount.

2.16.1 Documentation

Objective(s): To confirm that every payment has a supporting document.

Procedure:

- Request for a payment listing for the past 6 months and verify that they indeed have supporting documents.

2.16.2 Pre-Numbered Receipts

Objective(s): To confirm that all cash or checks received are recorded on pre-numbered receipts.

Procedure:

- Request some recent payments made and checks received (as maybe the practice) and verify that these are indeed pre-numbered.

2.16.3 Records

Objective(s): To confirm that all payments and receipts are recorded in cashbooks (date, description, amount).

Procedure:

- Records should have a cross-reference to the supporting document.

2.16.4 Cross Referencing

Objective(s): To confirm that every entry into the cashbook is cross-referenced to a supporting document.

Procedure:

- Cashbook for the past 6 months.

2.16.5 Monthly Updates

Objective(s): To confirm that all cashbooks are updated at least once a month.

Procedure:

- Request the cashbook for the past 6 months.

2.17 Advance Payments

Objective(s): To confirm whether the organization has documented procedures for managing business advances, including sufficient controls to account for funding advanced to staff members.

Procedures:

- Confirm documentation of the process for business advances (salary, travel, loans, etc.) in the Finance Manual/Policy.
- Review the process's adequacy, including request and approval, confirmation of receipt, and accounting/liquidation.
- For a sample of business advances, confirm compliance with the Finance Manual/Policy requirements.

2.17.1 Reconciliation

Objective(s): To confirm that all expense claims for staff advances are checked against the advance amounts and reconciled.

Procedure:

- Inquiry with management whether there are any advances paid to staff and review of relevant reconciliations by management.

2.17.2 Proof of Payment

Objective(s): To confirm that there is documentation proving the staff have received the requested advances.

Procedure:

- Inquiry with management whether there are any advances paid to staff.

2.17.3 Financial and Narrative Reports

Objective(s): To confirm the preparation of quality financial and narrative reports to the donor and AFS regularly.

Procedure:

- Inquire with management on the submission requirements -- previous year AFS financial and narrative reports.

2.18 Petty Cash

Objective(s): To confirm whether the organization has sufficiently documented policies and procedures to guide the expenditure of petty cash and consistently implements the controls for managing petty cash as designed.

Procedures:

- Review the Finance Manual/Policy for documented petty cash guidance on petty cash management.

- For a sample of petty cash transactions, confirm approval per the Finance Manual/Policy.

- Inquire and confirm the organization's procedures to ensure safe custody of petty cash (locked cashbox/safe, access limited, etc.).

- Review the supporting documents' adequacy, including the date and description of disbursement, payee, etc.
- Confirm whether the organization performs regular petty cash counts and reconciliations.

2.18.1 Vouchers

Objective(s): To confirm that the supporting documentation for petty cash disbursements has a Payee.

Procedure:

- Check petty cash vouchers issued in the past 6 months.

2.18.2 Petty Cashbox

Objective(s): To confirm that the cash is kept safely in a locked cashbox or safe in the custody of one specific individual.

Procedure:

- Ask to see the cashbox.

2.18.3 Daily Reconciliations

Objective(s): To confirm that the physical petty cash count is made regularly (weekly/monthly), and is checked by a senior staff member and documented.

Procedure:

- Inquiry with management and check the proof thereof.

2.18.4 Monthly Reconciliations

Objective(s): To confirm that a reconciliation of petty cash is done at least monthly.

Procedure:

- Inquire with management on monthly reconciliations.

2.18.5 SOPs

Objective(s): To confirm that all disbursements are made within the predetermined maximum amount for petty cash disbursements.

Procedure:

- Petty cash policy & SOP.

2.18.6 Requests

Objective(s): To confirm that the supporting documentation for disbursements contains the description of disbursements.

Procedure:

- For a sample of payment disbursements, inspect the supporting documents.

2.18.7 Documentation

Objective(s): To confirm that the supporting documentation for disbursements shows the date of disbursement.

Procedure:

- For a sample of payment disbursements, inspect the supporting documents.

Key Risks to be Considered

1. Inadequate financial management policies and procedures
2. Bank reconciliations – not prepared, not dated by officials, and incorrect
3. Financial reports – inadequate reports (variances not explained, only prepared for the donor – none for assessment of the overall financial performance/position of the organization)
4. Poor controls for managing advances to staff members – salary advances not recovered on time, no reconciliations for advances)
5. Segregation of duties for payments – only one signatory releasing all payments

Criteria and Possible Client Responses

1	2	3	4 (Highest Score)
INADEQUATE CAPACITY Key Deficiencies and Significant Weaknesses Not Remediable Before Award	**WEAK CAPACITY** Some Deficiencies and Significant Weaknesses Not Easily Remediable Before Award	**ADEQUATE CAPACITY** No Deficiencies, Significant Weakness Remediable Before Award	**STRONG CAPACITY** No Deficiencies or Significant Weaknesses
High Risk	Moderate to High Risk	Low to Moderate Risk	Low Risk
ASSESSMENT CRITERIA			
Organization has no banking relationship. Organization uses the bank account of a senior employee, and funds are commingled with personal funds.	Organization has no banking relationship and plans to establish a bank account in a registered banking institution before an award.	Organization has a bank account in a registered banking institution, and the account is adequate for its mission/goals. Opening and maintaining additional accounts limited to specific purposes may be beneficial.	Organization has bank accounts in a registered commercial banking institution that are appropriate for its mission/goals.
CLIENT'S RESPONSE			
We currently use the E.D.'s bank account and will continue using the same should we be considered for a USAID award. The E.D. has an account with ABC Bank, a Registered Commercial bank in the country.	As a newly registered/established organization, we are in the process of applying for a bank account with ABC Bank, a Registered Commercial Bank, in the country in the organization's name. The account should be active within a week (Proof of application should be available for review).	We currently have one (1) bank account with ABC Bank, a Registered Commercial Bank in the country we use for all our projects and core activities. We are more than willing to open additional bank accounts if needed to manage the project's funding effectively. (Proof of bank account should be available for review.)	We currently have three (3) bank accounts with ABC Bank, a registered commercial bank. Two (2) of the accounts are project-specific, and the third one is for core activities. A separate project bank account will be opened should we be considered for a USAID award. (As an assessor, review, and confirm and the three (3) bank accounts.)

Rating of 1:

1. How many bank accounts, both active and dormant, do you have as an organization?

We have one bank account with ABC Bank (a registered commercial bank) for our organization's activities, even though the account is not in our organization's name. We process all receipts and payments for the organization through this bank account.

2. You indicated that the bank account is not in the organization's name; whose name is it registered in?

It's registered in the name of our Executive Director. Since he is one of the founding members, we decided to use his bank account. He has the best interests of the organization, so we are not worried.

3. Does the Executive Director use the account for personal transactions?

Probably, as I said, but we are not worried; he's a man of integrity. However, as a critical control, he gives us a monthly account of the organization's funding in his bank account, which we reconcile to the organization's receipts and expenses for the relevant month.

4. Are there any plans to open an account under the organization's name?

Probably in the future. As you have noticed, we are a relatively small organization with a staff of five members, and our controls for managing the organization's funding are airtight.

Rating of 2:

1. How many bank accounts, both active and dormant, do you have as an organization?

As a newly registered organization, we are in the process of applying for a bank account with ABC Bank, a registered commercial bank, in the organization's name. We have submitted our application to open this account.

2. When do you expect the account to be active?

The account should be active within a week, and we may be able to share proof of the opened bank account with you. I understand you will finalize the review sometime next week.

3. Yes, however, we will be focusing on reporting next week, but you can, of course, share proof of opened bank account(s). In the interim, may you please assist with proof of your application for the opening of the bank account?

Yes, we will; we have the Board-approved letters and email correspondences with the bank.

Rating of 3:

1. How many bank accounts, both active and dormant, do you have as an organization?

We currently have one (1) bank account with ABC Bank, a Registered Commercial Bank.

    2.   How many projects are you currently managing?

We are currently implementing one project, funded by donor X. So, we effectively use our core bank account to manage the project and core funding.

    3.   Will you be in a position to open another bank account if required for the project?

We recently closed a bank account that we were using to manage donor Y funding. The project we were managing through that account ended last year; therefore, the bank account was dormant. So, yes, we are more than willing to open additional bank accounts if needed to manage project funding effectively.

ASSESSOR: Review and confirm proof of bank account to be reviewed.

Rating of 4:

    1.   How many bank accounts, both active and dormant, do you have as an organization?

We currently have three bank accounts.

    2.   Okay, what are the accounts used for?

Two of the accounts are project-specific, and the third one is for core activities.

    3.   How many projects are you currently managing?

We are currently implementing two projects, which are under donors X and Y.

    4.   Okay, so each of the project bank accounts is maintained for one project?

Exactly, we have a separate bank account for each of the two projects. The opening of individual project bank accounts was a requirement per the award agreement.

ASSESSOR: Confirm the three bank accounts.

MODULE 3: RISK MANAGEMENT

BACKGROUND:

This domain requires the Risk Management Policy or an equivalent review to assess the adequacy of risk controls, the design of the internal controls, and whether they are implemented as designed.

Estimated time for execution of this domain: 20 hours (including the background reading).

Skills and experience required for effective execution of this domain: an assessor with more than three years of experience in risk assessment.

OVERALL OBJECTIVE:

To verify whether the organization has adequate and effective policies and procedures in place to deal with potential risks and whether these are followed as per practice.

NUPAS Plus 2.0 Risk Management Domain Categories:

1. **Policy**
    1. Policy
    2. Zero Tolerance
2. **Reporting**
    1. Whistleblower
3. **Risk Assessment**
    1. Organizational Risk Assessment
    2. Program Risk Assessment
4. **Training**
5. **Subawards**
6. **Compliance**
7. **Internal Controls**

NUPAS PLUS 2.0 RISK MANAGEMENT EXAMPLE

CATEGORY/ SUB-CATEGORY		OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Policy	Policy	Confirm that there is a risk management policy in place and is reviewed/updated at least annually or when significant operational changes occur.	Fraud Management Policy
	Zero Tolerance	Confirm that the risk management policy addresses the intangibles such as deterrence, zero-tolerance policy, detection, investigation, and follow-up.	Review Reports

Reporting		Confirm that a whistle-blowing hotline is in place, user-friendly, and functioning correctly and that all employees are aware of it.	Fraud Management Policy, or Whistle-blowing Policy (if not incorporated into the Fraud Management Policy)
Risk assessment	Organizational Risk Assessment	Confirm that an organization-wide fraud risk assessment is performed involving all key individuals (across the organization) and addressing all the steps of a risk assessment process, and results are completely and accurately applied organization-wide and used to inform updates to the policy.	Annual Risk Assessment Reports
	Program Risk Assessment	Confirm that program-specific fraud risk assessment is performed involving all key individuals (across the organization) and addressing all the steps of a risk assessment process and that the results are completely and accurately applied program-wide.	Program Assessment Reports
Training		Confirm whether training/ awareness sessions were held, directed at all key employees throughout the organization (in their native language), whether presentation material covered all relevant information, and whether training is frequent and includes the latest updates (e.g., tri-annually as necessary – depending upon the complexity of operations, number of awards, size, etc.).	Evidence of training (attendance registers, training material)
Subawards		Confirm that fraud reporting is required in the subaward agreements, that the procedure is clearly defined, and that staff are fully versed in the process and motivated to report suspected wrongdoing.	Subaward agreement
Compliance		Advanced Compliance - To Confirm that the organization has an adequate and effective	Verification of country-specific legislation and compliance thereto

	compliance framework in place including comprehensive anti-corruption policy and procedures such as a conflict-of-interest policy (concerning staff, suppliers, and/or external advisors.) and efficient systems and structures to detect instances of non-compliance.	
Internal controls	Confirm that the organization has adequate internal control systems and procedures to safeguard its assets, manage internal risk, and ensure the accuracy and reliability of its financial information, all of which are consistently reviewed and updated	Finance, Procurement, HR, Fraud, and related policies

3.1 Policy

Objective(s): To verify whether there is a complete Risk Management Policy/Strategy in place.

Procedures:

- Verify whether a Risk Management Policy is in place and address the most pertinent issues (i.e., roles/responsible individuals/division in the organization, timelines for resolution of reported disclosures, communication with the whistleblower, potential rewarding of whistleblowers, periodic publication of success stories throughout the organization).

- Verify that the policy is reviewed/updated at least annually or when significant changes in operations occur.

- Verify whether the organization's risk management policy addresses all intangible aspects, such as deterrence, zero-tolerance policy, detection, investigation, and follow-up.

3.1.1 Policy

Objective(s): To confirm that there is a risk management policy in place and is reviewed/updated at least annually or when significant operational changes occur.

Procedure:

- Review the policy on fraud and risk management or related policies which include fraud.

3.1.2 Zero Tolerance

Objective(s): To confirm that the risk management policy addresses the intangibles such as deterrence, zero-tolerance policy, detection, investigation, and follow-up.

Procedure:

- Review Reports.

3.2 Reporting

Objective(s): To verify whether the fraud reporting hotline is addressed in the Risk Management Policy.

Procedure:

- Verify that an external fraud reporting hotline (whistleblowing hotline) exists and that the reporting system is user-friendly and tested annually (e.g., can report via SMS, phone, or email).

3.2.1 Whistleblower

Objective(s): To verify that there is an external fraud reporting hotline (whistleblowing hotline) that is user-friendly and tested annually (e.g., can report via SMS, phone, or email).

Procedure:

- Check if the hotline is functional and user-friendly (works via SMS, phone, or email).

3.3 Risk Assessment

Objective(s): To verify whether a fraud risk assessment is addressed in the Fraud Policy.

Procedure:

- Verify that both an organization-wide fraud risk assessment and a program-specific assessment are performed.

3.3.1 Organizational Risk Assessment

Objective(s): To confirm that an organization-wide fraud risk assessment is performed involving all key individuals (across the organization) and addressing all the steps of a risk assessment process, and results are completely and accurately applied organization-wide and used to inform updates to the policy.

Procedure:

- Review Annual Risk Assessments.

3.3.2 Program Risk Assessment

Objective(s): To confirm that program-specific fraud risk assessment is performed involving all key individuals (across the organization) and addressing all the steps of a risk assessment process and that the results are completely and accurately applied program-wide.

Procedure:

- Review Program Assessment Reports.

3.4 Training

Objective(s): To verify whether training/awareness sessions were held for all key employees (in their native language) throughout the organization, that the presentation material covered all relevant information, and whether training is frequent and updated regularly (e.g., tri-annually as necessary, based on the complexity of operations, number of awards, size, etc.).

Procedures:

- Verify that training/awareness sessions are held for all key employees (in their native language) throughout the organization.
- Confirm that the presentation material covers all relevant information and that the training is frequent and updated regularly (e.g., tri-annually as necessary, based on the complexity of operations, number of awards, size, etc.).

3.5 Subawards

Objective(s): In subaward agreements, fraud reporting is required (in the sub-agreement), the procedure is clearly defined, and staff are fully conversed on the process and motivated to report suspected wrongdoing.

Procedure:

- Verify in subaward agreements, that fraud reporting is required (in the sub-agreement), the procedure is clearly defined, and staff are fully conversed on the process and motivated to report suspected wrongdoing.

3.6 Compliance

Objective(s): To verify that the organization has an adequate compliance framework in place, including a basic anti-corruption policy and procedures such as a Conflict-of-Interest Policy (concerning staff, suppliers, and external advisors).

Procedure:

- Verify that the organization has an adequate and effective compliance framework in place including comprehensive anti-corruption policy and procedures such as a conflict of interest policy (concerning staff, suppliers, and/or external advisors.) and efficient systems and structures to detect instances of non-compliance.

3.7 Internal Controls

Objective(s): To verify that the organization has adequate internal control systems and procedures to safeguard its assets, manage internal risk, and ensure the accuracy and reliability of its financial information, all of which are consistently reviewed and updated.

Procedure:

- Give your professional evaluation. Since internal controls are a broad subject, you must pay attention to all of the related domains to form your opinion.

Key Risks to be Considered

1. Whistleblower hotline is out of date/not in place
2. Fraud training is not performed
3. Fraud risk assessment is not performed

Criteria and Possible Client Responses

1	2	3	4 (Highest Score)
INADEQUATE CAPACITY Key Deficiencies and Significant Weaknesses Not Remediable Before Award	**WEAK CAPACITY** Some Deficiencies and Significant Weaknesses Not Easily Remediable Before Award	**ADEQUATE CAPACITY** No Deficiencies, Significant Weakness Remediable Before Award	**STRONG CAPACITY** No Deficiencies or Significant Weaknesses
High Risk	Moderate to High Risk	Low to Moderate Risk	Low Risk
ASSESSMENT CRITERIA			
No fraud risk assessment is performed	A fraud risk assessment is performed but is not organization wide. Threats to strategic and operational objectives are not completely identified.	An organization-wide fraud risk assessment is performed, addressing all the steps of a risk assessment process; however, the results are incomplete/ inaccurately applied organization-wide.	An organization-wide fraud risk assessment is performed, involving all key individuals (throughout the organization) and addressing all the steps of a risk assessment process; the results are completely and accurately applied organization-wide and used to inform updates to the policy.
CLIENT'S RESPONSE			
The external auditors perform such an assessment in their preparation for the federal audit. We do not perform such a review.	We looked at fraud risks in the Human Resources area. No other divisions were considered.	An organization-wide risk assessment was performed that considered all areas and all objectives. This was not shared with the regions as we deem them to be low risk.	An organization-wide risk assessment was performed, considering all areas and all objectives, with donor involvement and roll-out to all regions. The results are monitored

		There have never been any incidences of fraud in the region. We also limited their involvement with the risk assessment because of their low risk.	quarterly and amended as significant changes in the operating environment take place. Reference was made to the COSO framework to guide us, among others. Our donor also actively participated and monitored the assessment and the implementation of recommendations. As we have a lot of sites in the regions, we perform site visits ourselves to monitor implementation and adherence.

ROLE-PLAY: Orientation

Rating of 1:

Do you perform a fraud risk assessment?

The external auditors perform such an assessment in their preparation for the federal audit. We do not conduct such a review.

But does someone/a team inside your organization perform a risk assessment, with at least a focus on fraud?

Oh, is that what you mean? Then, no, unfortunately not.

Rating of 2:

Do you perform a fraud risk assessment?

Yes, a fraud risk assessment was performed.

What was the focus of the risk assessment? Which organizational areas were assessed?

We looked at fraud risks in the Human Resources (HR) area.

So, other departments, such as Finance and Procurement, were not included?

No, it didn't seem necessary to include other departments.

It's important to perform an organization-wide fraud risk assessment and include all departments in your organization. Often, there is a significant interlinking of processes between departments. For example, both the HR and Finance departments are involved in payroll processing. Without assessing both departments, lapses in internal controls may go undetected and could lead to fraud. An organization-wide assessment should be performed to ensure adequate coverage and understanding of the interdependence between <u>all</u> activities/departments.

Oh, that is noted, thank you.

Rating of 3:

Do you perform a fraud risk assessment?

Yes, we do. An organization-wide risk assessment was performed, considering all areas and all objectives. We didn't conduct this in the regions, as we deem them to be low risk.

What do you mean when you say they are "low risk"?

There have never been any incidences of fraud in these regions.

It seems as if the focus of the risk assessment was the head office and its operations.

That's correct. The procedures applied at the regions are similar to those performed at the head office, though there are some differences.

Ok, it is important to include all individuals and regions in this assessment, as fraud can be perpetrated anywhere and by anyone. If there are changes in operations or personnel in the regions, these are risk factors that can lead to fraud. One needs to involve all key individuals and share the results with the organization. The implementation of any recommendations should be followed up, as well.

This is well noted.

Rating of 4:

Do you perform a fraud risk assessment?

Yes, an organization-wide risk assessment was performed, considering all areas and objectives, with donor involvement and roll-out to all regions. The results are monitored quarterly and amended as significant changes in the operating environment take place.

Did you refer to any frameworks to assist you?

Yes, we referred to the Committee of Sponsoring Organizations framework to guide us, among others. Our donor also actively participated and monitored the assessment and implementation of recommendations. Since we have many sites in the regions, we perform site visits ourselves to monitor implementation and adherence.

Thank you, it seems you are compliant in this regard.

MODULE 4: PROCUREMENT AND LOGISTICS

Background:

This domain requires the Procurement Policy or equivalent review to assess the adequacy thereof, the design of the internal controls, and whether they are implemented as designed.

Estimated time for execution of this domain: 38 hours (including the background reading)

Skills and experience required for effective execution of this domain: An assessor with more than three years of experience reviewing procurement.

Overall Objective:

To verify whether the organization has adequate and effective policies and procedures in place, and to determine whether these are followed as per practice.

NUPAS Procurement Categories:

1. **Procurement Policies, Procedures, and Practices**
2. **Compliance with Policies and Procedures – Reasonableness of Price**
3. **Procurement and Subawards**

NUPAS Plus 2.0 Procurement Categories:

4. **Approval Process**
5. **Final Documentation**
6. **Procurement Forms**
7. **Selection Process**
8. **Terrorism Financing Check**
9. **Sole Sourcing**
10. **Vehicle Management**
11. **Travel**
12. **Lease Agreement**

NUPAS PLUS 2.0 PROCUREMENT AND LOGISTICS EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Procurement Policies, Procedures, and Practices	Confirm that the organization has procurement policies, procedures, and practices in place that are adequate. [Note: Procurement policies, procedures, and practices include those relating to processes for purchasing, resolving, and settling disputes and claims;	Procurement Policy

	safeguards and controls over assets; and related records management].	
Compliance with Policies and Procedures – Reasonableness of Price	Confirm that the organization complies with its own policies and procedures for how determinations of reasonableness are made for purchases and who in the organization is responsible.	Procurement Policy Sample of procurement transactions – assess the reasonableness of price
Procurement and Subawards	Confirm that the organization has adequate policies, procedures, and practices in place for procurement and subaward processes using arm's length bargaining.	Subawards SAM.gov (and other) checks Conflict of Interest Declarations
Approval Process	Confirm that procurement policies contain an Approval Matrix or Delegations of Authority alternatively.	Procurement Policy Delegations of Authority
Final Documentation	Confirm that the organization prescribes which information to maintain as it relates to contracts.	Procurement Policy Contracts with vendors
Procurement Forms	Confirm that the Procurement Policy specifies which documentation should be maintained for all types of procurement.	Depends on the policy, but could include purchase request, purchase order, invoice, delivery note/acknowledgment of receipt of goods
Selection Process	Confirm that the Procurement Policy specifies the procedure for the selection of vendors.	Procurement Policy Sample of procurement transactions
Terrorism Financing Check	Confirm that the organization performs terrorism financing checks.	SAM verifications OFAC verifications UN Security Council verifications
Sole Sourcing	Confirm that the organization has a policy on sole sourcing.	Procurement Policy Sample of procurement transactions

Vehicle Management	Confirm that a Travel and Vehicle Management Policy is in place and is consistently implemented/followed.	Travel and Vehicle Management Policy
Travel	Confirm that the organization's travel advance forms have a breakdown of requested amount and are signed by the program manager, finance, and supervisor consistently.	Travel and Vehicle Management Policy Vehicle Expenses Logbooks Sample of travel-related transactions
Lease Agreement	Confirm that proper lease agreements are in place for leased assets	Lease Agreements

4.1 Procurement Policies, Procedures, and Practices

Objective(s): To confirm that the organization has procurement policies, procedures, and practices in place that are adequate.

[Note: Procurement policies, procedures, and practices include those relating to purchasing, resolving, and settling disputes and claims; safeguards and controls over assets; and related records management.]

Procedures:

- Request the procurement policy and verify that the following general aspects are addressed:
    - Initiation of a purchase requisition (based on a needs assessment) for large purchases
    - Development of requirements (technical, timing, quality, constraints)
    - Requisition approval
    - Solicitation of bids
    - Bid/proposal review and award
    - Responsibilities of contract management
    - Contract requirements for closure

    For less significant purchases, a dedicated budget and threshold can be applied with approval.

- Request a list of purchases and awarded contracts, select a sample of transactions, and verify whether the procurement policy was adhered to. In case of exceptions, the staff's understanding may be tested through the exit interview/close-out meeting.

4.2 Compliance with Policies and Procedures – Price Reasonableness

Objective(s): To confirm that the organization complies with its policies and procedures for how determinations of reasonableness are made for purchases and who in the organization is responsible.

Procedures:

- Verify that competitive bidding is defined (i.e., three quotations for purchases under a certain amount, higher amounts formal open tendering/ competitive bidding), and document how reasonableness is demonstrated (if it is clear enough in the policy).

- Verify that responsibilities for purchases are also outlined.

- Select a sample of transactions for testing.

4.3 Procurement and Subawards

Objective(s): To confirm that the organization has adequate policies, procedures, and practices in place for procurement and subaward processes using arm's length bargaining.

Procedures:

- Verify that these aspects are addressed following a fair bargaining process and the necessity of having contracts with the subawardee.

- Verify that directors of the main recipient organization and other officials sign a conflict-of-interest declaration.

- Inquire whether training has ever taken place and whether a highly qualified individual is employed to guide and keep the procurement team up to date. Select a sample of subawarded grants and verify whether procedures 20 and 21 were applied.

4.4 Approval Process

Objective(s): To verify that approvals occur according to an approved Approval Matrix or Delegation of Authority.

Procedures:

- Review the procurement policies for the Approval Matrix or Delegation of Authority.

- Review a sample of transactions for testing adherence to these policies.

4.5 Final Documentation

Objective(s): To verify that approvals occur according to an approved Approval Matrix or Delegation of Authority, that procurement documentation adequately supports the procurement process, and that contracts are in place with suppliers who provide regular services.

Procedures:

- Review the policies for guidance on contract transactions.

- Review a sample of transactions to verify compliance with the authorization thresholds.

- Review current suppliers and evaluate the need to end a contract (i.e., for recurring services).

4.6 Procurement Forms

Objective(s): To verify that the organization has procurement forms that are consistently used across the organization for all procurements.

Procedure:

- Review forms with the procurement team and management.

4.7 Selection Process

Objective(s): To verify that the selection of the best-qualified supplier/vendor is consistently documented and signed by all selection committee members.

Procedure:

- Review a sample of minutes from the procurement committee meeting / other governing body which serves this purpose and verify compliance with the selection process.

4.8 Terrorism Financing Check

Objective(s): To verify that terrorism-financing checks are performed in accordance with contractual obligations and USG rules and regulations.

Procedure:

- Review a sample of purchases from vendors and verify whether the necessary terrorist and other verifications were performed.

4.9 Sole Sourcing

Objective(s): To verify that the Procurement Policy provides for Sole Sourcing.

Procedure:

- Verify that the organization has a policy on sole sourcing and that it is consistently applied. Inquire with management whether sole sourcing is applicable and request a sample if these types of transactions have occurred.

4.10 Vehicle Management

Objective(s): To verify that a Travel and Vehicle Management Policy is in place and consistently applied to address movements between Head Office and Districts and that the logistics team is using vehicle usage trackers to ensure vehicles are maintained according to service schedules.

Procedures:

- Verify that the organization has a Travel and Vehicle Management Policy that is consistently implemented/followed and review a sample of transactions for its implementation and adherence to this policy.
- General ledger for employee advances.
- Inquire with the logistics team or operations division (depending on which function is responsible for vehicle management) and verify mileage via the tracker (if fitted to the vehicle), maintenance, and other mentioned variables.
- Specifically, verify whether vehicle use is adequately tracked; whether a vehicle is used for personal reasons without approval; and whether vehicle fuel consumption/maintenance is tracked/ensured.

4.11 Travel

Objective(s): To verify that the organization's travel advance forms have a breakdown of the requested amount and are signed by the program manager, finance, and supervisor consistently.

Procedure:

- Check travel approvals, including budget verification.

4.12 Lease Agreement

Objective(s): To verify whether there is a lease agreement in place for vehicles and that vehicles are used for project purposes only.

Procedure:

- Inquire with management and inspect usage reports for correct usage as per policies.

Key Risks to be Considered

1. Mandatory verifications are not performed.

2. Procurement Forms are inconsistently used.

3. Procurement Transactions are not approved.

MODULE 5: PROPERTY MANAGEMENT

Background:

This domain requires the review of the Assets Management Policy, or equivalent, to assess its adequacy, the adequacy of its internal controls, and whether they are implemented as designed.

Estimated time for execution of this domain: 4 hours (including the background reading)

Skills and experience required for effective execution of this domain: Preferably an assessor with over three years of experience in accounting and financial management.

Overall Objective:

To assess the adequacy of the Property Management processes and procedures.

NUPAS Plus 2.0 Property Management Domain Categories:

1. **Fixed Asset Register**
2. **Tracking System**
3. **Segregation of Duty**
4. **Updates**
5. **Disposal**
6. **Storage**
7. **Locked Storage**
8. **Property Management Policy and Procedures**
9. **Fixed Assets/Equipment Disposal Process**
10. **Safekeeping/Safeguarding of Fixed Assets**

NUPAS PLUS 2.0 PROPERTY MANAGEMENT EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Fixed Asset Register (FAR)	Confirm that the organization has a FAR to record its property, plant, and equipment.	FAR
Tracking System	Confirm that the FAR is adequately completed with all the relevant information, i.e., that all fields are completed, including the location of relevant assets.	FAR
Segregation of Duties	Confirm that there is adequate segregation of duties between the purchasing function and updating of the FAR.	Property Management Policy

Updates	Confirm that frequent asset verifications are performed and that FAR is updated with any changes/differences identified.	Assets verification reports
Disposal	Confirm that the organization has mostly adequate controls to ensure obsolete commodities are not distributed and there is no documentation.	Policy/ Procedure Manual
Storage	Confirm that an adequate facility for the storage of drug inventories/medical supplies is being used for project activities.	Inspection
Locked Storage	Confirm the existence of restricted access control through the locking of storage facilities.	Inspection
Property Management Policy and Procedures	Confirm the existence of property management policies, procedures, and practices that meet its needs and reflect best practices.	Property Management Policy and Procedures
Fixed Assets/Equipment Disposal	Confirm whether a property disposal process is in place in compliance with property management policies.	Property Disposal Guideline/Procedure
Safekeeping/safeguarding of Fixed Assets	Confirm the existence of insurance coverage for all fixed assets, including donor assets.	Insurance Policy

5.1 Fixed Asset Register

Objective(s): To confirm whether the organization maintains a Fixed Asset Register (FAR) for its fixed assets.

Procedure:

- Confirm whether the Fixed Assets Management Policy/equivalent requires a FAR, including the minimum information to be captured on the FAR per the organization's policy guidance.

5.2 Tracking System

Objective(s): Confirm the adequacy of the Fixed Asset Register.

Procedures:

- Review the Fixed Asset Register for a minimum of the following information:
    1. Description

2. Serial number
3. Acquisition cost
4. Date
5. Fixed asset number
6. Location
7. Condition
8. Funding Source
9. Frequency of updating

- Obtain the asset management policy/relevant finance procedure manual and verify that the tracking of equipment/supplies is addressed (e.g., frequency of updating and aspects from nr 1 to 9).

5.3 Segregation of Duty

Objective(s): To confirm whether there is a segregation of duties between the procurement function and FAR updating with the purchase.

Procedures:

- Obtain the assets management policy/ finance procedure manual and verify that segregation of duties is addressed, especially regarding purchasing and listing on the inventory list.
- Verify the segregation of purchasing and listing/updating the assets register for a recent purchase of inventory/assets.

5.4 Updates

Objective(s): To confirm the updating of the inventory list and the performance of inventory counts.

Procedures:

- Obtain the Assets Management Policy/Finance Procedure Manual and determine whether updating the inventory list (minor assets) is addressed.
- Request the relevant documentation for the annual updating exercise and verify that it was per policy.
- Verify consideration of the following with the update:
  o Timing to ensure key staff are available and given the time needed to conduct inventory counts
  o Proper planning (with individuals assigned to the relevant sites/locations)
  o How to treat assets identified as obsolete/damaged (e.g., marked/stored separately)

5.5 Disposal

Objective(s): To confirm whether adequate controls are in place to identify and dispose of obsolete inventory items.

Procedures:

- Review the asset management policy to determine if it guides the treatment of obsolete commodities.

- Verify that a recent batch of commodities was disposed of as per the policy.

5.6 Storage

Objective(s): To confirm that the inventory storage facilities are maintained under optimal conditions.

Procedures:

- Perform a walk-through of the commodities storage facility and verify that measures are in place to keep items in necessary states (e.g., temperatures, humidity).
- Inquire whether the organization produces exception reports (electronically or manually) in case of deviations from prescribed limits.
- Obtain these reports and verify if reporting obligations were complied with.

5.7 Locked Storage

Objective(s): To confirm the existence of restricted access control through the locking of storage facilities.

Procedure:

- Inspect the facilities and verify whether a functioning locking system is in place.

5.8 Property Management Policy and Procedures

Objective(s): To confirm the existence of property management policies, procedures, and practices that meet its needs and reflect best practices.

Procedure:

- Inquire with the client management and review property management policies and procedures.

5.9 Fixed Assets/Equipment Disposal Process

Objective(s): To confirm whether a property disposal process is in place in compliance with property management policies.

Procedure:

- Inquire with the client management and review property management policies and procedures.

5.10 Safekeeping/Safeguarding of Fixed Assets

Objective(s): To confirm the existence of insurance coverage for all fixed assets, including donor assets.

Procedure:

- Insurance on fixed assets.

Key Risks to be Considered

1. Inadequate Fixed Asset Register.

2. Failure to document procedures for handling program medical supplies.

3. Absence of property management policies and procedures, including those on property disposal and fixed asset insurance.

Criteria and Possible Client Responses

1	2	3	4 (Highest Score)
INADEQUATE CAPACITY Key Deficiencies and Significant Weaknesses Not Remediable Before Award	**WEAK CAPACITY** Some Deficiencies and Significant Weaknesses Not Easily Remediable Before Award	**ADEQUATE CAPACITY** No Deficiencies, Significant Weakness Remediable Before Award	**STRONG CAPACITY** No Deficiencies or Significant Weaknesses
High Risk	Moderate to High Risk	Low to Moderate Risk	Low Risk
ASSESSMENT CRITERIA			
The organization does not have any controls to ensure that obsolete commodities are not distributed.	The organization does not have adequate controls to ensure that obsolete commodities are not distributed.	The organization has adequate controls to ensure that obsolete commodities are not distributed.	The organization has adequate controls to ensure that obsolete commodities are not distributed.
CLIENT'S RESPONSE			
We generally do not have procedures for obsolete stock, nor do we generally get reports of distributing obsolete stock. Also, considering that we get our consignment from China, we usually buy in large quantities to save on transportation and avoid shortages.	We order and keep low volumes of stock to try and mitigate the risk of distributing obsolete drugs.	Random inventory counts are performed to ensure that all inventory in the storeroom is not expired. The pharmacists also check the expiry dates on medications before dispensing them to patients (check count sheets).	We totally understand the importance of checking the drugs/medication on hand to ensure that we do not keep expired stock in storage. Finance and pharmacy staff, therefore, conduct monthly counts/verifications as per the inventory management policy, check expiry dates, and verify quantities per the inventory management. system. Also, the inventory in the storeroom is arranged to
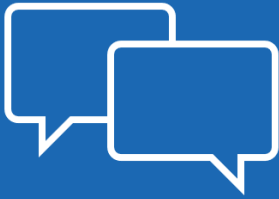
			ensure FIFO and reduce the risk of distributing expired drugs (check the arrangement in the storeroom and verify the count sheets).

Does your organization have documented policies that guide procedures for identifying and disposing of obsolete stock?

Rating of 1

Currently, we have none. We believe the chances of distributing obsolete stock are low, and we try to ensure that it does not expire.

Rating of 2

We order and keep low volumes of stock to try and mitigate the risk of distributing obsolete drugs.

Rating of 3

Random inventory counts are performed to ensure that all inventory in the storeroom has not expired. The pharmacists also check the expiry dates on the medication before dispensing it to patients (check count sheets).

Rating of 4

Yes, we have a documented warehousing/inventory management policy that requires cycle counts by the warehousing or inventory management team. The cycle counts identify expired or damaged stock. When stock is damaged, it is approved for disposal per the approval processes and in line with the country's legislation. However, the risk of obsolete stock is low as we issue inventory on a FIFO basis, ensuring that stock received first is issued first. Therefore, the stock in storage is always the most recent.

MODULE 6: INFORMATION TECHNOLOGY

Background:

This domain requires a good understanding of Information Technology (IT) general controls.

Estimated time for execution of this domain: 14 hours

Skills and experience required for effective execution of this domain: an assessor with more than five years of experience assessing and testing IT general controls.

Overall Objective:

To assess if the organization has an adequate IT Policy, if adequate structures and resources are in place to support the IT function, and if adequate IT internal controls are in place.

NUPAS Plus 2.0 IT Domain Categories:

1. IT Committee
2. IT Plan
3. IT Risk Mitigation
4. Cybersecurity
5. Access
6. Staff Terminations
7. Data Retention
8. Error Tracking System
9. Disaster Recovery
10. Segregation of Duties
11. Back-ups
12. Antivirus
13. Firewall
14. Guest Network
15. Operating System Update
16. Updating Workstations, Laptops, and Computers
17. Software Installation and License
18. Passwords
19. Automatic Shutdowns
20. Licenses

Procedures to be undertaken for a review of the IT domain:

- Document review (Estimated time required: 11hrs)
- Interviews (Estimated time required: 1.5hrs)
- Physical Verification (Estimated time required: 0.5hrs)
- Observations (photos, videos, and virtual access to computers commonly used in virtual reviews) (Estimated time required: 1hr)

Documents to be requested for effective review of IT:

- Refer to the "Documents list" tab in the NUPAS Plus 2.0 tool

Members to be considered for interviews:

- Chief Information Officer
- Financial Director
- Information Technology Manager
- External Information Technology Consultants

NUPAS PLUS 2.0 INFORMATION TECHNOLOGY EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
IT Committee	Confirm if there is an IT Committee in place to provide oversight of the IT function	IT Committee terms of reference IT Committee minutes
IT Plan	Confirm if an IT plan is in place and if it addresses the following: - Hardware requirements - Software requirements (including updates) - Staffing requirements Training of IT staff members and users	IT Plan
IT Risk Mitigation	Confirm if the organization performs IT risk assessments and if their risk assessment process is robust and adequately documented.	IT Risk Report

Cybersecurity	Confirm that the organization has cybersecurity insurance to mitigate losses from cyber incidents, including data breaches, business interruption, and network damage.	IT security risk assessments Cybersecurity Insurance Policy
Access	Assess if the organization has a policy or procedures for data and network access rights	IT Policy or Access Rights Policy
Staff termination	Confirm if there is a documented procedure for the return of hardware equipment and the restriction of access rights to terminated staff members.	IT Policy or HR Policy
Data retention	Confirm whether the organization has a data retention policy to help organizations keep track of how long information must be kept and how to dispose of the information when it's no longer needed.	IT Policy or Data Retention Policy
Error tracking system	Confirm whether procedures are in place to ensure that systems incidents, problems, and errors are reported, analyzed, and resolved on time.	IT Policy Help desk procedures
Disaster recovery	Confirm that the organization has documented IT disaster recovery procedures and determine if disaster recovery tests are performed on data.	IT Policy Disaster Recovery Policy or procedures Disaster recovery test results
Segregation of duties	Assess if there is adequate segregation of duties within the IT function, with database administration clearly segregated from the other duties	IT Policy IT function organizational chart Job descriptions for IT staff members

Back-ups	Confirm if data back-ups are addressed in a policy and if local and off-site back-ups are conducted at a reasonable frequency.	IT Policy Back-up procedures Server back-up log reports
Antivirus	Confirm if the organization has up-to-date antivirus software installed on all laptops, computers, and servers.	IT Policy Antivirus license
Firewall	Confirm if the organization has a working firewall to establish a barrier between the internal network and incoming traffic from external sources (such as the internet) in order to block malicious traffic like viruses and hackers.	IT Policy
Guest network	Confirm whether the organization has a separate network for guests, without access to the organization's network.	IT Policy
Operating system updates	Confirm that the organization's servers and client computers are updated with the latest operating system and third-party software patches, drivers, and firmware.	IT Policy Server update log reports Patch and update log reports
Updating workstations – laptops and computers	Confirm if the organization's workstations are configured and maintained in the same way, with a standard set of software installed (standard operating environment).	IT Policy
Software installation and license	Confirm if the installation of software is addressed in the IT policy, and whether software may only be installed by a delegated IT staff member.	IT Policy Access Policy or procedures

Passwords	Confirm if there is a documented policy or procedure on passwords to access workstations, as well as system access.	IT Policy
Automatic shutdowns	Confirm if the organization has automatic shutdowns, as well as system locks if computers are idle for a defined period.	IT Policy
Licenses	Confirm whether the organization has valid licenses for all software used.	Software licenses

6.1 IT Committee

Objective(s): To confirm if there is an IT Committee that oversees IT functions and that it operates effectively.

Procedures:

- Inquire with management if there is an IT Committee or who has oversight of the IT function.

- Assess if oversight of the IT function is adequate after taking into account the complexity of operations.

6.2 IT Plan

Objective(s): To confirm whether an IT Plan is in place, and if it addresses:

- Hardware requirements

- Software requirements (including updates)

- Staffing requirements

- Training of IT staff members and users

Procedures:

- Inquire with management if there is an IT Plan.
- Request the IT Plan and verify if it is valid and includes the following topics/sections: hardware, software purchases, staffing, training, equipment to sunset, and whether is reviewed/updated annually.
- Review the IT Plan to verify if it was reviewed or approved.
- Obtain the minutes of the IT committee/other approval to verify review/approval.

6.3 IT Risk Mitigation

Objective(s): To confirm whether the organization performs IT risk assessments and if the risk assessment process is robust and adequately documented.

Procedures:

- Inquire with management whether an IT risk assessment has been performed.

- Obtain the assessment and verify that key individuals and important aspects were involved, such as security, segregation of duties, and expansion.

- Obtain the relevant IT committee minutes to verify that the committee evaluates and addresses identified IT risks.

6.4 Cybersecurity

Objective(s): To confirm that the organization has cybersecurity insurance to mitigate losses from cyber incidents, including data breaches, business interruption, and network damage.

Procedures:

- Inquire with management whether cybersecurity insurance is in place.

- Obtain the insurance policy and verify that the organization is adequately covered in case of a significant data breach.

- Verify if there is any independent confirmation of the adequacy of the cover.

6.5 Access

Objective(s): To confirm whether the organization has a data and network access rights policy or procedures.

Procedures:

- Inquire with management whether a policy for data and network access rights is in place.

- Obtain the policy and verify that data and network access rights for users within the entity are addressed and that staff have signed the policy.

- Talk to some staff members and evaluate their understanding and implementation of the policy.

- Obtain the Declarations of Interest for board members and verify if they are appropriately completed and signed.

6.6 Staff Terminations

Objective(s): To confirm whether there is a documented procedure to address the return of hardware equipment and to restrict access rights of terminated staff members.

Procedures:

- Inquire with management about the staff termination practices and procedures.
- Verify if the practices are documented in a policy or procedure.

- Verify if the deactivation of user profiles and recovery of hardware from employees whose services were terminated are addressed.
- Select a sample of terminations from HR and verify that users' access rights were removed timely.

6.7 Data Retention

Objective(s): To confirm whether the organization has a Data Retention Policy to inform how long information must be kept and how to properly dispose of it after this period.

Procedures:

- Inquire with IT management if they have a data access/retention policy in place and included in the master IT policy.
- For a sample of significant procedures, request activity reports to test for compliance.

6.8 Error Tracking System

Objective(s): To confirm whether procedures are in place to ensure that systems incidents, problems, and errors are reported, analyzed, and resolved on time.

Procedures:

- Inquire with IT management whether procedures are in place to ensure that system incidents, problems, and errors are reported, analyzed, and resolved on time.
- Verify whether procedures are in place to address such issues and look for evidence that previously reported incidents, problems, and errors have been resolved or closed out after analysis. This should be available whether an online tracking program or something like a spreadsheet is being used.

6.9 Disaster Recovery

Objective(s): To confirm that the organization has documented IT disaster recovery procedures and whether disaster recovery tests are performed on data.

Procedures:

- Obtain the DR procedure and inspect the contents for:
  - The frequency of testing addressed.
  - Definition of the hot site or cold site.
- Obtain the results of the latest test and verify that it was performed in compliance with the policy.

6.10 Segregation of duties

Objective(s): To assess if there is adequate segregation of duties within the IT function, and that database administration is clearly segregated from the other responsibilities.

Procedures:

- Review and confirm the existence of IT Policy.
- Ensure that the database administrator function is segregated from the other duties in the policy.

- Verify, through inquiry, that the Database Administrator password is not shared amongst multiple employees.

6.11 Back-ups

Objective(s): To confirm if data back-ups are addressed by a policy and if local and off-site back-ups are conducted with reasonable frequency.

Procedures:

- Inspect the IT Policy for backup procedures, including the location and frequency of back-ups.

- Request the past back-ups performed and verify that they were conducted in accordance with the policy requirements.

6.12 Antivirus

Objective(s): To confirm whether the organization has up-to-date antivirus software installed on all laptops, computers, and servers.

Procedures:

- Inspect a sample of workstations for antivirus and anti-malware software and verify that the latest versions were installed.

- Ask for evidence of when the software was last run, if not automatically set.

- Select a few of the organization's computers or laptops on a random basis to verify if antivirus and anti-malware software are installed and up to date.

6.13 Firewall

Objective(s): To confirm if the organization has a working firewall in place to establish a barrier between the internal network and incoming traffic from external sources (such as the internet) to block malicious traffic like viruses and hackers.

Procedures:

- Inspect a sample of workstations so see if a firewall is installed.

- Inquire with the IT manager about how access is controlled and obtain the necessary proof of whether the organization uses a router or wireless network.

6.14 Guest Network

Objective(s): To confirm whether the organization has a separate network for guests that does not allow access to the organization's network.

Procedures:

- Load the available options for connecting to a Wi-Fi network onto a personal computer/cellphone and verify that the guest network is available.

- Verify whether it is password-protected if it is available and inquire how frequently the password is changed.

6.15 Operating System Updates

Objective(s): To confirm that the organization's servers and client computers are updated with the latest operating system and third-party software patches, drivers, and firmware.

Procedures:

- Obtain the server update log and verify whether regular updates for the operating system and third-party software patches, drivers, and firmware have been conducted.

- Verify if the frequency of updates is as defined in the IT Policy.

- Verify, through inquiry, the version of the operating system and internet browser, and confirm if they are supported by software developers.

- Inquire and verify if the software updates and patches automatically.

- Request and obtain patches and update log reports.

6.16 Updating Workstations –Laptops and Computers

Objective(s): To confirm that the organization's servers and client computers are updated with the latest operating system and third-party software patches, drivers, and firmware.

Procedures:

- Inquire from management if some employees use personal laptops or tablets for business purposes.

- Review the IT Policy to verify if personal laptops or tablets are allowed and in use, and if any data security measures are in place.

- Verify, through inquiry and desktop review, if workstation management systems are in place and if workstations are configured and maintained in the same way, with a standard package of software installed (standard operating environment).

6.17 Software Installation and License

Objective(s): To confirm if software installation is addressed in the IT Policy and if software may only be installed by a delegated IT staff member.

Procedures:

- Check for a policy or procedure to determine which software is authorized/not authorized.

- Attempt to load software on a sample of workstations and verify that the attempts are blocked.

- Check the license and expiration date for each commercial software package on a sample of computers.

6.18 Passwords

Objective(s): To confirm if there is a documented policy or procedure on passwords to access workstations and for system access.

Procedures:

- Inquire with the head of IT whether there are systems to ensure the security of passwords and access to financial system records.

- Perform a walk-through to determine effectiveness.

- Verify whether there is a policy or procedure regarding password retention, physical security of computers, etc.

6.19 Automatic Shutdowns

Objective(s): To confirm if the organization has automatic shutdowns and system locks if computers are idle for a defined period.

Procedures:

- Inquire with the head of IT whether there are automatic shutdown/system locks for the finance department and associated computers.

- Attempt to gain access to one of the systems.

6.20 Licenses

Objective(s): To confirm whether the organization has valid licenses for all software used.

Procedure:

- Check the license and expiration date for each commercial software package on a sample of computers.

Key Risks to be Considered

1. Lack of adequate IT policies in place
2. Noncompliance with IT policies and procedure requirements
3. Lack of IT plans
4. No IT risk assessments performed
5. Inadequate access controls
6. Loss of information or data

MODULE 7: HUMAN RESOURCES

Background:

This domain requires a review of the Human Resources (HR) Policies and Procedures to assess their adequacy, as well as the design of internal controls and whether these controls are implemented as designed.

Estimated time for execution of this domain: 40 hours (including the background reading)

Skills and experience required for effective execution of this domain: an assessor with more than two years of experience in human resources administration.

Overall Objective:

To verify whether the organization has adequate and effective HR policies and procedures in place and whether these are followed in practice.

NUPAS Human Resources Domain Categories:

1. **Overall HR Policies and Procedures**
2. **Staff Time Management**
3. **Payroll System**
4. **Travel**

NUPAS Plus 2.0 Human Resources Domain Categories:

5. **HR Policies and Procedures**
   1. Fair Recruitment
   2. Files for Recruitment
   3. Reference and Salary Checks
   4. Vacancies
   5. Personnel Files
   6. Orientation
   7. Career Advancement
   8. Professional Development Opportunities
   9. Personnel Appraisals
   10. Attrition
   11. Resignations

6. **Staff Time Management and Payroll**
   1. Staff on Payroll
   2. Payroll Changes
   3. Payroll Approval
   4. Deductions
   5. Levels of Effort
   6. Organizational Chart (Organigram)

7. **STAFF TRAVEL**
   1. Expenses
   2. Staff Advances
   3. Lodging

8. **Personnel Data Protection**
9. **Diversity, Equality, and Inclusion (DEI)**
10. **Staff Wellness**
11. **HR Reports**
12. **Exit Interviews**
13. **Staff Engagement**
14. **Compensation**
15. **Security & Safety**
16. **Employee Relations**
17. **Timesheet**

NUPAS PLUS 2.0 HUMAN RESOURCES EXAMPLE

CATEGORY/ SUB-CATEGORY		OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
HR Policies and Procedures	Staff time management	Confirm that the organization has an established, reliable, and documented labor activity system that it enforces (i.e., timesheets).	Staff timesheets
	Payroll system	Confirm that the organization has a well-thought-out, well-documented, and effective payroll system (either in electronic or hard copy format) founded on sound payroll policies and procedures that are consistently followed. [Note: The payroll system can be either electronic or hard copy.]	Compensation Policy
	Travel policies and procedures	Confirm that the organization has and follows appropriate travel policies and procedures.	Travel Policy
	Fair recruitment	Confirm that the organization has processes in place to ensure fair recruitment.	HR Policy/Manual Employee handbook

Files for recruitment	Confirm that the organization maintains files that document the recruitment process followed.	Minutes of interviews/interview reports
Reference and salary checks	Confirm that the organization checks references and salary history.	Evidence of references and salary checks
Vacancies	Confirm that there are no vacant positions older than three months.	Organizational chart and vacancy profiles
Personnel files	Verify that personnel files are kept which contain basic information (e.g., appointment letter, employment contract, disciplinary documents, leave)	Personnel files
Orientation	Confirm if there is an orientation of new employees	Signed declaration by employee Attendance registers for induction sessions (if more than one person is employed at a time)
Career advancement	Confirm if the organization has prospects of career development, growth, and salary increases for employees	Salary increase letters Promotion letters
Professional development opportunities	Confirm if the organization has prospects for career development and growth for employees.	Authorization letter for development (e.g., for starting a course)
Personnel appraisals	Confirm that the organization's all staff have received a personnel appraisal every six or 12 months for the past three years.	Proof of personnel appraisals
Attrition	Verify if the organization has a practice in place to manage their staff complement (i.e., prevent large reductions in the workforce).	Written strategy for managing staff attrition
Resignations	Verify if the organization has a procedure in place to guide the resignation process.	Resignation/|termination letter

Staff Time Management and Payroll	Staff on payroll	Confirm that the organization has documented measures in place to ensure that the staff on the payroll are valid.	Payroll report Approved payroll reconciliations
	Payroll changes	Confirm that changes in salary/ allowances were approved.	Payroll change report
	Payroll approval	Confirm that the payroll is approved.	Payroll report
	Deductions	Confirm that all deductions are included on the payroll.	Payroll report
	Level of effort	Confirm that all staff working on the project have the LOE, the capacity, and the ability needed, and have been trained.	Donor agreement (LOEs will be stated here) Staff time sheets
	Organizational chart	Confirm that the organization has an up-to-date and approved organizational chart	Organizational chart Minutes in which the organizational chart was approved
Staff Travel	Expenses	Confirm that all reimbursed expenses are supported by valid source documents and that there are procedures to provide guidance	General ledger (to select a sample relating to employee expenses, such as travel/refreshments) Source documents
	Staff advances	Confirm that the organization reconciles expense claims for amounts advanced and that there are procedures to guide this process.	Expense claim reconciliations, together with supporting documents
	Lodging	Confirm that the local organization has a lodging policy and consistently applies it.	Lodging Policy
Data Protection		Confirm whether the organization has a Data Protection Policy and implements it.	Data Protection Policy

Diversity, Equality, and Inclusion (DEI)	Confirm whether there is a DEI policy in place and is effectively used, and there is evidence that the organization considers DEI issues when hiring, promoting, and in the development of staff, particularly there are initiatives to ensure minority groups are considered and represented in the organization.	DEI Policy
Staff Wellness	Confirm whether the organization has a staff wellness policy and implements initiatives to promote the physical and mental health of the employees, including through counseling services.	Staff Wellness Policy
HR Reports	Confirm that HR reports are prepared regularly providing management with HR data to track retention and staff engagement levels in the entire employee life cycle.	HR reports
Exit Interviews	Confirm that exit interviews are conducted with every staff separation, data from exit interviews is analyzed to identify the general trends for staff separation, and efforts are made to address the causes of exit.	Evidence of staff exit interviews and analysis of causes for staff separation
Staff Engagement	Confirm whether there is scheduled and/or regular communication to staff by management through staff meetings, town hall meetings, bulleting, and general communication from management, and the management always seeks and considers staff opinion on matters affecting staff.	Evidence (meeting minutes/rundown) of staff meetings, and town hall meetings as communication channels between staff and management
Compensation	Confirm that salary scales are available and have been adjusted at least every 3 years with Board approval and that the organization conducts market salary surveys at least every other year to ensure salaries are in line with the market.	Updated salary scale
Security & Safety	Confirm whether there are safety and security policies in place and whether all incidents are reported, investigated, and action taken to address the risk.	safety and security policies and procedures
Employee Relations	Confirm whether the organization has clear procedures for staff to raise their grievances, whether there is a prompt response to address	Complaints management procedure/policy

	them, and whether there are no pending labor/employment disputes.	
Timesheet	Confirm whether the timesheet includes budget codes for all the different projects and that ALL staff consistently submit on time without errors	Timesheet template

7.1 Overall HR Policies and Procedures

Objective(s): To confirm that the organization has instituted and follows HR policies, procedures, and practices.

[Note: Depending on the size and needs of the organization, HR policies will typically cover the hiring, promotion, recognition, retention, retirement, compensation and benefits, supervision, transfer, and termination of employees.]

Procedures:

- Review the HR Manual to see whether aspects such as staff retention, fair recruitment, a requirement for reference checks, need for orientation, career advancement, professional development opportunities, personnel appraisals, a procedure for resignations, a procedure for payroll payment process (including changes), approval, deductions, a requirement for the maintenance of personnel files, procedure on advances, lodging, and claiming for staff expenses, are addressed.

- Select a sample of transactions to test the above-mentioned aspects.

- Request the organizational chart and verify whether job descriptions exist for key employees.

- Request the compensation plan and verify whether methods and calculation basis for types of compensation are defined and relevant to the organization.

- Verify that roles, responsibilities, and delegations of authority are outlined. In the HR Manual

7.2 Staff Time Management

Objective(s): To confirm that the organization has an established, reliable, and documented labor activity system that it enforces (i.e., timesheets).

Procedures:

- Verify the following in the system:
    - Completion of timesheets is monitored (e.g., to prevent manipulation).
    - Hours are timely and accurately charged to projects.
    - Time usage is analyzed and used for future planning (e.g., resource expansion).
    - Statutory reporting functionality is available.
    - Request a sample of timesheets and verify whether the sheets are adequately designed and accurately completed.
    - Verify that the Level of Effort (LOE) is indicated as well.
    - Request a sample of timesheets and verify that supervisors sign their approval (and include the date signed).

- o Verify that time is accurately charged to the project, especially if the employee works on multiple projects.
- o Request system-generated reports and individual timesheets from the payroll administrator; compare these to verify agreement with the hours charged.

7.3 Payroll System

Objective(s): To confirm that the organization has a well-thought-out, well-documented, and effective payroll system (either in electronic or hard copy format) founded on sound payroll policies and procedures that are consistently followed.

[Note: The payroll system can be either electronic or hard copy.]

Procedures:

- Review compensation Policy.
- Inquire whether the organization has a payroll system, request a sample of salary slips, and verify that processing followed local laws and HR-specific policies and procedures.
- Confirm that this verification and reconciliation is performed on a monthly (or more frequent) basis.

7.4 Fair Recruitment

Objective(s): To verify whether a fair, effective, and ability-based recruitment system is in place.

Procedures:

- Inquire with management about whether a fair, effective, and ability-based recruitment system is in place.
- Verify, through inspection of the interview notes, that staff were indeed appointed fairly and based on merit.

7.5 Files for Recruitment

Objective(s): To verify that employee files exist, that the recruiting process was followed, and that documentation of the hiring procedure exists.

Procedures:

- Select a sample of employees from the employee list and request employee files, including documentation of hiring procedures.
- Verify whether the recruiting process was followed.

7.6 Reference and Salary Checks

Objective(s): To verify whether reference and salary checks are performed.

Procedure:

- Ask management whether they check references and salary history and verify if reference checks and salary history are documented.

7.7 Vacancies

Objective(s): To verify whether vacancies are filled quickly, within at least three months from the date of advertisement.

Procedure:

- Request the organizational chart and vacancy profiles and verify whether positions are filled within three months from the date of advertisement.

7.8 Personnel Files

Objective(s): To verify whether personnel files are kept and stored in secure locations.

Procedure:

- Select a sample of employees from the employee listing, request their files, and verify that these employee files are kept in secure locations.

7.9 Orientation

Objective(s): To verify whether new employees are oriented upon employment.

Procedure:

- Inquire with management whether new employees receive an orientation and check for evidence of any recently conducted.

7.10 Career Advancement

Objective(s): To verify whether there are prospects of career advancement and growth for employees, as well as salary increases.

Procedure:

- Inquire with management on the prospects of career advancement and growth for employees and obtain relevant evidence.

7.11 Professional Development Opportunities

Objective(s): To verify whether there are prospects of professional development appropriate to the organization.

Procedure:

- Inquire with management on the prospects of career development for their employees and obtain relevant evidence.

7.12 Personnel Appraisals

Objective(s): To verify whether the HR Policy addresses personnel appraisals and describes the process for conducting them, and that the organization's all staff have received a personnel appraisal every six or 12 months for the past three years.

Procedure:

- Review the HR policy on personnel appraisals and check files for appraisals.

7.13 Attrition

Objective(s): To verify whether the HR Policy addresses attrition, the preservation/replacement of positions, and whether the organization consistently adheres to the policy.

Procedures:

- Request the organization's Staff Retention Policy and review it for adequacy.
- Ask management, and any other official documents/reports, about staff attrition.

7.14 Resignations

Objective(s): To verify whether resignations are supported by genuine resignation or termination letters.

Procedure:

- Select a sample of terminated employees from the terminations list and request resignation or termination letters to verify their termination.

7.15 Staff on Payroll

Objective(s): To verify whether staff, at any given point in time as per the payroll report, are valid staff members.

Procedure:

- Select a sample of employees from the payroll listing and verify whether there are signed timesheets for the month or other signed evidence that the employee is a valid employee.

7.16 Payroll Changes

Objective(s): To verify whether changes in salary/allowances were approved.

Procedure:

- Select a sample of changes from the Payroll Change Report for the past six months and verify that changes in salary/allowances were approved.

7.17 Payroll Approval

Objective(s): To verify whether duly authorized officials approved the payroll.

Procedure:

- Select a sample of payroll approvals and verify that they were approved as per the HR Policy.

7.18 Deductions

Objective(s): To verify whether deductions were made in accordance with the HR Policy and applicable laws of the country.

Procedures:

- Select a sample of payroll deductions and verify that these were made according to the HR Policy and applicable laws of the country.
- Verify that all deductions are entered correctly while preparing payroll/pay sheets.

7.19 Levels of Effort

Objective(s): To verify whether the Level of Effort (LOE) is correctly determined and charged to projects via completed timesheets, especially when the employee works on multiple projects.

Procedure:

- Select a sample of timesheets and verify that the hours as per the timesheet were correctly charged to the project salary journal and project general ledger.

7.20 Organizational Chart

Objective(s): To verify whether the organization's structure is presented as a chart (or organogram) and annually approved by the Board.

Procedure:

- Verify that departments and key positions are correctly displayed on the organizational chart and request the latest approval of the chart.

7.21 Expenses

Objective(s): To verify that all expense claims for staff advances are checked against the advance amount and reconciled.

Procedure:

- Inquire with management whether there are any advances to staff and review the relevant reconciliations by management.

7.22 Staff Advances

Objective(s): To verify whether staff are given advances and whether there is a proper procedure to reconcile expenditures and recoup amounts (as necessary).

Procedure:

- Check staff advances are accurately calculated using Board approved rates for lodging and per diem.

7.23 Lodging

Objective(s): To verify whether lodging expenses were incurred and reimbursed in accordance with the HR (or other applicable) Policy.

Procedure:

- Check staff advances are accurately calculated using Board approved rates for lodging and per diem.

7.24 Personnel Data Protection

Objective(s): To verify whether the organization has a Data Protection Policy and implements it.

Procedure:

- Data Protection Policy- Inquiry with Management whether there are data protection safeguards and rights to protect personnel data from improper processing, transfer, and usage.

7.25 Diversity, Equality, and Inclusion (DEI)

Objective(s): To verify whether there is a DEI policy in place that is effectively used and whether there is evidence that the organization considers DEI issues when hiring, promoting, and in the development of staff, particularly to ensure minority groups are considered and represented in the organization.

Procedure:

- Inquiry with management whether there is DEI policy, procedures, and initiatives to promote DEI in hiring, promotion, and development of staff, and to increase the representation of minority groups.

7.26 Staff Wellness

Objective(s): To verify whether the organization has a staff wellness policy and implements initiatives to promote the physical and mental health of the employees, including through counseling services.

Procedure:

- Inquiry with management whether there are initiatives to promote staff wellness including mental health.

7.27 HR Reports

Objective(s): To verify that HR reports are prepared regularly providing management with HR data to track retention and staff engagement levels in the entire employee life cycle.

Procedure:

- Inquiry with management whether there are any HR reports produced regularly and whether there is use of HR data analytics to track retention, employee experience, and general data for decision making.

7.28 Exit Interviews

Objective(s): To verify that exit interviews are conducted with every staff separation; data from exit interviews is analyzed to identify the general trends for staff separation; and efforts are made to address the causes of exit.

Procedure:

- Inquiry with management whether exit interviews are conducted from separating employees and whether documentation exists to verify the exit interview.

7.29 Staff Engagement

Objective(s): To verify whether there is scheduled and/or regular communication to staff by management through staff meetings, town hall meetings, bulleting, and general communication from management and whether the management always seeks and considers staff opinion on matters affecting staff.

Procedure:

- Inquiry into whether two-way communication is promoted and whether there is a system to allow employees to provide input on decisions, as well as suggestions to improve the organization.

7.30 Compensation

Objective(s): To verify that salary scales are available and have been adjusted at least every 3 years with Board approval and that the organization conducts market salary surveys at least every other year to ensure salaries are in line with the market.

Procedure:

- Inquiry with management whether the organization has an updated salary scale (updated within the last 3 years) and whether market salary surveys are used to adjust the salary scale.

7.31 Security & Safety

Objective(s): To verify whether there are safety and security policies in place and whether all incidents are reported, investigated, and action taken to address the risk.

Procedure:

- Inquire whether there is a security and safety policies and procedures manual.

7.32 Employee Relations

Objective(s): To verify whether the organization has clear procedures for staff to raise their grievances, whether there is a prompt response to address them, and if there are no pending labor/employment disputes.

Procedure:

- Inquire whether there are policies and procedures in place for staff grievances and whether there is any pending legal suit concerning an employment dispute.

7.33 Timesheet

Objective(s): To verify whether the timesheet includes budget codes for all the different projects and if ALL staff consistently submit on time without errors.

Procedure:

- Review the Timesheet template and status of regular submissions.

Key Risks to be Considered

1. Completion of timesheets (using budgeted time instead of actual, non-completion)
2. Timesheets not approved
3. Key vacant positions not filled
4. Payroll reconciliations not performed/approved
5. Salary scales not in existence/approved
6. Personnel files incomplete

MODULE 8: MONITORING AND EVALUATION

Background:

The M&E domain requires a lot of background reading, including the Activity Monitoring and Evaluation Plan, work plans, activity reports, exploration of existing databases, data audit reports, data analysis plan, curriculum vitae (resume) of relevant staff, minutes of training on Monitoring and Evaluation (M&E) related topics, training curriculum, organizational charts for both the M&E unit and the overall organization.

Estimated time for execution of this domain: 60 hours (including the background reading)

Skills and experience required for effective execution of this domain: an assessor with more than five years of experience in designing, implementing, and reporting on an M&E system in general, and at least two years in a PEPFAR/donor-sponsored project.

Overall Objective: To assess if the organization has an adequate M&E system in place that complies with the reporting requirements for PEPFAR-sponsored projects, with an effective M&E structure.

NUPAS Plus 2.0 M&E Domain Categories:

1. **M&E Unit**
    1. Organigram
    2. Skills
    3. Experience
    4. Decision Making

2. **M&E Plan**
    1. AMELP
    2. Budget
    3. Workplan Analysis
    4. Performance Indicators

3. **Routine Monitoring**
    1. Equipment
    2. Forms
    3. Tools
    4. Tool Analysis
    5. SOPs

4. **Databases**
    1. PEPFAR Database
    2. Database Reporting
    3. Monitoring Reports

5. **Supervision and Data Quality**
    1. Tools
    2. Documentation
    3. Data audit
    4. Audit reports
    5. Use of Audit reports
    6. Training

6. **Data Use**
    1. Plan
    2. Documentation
    3. Course Correct
    4. Data Reviews

NUPAS Plus 2.0 MONITORING AND EVALUATION EXAMPLE

CATEGORY/ SUB-CATEGORY		OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
M&E Unit	Organigram	Confirm that the organization has an M&E unit, responsibilities are clearly defined in job descriptions and the number of permanent positions is adequate.	Organizational chart, CVs, and job description
	Skills	Confirm if all staff at the M&E unit have qualifications and experience that are specific to M&E.	CVs and job description
	Experience	Confirm if staff are expertly able to collate, process, and analyze data.	CVs, and job description
	Decision Making	Confirm if staff are expertly able to package the data to support decision-making, including preparing PowerPoint slides.	data presentation/visualization
Organizational M&E Plan	AMELP	Confirm if the organization has an M&E plan for its PEPFAF-funded project (or other projects) with all required components including	M&E plan as per USAID's AMELP template

		Performance Indicators Reference Sheet.	
	Budget	Confirm that specific resources (human, financial, and physical) have been committed to implementing the M&E plan with no gaps.	M&E budget
	Workplan Analysis	Confirm if activities in the work plan are allocated and have specific time frames for implementation with no gaps.	Annual work plan
	Performance Indictors	Confirm if the work plan contains clear and specific goals, activities, timelines, responsibilities, or performance indicators and targets.	Annual work plan
Routine monitoring	Equipment	Confirm if essential tools and equipment for data management are consistently available.	Data collection and reporting tools and equipment
	Forms	Confirm if all tiers of data collection and reporting are using standard data collection forms with no gaps.	Standard data collection forms
	Tools	Confirm if there are tools used to capture essential indicators for routine performance monitoring.	Data collection and reporting tools and equipment

	Tool Analysis	Confirm if the organization has consistently identified gaps in the existing tools that need to be updated.	Relevant documentation
	SOPs	Confirm if there are M&E guidelines to document the procedures for recording, collecting, collating, and reporting routine data from the health information system.	SOPs
Databases	PEPFAR Database	Confirm if the organization's database for capturing and storing PEPFAR data is up to date.	PEPFAR Database observations
	Database reporting	Confirm if the database consistently captures all data elements required by the organization's M&E system.	Project M&E Reports
	Monitoring Reports	Confirm if the organization can generate routine monitoring reports using its databases	Project M&E Reports
Supervision and Data Audit	Tools	Confirm if guidelines and tools for supportive supervision are available.	Routine Data Quality Assessment (RDQA) tool and reports
	Documentation	Confirm if the last supportive supervision was conducted in accordance with the	Relevant supporting documents

		current guidelines with no gaps.	
	Data audit	Confirm if policies, procedures, and tools for data quality audits are available and always used.	Relevant policies, procedures, and tools
	Audit reports	Confirm if data quality audits are conducted as per the stipulated procedures and proper post-RDQA follow-up action items are implemented.	Routine Data Quality Assessment (RDQA) tool and guidelines and audit reports
	Use of Audit reports	Confirm whether the findings and feedback from the data quality audit are shared with stakeholders.	M&E data quality audit reports
	Training	Confirm if staff are appropriately trained to carry out tasks relating to the assessment of data quality (completeness, timeliness, accuracy, reliability) with no gaps.	Relevant supporting documents
Data Demand and Use	Plan	Confirm if the organization has a data use plan for its PEPFAR-funded project.	Data use plans, AMELP/M&E Plan
	Documentation	Confirm if the data use plan is fully implemented.	Relevant supporting documents
	Course Correction	Confirm if routine data is used to design effective remediation measures.	Meeting minutes/notes; presentations or dashboards

	Data Reviews	Confirm if the organization regularly conducts a systematic review of data involving technical and M&E staff, learns from it, and makes performance improvement decisions.	Meeting minutes/notes; presentations, decision makings

8.1 M&E Unit

Objective(s): To confirm if the organization has the proper number of M&E staff with the right skills, clear roles, responsibilities, and resources needed to carry out M&E functions for the project.

Procedures:

- Review the organizational chart; review job descriptions to check if responsibilities are defined; check if a staff member or unit is in place.

- Review qualifications of M&E staff by obtaining curriculum vitae/résumé or conducting an interview with the M&E official. Verify whether staff have the appropriate qualifications.

- Inspect the M&E training curriculum and verify that it includes a session or sub-session on gender in M&E with no gaps; check if gender disaggregation and other gender reporting requirements are included.

- Verify whether the staff is aware and conversed with the process of collating, processing, and analyzing data through discussions with M&E personnel and review of reports and data analysis samples.

8.1.1 Organigram

Objective(s): To confirm that the organization has an M&E unit, responsibilities are clearly defined in job descriptions, and the number of permanent positions is adequate.

Procedure:

- Review the organizational chart and the job descriptions to check if responsibilities are defined, and check if a staff member or unit is in place.

8.1.2 Skills

Objective(s): To confirm if all staff at the M&E unit have qualifications and experience that are specific to M&E.

Procedures:

- Review the qualifications of M&E staff by obtaining a CV/interview of the M&E official and verify whether he/she has appropriate qualifications that match their job description.

- Ask if at least one M&E staff has skills/experience in developing AMELP, and data analysis using Excel, Power Point, and indicators reference sheets.

8.1.3 Experience

Objective(s): To confirm if staff are expertly able to collate, process, and analyze data.

Procedure:

- Through discussions with M&E personnel and reviewing reports and data analysis samples, verify whether staff is well conversed with the process to collate, process, and analyze data. Past training could also aid in making this determination.

8.1.4 Decision Making

Objective(s): To confirm if staff are expertly able to package the data to support decision-making, including preparing power point slides.

Procedure:

- Enquire the process followed to package information, and how it is used to support decision-making, this includes preparation of PowerPoint slides or other form data presentation/visualization.

8.2 M&E Plan

Objective(s): To check if the organization has a well-developed and comprehensive AMELP as required by USAID for its USAID-funded projects. Also, to check if the organization has a detailed work plan for which enough resources are allocated.

Procedures:

- Check the M&E Plan for completeness and quality and if it complies with USAID's Activity Monitoring, Evaluation, and Learning Plan (AMELP) standards.
- Check the budget allocated for M&E or get an estimate if there is no separate M&E budget.
- Perform a gap analysis (sequence of tasks between various programs) on the annual work plan by verifying that the work plan contains clear and specific goals, activities, timelines, responsibilities, or performance indicators and targets.

8.2.1 AMELP

Objective(s): To confirm if the organization has an M&E plan for its PEPFAF-funded project (or other projects) with all required components including the Performance Indicators Reference Sheet.

Procedure:

- Check the M&E Plan for completeness and quality, and if it is up to date, and use USAID's AMELP template as a standard.

8.2.2 Budget

Objective(s): To confirm that specific resources (human, financial, and physical) have been committed to implementing the M&E plan with no gaps.

Procedures:

- Refer to the organogram or otherwise review the minutes of the meeting where the M&E work plan was deliberated.

- Check the budget allocated for the M&E function or get an estimate if there is no separate M&E budget.

8.2.3 Workplan Analysis

Objective(s): To confirm if the activities in the work plan are allocated and have specific time frames for implementation with no gaps.

Procedure:

- Verify that activities in the work plan are allocated and have specific time frames for implementation with no gaps.

8.2.4 Performance Indicators

Objective(s): To confirm if the work plan contains clear and specific goals, activities, timelines, responsibilities, or performance indicators and targets.

Procedure:

- Verify that the work plan contains clear and specific goals, activities, timelines, responsibilities, or performance indicators and targets.

8.3 Routine Monitoring Tools

Objective(s): To examine the existence of management systems, tools, and practices for conducting routine monitoring of program activities, including collecting and reporting data.

Procedures:

- Check with management whether essential tools (paper-based or electronic) and equipment for data management are available.

- Check with management whether the essential tools are standard and in use by all tiers.

- Check with management whether the tools include essential indicators for routine performance monitoring.

- Check if there are written M&E guidelines to document the procedures for recording, collecting, collating, and reporting routine data from the health information system.

8.3.1 Equipment

Objective(s): To confirm if essential tools and equipment for data management are consistently available.

Procedure:

- Inquire with management about the tools and equipment available for the collection and reporting of data. (If the local partner uses paper-based systems, the forms/registers should be available, and if the local organization uses electronic tools the required equipment should be available).

8.3.2 Forms

Objective(s): To confirm if all tiers of data collection and reporting are using standardized data collection forms with no gaps.

Procedure:

- Inquire with management about the tools and equipment available for the collection and reporting of data.

8.3.3 Tools

Objective(s): To confirm if there are tools used to capture essential indicators for routine performance monitoring.

Procedure:

- Inquire with management about the tools and equipment available for the collection and reporting of data.

8.3.4 Tool Analysis

Objective(s): To confirm if the organization has consistently identified gaps in the existing tools that need to be updated.

Procedure:

- Inquire with management about whether they conduct an analysis of M&E tools.

8.3.5 SOPs

Objective(s): To confirm if there are M&E guidelines to document the procedures for recording, collecting, collating, and reporting routine data from the health information system.

Procedure:

- See written M&E guidelines and procedures for recording, collecting, collating, and reporting program information.

8.4 Databases

Objective(s): To assess the existence of the standard database, data collection, and storage systems for PEPFAR projects.

Procedures:

- Check if the organization has a database for capturing and storing PEPFAR data.
- Obtain reports from management to check if the database captures all data elements required by the organization's M&E system.
- Request reports to check if the organization can generate routine monitoring reports using its databases.

8.4.1 PEPFAR Database

Objective(s): To confirm if the organization's database for capturing and storing PEPFAR data is up to date.

Procedure:

- Standard database for PEPFAR Database

8.4.2 Database Reporting

Objective(s): To confirm if the database consistently captures all data elements required by the organization's M&E system.

Procedure:

- Proof by M&E Reports.

8.4.3 Monitoring Reports

Objective(s): To confirm if the organization can generate routine monitoring reports using its databases.

Procedure:

- Projects M&E Reports (Last two months).

8.5 Supervision and Data Quality

Objective(s): To assess the existence of M&E policies, procedures, tools, and review for the data quality audit and supervision. This includes checking the availability of written M&E guidelines and procedures for recording, collecting, collating, and reporting program information.

Procedures:

- Inquire with management on the availability of supportive supervision tools and guidelines.
- Obtain a sample supportive supervision report from management and check compliance with the tool and guidelines.

- Check with management on the availability policy, procedures, and tools for data quality audits.
- Obtain sample data-quality audit reports from management and check their compliance with the policy and procedures.
- Verify whether staff have undergone training (with due regard to their existing qualifications) to carry out tasks relating to the assessment of data quality (completeness, timeliness, accuracy, and reliability).

8.5.1 Tools

Objective(s): To confirm if guidelines and tools for supportive supervision are available.

Procedure:

- Inquire with management about supportive supervision tools and guidelines.

8.5.2 Documentation

Objective(s): To confirm if the last supportive supervision was conducted in accordance with the current guidelines with no gaps.

Procedure:

- Inquire with management and obtain corroborative evidence.

8.5.3 Data Audit

Objective(s): To confirm if policy, procedures, and tools for data quality audits are available and always used.

Procedure:

- M&E policies and procedures, review for a procedure for the audit of data.

8.5.4 Audit Reports

Objective(s): To confirm if data quality audits are conducted as per the stipulated procedures and proper post-RDQA follow-up action items are implemented.

Procedures:

- M&E data quality audit reports.
- Check the frequency of routine data quality audits, and if there are guidelines for conducting RDQA.
- Review the last RDQA report, the data verification process, RDQA reports, and feedback/post-RDQA follow-up processes.

8.5.5 Use of Audit Reports

Objective(s): To confirm whether the findings and feedback from the data quality audit are shared with stakeholders.

Procedure:

- M&E data quality audit reports.

8.5.6 Training

Objective(s): To confirm if staff are appropriately trained to carry out tasks relating to the assessment of data quality (completeness, timeliness, accuracy, reliability) with no gaps.

Procedure:

- Verify whether staff have undergone training (with due regard to their existing qualifications).

8.6 Data Use

Objective(s): To examine the organization's data demand and use capabilities and practices, including reviewing different data-use practices, such as data-review meetings and remedial action plans informed by data.

Procedures:

- Inquire with management on the availability of a data-use plan for its PEPFAR-funded project.
- Obtain sample minutes/notes or presentations from management and check compliance with the data-use plan.
- Obtain sample minutes/notes or presentations from management and check whether routine data are used to design effective remediation measures on project implementation.
- Obtain sample reports, data-review meetings presentations, etc., from management, and check whether gender analysis and reporting are included in the data analysis and are presented in the data use/review practices.

8.6.1 Plan

Objective(s): To confirm if the organization has a data use plan for its PEPFAR-funded project.

Procedure:

- Proof of data use plan.

8.6.2 Documentation

Objective(s): To confirm if the data use plan is fully implemented.

Procedure:

- Check minutes/notes and presentations.

8.6.3 Course Correction

Objective(s): To confirm if routine data is used to design effective remediation measures.

Procedure:

- Check minutes/notes, presentations, or dashboards and ask how they used data.

8.6.4 Data Reviews

Objective(s): To confirm if the organization regularly conducts a systematic review of data involving technical and M&E staff, learns from it, and makes performance improvement decisions.

Procedure:

- The organization uses data for decision-making and performance improvement.

Key Risks to be Considered

1. The project does not have an Activity Monitoring Evaluation and Learning Plan (AMELP) or M&E Plan
2. Insufficient M&E staff
3. No guidance for conducting routine data quality assessment (RDQA)

Case Study for Monitoring & Evaluation

NUPAS PLUS 2.0 ASSESSMENT: MONITORING AND EVALUATION

CASE STUDY

Please read the below case, which is extracted from a past review. For this practice, assume that you have already received all the review documents and conducted interviews of all staff and management that need to be interviewed to complete the M&E and Performance Management domains. Based on the information you have in the case presented above, score performance management and M&E domains, and identify areas for improvement.

Desk review and interview of M&E staff for NGO1 reveal that they have the following:

NGO 1 started implementing USAID-funded programs in 2017. The NGO currently has two USAID-funded programs being implemented in five districts of country X. The M&E unit is led by a MEL Director and has five M&E Officers and six M&E Assistants. All have a clearly defined job description for their specific post. The MEL Director is part of the senior management team. All the M&E Officers have at least a relevant bachelor's degree. Although NGO 1 has no formal M&E training curriculum, their M&E staff have received on-the-job M&E training. NGO 1's Activity Monitoring, Evaluation, and Learning Plan (AMELP) shows evidence of data disaggregation by gender, and previous reports adhered to gender reporting requirements.

The M&E team has program-specific dashboards with up-to-date data that inform decision-making.

The organization does not have a data-use plan for its USAID-funded projects. However, the organization has shown efforts to use its data by creating electronic dashboards. Evidence from the dashboards and activity reports indicates that the NGO uses routine data to design effective remedial measures despite not having a formal data use plan. The organization has systems and tools for capturing sex-disaggregated data. Under one of its projects, the organization reports PEPFAR indicators such as the percentage of Orphans and Vulnerable Children (OVC) aged 10-17 that received adolescent HIV prevention and sexual reproductive health services (OVC_HIVPREV). In addition, they have:

1. Well-developed and approved results framework for each project.

2. Three quarterly reports that show the organization provides progress versus target for each key performance indicator.

3. A draft project management manual.

4. Five experienced and trained project managers who are led by the head of programs.

5. Managers that are all university graduates, with additional training in different disciplines; supervise 13 program officers serving under various projects.

6. A well-developed Activity Monitoring, Evaluation, and Learning Plan (AMELP).

7. A process in place for monitoring, evaluating, and learning from implementation to adapt and achieve results.

The management ensures that the organization has adequate information for the NGO's program management and that data is consistent with the data and learning needs of the projects.

M&E SUMMARY SCORES FOR NGO 1

Criteria	NGO 1
M&E Unit	3.67
Organizational M&E Plan	1.00
Routine Monitoring	4.00
Databases	2.50
Supervision and Data Audit	3.50
Data Demand and Use	3.00
Technical Reporting	4.00
Average Score	**3.50**

MODULE 9: GENDER AND SOCIAL INCLUSION (GESI)

Background:

This domain requires knowledge of key gender terminologies and background reading to verify and triangulate data gathered through focus group discussions/interviews.

Skills and experience required for effective execution of this domain: an assessor with at least three years of experience in gender and development.

Overall Objective:

To create a useful and easy-to-use tool for undertaking gender audits as well as social inclusion interventions.

This tool has the following two specific objectives:

1. Assess an organization's capacity for gender mainstreaming and social inclusion at three levels: organizational level, project/program level, and individual level.

2. Identify existing gender mainstreaming and social inclusion gaps useful for designing a gender strategy/ gender mainstreaming capacity development plan.

NUPAS Plus 2.0 GESI Categories:

1. **Gender Equality Policy**
2. **Gender Integration Training for Staff**
3. **Gender Budgeting**
4. **Gender Equality and Women's Empowerment in the Mission Statement**
5. **Gender Focal Point**
6. **Gender and Gender-Based Violence (GBV) Issues Integrated into Programmatic Strategies**
7. **Sex Disaggregation of Data on Program Beneficiaries**
8. **Gender Analysis**
9. **Strategic Plan for Gender Equality**
10. **Gender Roles and Responsibilities**
11. **Sexual Harassment and Abuse Policy**
12. **Gender Communication**
13. **Gender Parity in Top-Level Leadership and Technical Positions**
14. **LGBTG Disaggregation**
15. **Equal Opportunity Policies**
16. **Family-Friendly Policies**
17. **LGBT Policy**

Procedures to be undertaken for a review of the GESI domain:

- Review of documents (Estimated time required: 48 hours)
- Interviews or focus group discussion (Estimated time required: 8 hours)

Documents to be requested for effective review of GESI:

- Gender equality policy, guideline, and/or checklist/manual
- Strategic plan
- Human resource policy
- Sexual harassment policy, if any
- Gender integration staff training report and attendance sheet, if any
- USAID-funded project/program work plans, as well as annual/quarter reports
- Gender analyses report, if any
- Gender audit report, if any
- Communications materials (brochures, newsletters) and strategy
- Organizational chart
- Job descriptions for staff (sample job descriptions from management, gender focal person, human resource, program/project manager, etc.) and staff appraisal forms
- Project reports
- Project work plans
- Tools for gender mainstreaming if any
- Sample staff recruitment and promotion minutes
- Budgets

Members to be considered for interviews (one-on-one or group discussion format):

- Program Director
- Monitoring and Evaluation Director
- Gender Expert/ Focal Person
- Delegate from Human Resource and Administration
- Delegate from Finance

NUPAS Plus 2.0 GENDER AND SOCIAL INCLUSION EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Gender Equity Policy	Assess if the organization has a gender policy and/or gender mainstreaming guidelines.	Gender policy and implementation guideline/ manual

Gender Integration Training for Staff	Assess if the organization has regular mandatory gender integration training for its staff.	Gender integration training minutes; training attendees
Gender Budgeting	Assess if the organization employs gender budgeting at both institutional and project levels.	Check the budget and ask if a percent of the budget is allocated to implement the gender policy
Gender Equality and Women Empowerment in Mission Statement	Assess if the organization has a mission statement that clearly promotes gender equality and women's empowerment, with a strategy that facilitates its achievement.	Strategic plan (read mission statement)
Gender Focal Point	Assess if the organization has assigned a gender focal person with clear roles and responsibilities for integrating gender, both at the institutional and program/project level.	Organizational chart; job description of assigned gender focal person (if any)
Gender and GBV Issues Integrated into Programmatic Strategies	Assess if the organization addresses gender and gender-based violence in programs targeting men and women, as well as girls and boys.	Workplan and other project documents
Sex Disaggregation of Data on Program Beneficiaries	Assess if the organization has a policy or procedures on sex disaggregation of beneficiaries for targets and results	Gender policy; organizational/program database or reports
Gender Analysis	Assess if the organization conducts a gender analysis, including all five categories and includes five categories: access; knowledge, belief, and practices; practices and participation; time/space as well as legal).	Gender analysis report
Strategic Plan for Gender Equality	Assess if the organization has a strategic plan with gender equality or women's empowerment activities, monitors it regularly, and is on track.	Strategic plan; gender audit report
Gender Roles and Responsibilities	Assess if the organization's gender roles and responsibilities are integrated into all staff job descriptions (including those of top-	Sample of staff job descriptions (gender focal person, top management, human resource, project staff)

	level leadership) and assess if staff is monitored for their respective gender mainstreaming mandates during performance appraisal.	
Sexual Harassment and Abuse Policy	Assess if the organization has a zero-tolerance sexual harassment policy with a code of conduct that is signed by all staff and a reporting system.	Sexual harassment and abuse policy; human resource policy
Gender Communication	Assess if the organization has incorporated gender equality in its communications and media strategies and reflects a gender perspective in its communication materials (such as brochures, and newsletters).	Gender policy; communication strategy; brochures, flyers, newsletter
Gender Parity in Top-Level Technical and Leadership Positions	Assess if the organization has planned and achieved gender parity at top-level leadership (including board and higher-level management) and level of project/ program/ technical staff.	Gender policy/strategy; current sex-disaggregated staff data
LGBTG Disaggregation	Verify if the organization has planned and achieved gender parity in both top-level leadership (including board and higher-level management) and project/program/technical staff.	Supporting documents
Equal Opportunity Policies	Assess if the organization has a human resources policy promoting equal opportunity, and nondiscrimination, and uses affirmative measures in hiring and promotion.	Human resources policies; staff recruitment/promotion minutes
Family-Friendly Policies	Assess if the organization has a family-friendly human resources policy for ensuring gender equity at the workplace.	Human resources policies; gender policy
LGBTQ Policy **	In countries where it is legal, assess if the organization has LGBTQ inclusive policy	Human resources policies; gender policy

** **Note**: This question should not be administered in countries where advocating for or discussing LGBTQ issues is banned legally.

9.1 Gender Equity Policy

Objective(s): To verify whether the organization has a Gender Equity Policy or mainstreaming guideline/gender mainstreaming manual.

Procedures:

- Prior to the focus group discussion, the assessor needs to check whether the organization has a gender policy and/or a gender mainstreaming guideline through document review.
- If they have a gender policy, the assessor needs to ask the following question during the focus group discussion:
  - "How often is the gender policy put into practice?"

9.2 Gender Integration Training for Staff

Objective(s): To verify whether the organization regularly provides gender integration training to staff.

Procedures:

- Rating of this domain can start with the focus group discussion, with a document review required to verify the collected data (data training reports and number of training attendees).
- The assessor shall pose the following questions:
  - Is gender integration training provided to staff? If yes, how often does the organization plan and conduct such training? And how many staff have attended the training?

9.3 Gender Budgeting

Objective(s): To verify whether the organization employs gender budgeting at institutional and project/program levels.

Procedures:

- Scoring of gender budgeting requires first focus group discussion and verification of collected data through document review of budgets.
- The two key questions that the assessor should raise are the following:
  - Is there specific budgeting/funding for operationalizing and implementing the gender policy and/or gender mainstreaming and gender equality activities?
  - Is there specific budgeting/funding for staff capacity-building around gender integration?

Note: Implementation of the gender policy requires allotting financial resources at the institution (e.g., gender integration training, hiring gender expert consultants on a part-time or full-time basis; budget for conducting gender audit, etc.) and project level (funding for conducting gender analysis, etc.). If the organization has a mission statement that explicitly or implicitly promotes gender equality and implements projects/programs, then 100 percent of the needed financial budget is already available at the program/project level. The key issue is to check whether a budget is available at the institutional level to implement the gender policy.

9.4 Gender Equality and Women's Empowerment in Mission Statement

Objective(s): To verify if the organization has a mission statement that clearly promotes gender equality and women's empowerment, has a gender strategy that facilitates achievement of the stated gender equality and women's empowerment vision, and if the gender strategy is consistently implemented.

Procedures:

- The assessor shall read the organization's mission statement, outlined under its strategic plan, to identify how it contributes to gender equality and women's empowerment.

- The assessor will read the mission statement during the focus group discussion and discuss whether gender equality is explicitly or implicitly included. Another possible scenario is that the mission statement might not reflect gender equality and/or women's empowerment at all.

- For organizations with a mission statement that reflects gender equality (either implicitly or explicitly), the most important issue the assessor should clarify is how often the mission statement is put into practice. In other words, the assessor should identify whether the organization has a gender strategy that facilitates the achievement of its vision, and how often that strategy is put into practice.

9.5 Gender Focal Point

Objective(s): To verify if the organization has assigned a focal person for gender who has a responsibility to integrate gender into the organizational and project/program mandates.

Procedures:

- Score this domain by completing both a document review of the organizational chart and a focus group discussion.

- Ask the participants of the focus group discussion whether there is a gender focal person/gender adviser. If their response is positive, identify whether that focal person/gender expert is providing part or all their time for gender mainstreaming.

9.6 Gender and GBV Issues Incorporated in Programmatic Strategies

Objective(s): to verify if the organization has gender or GBV strategies or programs in place, and also check whether the organization integrates gender into its existing programs/projects.

Procedures:

- Score this criterion by conducting a document review of the organization's work plan and sample reports.

- Raise this domain during focus group discussions and document participants' responses.

9.7 Sex-disaggregation of Data on Program Beneficiaries

Objective(s): To verify if the organization has policies and procedures on sex disaggregation of beneficiaries for targets and results.

Procedure:

- Score this domain by conducting a document review, primarily of the gender policy/manual/guideline and sample reports.

9.8 Gender Analysis

Objective(s): To verify if the organization has experience conducting gender analysis as part of its planning and monitoring activities, which includes access; knowledge, belief, practices and participation; time/space, and legal[1].

Procedures:

- Review the gender analysis report (this is the key assessment method for the gender analysis domain).
- Identify whether the organization has experience in conducting gender analysis or not. If no experience, then the scoring will be inadequate.
- Read the analysis report if the organization has experience in conducting gender analysis and check what domains have been included.

9.9 Strategic Plan for Gender Equality

Objective(s): To verify if the organization has a strategic plan for gender equality or women's empowerment activities, monitors their plan regularly, and is on track.

Procedures:

- Document review and focus group discussions (these are vital to scoring this domain).
- Review the strategic plan before the focus group discussion and assess whether gender mainstreaming is included or not. During the discussion, the following questions should be asked of participants:
    - Does the organization monitor women's empowerment and gender equality?

  (Note: The gender audit will enable the assessor to measure the level of monitoring). Therefore, the follow-up question will be:
    - Is a gender audit conducted? If yes, what do the results imply?
- Review the gender audit and score it in line with the result (the assessor shall decide how effectively the women's empowerment and gender equality strategy is implemented—i.e., is it 80 percent on track, or can we say 100 percent?).

9.10 Gender Roles and Responsibilities

Objective(s): To verify if gender roles and responsibilities are integrated into staff job descriptions in addition to the gender focal person.

Procedure:

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[1] Additional information on conducting a gender analysis is available at
https://pdf.usaid.gov/pdf_docs/Pnadt865.pdf

- Score this domain primarily based on a review of sample job descriptions and forms for management positions, the gender focal person, human resources, program/project manager, and staff appraisal.

9.11 Sexual Harassment and Abuse Policy

Objective(s): To verify if the organization has a zero-tolerance sexual harassment policy with a code of conduct signed by all staff and a reporting system.

Procedures:

- Score this domain primarily by reviewing the organization's sexual harassment and abuse policy/guidelines. If there is no formal policy on sexual harassment and abuse, review its human resource manual and gender policy.
- Also, conduct focus group discussions to identify whether a sexual harassment reporting system is in place.
- Ask the focus group participants:
  - Does the organization's reporting system address sexual harassment (at the office level) and abuse (on beneficiaries)?

9.12 Gender Communication

Objective(s): To verify if gender equality is incorporated in the organization's communications and media strategies and if a gender perspective is reflected in its communications materials, such as brochures, newsletters, etc.

Procedures:

- Score by reviewing communications materials and the results of focus group discussions.
- Score the focus group findings primarily based on how gender quality and women's empowerment are portrayed in the organization's communications, communication materials, and media strategy (if any).

9.13 Gender Parity in Top-Level Leadership and Technical Positions

Objective(s): To verify if the organization has planned and achieved gender parity in both top-level leadership (including board and higher-level management) and project/program/technical staff.

Procedure:

- Score this domain based on staff data gathered from human resources.

9.14 LGBTG Disaggregation

Objective(s): To verify if the organization has planned and achieved gender parity in both top-level leadership (including board and higher-level management) and project/program/technical staff.

Procedure:

- Check gender policy and implementation guidelines.

9.15 Equal Opportunity Policies

Objective(s): To verify if the organization has a human resources policy promoting equal opportunity and nondiscrimination and uses affirmative measures in hiring and promotion.

Procedures:

- Score this domain using document analysis and focus group discussions.

- Review the organization's human resource manual and sample staff recruitment and promotion minutes. Remember that the organization might be taking affirmative measures without instituting a formal policy. Focus group discussions can be an excellent way to discover whether this is the case.

9.16 Family-Friendly Policies

Objective(s): To verify if the organization has a family-friendly human resources policy for ensuring gender equity in the workplace. The primary purpose of a family-friendly policy is to create a work environment that responds to specific gender needs (special time arrangements for breastfeeding mothers, assigning space for daycare and breastfeeding, etc.) or for gender equity purposes.

Procedures:

- Score this domain via document review and interview staff on areas that need clarification.

- Review the organization's human resource and gender policies to identify existing family-friendly work arrangements.

- Conduct focus groups as family-friendly work arrangements might be in practice without formal policies being in place.

9.17 LGBT Policy

Objective(s): To verify if the organization has a policy and is consistently inclusive of LGBTQ in the workplace and programmatic policies and reports on it.

Procedures:

- Note: This question should not be administered in countries where advocating for or discussing LGBT issues is banned legally.
- Check gender policy and implementation guidelines.

NUPAS PLUS 2.0 ASSESSMENT: GENDER EQUITY AND SOCIAL INCLUSION MODULE

CASE STUDY[1]

Participants will watch a video presentation on conducting a NUPAS Plus Gender assessment and after the video, there will be a Q&A session. NUPAS Plus GESI Scores will be shared with participants for discussion during the Q&A session. For the practice exercise, assume that you have already received all the review documents.

Background

SaveLives, established in 2016, is a local non-profit organization based in Freelandia. Partnering with other local organizations, SaveLives has implemented HIV/AIDS programs funded by PEPFAR, USAID, and UNICEF. As of 2019, it received prime funding from USAID to carry out two projects: 1) DREAMS (**D**etermined, **R**esilient, **E**mpowered, **A**IDS-free, **M**entored & **S**afe) Project, and 2) FAR (Freelandia Adherence & Retention) Project. Through its DREAMS Project, SaveLives targets adolescent girls (in and out of school), orphans and vulnerable children aged 9-19, and young women aged 20-24 and has a strong focus on gender equality and empowerment. A secondary target population is their male sexual partners aged 20-49.' The DREAMS Project aims to reduce HIV risk and transmission, decrease teenage pregnancy and gender-based violence rates among adolescent girls and young women using evidence-based interventions; and provide economic opportunities for young people, particularly young women. A gender analysis was conducted before starting the implementation of the DREAMS Project back in 2019. The FAR project aims to reduce the impact, transmission, and spread of HIV through a comprehensive, integrated community-based response that provides a range of treatment, care, and support interventions to vulnerable groups living with or affected by HIV. The project is implemented in 8 of the 15 regions in Freelandia.

SaveLives has 20 permanent employees and 50 community volunteers for the implementation of projects. It has a dedicated gender focal person who has been assigned to the DREAMS Project, however, there is not a gender focal person that is involved in gender mainstreaming throughout the organization. The organization has a mission statement posted in its reception area which reads: **"SaveLives aims to achieve sustainable advances in health care around the world by implementing health education programs and providing humanitarian assistance in areas of need."** The organization also has an equal opportunity policy dating back to 2016 to ensure against discrimination on the bases of gender, disability, sexual orientation, age, marital status, and parental status. SaveLives has a zero-tolerance sexual harassment policy with a code of conduct that is signed by all staff when they are hired. The organization also has a human resources policy promoting equal opportunity and nondiscrimination and uses affirmative measures in hiring and promotion.

The USAID Mission in Freelandia has requested your organization to conduct a Gender and Social Inclusion Assessment using the NUPAS Plus tool. *The NUPAS Plus Excel sheet with answers for the GESI Module Case Study is available online at* **NUPAS Plus Training Manual - Resources**.

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[1] This case study is fictional but based on real data from projects.

MODULE 10: GOVERNANCE

Background:

This domain requires a good understanding of corporate governance and an understanding of the country's legislative requirements on governance.

Estimated time for execution of this domain: 5 hours (including the background reading on legislative requirements)

Skills and experience required for effective execution of this domain: an assessor with more than three years of experience in corporate governance work or corporate governance reviews, and at least a fair understanding of local corporate laws.

Overall Objective:

To assess if the organization complies with local legal requirements on governance and has adequate and effective management and governance structures in place.

NUPAS Plus 2.0 Governance Categories:
1. Governance Structure and Accountability
2. Board Membership
3. Membership Rules
4. Roles and Responsibilities
5. Board Meetings
6. Documentation
7. Decision Making
8. Fiduciary Risk Management
9. Board Evaluation
10. Board and Main Governance Committee Structure
11. Finance Management
12. Strategic and Business Planning
13. Performance Management
14. Risk Management
15. Executive Leadership
16. Succession Plans

Procedures to be undertaken for a review of the Governance domain:
- Document review (Estimated time required: 4.5 hours)
- Interviews (Estimated time required: 0.5 hours)

Documents to be requested for effective review of governance:
- Refer to the "Documents list" tab in the NUPAS Plus 2.0 tool.

Members to be considered for Interviews:
- Executive Director/Chief Executive Director
- Finance Director/Chief Financial Officer
- Head of Legal

- Company Secretary
- Board Chairperson or other Board Member(s)

NUPAS Plus 2.0 GOVERNANCE EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Governance Structure	Confirm if the governance structure complies with local laws and has done so for the past three years.	Board TOR/bylaws
Board Membership	Confirm if board members and officers are elected/appointed/ removed in accordance with applicable laws and by approved written procedures.	Board TOR/ Governance Manual/ bylaws Companies Act/ Relevant legislation
Membership Rules	Determine if the organization has/does not have rules for membership, eligibility, suspensions, and expulsion.	Board TOR/ Governance Manual/ bylaws
Roles and Responsibilities	Confirm if all board members have clear roles and responsibilities which are aligned with all components of the Strategic Plan and includes: know and support the mission of the organization, attend board meetings regularly, prepare for meetings in advance, maintain confidentiality, offer informed and impartial guidance, avoid conflicts of interest, fulfil the duties of the office (e.g. treasurer), participate in committees and special events, support the Director, take part in resource development, represent the organization externally AND all have fulfilled roles for the past three years.	Board TOR/ Governance Manual/ bylaws
Board Meetings	Confirm whether at least a minimum number of governing board meetings per year are held, as required by the Companies Act and the Governance Manual.	Board TOR/ Governance Manual/ bylaws Companies Act/relevant legislation

		Board meeting minutes
Documentation	Confirm if all board meeting minutes are documented in the stated period, cover discussions, include action items, and are approved by all board members.	Minutes of Board meetings
Decision Making	Confirm if the Board has procedures in place for decision-making, including the number needed for a quorum, how to vote, and decision recording.	Board TOR/ bylaws
Fiduciary Risk Management	Confirm if the board oversees fiduciary risk controls for its members, officers, and employees; and if effective mechanisms exist for the enforcement of such policies.	Board TOR/ Governance Manual/ bylaws Companies Act/relevant legislation Conflict of interest declarations
Board Evaluation	Confirm if the board conducts structured, annual self-assessments to identify governance gaps.	Board TOR/ Governance Manual/ bylaws
Board and Main Governance Committee Structure	Confirm whether the organization has a functional Board and committee.	TORs for Board and Committees
Finance Management	Confirm whether finance is a standing agenda item at every board meeting, with the organization's senior management and Board making collective financial decisions collectively, and whether there are highly effective internal control systems and regular financial information communication systems in place.	
Strategic and Business Planning	Confirm whether the organization has a strategic plan with a clear mission statement, vision, and key goals, as well as an operational/implementation plan in place.	Strategic Plan

Performance Management	Confirm whether the organization has a concrete performance management process in place based on which the Board Chair reviews the performance of the executive director who then reviews the performance of reviews of all senior staff with clear performance objectives and development plans, on an annual basis.	Performance management process and tools
Risk Management	Confirm whether the organization has a risk management plan, and Risk Management Committee, with risk management being a standing agenda item at board meetings and ensure that risks are being systematically evaluated and effectively managed throughout the organization.	Risk management plan and procedures
Executive Leadership	Confirm whether the organization has a coherent senior management structure, including the executive leadership with demonstrable distinction between the roles and responsibilities of the Board and the Executive Director, including in matters related to compliance, risk, legal, finance, and audit.	Board and Executive Management TORs
Succession Plans	Confirm whether the organization has policies for succession planning for the Board Chair, Members, and Executive Leadership which are consistently applied.	Policies on succession planning for Board Chair, Members, and Executive Leadership

10.1 Governance Structure and Accountability

Objective(s): To confirm if the organization has an established governance structure, is in compliance with local laws, and has been for the past three years.

Procedures:

- Research the country's legal requirements on governance structures for the NGO.
- Review the Board Terms of Reference (TOR) or bylaws and verify compliance with local laws.

10.2 Board Membership

Objective(s): To confirm if board members and officers are elected/appointed and removed in accordance with applicable laws and approved written procedures.

Procedures:

- Review TOR and check criteria for how board members are appointed.

- Inquire whether any board members were elected or retired in the last two years. If there were, obtain the relevant minutes and appointment/retirement documents to verify if they were implemented in line with the requirements of the law and the Board TOR or bylaws.

10.3 Membership Rules

Objective(s): To confirm if the organization has rules for board membership, eligibility, suspensions, and expulsion.

Procedure:

- Review the board TOR/Governance Manual and bylaws to verify rules for membership, eligibility, suspensions, and expulsion.

10.4 Roles and Responsibilities

Objective(s): To confirm whether the organization's all Board members have clear roles and responsibilities that are aligned with all components of the Strategic Plan and include: knowing and supporting the mission of the organization, attending board meetings regularly, preparing for meetings in advance, maintaining confidentiality, offering informed and impartial guidance, avoiding conflicts of interest, fulfilling the duties of the office (e.g. treasurer), participating in committees and special events, supporting the Director, taking part in resource development, representing the organization externally AND all have fulfilled roles for the past three years.

Procedure:

- Review Terms of Reference or By-Laws.

10.5 Board Meetings

Objective(s): To confirm if a minimum number of governing board meetings per year are held as required by the Companies Act and the Governance Manual

Procedures:

- Review the Board TOR/Governance Manual/bylaws to determine if the number of meetings to be held per year is defined.
- Obtain the board meeting minutes for the past three years to verify if the number of meetings held per year is as required by the TOR/Governance Manual/bylaws.
- Obtain the board meeting minutes for the past three years and verify that they include action items and are duly approved.

10.6 Documentation

Objective(s): To confirm if all board meeting minutes are documented in the stated period, cover discussions, includes action items, and are approved by all board members.

Procedure:

- Check minutes of Board meetings.

10.7 Decision Making

Objective(s): To confirm if the board has procedures for decision-making, including the number needed for a quorum, how to vote, and decision recording.

Procedure:

- Review TOR or bylaws for decision-making procedures, including the number of members needed for a quorum, how to vote, and decision recording.

10.8 Fiduciary Risk Management

Objective(s): To confirm whether the board oversees fiduciary risk controls for its members, officers, and employees; and has effective mechanisms for enforcement of such policies in place.

Procedure:

- Review TOR or bylaws and determine if the board oversees fiduciary risk controls for its members, officers, and employees; and has effective mechanisms for enforcement of such policies and controls.

10.9 Board Evaluation

Objective(s): To confirm whether the board conducts structured, annual self-assessments to identify governance gaps.

Procedures:

- Verify if there is a process for board self-evaluation.
- Obtain self-evaluation reports, verify if they are consistently produced, and if corrective action is implemented when gaps are identified.

10.10 Board and Main Governance Committee Structure

Objective(s): To confirm whether the organization has a functional Board and committees.

Procedure:

- Review Leadership and Governance committee structure.

10.11 Finance Management

Objective(s): To confirm whether finance is a standing agenda item at every board meeting, with the organization's senior management and Board making collective financial decisions collectively, and whether there are highly effective internal control and regular financial information communication systems in place.

Procedures:

- Check if the Senior Management Team and Board act collectively to engage in financial matters.
- Check if they frequently receive financial information e.g., biannually.
- Check if they have communication of financial information to staff.

10.12 Strategic Plan

Objective(s): To confirm whether the organization has a strategic plan with a clear mission statement, vision, and key goals, as well as an operational/implementation plan in place.

Procedure:

- Check if the organization has a Strategic Plan and organizational systems and processes in place.

10.13 Performance Management

Objective(s): To confirm whether the organization has a concrete performance management process in place based on which the Board Chair reviews the performance of the executive director who then reviews the performance of reviews of all senior staff with clear performance objectives and development plans, on an annual basis.

Procedure:

- Check if the organization has a performance management process for the Executive Director and the senior management team by the Board.

10.14 Risk Management

Objective(s): To confirm whether the organization has a risk management plan, and Risk Management Committee, with risk management being a standing agenda item at board meetings and ensure that risks are being systematically evaluated and effectively managed throughout the organization.

Procedure:

- Check if there is clear evidence of a risk management plan and improved risk outcomes.

10.15 Executive Leadership

Objective(s): To confirm whether the organization has a coherent senior management structure, including the executive leadership with demonstrable distinction between the roles and responsibilities of the Board and the Executive Director, including in matters related to compliance, risk, legal, finance and audit.

Procedure:

- Check if the organization has established an executive leadership reporting structure.

10.16 Succession Plans

Objective(s): To confirm whether the organization has policies for succession planning for the Board Chair, Members, and Executive Leadership, and are consistently applied.

Procedure:

- Check policies on succession planning for Board Chair, Members, and Executive Leadership.

Key Risks to be Considered

1. Noncompliance with legal and governance requirements.
2. Ineffective Boards and committees appointed by the board.
3. No finance and risk management oversight.
4. Lack of approved strategic plan for sustainability.

MODULE 11: SUBAWARD MANAGEMENT

Background:

This domain requires reviewing the organization's sub-award management technical capacity, including the sub-award management manual, and processes to assess their adequacy and compliance, determine whether they are followed as designed, and whether they yield the intended results.

Estimated time for execution of this domain: 3 hours (including the inquiries and review of the sub-award management process of the organization)

Skills and experience required for effective execution of this domain: preferably an assessor with over three years of experience in sub-award management.

Overall Objective:

To assess the processes and procedures in place to ensure compliance and identify/mitigate risks to enable the organization to achieve the appropriate capacity to successfully manage sub-awards.

NUPAS Plus 2.0 Subaward Management Categories:

1. Subawards
2. Subaward Manual
3. Mechanism Types
4. Subaward Planning
5. Competitive Solicitation
6. Non-Competitive Solicitations
7. Prime Approvals
8. Pre-award Assessment
9. Special Award Conditions (SAC)
10. Flow downs
11. Budget
12. Indirect Costs
13. Annual Workplan
14. Subaward Reporting
15. Capacity Strengthening
16. Modifications
17. Monitoring Plan
18. Deficiencies
19. Financial Management
20. Inventory
21. Site Visits
22. Closeout

NUPAS Plus 2.0 SUBAWARD MANAGEMENT EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Subawards	Confirm that the organization has the appropriate capacity and strong legal frameworks for successfully managing subawards.	Relevant documentation, including manuals, polices, and procedures
Subaward Manual	Confirm that the organization has a recently (1-3 years) Board approved complete subaward manual which includes all of the following: 1. Roles and Responsibilities for Grants Management and Administration; 2. Pre Award Process and Procedures; 3. Post award Process and Procedures; 4. Implementation of Grant Project; 5. Project Evaluation; 6. Compliance, audits, and audit readiness; Project Close-out; and is consistently applied.	Subaward Manual
Mechanism Types	Confirm whether all templates exist and are fully compliant in terms of Cost or Firm Fixed Price Contract, Cost Plus Fixed Fee, Time and Materials, Indefinite Delivery/Indefinite Quantity, and whether the right mechanism is correctly and consistently applied.	Relevant templates and sub-awarding mechanisms
Subaward Planning	Confirm that all subs are identified when applying for the award and appear explicitly in the approved award.	subaward
Competitive Solicitation	Confirm that the Request for Applications (RFA) includes all components: organizational background, project goals and targets, geographical scope, thematic area, SOW, deliverables, budget with appropriate categories, RFP instructions, and eligibility criteria, and are posted on all relevant and appropriate websites.	RFAs in the last two years
Non-Competitive Solicitations	Confirm that sole source awards are fully justified and approved by USAID.	sole source awards in the past two years

Prime Approvals	Confirm whether the Request for Approvals is submitted on time with all relevant information, and USAID has approved all subawards.	approval letters and/or emails
Pre-award Assessment	Confirm if the organization consistently uses the NUPAS Plus 2.0 or any other internationally recognized tool that employs verifiable evidence for scoring risk, its staff are trained in using the tool, and it is carried out before the award is issued.	pre award assessment of the grantee/subawardee
Special Award Conditions (SAC)	Confirm whether the organization consistently develops SACs based on pre-award assessment findings and with realistic timeframes for completion.	pre-award assessment and SACs in subawards
Flow downs	Confirm whether all Flow-downs are included in subawards: 1. Fraud Reporting; 2. Prohibition of Terrorism Transactions; 3. Suspension; 4. Trafficking Persons; 5. Child Safeguarding; 6. Voluntary Population Planning; 7. Anti-corruption; 8. Conflict of Interest; 9. Whistleblower; 10. Procurement of Restricted Goods; and 9. all Mandatory Standard Provisions (MSPs).	terms and conditions of prime and sub-awards
Budget	Confirm whether the sub-award budget includes all categories such as 1. Salaries 2. Fringe 3. Consultants STTA 3. Travel and transport 4. Equipment 5. Supplies and Consumables 6.Activities 7. Indirect cost, Operations, and Overhead 8. Cost Share/Marching Costs 9. NICRA or 10% de minimus 10. Budget Notes and has the right funding level to meet performance and compliance requirements.	sub-award budgets
Indirect Costs	Confirm whether the organization has a policy for indirect costs for sub-awards and consistently applies 10% de minimus or NICRA to all sub-awards.	indirect cost policy
Annual Workplan	Confirm that all sub-awards have work plans approved by technical leads, and include all activities, targets, and timeframes.	sub-award work plans

Subaward Reporting	Confirm whether the organization has a sub-award reporting template that includes activities, performance indicators, financial reports, challenges, and success stories and whether all subs use the template consistently.	sub-award reporting template
Capacity Strengthening	Confirm whether all sub-recipients receive ongoing training on how to comply with the terms and conditions of their sub-awards and whether all weaknesses are identified in the pre-award assessment and included in a capacity-building plan.	capacity-building plan
Modifications	Confirm whether all sub-recipients understand through training or documentation when modifications are required, and whether the Prime anticipates the need and issues all modifications on time and retains all fully executed copies on file.	modifications
Monitoring Plan	Confirm whether all sub-awards, when applicable, have an approved Monitoring Plan that is fully compliant and includes monitoring approach, process, systems, indicators, and reporting timeframes, and is consistently used as a reference document during site visits or desk reviews.	sub-award monitoring plans
Deficiencies	Confirm whether all deficiencies identified during monitoring are properly addressed, through site visit reports, modification, corrective actions, or termination, when necessary.	sub-award monitoring findings
Financial Management	Confirm whether there are adequate financial monitoring and management processes and procedures in place and are compliant with the terms and conditions of awards.	financial monitoring and management processes and procedures
Inventory	Confirm whether all grantees and sub-recipients understand when prior approvals are needed and submit regular reports. These are retained on file and are submitted to the prime sufficiently in advance.	Inventory of approvals
Site Visits	Confirm whether the organization has a site visit schedule for all subs that includes a review of activities, performance results, compliance with the award, and a checklist or report template that is consistently applied.	site visit policy and reports

Closeout	Confirm that the organization has a closeout policy and procedures for sub-awards and are consistently applied.	closeout policy for subawards

11.1 Subawards

Objective(s): To confirm that the organization has the appropriate capacity and strong legal frameworks for successfully managing subawards.

Procedure:

- Confirm the number of subawards, amounts, and duration.

11.2 Subaward Manual

Objective(s): To confirm that the organization has a recently (1-3 years) Board approved complete subaward manual which includes all of the following: 1. Roles and Responsibilities for Grants Management and Administration; 2. Pre Award Process and Procedures; 3. Post award Process and Procedures; 4. Implementation of Grant Project; 5. Project Evaluation; 6. Compliance, audits, and audit readiness; Project Close-out; and is consistently applied.

Procedure:

- Verify whether the organization has a grant/subaward policy or manual which includes: 1. Roles and Responsibilities; 2. Planning Subawards; 3. Evaluating and Selecting Applicants; 4. Pre-Award Survey; 5. Type of Subaward; 6. Subaward Reporting; 7. Subaward Monitoring; 8. Financial Management; 9. Fraud Management; 11. Close Out.

11.3 Mechanism Types

Objective(s): To confirm whether all templates exist and are fully compliant in terms of Cost or Firm Fixed Price Contract, Cost Plus Fixed Fee, Time and Materials, Indefinite Delivery/Indefinite Quantity, and whether the right mechanism is correctly and consistently applied.

Procedure:

- Identification of correct sub-awarding mechanism.

11.4 Subaward Planning

Objective(s): To confirm that all subs are identified when applying for the award and appear explicitly in the approved award.

Procedure:

- Review award for subs.

11.5 Competitive Solicitation

Objective(s): To confirm that the Request for Applications (RFA) includes all components: organizational background, project goals and targets, geographical scope, thematic area, SOW, deliverables, budget with appropriate categories, RFP instructions, and eligibility criteria, and are posted on all relevant and appropriate websites.

Procedure:

- Review all RFAs in the past two years.

11.6 Non-Competitive Solicitations

Objective(s): To confirm that sole source awards are fully justified and approved by USAID.

Procedure:

- Review all sole source awards in the past two years.

11.7 Prime Approvals

Objective(s): To confirm whether the Request for Approvals is submitted on time with all relevant information, and USAID has approved all subawards.

Procedure:

- Review approval letters and/or emails.

11.8 Pre-award Assessment

Objective(s): To confirm if the organization consistently uses the NUPAS Plus 2.0 or any other internationally recognized tool that employs verifiable evidence for scoring risk, its staff are trained in using the tool, and it is carried out before the award is issued.

Procedure:

- Conduct a pre award assessment of the grantee/subawardee.

11.9 Special Award Conditions (SACs)

Objective(s): To confirm whether the organization consistently develops SACs based on pre-award assessment findings and with realistic timeframes for completion.

Procedure:

- Review pre-award assessment and SACs in subawards.

11.10 Flow-downs

Objective(s): To confirm whether all Flow-downs are included in subawards: 1. Fraud Reporting; 2. Prohibition of Terrorism Transactions; 3. Suspension; 4. Trafficking Persons; 5. Child Safeguarding; 6. Voluntary Population Planning; 7. Anti-corruption; 8. Conflict of Interest; 9. Whistleblower; 10. Procurement of Restricted Goods; and 9. all Mandatory Standard Provisions (MSPs).

Procedure:

- Review the terms and conditions of prime and sub-awards.

11.11 Budget

Objective(s): To confirm whether the sub-award budget includes all categories such as 1. Salaries 2. Fringe 3. Consultants STTA 3. Travel and transport 4. Equipment 5. Supplies and Consumables 6.Activities 7. Indirect cost, Operations, and Overhead 8. Cost Share/Marching Costs 9. NICRA or 10% de minimus 10. Budget Notes and has the right funding level to meet performance and compliance requirements.

Procedure:

- Review the sub-award budgets.

11.12 Indirect Costs

Objective(s): To confirm whether the organization has a policy for indirect costs for sub-awards and consistently applies 10% de minimus or NICRA to all sub-awards.

Procedure:

- Review indirect cost policy and practice.

11.13 Annual Workplan

Objective(s): To confirm that all sub-awards have work plans approved by technical leads, and include all activities, targets, and timeframes.

Procedure:

- Review sub-award work plans.

11.14 Subaward Reporting

Objective(s): To confirm whether the organization has a sub-award reporting template that includes activities, performance indicators, financial reports, challenges, and success stories and whether all subs use the template consistently.

Procedure:

- Check the availability of a proper sub-award reporting template.

11.15 Capacity Strengthening

Objective(s): To confirm whether all sub-recipients receive ongoing training on how to comply with the terms and conditions of their sub-awards and whether all weaknesses are identified in the pre-award assessment and included in a capacity-building plan.

Procedure:

- Subrecipient training and capacity building.

11.16 Modifications

Objective(s): To confirm whether all sub-recipients understand through training or documentation when modifications are required, and whether the Prime anticipates the need and issues all modifications on time and retains all fully executed copies on file.

Procedure:

- Check if modifications are appropriately issued and filed.

11.17 Monitoring Plan

Objective(s): To confirm whether all sub-awards, when applicable, have an approved Monitoring Plan that is fully compliant and includes monitoring approach, process, systems, indicators, and reporting timeframes, and is consistently used as a reference document during site visits or desk reviews.

Procedure:

- Development of sub-award monitoring plans.

11.18 Deficiencies

Objective(s): To confirm whether all deficiencies identified during monitoring are properly addressed, through site visit reports, modification, corrective actions, or termination, when necessary.

Procedure:

- Check if there is a process for rectifying subrecipient deficiencies.

11.19 Financial Management

Objective(s): To confirm whether there are adequate financial monitoring and management processes and procedures in place and are compliant with the terms and conditions of awards.

Procedure:

- Financial monitoring and management.

11.20 Inventory

Objective(s): To confirm whether all grantees and sub-recipients understand when prior approvals are needed and submit regular reports. These are retained on file and are submitted to the prime sufficiently in advance.

Procedure:

- Inventory control, prior approvals, and other compliance areas.

11.21 Site Visits

Objective(s): To confirm whether the organization has a site visit schedule for all subs that includes a review of activities, performance results, compliance with the award, and a checklist or report template that is consistently applied.

Procedure:

- Review site visit policy and reports.

11.22 Closeout

Objective(s): To confirm that the organization has a closeout policy and procedures for sub-awards; and are consistently applied.

Procedure:

- Review closeout policy for subawards.

Key Risks to be Considered

1. Prime local organizations do not "flow down" agreement provisions to subrecipients.
2. Prime local organizations do not have policies and procedures to effectively select and manage subrecipients.
3. Prime local organizations do not provide capacity strengthening to subrecipients.

MODULE 12: COMMUNICATIONS

Background:

This domain requires reviewing the organization's communications strategy/plan to assess its adequacy, determine whether it is implemented as designed, and whether it yields the intended results. It is also a tool that enables assessment of the organization's communications capacity and systems and whether they are effective.

Estimated time for execution of this domain: 3 hours (including the inquiries and review of the communications systems and processes of the organization)

Skills and experience required for effective execution of this domain: preferably an assessor with over three years of experience in corporate communications.

Overall Objective:

To assess the organization's effectiveness or external and internal communication.

NUPAS Plus 2.0 Communications Categories:

1. **Communications Strategy and Goals**
2. **Staff Capacity**
3. **Information Management/Knowledge Management**
4. **Monitoring & Evaluation of Communication Activities**
5. **Knowledge Management and External Linkages**
6. **Internal Communications and Decision Making**
7. **External Communications**
8. **Branding**
9. **USAID Logo**
10. **Marking Plan**
11. **Disclaimer**
12. **Exceptions**

NUPAS Plus 2.0 COMMUNICATIONS EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Communications Strategy and Goals	Confirm that the organization's communication plan or strategy is in place, updated, and aligned to organizational goals; communications practices are in place and donor-funded programs/projects have a clear understanding of their branding/marking/communication requirements, and the organization understands who its audience is and has plans for communicating with these	Communications Strategy

	audiences with the appropriate channel(s) and messaging.	
Staff Capacity	Confirm if the organization has at least one staff member dedicated to communication-related activities and this is well reflected in his/her title and job description; the individual has the appropriate skills and experience for the role and feels supported by the organization to succeed in it, and there are opportunities for effective training and professional development in communications.	Job description and qualification of Comms Staff
Information Management/Knowledge Management	Confirm whether there is an organized data collection process in place and whether the information is stored in a centralized database with a formal backup process to protect the data; the appropriate staff have access to the information and can effectively utilize the system and are aware of photo consent/release forms and have processes in place to obtain consent before publishing any items including personally identifiable information or graphics.	Information/Knowledge Management System
Monitoring & Evaluation of Communication Activities	Confirm if the organization has formal methods for monitoring and evaluating its communication activities that align with the organization's goals and mission. Data collection is done in an organized way and an appropriate staff member has been dedicated to ensuring that communication-related activities are evaluated for effectiveness regularly.	Communications M&E Tracker
Knowledge Management and External Linkages	Confirm if the organization: • Has proven analytical capacity to identify good practices and lessons learned, and strong systems for documenting, storing, and disseminating program knowledge. • Analyzed and shared good practices and lessons learned internally at least twice a year. • Frequently participated actively in formal networks and a leadership role. • Frequently and routinely participated in discussions with donors, governments, and	Information/Knowledge Management System External Communications Strategy/Approach

	civil society organizations on approaches, lessons learned, and good practices. • Frequently presented its approaches and results at external events.	
Internal Communications and Decision Making	Confirm whether: • The organization has clear two-way communications between management and staff, and across departments, and regular structured settings to exchange ideas and discuss problems and opportunities. • Management consistently listens to staff ideas and seeks staff input. • Staff frequently initiate discussions with management and raise challenging issues. • The organization has a decision-making process with extensive staff involvement for shared responsibility, ownership, and accountability, and proper space and infrastructure to facilitate internal communications.	Internal Communications Strategy and interviews with management and staff
External Communications	Confirm whether the organization has: • A well-written strategy for identifying audiences, channels, and materials for external communications. • A written external communications strategy that is consistently followed. • Good capacity for implementing the external communications strategy and overseeing written and oral products. • A good process for pre-testing and revising external communication messages and materials and monitoring their effectiveness. • Proper templates or style guides for documents and the website. • A strongly positive reputation among key stakeholders.	External Communications Strategy/Approach

Branding	Confirm whether the organization has: A Branding Plan	Branding Plan
USAID Logo	Confirm USAID Logo is correctly used	External Communication
Marking Plan	Confirm whether the organization has: A Marking Plan	Marking Plan
Disclaimer	Confirm whether the organization has: A standard Disclaimer	External Communication
Exceptions	Confirm whether the organization has: Any approved exceptions	USAID Approval letter

12.1 Communications Strategy and Goals

Objective(s): To confirm that the organization's communication plan or strategy is in place, updated, and aligned to organizational goals; communications practices are in place and donor-funded programs/projects have a clear understanding of their branding/marking/communication requirements, and the organization understands who its audience is and has plans for communicating with these audiences with the appropriate channel(s) and messaging.

Procedures:

- Determine if the organization's communication strategy is aligned with its mission, goals, and target audience.
- Review the organization's communication strategy and plan documents and ensure that the strategy includes measurement and evaluation criteria for the tactics employed.
- Review the effectiveness of the channels used and the key messages in reaching its audience.

12.2 Staff Capacity

Objective(s): To confirm if the organization has at least one staff member dedicated to communication-related activities and this is well reflected in his/her title and job description; the individual has the skills and experience appropriate for the role and feels supported by the organization to succeed in it, and there are opportunities for effective training and professional development in communications.

Procedures:

- Determine if the organization has staff involved in communication-related activities with the skills and experience to successfully perform their duties.

- If communication-related positions exist at the organization, review the job descriptions and recruitment process for these roles.
- Meet with staff identified as being involved in communication or knowledge management.
- Evaluate their interest, skills, and experience in the area they've been tasked with.

12.3 Information Management/Knowledge Management

Objective(s): To confirm whether there is an organized data collection process in place and whether the information is stored in a centralized database with a formal backup process to protect the data; the appropriate staff have access to the information and can effectively utilize the system, and are aware of photo consent/release forms and have processes in place to obtain consent before publishing any items including personally identifiable information or graphics.

Procedures:

- Determine if the organization has an effective way of capturing, storing, and retrieving information.
- Review how the organization collects or captures information, such as lessons learned, project data, photos, videos, release/consent forms, interview transcripts or recordings, surveys, feedback, etc.
- Review the organization's method of storing project and organizational information, including reports, data, photos/videos, presentations, newsletters, technical briefs, abstracts, posters, etc.
- Determine if staff have appropriate access to this information and if the organization's leadership can retrieve it for reporting/compliance and business development purposes.

12.4 Monitoring & Evaluation of Communication Activities

Objective(s): To confirm if the organization has formal methods for monitoring and evaluating its communication activities that align with the organization's goals and mission. Data collection is done in an organized way and an appropriate staff member has been dedicated to ensuring that communication-related activities are evaluated for effectiveness regularly.

Procedures:

- Determine if an organization has processes in place to track and measure the impact of communication activities.
- Review the organization's key performance indicators and learn how they relate to the communication strategy.
- Evaluate the current data collection and analysis processes in place to measure communication-related activities and outcomes. Ask for examples of how they use this data within the organization.
- Evaluate the reporting systems used by the organization.

12.5 Knowledge Management and External Linkages

Objective(s): To confirm if the organization:

- Has proven analytical capacity to identify good practices and lessons learned, and strong systems for documenting, storing, and disseminating program knowledge.

- Analyzed and shared good practices and lessons learned internally at least twice a year.

- Frequently participated actively in formal networks and a leadership role.

- Frequently and routinely participated in discussions with donors, governments, and civil society organizations on approaches, lessons learned, and good practices.
- Frequently presented its approaches and results at external events.

Procedure:

- Verify if the organization has proven analytical capacity to identify good practices and lessons learned, as well as strong systems for documenting, storing, and disseminating program knowledge.
- Check if the organization frequently and routinely participates in discussions and presentations with donors, governments, civil society organizations, and other external audiences on approaches, lessons learned, and good practices.

12.6 Internal Communications and Decision Making

Objective(s): To confirm whether:

- The organization has clear two-way communications between management and staff, and across departments, and regular structured settings to exchange ideas and discuss problems and opportunities.
- Management consistently listens to staff ideas and seeks staff input.
- Staff frequently initiate discussions with management and raise challenging issues.
- The organization has a decision-making process with extensive staff involvement for shared responsibility, ownership, and accountability, and proper space and infrastructure to facilitate internal communications.

Procedure:

- Determine that the organization has strong two-way communications between management and staff, and regular structured settings to exchange ideas and discuss problems and opportunities.
- Check if there exists a decision-making process with extensive staff involvement for shared responsibility, ownership, and accountability; and if the organization has adequate space and infrastructure to facilitate internal communications.

12.7 External Communications

Objective(s): To confirm whether the organization has:

- A well-written strategy for identifying audiences, channels, and materials for external communications.
- A written external communications strategy that is consistently followed.
- Good capacity for implementing the external communications strategy and overseeing written and oral products.
- A good process for pre-testing and revising external communication messages and materials and monitoring their effectiveness.
- Proper templates or style guides for documents and the website.

- A strongly positive reputation among key stakeholders.

Procedures:

- Verify that the organization has a well-written strategy for identifying audiences, channels, and materials for external communications, and the capacity to implement the external communications strategy and oversee written and oral products.

- Verify if the organization pre-tests and revises external communication messages and materials, including those in hardcopy and on social media, and monitors their effectiveness, and the organization enjoys a positive reputation with key stakeholders.

12.8 Branding

Objective: To determine whether the organization is consistently in compliance with Marking and Public Communications under USAID-funded assistance mandatory provision. There is a full understanding of the provision, and the organization consistently acknowledges the support of the "American People". The standard USAID logo is always used unless the award requires the use of an additional or substitute logo. When the USAID Identity cannot be displayed, the recipient otherwise acknowledges USAID and the support of the "American People".

Procedure:

- Review Marking and Public Communications under USAID-funded assistance.

12.9 USAID Logo

Objective: To determine whether the organization is consistently in compliance with the USAID identity provision. There is a full understanding of the provision. The organization uses the USAID Identity of a size and prominence equivalent to or greater than any other identity or logo displayed, as appropriate.

Procedure:

- Review the use of USAID Identity Logos.

12.10 Marking Plan

Objective: To determine whether the organization has an approved marking plan for implementation. The organization is aware of the need to pre-produce materials and public communications for AO approval and the need for sufficient lead time in submitting copies of notices for approval by AOR and USAID's Office of Legislative and Public Affairs and follows the approved marking plan with no exceptions. The organization gives the public notice of the receipt of their award and announces progress and accomplishments. Press releases or other public notices always include a statement substantially as follows:

"The U.S. Agency for International Development administers the U.S. foreign assistance program providing economic and humanitarian assistance in more than 80 countries worldwide."

Procedure:

- Review Approved Marking Plan.

12.11 Disclaimer

Objective: To determine whether the organization is consistently in compliance with the Disclaimer provision. There is a full understanding of the provision. All consultants contracted that produce studies, reports, audio/visual materials, and any other information/media products have instructions on how to use the Disclaimer. Any "public communication" in which the content has not been approved by USAID contains the following disclaimer:

"This study/report/audio/visual/other information/media product (specify) is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of [insert recipient name] and do not necessarily reflect the views of USAID or the United States Government."

Procedure:

- Verify Disclaimer on "public communication" in which the content has not been approved by USAID.

12.12 Exceptions

Objective: To determine whether the organization is consistently in compliance except for USAID marking requirements and Marking Plan Waiver provisions. There is a full understanding of the provisions. The organization has requested a Marking Plan Waiver as necessary. This is included in all sub-awards and contracts.

Procedure:

- Check for exceptions from USAID marking requirements and Marking Plan Waivers.

Key Risks to be Considered

1. Non-compliance with USAID Branding and Marking requirements.
2. External communication does not consistently reflect the strategic vision.
3. Two-way communication is not consistent, and lessons learned are not effectively communicated internally.

MODULE 13: KEY POPULATIONS (KP)

Background:

This domain requires reviewing the organization's legal framework and structures for ensuring KP's meaningful engagement in all aspects, and relevant strategies, plans, and policies to assess adequacy, determine whether they are implemented as designed, and whether they yield the intended results.

Estimated time for execution of this domain: 3 hours (including the inquiries and review of relevant documentation.)

Skills and experience required for effective execution of this domain: preferably an assessor with over three years of experience in executive management and compliance.

Overall Objective:

To assess the processes and procedures in place to ensure KPs in the organization's core structure.

NUPAS Plus 2.0 Key Populations Categories:

1. **Legal**
    1. Legal Requirements
    2. Organizational Registration
    3. Organizational Structure
    4. KP in Management

2. **Governance**
    1. Governance Structure
    2. KP Board Membership
    3. Board Membership Rules
    4. Board Compliance
    5. Roles and Responsibilities (Board)
    6. KP Roles and Responsibilities
    7. Board Evaluation (General)
    8. Vision and Mission

3. **Human Resources**
    1. Fair recruitment
    2. Targeted recruitment (Staff/Field workers)
    3. Targeted Recruitment (Management)
    4. Job competencies*
    5. KP sensitization training for staff
    6. KP Focal Person

4. **Organizational Sustainability**
    1. Diversified Funding
    2. Indirect Costs

5. **Community Outreach for KP**
    1. Planning
    2. Mapping
    3. Implementation
    4. Monitoring

5. Evaluation
6. Communication Materials

6. Country Environment
1. Legal Environment
2. Stigma and Discrimination
3. Acknowledgment of Diversity in Sexual Orientation and Gender Identity
4. Confidentiality and Informed Consent
5. Physical Infrastructure of KP-led Organization

NUPAS Plus 2.0 KEY POPULATIONS EXAMPLE

CATEGORY/ SUB-CATEGORY		OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Legal	Legal Requirements	Confirm whether the organization is legally registered; has, and is fully compliant with, all required permits and licenses to operate; and is aware of its tax status and fully compliant with applicable tax, labor, occupational health, and safety, environmental, and other material laws and regulations relevant to its operations.	legal registration requirements Deeds of Trust/ Articles of Association/ Memorandum of Incorporation/NPO certificate Appropriate NGO Permit Tax - letter of good standing Environmental compliance Manual
	Organizational Registration	Confirm whether the organization is locally registered with no affiliation with an international partner.	registration documents
	Organizational Structure	Confirm whether the organization has a strong organizational structure, is well-designed, and is highly relevant to its mission and goals, and whether the roles and responsibilities of departments or functions and lines of communication are well-defined and highly appropriate.	organization's charter, by-laws, and other foundational/operational documents organogram

		KP in Management	Confirm whether the organization has KPs on Board and Executive Leadership.	Presence of KPs in Board and Executive Leadership
Governance		Governance Structure	Confirm whether the organization's governance structure is in full compliance with local laws and has been for the past three years.	Terms of Reference or By-Laws
		KP Board Membership	Confirm whether the organization's 40% to 60% of Board Members are KP.	Constitution/Govern ance Structure
		Board Membership Rules	Confirm whether the organization's all board members and officers are elected for a specified period and removed in accordance with applicable laws and approved written procedures and whether a minimum number of Board members always meet, and the Chairman of the Board schedules meetings, sets agenda and leads discussions.	Board TOR and selection criteria
		Board Compliance	Confirm whether the organization's membership rules specify eligibility, suspensions, and expulsions and are always upheld for the past three years.	Board TOR
		Roles and Responsibilities (Board)	Confirm whether the organization's all Board members have clear roles and responsibilities which among other things include: knowing and supporting the mission of the organization, attending Board meetings regularly, preparing for meetings in advance, maintaining confidentiality, offering informed and impartial guidance, avoiding conflicts of interest, fulfilling the duties of the office (e.g. treasurer), participating in committees and special events, as well as in resource development, supporting the Director representing the organization externally, and whether all have fulfilled their roles for the past three years.	Terms of Reference or By-Laws
		KP Roles and Responsibilities	Confirm whether there is a KP subcommittee on the Board to ensure KP inclusion in planning, implementing, and evaluating services, which are minuted with action items and updates.	Job description or Scope of Work of Board members

	Board Evaluation (General)	Confirm whether the organization's board conducts a structured annual self-assessment to identify governance gaps, which cover: 1) setting measurable objectives for improving governance that foster enhancement of services that the organization renders; 2) gathering information to assess the effectiveness in improving organizational performance; 3) drawing conclusions based on findings and developing and implementing an improvement plan; 4) evaluating the performance to support sustained improvement; AND has completed a self-assessment for the past three years.	assessment procedures
	Vision and Mission	Confirm whether KP is the main component of the vision and mission statement and consistently reflected in project work plans.	Mission and Vision Statements
Human Resources	Fair recruitment	Confirm whether all staff are recruited freely and fairly only based on merit.	Relevant HR policies
	Targeted recruitment (Staff/Field workers)	Confirm whether more than 60% of the organization's outreach staff members include KPs who are hired from within the communities served by the organization and meet all the job qualifications.	job advertisements, job descriptions, recruitment data, and job competencies
	Targeted Recruitment (Management)	Confirm whether more than 60% of the organization's senior leadership includes KPs who are hired from within the communities served by the organization and meet all the job qualifications.	job advertisements, job descriptions, recruitment data, and job competencies
	Job competencies*	Confirm whether the organization's hired KPs meet 90% of the job requirements.	job advertisements, job descriptions, recruitment data, and job competencies
	KP sensitization training for staff	Confirm whether the organization has mandatory annual training on KP sensitization and whether all staff attend it.	KP policy, minutes, and training attendance sheets
	KP Focal Person	Confirm whether there is at least one full-time KP focal person with clear roles and responsibilities.	organogram

Organizational Sustainability	Diversified Funding	Confirm whether the organization has a diversified funding base capable of sustaining its programs over the long term, and that no single funding stream is over 25%.	funding tracker and award budgets
	Indirect Costs	Confirm whether the organization generates income and has multiple sources of funding for projects that provide indirect costs.	award budgets
Community Outreach for KP	Planning	Confirm whether KPs from the community are consistently included in developing annual work plans.	meeting minutes and draft work plans with comments
	Mapping	Confirm whether KPs are consistently included in developing and updating community maps.	meeting minutes and drafts of maps with comments
	Implementation	Confirm whether the KPs from the community are consistently hired to provide outreach services.	meeting minutes
	Monitoring	Confirm whether the KPs from the community are consistently involved in monitoring services.	draft reports
	Evaluation	Confirm whether the KPs from the community are consistently involved in the design, data collection, analysis, and dissemination of the evaluation results.	evaluation reports
	Communication Materials	Confirm whether the KPs are consistently involved in developing and pre-testing outreach materials.	meeting minutes and draft reports
Country Environment	Legal Environment	Confirm whether the KP rights are protected by antidiscrimination and protective laws derived from human rights standards.	relevant policies and tools latest laws on homosexuality, transgender, sex work, and drug use
	Stigma and Discrimination	Confirm whether the organization has nondiscrimination policies for sexual and gender minorities, as well as mechanisms to monitor and enforce appropriate sanctions.	nondiscrimination policies
	Acknowledgment of Diversity	Confirm whether the organization consistently uses data collection forms that include gender	intake forms, registration forms

	in Sexual Orientation and Gender Identity	nonconforming identities, not just "male" or "female" or nicknames.	
	Confidentiality and Informed Consent	Confirm whether documents with identifying information are stored in a locked cabinet and only a few staff have access to it, and whether clients are informed of their rights as 'participants' before participating.	consent forms, and observation of where they are stored (in locked cabinets)
	Physical Infrastructure of KP-led Organization	Confirm whether the organization has facilities that include single occupancy or gender-neutral restrooms.	Facility observation

13.1 Legal

Objective(s): To confirm whether the organization has fulfilled all the legal requirements of an NGO, complies with all applicable rules and regulations, and has an established organizational structure.

Procedure:

- Verify legal registration requirements and compliance.

13.1.1 Legal Requirements

Objective(s): To confirm whether the organization is legally registered; has, and is fully compliant with, all required permits and licenses to operate; and is aware of its tax status and fully compliant with applicable tax, labor, occupational health, and safety, environmental, and other material laws and regulations relevant to its operations.

Procedures:

- Confirm compliance with legal registration requirements and other material licenses, permits, laws, and regulations.
- Verify lawful registration by obtaining Deeds of Trust/ Articles of Association/ Memorandum of Incorporation/NPO certificate.
- Check if there is a permit in place (for the type of industry the NGO is working in?)
- Tax - letter of good standing?
- Environmental compliance, if applicable?".

13.1.2 Organizational Registration

Objective(s): To confirm whether the organization is locally registered with no affiliation with an international partner.

Procedure:

- Verify registration documents.

13.1.3 Organizational Structure

Objective(s): To confirm whether the organization has a strong organizational structure, is well-designed and highly relevant to its mission and goals, and whether the roles and responsibilities of departments or functions and lines of communication are well-defined and highly appropriate.

Procedure:

- Confirm that the organization's charter, by-laws, and other foundational/operational documents support its mission and goals.
- Are vision and mission clearly defined? (Does the mission clearly support the accomplishment of the vision, and is clearly articulated how to be achieved)?
- Is there an organizational charter in place, and does it contain definitions of departmental/ functional responsibilities and the authority of project managers?
- Did the NGO draw up an organogram?
- Are lines of communication demonstrated?
- Verify that there are no contradictions/ inconsistencies between the charter and organogram.

13.1.4 KP in Management

Objective(s): To confirm whether the organization has KPs on Board and Executive Leadership.

Procedure:

- How many self-disclosed KPs are on Board and in Executive Leadership?

13.2 Governance

Objective(s): To confirm the organization's governance and board structure, and its roles and responsibilities.

Procedure:

- Review Board TOR or By-Laws.

13.2.1 Governance Structure

Objective(s): To confirm whether the organization's governance structure is in full compliance with local laws and has been for the past three years.

Procedure:

- Review Terms of Reference or By-Laws.

13.2.2 KP Board Membership

Objective(s): To confirm whether the organization's 40% to 60% of Board Members are KP.

Procedure:

- Review Constitution/Governance Structure to identify if it is specified that a certain % should be KP, and is it written in their policies?

13.2.3 Board Membership Rules

Objective(s): To confirm whether the organization's all board members and officers are elected for a specified period and removed in accordance with applicable laws and approved written procedures and whether a minimum number of Board members always meet, and the Chairman of the Board schedules meetings, sets agenda and leads discussions.

Procedure:

- Review TOR and check criteria on how Board Members are appointed.

13.2.4 Board Compliance

Objective(s): To confirm whether the organization's membership rules specify eligibility, suspensions, and expulsions and are always upheld for the past three years.

Procedure:

- Review TOR and check for rules on membership.

13.2.5 Roles and Responsibilities (Board)

Objective(s): To confirm whether the organization's all Board members have clear roles and responsibilities which among other things include: knowing and supporting the mission of the organization, attending Board meetings regularly, preparing for meetings in advance, maintaining confidentiality, offering informed and impartial guidance, avoiding conflicts of interest, fulfilling the duties of the office (e.g. treasurer), participating in committees and special events, as well as in resource development, supporting the Director representing the organization externally, and whether all have fulfilled their roles for the past three years.

Procedure:

- Review Terms of Reference or By-Laws.

13.2.6 KP Roles and Responsibilities

Objective(s): To confirm whether there is a KP subcommittee on the Board to ensure KP inclusion in planning, implementing, and evaluating services, which are minuted with action items and updates.

Procedure:

- Review written roles and responsibilities of the Board.

13.2.7 Board Evaluation (General)

Objective(s): To confirm whether the organization's board conducts a structured annual self-assessment to identify governance gaps, which cover: 1) setting measurable objectives for improving governance that foster enhancement of services that the organization renders; 2) gathering information to assess the effectiveness in improving organizational performance; 3) drawing conclusions based on findings and developing and implementing an improvement plan; 4) evaluating the performance to support sustained improvement; AND has completed a self-assessment for the past three years.

Procedure:

- Review assessment procedures.

13.2.8 Vision and Mission

Objective(s): To confirm whether KP is the main component of the vision and mission statement and consistently reflected in project work plans.

Procedure:

- Review Mission and Vision Statements.

13.3 Human Resources

Objective(s): To confirm whether the organization complies with best HR practices and rules and regulations.

Procedure:

- Review relevant HR policies.

13.3.1 Fair Recruitment

Objective(s): To confirm whether all staff are recruited freely and fairly only based on merit.

Procedures:

- Inquire with management about whether there are volunteers as workers.
- Verify through inspection of the interview notes that the appointed staff were indeed appointed freely and on the basis of merit.

13.3.2 Targeted Recruitment (Staff/Field Workers)

Objective(s): To confirm whether more than 60% of the organization's outreach staff members include KPs who are hired from within the communities served by the organization and meet all the job qualifications.

Procedure:

- Review job advertisements, job descriptions, recruitment data, and job competencies.

13.3.3 Targeted Recruitment (Management)

Objective(s): To confirm whether more than 60% of the organization's senior leadership includes KPs who are hired from within the communities served by the organization and meet all the job qualifications.

Procedure:

- Review job advertisements, job descriptions, recruitment data, and job competencies.

13.3.4 Job Competencies*

Objective(s): To confirm whether the organization's hired KPs meet 90% of the job requirements.

Procedure:

- Review job advertisements, job descriptions, recruitment data, and job competencies.

13.3.5 KP Sensitization Training for Staff

Objective(s): To confirm whether the organization has mandatory annual training on KP sensitization and whether all staff attend it.

Procedure:

- KP policy, minutes, and training attendees.

13.3.6 KP Focal Person

Objective(s): To confirm whether there is at least one full-time KP focal person with clear roles and responsibilities.

Procedure:

- Check the organogram of the organization.

13.4 Organizational Sustainability

Objective(s): To confirm whether the organization has multiple sources of funding to finance its operations and projects.

Procedure:

- Review funding tracker and award budgets.

13.4.1 Diversified Funding

Objective(s): To confirm whether the organization has a diversified funding base capable of sustaining its programs over the long term, and that no single funding stream is over 25%.

Procedure:

- Request the list of current awards (funding tracker) and assess whether the duration/amounts received would sustain the long-term sustainability of the organization.
- Make a note of any recurring awards.

13.4.2 Indirect Costs

Objective(s): To confirm whether the organization generates income and has multiple sources of funding for projects that provide indirect costs.

Procedure:

- Review award budgets.

13.5 Community Outreach for KP

Objective(s): To confirm the organization's community outreach programs and activities.

Procedure:

- Review work plans, M&E reports, and meeting minutes.

13.5.1 Planning

Objective(s): To confirm whether KPs from the community are consistently included in developing annual work plans.

Procedure:

- Check meeting minutes and draft work plans with comments.

13.5.2 Mapping

Objective(s): To confirm whether KPs are consistently included in developing and updating community maps.

Procedure:

- Check meeting minutes and drafts of maps with comments.

13.5.3 Implementation

Objective(s): To confirm whether the KPs from the community are consistently hired to provide outreach services.

Procedure:

- Check meeting minutes.

13.5.4 Monitoring

Objective(s): To confirm whether the KPs from the community are consistently involved in monitoring services.

Procedure:

- Check draft reports.

13.5.5 Evaluation

Objective(s): To confirm whether the KPs from the community are consistently involved in the design, data collection, analysis, and dissemination of the evaluation results.

Procedure:

- Check evaluation reports.

13.5.6 Communication Materials

Objective(s): To confirm whether the KPs are consistently involved in developing and pre-testing outreach materials.

Procedure:

- Check meeting minutes and draft reports.

13.6 Country Environment

Objective(s): To confirm whether the organization's environment is conducive to the engagement of KPs.

Procedure:

- Review of relevant policies and tools.

13.6.1 Legal Environment

Objective(s): To confirm whether the KP rights are protected by antidiscrimination and protective laws derived from human rights standards.

Procedure:

- Review the latest laws on homosexuality, transgender, sex work, and drug use.

13.6.2 Stigma and Discrimination

Objective(s): To confirm whether the organization has nondiscrimination policies for sexual and gender minorities, as well as mechanisms to monitor and enforce appropriate sanctions.

Procedure:

- Review of nondiscrimination policies.

13.6.3 Acknowledgment of Diversity in Sexual Orientation and Gender Identity

Objective(s): To confirm whether the organization consistently uses data collection forms that include gender nonconforming identities, not just "male" or "female" or nicknames.

Procedure:

- Review of intake forms, registration forms, etc.

13.6.4 Confidentiality and Informed Consent

Objective(s): To confirm whether documents with identifying information are stored in a locked cabinet and only a few staff have access to it, and whether clients are informed of their rights as 'participants' before participating.

Procedure:

- Review of consent forms, and observation of where they are stored (in lock cabinets?).

13.6.5 Physical Infrastructure of KP-led Organization

Objective(s): To confirm whether the organization has facilities that include single occupancy or gender-neutral restrooms.

Procedure:

- Facility observation.

Key Risks to be Considered

1. Organization not legally compliant with local laws.
2. KP local organizations not effectively incorporating KP in planning and implementation.

MODULE 14: BUSINESS DEVELOPMENT

Background:

This domain requires reviewing the organization's business development and resource mobilization strategy/plan to assess its adequacy, determine whether it is implemented as designed, and whether it yields the intended results. It is also a tool that enables assessment of the organization's funding sources and whether they are diversified.

Estimated time for execution of this domain: 3 hours (including the inquiries and review of the resource mobilization process of the organization)

Skills and experience required for effective execution of this domain: preferably an assessor with over three years of experience in accounting and financial management.

Overall Objective:

To assess the processes and procedures in place to raise funds to enable the organization to continue as a going concern.

NUPAS Plus 2.0 Business Development Categories:
1. **Resource Mobilization Plan**
2. **Dedicated staff**
3. **Targets**
4. **Proposal Preparation**
5. **Budget for Resource Mobilization**
6. **Advocacy and Influence**
7. **Diversified Funding**

NUPAS Plus 2.0 BUSINESS DEVELOPMENT EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Resource Mobilization Plan	Confirm whether the organization has a formally adopted process for identifying and responding to funding opportunities timely.	Resource Mobilization Plan (RMP)
Dedicated staff	Confirm the existence of suitably qualified resource mobilization staff.	RMP
Targets	Confirm whether the RMP has reasonable targets that are being monitored.	RMP
Proposal Preparation	Confirm whether the organization has an established process for responding timely to funding opportunities.	Proposals

Budget for Resource Mobilization	Confirm whether funding is available for resource mobilization activities.	Annual budget
Advocacy and Influence	Confirm whether the organization has: • An objective of advocacy on policies and issues. • Regularly carried out significant advocacy activities over the past three years. • A well-written plan or strategy for advocacy work, and an effective website. • Enough skilled staff for effective advocacy. • Been good at mobilizing its clients and developing alliances with other stakeholders for advocacy. • Significant influence on the formulation or implementation of government policies at the national or local level, on the general public's views, and on donor or regional organization policies.	Advocacy plan/strategy
Diversified Funding	Confirm whether the organization has significant and diversified funding sources.	Funding grid

14.1 Resource Mobilization Plan

Objective(s): To confirm whether the organization has a formally adopted process for timely identifying and responding to funding opportunities.

Procedures:

- Inquire with management whether they have a Resource Mobilization/similar strategy in place.
- Review the adequacy of the strategy (strategies, drivers, targets, etc.)
- Verify that the frequency of review/updating is addressed.

14.2 Dedicated Staff

Objective(s): To confirm the existence of suitably qualified resource mobilization staff.

Procedures:

- Review the job descriptions of individuals identified by management as personnel that are key to the organization's resource mobilization efforts and confirm their responsibility and that the relevant staff is aware.

- Review the organizational chart and resume/curriculum vitae of key individuals, consider their experience in business, and determine whether the organization can support resource mobilization.

14.3 Targets

Objective(s): To confirm whether the resource mobilization plan has reasonable targets and that they are being monitored.

Procedures:

- Review the Resource Mobilization Strategy/Plan for inclusion of targets.
- Confirm the reasonableness of the targets by comparing the organization's past performance in achieving the set targets.

14.4 Proposal Preparation

Objective(s): To confirm whether the organization has an established process for timely response to funding opportunities.

Procedures:

- Review the resource mobilization strategy/policy in place for responding to requests for application/ funding opportunities.
- Obtain recent awards/proposal submissions, compare the requests made to the actual proposal submitted, and compare it to the internal process for consistent application.

14.5 Budget for Resource Mobilization

Objective(s): To confirm whether funding is available for resource mobilization activities.

Procedures:

- Review the organization's budget for the availability of the core operating budget.
- Inquire with the organization's management whether they were able to fund planned core operating activities. If so, confirm through the review of core activities reports that were performed and achieved as budgeted. Also, review past budget variance analysis reports.

14.6 Advocacy and Influence

Objective(s): To confirm whether the organization aims to advocate for policies and issues and has:

- Regularly carried out significant advocacy activities over the past three years.
- A well-written plan or strategy for advocacy work, and an effective website.
- Sufficient skilled staff for effective advocacy.
- Been good at mobilizing its clients and developing alliances with other stakeholders for advocacy.
- Significant influence on the formulation or implementation of government policies at the national or local level, on the general public's views, and donor or regional organization policies.

Procedures: Verify that the organization has:

- An objective of advocacy on policies and issues.

- Regularly carried out significant advocacy activities over the past three years.
- A comprehensive written plan or strategy for advocacy work.
- Sufficient skilled staff for effective advocacy.
- Been effective in mobilizing its clients for advocacy.
- Been effective in developing alliances with other stakeholders for advocacy.
- Had a significant influence on the formulation or implementation of government policies at the national or local level.
- Had a significant influence on donor or regional organizational policies.
- Had a significant influence on the general public's views.

14.7 Diversified Funding

Objective(s): To confirm whether the organization has significant and diversified funding sources.

Procedures:

- Review the list of current awards (per the funding tracker) to assess whether their duration/amounts received would sustain the organization's long-term viability.
- Determine the proportion of each funding source, per the tracker.
- Make a note of any recurring awards.

Key Risks to be Considered

1. No documented Resource Mobilization Plan or Inadequate Resource Mobilization Plan.

MODULE 15: AWARD MANAGEMENT

Background:

This domain requires reviewing the organization's award management technical capacity, including the award management manual, and processes to assess their adequacy and compliance, determine whether they are followed as designed, and whether they yield the intended results.

Estimated time for execution of this domain: 3 hours (including the inquiries and review of the award management process of the organization)

Skills and experience required for effective execution of this domain: preferably an assessor with over three years of experience in award management.

Overall Objective:

To assess the processes and procedures in place to ensure compliance and identify/mitigate risks to enable the organization to achieve the appropriate capacity to successfully manage awards.

NUPAS Plus 2.0 Award Management Categories:

1. **Start-Up**
   1. Award Read
   2. SACs
   3. Files
   4. Bank Account
   5. Key Personnel and Other Staff
   6. Branding and Marking Plan
   7. Procurement Plan
   8. Workplan
   9. Workplan Budget
   10. AMELP

2. **Leadership**
   1. USAID Meetings
   2. Consortium Meetings
   3. Staff Meetings
   4. Operations Meetings
   5. Technical Meetings

3. **Procurement**
   1. Subrecipients
   2. Equipment
   3. Supplies

4. **Financial Management**
   1. Requesting Funds
   2. Accruals
   3. Budget Modifications
   4. Travel Approvals

5. **Monitoring**
   1. Performance

2. CLA
6. **Reporting**
    1. Performance Reports
    2. Reporting Calendar
    3. Technical Reporting
    4. Annual Audit
    5. Foreign Tax Reporting
    6. SF 425
    7. Cost Share

7. **Closeout**
    1. Closeout Policy
    2. Closeout Plan Template

NUPAS Plus 2.0 AWARD MANAGEMENT EXAMPLE

CATEGORY/ SUB-CATEGORY		OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Start-Up	Award Read	Confirm whether all key personnel, management, operations, technical, and leadership have read the award and signed the confirmation.	Check understanding of award
	SACs	Confirm whether the Special Award Conditions (SACs) in the award have an action plan for correction and are completed on time.	SACs
	Files	Confirm whether the organization has filed the fully executed award(s) and letter of delegation for AOR/COR and updated them with the latest versions.	Filing system
	Bank Account	Confirm whether the organization has created a separate bank account and used it exclusively for awards.	Bank Account
	Key Personnel and Other Staff	Confirm whether most key personnel and 50% of other staff were hired during the start-up phase.	Joining dates for all key personnel on board and other staff Employment contracts
	Branding and Marking Plan	Confirm whether the organization has its Branding and Marking plan approved by USAID.	Branding and Marking Plan

	Procurement Plan	Confirm whether the organization's Procurement Plan has been submitted to and approved by USAID.	Procurement Plan
	Workplan	Confirm whether the Workplan was submitted to and approved by USAID.	Workplan
	Workplan Budget	Confirm whether the budget was submitted to and approved by USAID.	Workplan Budget
	AMELP	Confirm whether the organization's AMELP is approved by USAID.	AMELP
Leadership	USAID Meetings	Confirm whether the meetings with AOR or COR are participated regularly (weekly, bi-weekly, or monthly) with agenda or minutes.	Relevant documentation, including agendas, minutes, attendance at regular meetings, presentations, etc.
	Consortium Meetings	Confirm whether consortium meetings are held regularly (monthly, bimonthly, quarterly) with agendas and minutes.	Relevant documentation, including agendas, minutes, attendance at regular meetings, presentations, etc.
	Staff Meetings	Confirm whether staff meetings are held regularly (weekly, bi-weekly, monthly) with agendas and minutes.	Relevant documentation, including agendas, minutes, attendance at regular meetings, presentations, etc.
	Operations Meetings	Confirm whether operations meetings are held regularly (weekly, bimonthly, monthly) with agendas and minutes.	Relevant documentation, including agendas, minutes, attendance at regular meetings, presentations, etc.
	Technical Meetings	Confirm whether technical meetings are held regularly (weekly, bi-weekly, monthly) with agendas and minutes.	Relevant documentation, including agendas, minutes, attendance

			at regular meetings, presentations, etc.
Procurement	Subrecipients	Confirm whether subawards are issued on time, with flow-downs, and regular monitoring meetings with minutes.	sub-awards, progress, and financial reports
	Equipment	Confirm whether all equipment in the budget is purchased on time, in compliance with internal procedures, and added to asset inventory.	Purchase requisition forms, budget, invoice, payments, and asset inventory
	Supplies	Confirm whether all supplies in the budget were purchased on time and in compliance with internal procedures.	Purchase requisition forms, budget, invoice, payments, and asset inventory
Financial Management	Requesting Funds	Confirm whether all previous SF 270 or SF 1034 consistently covers activities, are calculated correctly, and are submitted on time.	SF 270 or SF 1034
	Accruals	Confirm whether Accrual reports are consistently submitted on time and accurately.	Pipeline documentation
	Budget Modifications	Confirm whether budget modifications are needed or not, and if needed, they are discussed with and approved by USAID, and whether some of them include major scope changes, key personnel changes, additional funding, changes to indirect costs, adding commodities, training, or sub-recipients; and ensure that approvals are received before spending; reasons are justified; and the amount is reasonable.	budget modifications approvals
	Travel Approvals	Confirm that all travel requests are approved before travel is initiated, and expenses and reimbursements are submitted on time.	Travel Policy
Monitoring	Performance	Confirm whether most targets and progress are reviewed monthly and appropriate course correction measures are taken.	targets vs. progress and corrective measures
	CLA	Confirm whether all Collaboration, Learning, and Adaptation (CLA) work plan activities are approved and implemented per the schedule and whether findings are disseminated on time.	CLA plans

Reporting	Performance Reports	Confirm whether all monthly or quarterly performance reports are submitted on time and whether 80% of targets are achieved.	Performance Reports
	Reporting Calendar	Confirm whether the organization maintains an up-to-date project calendar on reporting and all parties understand their role and deadlines.	Reporting Calendar
	Annual Audit	Confirm whether the auditor is approved by USAID, sufficient budget is provided for the audit, all annual schedules are maintained, and audit findings are closed within 12 months.	Audit Reports
	Technical Reporting	Confirm the organization's capacity to prepare technical/progress reports for the donor that are complete, reliable, and on time.	Quarterly reports/annual reports or other technical reports
	Foreign Tax Reporting	Confirm whether all purchases above $500 are listed; exempt and non-exempt taxes are included, and the report is submitted on April 16.	Supporting documents
	SF 425	Confirm whether all reports on financial status, cost share, and program income are correct and timely.	Financial status reports
	Cost Share	Confirm whether all cost share items are captured on time using a tool and reported correctly.	cost share capturing tool
Closeout	Closeout Policy	Confirm whether the Closeout Policy and SOPs are approved by the Board and include 1. Designated team with roles and responsibilities; 2. Timeline; and 3. Checklist.	Closeout Policy
	Closeout Plan Template	Confirm whether the closeout plan template is complete and has been submitted on time for previous projects.	Closeout Plan

15.1 Start-Up

Objective(s): To confirm whether the organization's key personnel have read, and understand the award, whether it has an action plan for SACs, and submitted its Branding and Marking Plan, AMELP, Workplan and Procurement Plan, and Workplan Budged and have been approved.

Procedure:

- Review all documentation relevant to those aspects.

15.1.1 Award Read

Objective(s): To confirm whether all key personnel, management, operations, technical, and leadership have read the award and signed the confirmation.

Procedure:

- Understanding your award: verify all key personnel, management, operations, technical and leadership have read the award.

15.1.2 SACs

Objective(s): To confirm whether the Special Award Conditions (SACs) in the award have an action plan for correction and are completed on time.

Procedure:

- Review and plans to address Special Award Conditions.

15.1.3 Files

Objective(s): To confirm whether the organization has filed the fully executed award(s) and letter of delegation for AOR/COR and updated them with the latest versions.

Procedure:

- Verify whether the fully executed award and letter of delegation for AOR/COR are on file.

15.1.4 Bank Account

Objective(s): To confirm whether the organization has created a separate bank account and used it exclusively for awards.

Procedure:

- New bank account for an award.

15.1.5 Key Personnel and Other Staff

Objective(s): To confirm whether most key personnel and 50% of other staff were hired during the start-up phase.

Procedure:

- Check the joining dates for all key personnel on board and other staff.

15.1.6 Branding and Marking Plan

Objective(s): To confirm whether the organization has its Branding and Marking plan approved by USAID.

Procedure:

- Approved document on the identity of service or product using images and words consistent with service and complies with USAID branding requirements.

- Review USAID and awardee's logos tagline.

15.1.7 Procurement Plan

Objective(s): To confirm whether the organization's Procurement Plan has been submitted to and approved by USAID.

Procedure:

- Review procurement and ensure all items in the proposal are listed and have sufficient budget.

15.1.8 Workplan

Objective(s): To confirm whether the Workplan was submitted to and approved by USAID.

Procedure:

- Review the detailed work plan based on Year 1 of the proposal if it includes Activity Descriptions, outputs, Targets, Indicators, sub-recipients, and locations.

15.1.9 Workplan Budget

Objective(s): To confirm whether the budget was submitted to and approved by USAID.

Procedure:

- Review the budget for the work plan.

15.1.10 AMELP

Objective(s): To confirm whether the organization's AMELP is approved by USAID.

Procedure:

- Review approved AMELP whether it includes Theory of change, baseline, program and impact indicators, data collection methods, and automated systems.

15.2 Leadership

Objective(s): To confirm whether the organization regularly holds or participates in all the meetings with AOR or COR.

Procedure:

- Review relevant documentation, including agendas and minutes.

15.2.1 USAID Meetings

Objective(s): To confirm whether the meetings with AOR or COR are participated regularly (weekly, bi-weekly, or monthly) with agenda or minutes.

Procedure:

- Review attendance at regular meetings with AOR/COR, review presentations, documents, and follow-up actions.

15.2.2 Consortium Meetings

Objective(s): To confirm whether consortium meetings are held regularly (monthly, bimonthly, quarterly) with agendas and minutes.

Procedure:

- Review attendance at regular meetings with AOR/COR, review presentations, documents, and follow-up actions.

15.2.3 Staff Meetings

Objective(s): To confirm whether staff meetings are held regularly (weekly, bi-weekly, monthly) with agendas and minutes.

Procedure:

- Review attendance at regular meetings with AOR/COR, review presentations, documents, and follow-up actions.

15.2.4 Operations Meetings

Objective(s): To confirm whether operations meetings are held regularly (weekly, bimonthly, monthly) with agendas and minutes.

Procedure:

- Review attendance at regular meetings with AOR/COR, review presentations, documents, and follow-up actions.

15.2.5 Technical Meetings

Objective(s): To confirm whether technical meetings are held regularly (weekly, bi-weekly, monthly) with agendas and minutes.

Procedure:

- Review attendance at regular meetings with AOR/COR, review presentations, documents, and follow-up actions.

15.3 Procurement

Objective(s): To confirm whether the organization has issued and executed the sub awards and purchase orders on time.

Procedure:

- Check sub awards, purchase orders, and invoices.

15.3.1 Subrecipients

Objective(s): To confirm whether subawards are issued on time, with flow-downs, and regular monitoring meetings with minutes.

Procedure:

- Review sub-awards, their timeliness, and if they cover stated objectives, adequate budget, progress, and financial reports.

15.3.2 Equipment

Objective(s): To confirm whether all equipment in the budget is purchased on time, in compliance with internal procedures, and added to asset inventory.

Procedure:

- Review purchase requisition forms, budget, invoice, payments, and asset inventory.

15.3.3 Supplies

Objective(s): To confirm whether all supplies in the budget were purchased on time and in compliance with internal procedures.

Procedure:

- Review purchase requisition forms, budget, invoice, payments, and asset inventory.

15.4 Financial Management

Objective(s): To confirm whether the organization has timely and consistently completed funding requests, budget modifications, travel arrangements, and accrual reports.

Procedure:

- Review relevant records and documentation.

15.4.1 Requesting Funds

Objective(s): To confirm whether all previous SF 270 or SF 1034 consistently covers activities, are calculated correctly, and are submitted on time.

Procedure:

- Review SF 270 or SF 1034 if they consistently cover activities, are calculated correctly, and are submitted on time.

15.4.2 Accruals

Objective(s): To confirm whether Accrual reports are consistently submitted on time and accurately.

Procedure:

- Review records for documenting Pipeline (Obligation - Total Amount Spent) to ensure the amount is within donor requirements and is submitted on time.

15.4.3 Budget Modifications

Objective(s): To confirm whether budget modifications are needed or not, and if needed, they are discussed with and approved by USAID, and whether some of them include major scope changes, key personnel changes, additional funding, changes to indirect costs, adding commodities, training, or sub-recipients; and ensure that approvals are received before spending; reasons are justified; and the amount is reasonable.

Procedures:

- Review budget mods and reasons, including major scope changes, key personnel changes, additional funding, changes to indirect costs, and adding commodities, training, or sub-recipients.
- Ensure approvals are received before spending, reasons are justified, and the amount is reasonable.

15.4.4 Travel Approvals

Objective(s): To confirm that all travel requests are approved before travel is initiated, and expenses and reimbursements are submitted on time.

Procedure:

- Review the Travel Policy and determine if requests are approved before travel is initiated, and expenses and reimbursements are submitted on time.

15.5 Monitoring

Objective(s): To confirm whether the organization has monthly reviewed targets vs. achievements and approved and executed CLA activities.

Procedure:

- Review targets vs achievements and CLA work plans.

15.5.1 Performance

Objective(s): To confirm whether most targets and progress are reviewed monthly and appropriate course correction measures are taken.

Procedure:

- Determine if targets and progress are reviewed every month and appropriate course correction actions are taken.

15.5.2 CLA

Objective(s): To confirm whether all Collaboration, Learning, and Adaptation (CLA) work plan activities are approved and implemented per the schedule and whether findings are disseminated on time.

Procedure:

- Determine if CLA plans are approved, on track, and learnings are shared.

15.6 Reporting

Objective(s): To confirm whether the organization has complied with all reporting requirements as per deadlines.

Procedure:

- Review performance and financial reports.

15.6.1 Performance Reports

Objective(s): To confirm whether all monthly or quarterly performance reports are submitted on time and whether 80% of targets are achieved.

Procedure:

- Monthly or quarterly performance reports are submitted on time, and 80% of targets are achieved.

15.6.2 Reporting Calendar

Objective(s): To confirm whether the organization maintains an up-to-date project calendar on reporting and all parties understand their role and deadlines.

Procedure:

- The project has a reporting calendar, and all parties understand their role and deadlines.

15.6.3 Technical Reporting

Objective(s): To confirm the organization's capacity to prepare technical/progress reports for the donor that are complete, reliable, and on time.

Procedures:

- Obtain sample reports for the donor and assess the quality and timeliness.
- Check for required data analysis, such as target vs. achievement and indicator disaggregation, from the Monitoring, Evaluation, and Reporting (MER) indicators guide.

15.6.4 Annual Audit

Objective(s): To confirm whether the auditor is approved by USAID, sufficient budget is provided for the audit, all annual schedules are maintained, and audit findings are closed within 12 months.

Procedure:

- Confirm if the auditor is approved by USAID; sufficient budget is provided for the audit, the annual schedule is maintained, and audit findings are closed within 12 months.

15.6.5 Foreign Tax Reporting

Objective(s): To confirm whether all purchases above $500 are listed; exempt and non-exempt taxes included, and the report is submitted on April 16.

Procedure:

- Confirm if all purchases above $500 are listed; exempt and non-exempt taxes are included; and report submitted on April 16.

15.6.6 SF 425

Objective(s): To confirm whether all reports on financial status, cost share, and program income are correct and timely.

Procedure:

- Review reports on financial status, cost share, and program income, and ensure correctness and timeliness.

15.6.7 Cost Share

Objective(s): To confirm whether all cost share items are captured on time using a tool and reported correctly.

Procedure:

- Review cost share capturing tool for completeness per award.

15.7 Closeout

Objective(s): To confirm whether the organization's Board has approved and complied with the Closeout Policy and SOPs.

Procedure:

- Closeout Policy and SOPs.

15.7.1 Closeout Policy

Objective(s): To confirm whether the Closeout Policy and SOPs are approved by the Board and include 1. Designated team with roles and responsibilities; 2. Timeline; and 3. Checklist.

Procedure:

- Review the Closeout Policy and determine if all:1. Designated team with roles and responsibilities; 2. Timeline; 3. Checklist 4. Record Retention and 5. Inventory reports are included in it.

15.7.2 Closeout Plan Template

Objective(s): To confirm whether the closeout plan template is complete and has been submitted on time for previous projects.

Procedure:

- Review the schedule to develop a closeout plan and template, and check if it includes: 1) Deliverable schedule and timeline for completing required actions; 2) Financial Report with expenditures to date and estimated funds needed for completion; 3. Property Disposition Plan; 4. Plan for Phase-out of Activities; 5. Steps to Transfer Capacity.

Key Risks to be Considered

1. Award Mandatory Standard Provisions and Required as Applicable Provisions are not fully understood and systems are not in place for compliance.
2. Special Award Conditions are not closed within the required time frame...
3. Costs are not allocated appropriately; full costs are not recovered and there may be disallowable costs.

MODULE 16: SUSTAINABILITY

Background:

This domain requires a review of the organization's ability to manage additional funding and determining whether controls are in place in relation to knowledge management and external linkages, internal communications and decision-making, external communications, and advocacy and influence.

Estimated time for execution of this domain: 20 hours (including the background reading)

Skills and experience required for effective execution of this domain: an assessor with more than two years of experience in reviewing organizational sustainability.

Overall Objective:

To verify whether the organization is sustainable.

NUPAS Plus 2.0 Sustainability Categories:

1. **Legal**
    1. Governance Structure and Accountability (NUPAS)
    2. Taxes (NUPAS PLUS)

2. **Governance**
    1. Board Terms of Reference or By-Laws (NUPAS PLUS)
    2. Board Membership (NUPAS PLUS)
    3. Board Roles and Responsibilities (NUPAS PLUS)

3. **Sustainability**
    1. Absorptive Capacity (NUPAS)
    2. Funding Diversification (NUPAS PLUS)
    3. Project Management Capacity (NUPAS)

4. **Finance**
    1. Accounting and Bookkeeping (NUPAS)
    2. Segregation of Duties (NUPAS)
    3. Organizational Risk Assessment (NUPAS PLUS)

5. **Human Resources**
    1. Staff Attrition (NUPAS PLUS)

6. **Information Technology**
    1. IT Assessment (NUPAS PLUS)

7. **Gender**
    1. Gender Equity Policy (NUPAS PLUS)
    2. Gender Budget (NUPAS PLUS)
    3. Gender Focal Person (NUPAS PLUS)

8. **Strategic Information**
    1. Data Use (NUPAS PLUS)
       Performance (NUPAS PLUS)

2. Technical Reporting (NUPAS PLUS)

NUPAS Plus 2.0 SUSTAINABILITY EXAMPLE

CATEGORY/ SUB-CATEGORY		OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Legal	Governance Structure and Accountability (NUPAS)	Confirm whether the organization is legally registered; has, and is fully compliant with, all required permits and licenses to operate; and is aware of its tax status and fully compliant with applicable tax, labor, occupational health, and safety, environmental, and other material laws and regulations relevant to its operations.	legal registration requirements Deeds of Trust/ Articles of Association/ Memorandum of Incorporation/NPO certificate Appropriate NGO Permit Tax - letter of good standing Environmental compliance Manual
	Taxes (NUPAS PLUS)	Confirm that the organization consistently complies with payroll tax, VAT, and other applicable tax regulations.	Tax - letter of good standing (Tax clearance certificate)
Governance	Board Terms of Reference or By-Laws (NUPAS PLUS)	Confirm: • The board has determined a governance function and appropriate policies and structures are in place. • The board works as a cohesive body with a Board Chair and 5-7 board members providing oversight. • Presence of a board constitution and code of conduct. • Ongoing updating of the constitution, interpretation of its mandate, and ensuring a governance system is in place.	Organization's charter, by-laws, and other foundational/operational documents Board TOR or By-Laws Code of conduct Organogram

		• Board performance review self-assessment structure in place.	
	Board Membership (NUPAS PLUS)	Confirm if the organization has rules for board membership, eligibility, suspensions, and expulsion.	Board TOR and selection criteria Governance Manual
	Board Roles and Responsibilities (NUPAS PLUS)	Confirm whether the organization's all Board members have clear roles and responsibilities which among other things include: knowing and supporting the mission of the organization, attending Board meetings regularly, preparing for meetings in advance, maintaining confidentiality, offering informed and impartial guidance, avoiding conflicts of interest, fulfilling the duties of the office (e.g. treasurer), participating in committees and special events, as well as in resource development, supporting the Director representing the organization externally, and whether all have fulfilled their roles for the past three years.	Terms of Reference or By-Laws Job description or Scope of Work of Board members
Sustainability	Absorptive Capacity (NUPAS)	Confirm that the organization has more than adequate absorptive capacity (i.e., that it can rise to the level of effort required to implement an additional project/activity).	Relevant documentation, including current staff complement, including skill set and level of experience
	Funding Diversification (NUPAS PLUS)	Confirm whether the organization has a diversified funding base capable of sustaining its programs over the long term, and that no single funding stream is over 25%.	funding tracker and award budgets
	Project Management Capacity (NUPAS)	Confirm whether the organization has a comprehensive and well-documented project management system in place to monitor progress on projects regularly; and whether the organization consistently produces useful project management reports.	Project Management Manual Results Framework/ other tools
Finance	Accounting and Bookkeeping (NUPAS)	Confirm that the organization has a reliable double-entry accounting/ bookkeeping system that meets its needs and is otherwise appropriate; that financial transactions are entered into the system consistently, per applicable standards, policies, and procedures daily; and that system has	Double-entry accounting/bookkeeping system

		functionalities to automatically reconcile subsidiary ledger to the main ledger.	
	Segregation of Duties (NUPAS)	Confirm that there are well-thought-out and documented policies, procedures, and practices that safeguard the payment process.	Relevant policies, procedures, and practices
	Organizational Risk Assessment (NUPAS PLUS)	Confirm that an organization-wide fraud risk assessment is performed involving all key individuals (across the organization) and addressing all the steps of a risk assessment process, and results are completely and accurately applied organization-wide and used to inform updates to the policy.	Annual Risk Assessment Reports
HR	Staff Attrition (NUPAS PLUS)	Confirm whether staff attrition is low for the organization's size, type, and location.	Staff Retention Policy and any other official documents/reports
IT	IT Assessment (NUPAS PLUS)	Confirm whether staff attrition is low for the organization's size, type, and location.	IT risk assessment
Gender	Gender Equity Policy (NUPAS PLUS)	Confirm whether the organization has a Gender Equality Policy, and implementation guidelines and consistently uses them to mainstream gender into policies and practices.	Gender Equity Policy
	Gender Budget (NUPAS PLUS)	Confirm whether 100% of needed financial resources are available for the implementation of the organization's gender policy both at the institutional and programmatic levels.	Gender budget
	Gender Focal Person (NUPAS PLUS)	Confirm if the organization has assigned at least one full-time gender focal person with clear roles and responsibilities.	organogram
Strategic Information	Data Use (NUPAS PLUS)	Confirm whether the organization has a data use plan for its PEPFAR-funded project and conducts regular data review meetings, whether the data use plan is fully implemented, and whether routine data is used to design effective remedial measures.	data use plan, data review meeting notes, action items/work plans, and presentations or dashboards
	Performance (NUPAS PLUS)	Confirm whether most targets and progress are reviewed monthly and appropriate course correction measures are taken.	targets vs progress

| | Technical Reporting (NUPAS PLUS) | Confirm the organization's capacity to prepare technical/progress reports for the donor that are complete, reliable, and on time. | sample reports for the donor

MER indicators guide |
|---|---|---|---|

16.1 Governance Structure and Accountability

Objective(s): To confirm whether the organization is legally registered; has, and is fully compliant with, all required permits and licenses to operate; and is aware of its tax status and fully compliant with applicable tax, labor, occupational health, and safety, environmental, and other material laws and regulations relevant to its operations.

Procedures:

- Confirm compliance with legal registration requirements and other material licenses, permits, laws, and regulations.

- Verify lawful registration by obtaining Deeds of Trust/ Articles of Association/ Memorandum of Incorporation/NPO certificate.

- Check if there is a permit in place (for the type of industry the NGO is working in?)

- Tax - letter of good standing?

- Environmental compliance, if applicable?".

16.2 Taxes

Objective(s): To confirm that the organization consistently complies with payroll tax, VAT, and other applicable tax regulations.

Procedure:

- Inquiry with management on regulations for income/payroll taxes.

16.3 Board Terms of Reference or By-Laws

Objective(s): To confirm:

- The board has determined a governance function and appropriate policies and structures are in place.

- The board works as a cohesive body with a Board Chair and 5-7 board members providing oversight.

- Presence of a board constitution and code of conduct.

- Ongoing updating of the constitution, interpretation of its mandate, and ensuring a governance system is in place.

- Board performance review self-assessment structure in place.

Procedure:

- Verify if the organization has established a governance structure with committees, and possesses board terms of reference or by-laws, a mandate, a board constitution, a code of conduct, policies, and procedures.

16.4 Board Membership

Objective(s): To confirm if the organization has rules for board membership, eligibility, suspensions, and expulsion.

Procedure:

- Review the board TOR/Governance Manual and bylaws to verify rules for membership, eligibility, suspensions, and expulsion.

16.5 Board Roles and Responsibilities

Objective(s): To confirm whether the organization's all Board members have clear roles and responsibilities which among other things include: knowing and supporting the mission of the organization, attending Board meetings regularly, preparing for meetings in advance, maintaining confidentiality, offering informed and impartial guidance, avoiding conflicts of interest, fulfilling the duties of the office (e.g. treasurer), participating in committees and special events, as well as in resource development, supporting the Director representing the organization externally, and whether all have fulfilled their roles for the past three years.

Procedure:

- Review Terms of Reference or By-Laws.

16.6 Absorptive Capacity

Objective(s): To confirm that the organization has more than adequate absorptive capacity (i.e., that it can rise to the level of effort required to implement an additional project/activity).

Procedures:

- Determine if the organization has a track record in this regard.
- Review the organization's current staff complement, including skill set and level of experience.

16.7 Funding Diversification

Objective(s): To confirm whether the organization has a diversified funding base capable of sustaining its programs over the long term, and that no single funding stream is over 25%.

Procedure:

- Request the list of current awards (funding tracker) and assess whether the duration/amounts received would sustain the long-term sustainability of the organization.
- Make a note of any recurring awards.

16.8 Project Management Capacity

Objective(s): To confirm whether the organization has a comprehensive and well-documented project management system in place to monitor progress on projects regularly; and whether the organization consistently produces useful project management reports.

Procedure:

- Verify that the organization has a well-documented Project Management Manual, including a Results Framework/ other tool to guide the accomplishment of project/ program objectives.
- Is there a compliance officer monitoring and reporting on deliverables?

16.9 Accounting and Bookkeeping

Objective(s): To confirm that the organization has a reliable double-entry accounting/ bookkeeping system that meets its needs and is otherwise appropriate; that financial transactions are entered into the system consistently, per applicable standards, policies, and procedures daily; and that system has functionalities to automatically reconcile subsidiary ledger to the main ledger.

Procedures:

- Confirm that the organization has a double-entry accounting/bookkeeping system and that financial transactions are entered into the system consistently in accordance with applicable standards, policies, and procedures.
- Is the system consistently used, as well as in accordance with GAAP?
- Are transactions recorded timely and consistently?
- Does the system have the functionality to automatically reconcile summaries of transactions to detailed transactions (or is it done manually)?
- Are entries adequately cross-referenced to source documents?
- Are subsidiary ledgers reconciled to the main ledger (manually/ automatically)?

Note: For very small organizations and awards, a manual (handwritten in books) double-entry accounting system may be acceptable provided it is established and used regularly and consistently in accordance with acceptable accounting principles, standards, policies, procedures, and practices and is regularly kept up to date, reconciled and reviewed by appropriately trained, experienced, and otherwise competent personnel.

16.10 Segregation of Duties

Objective(s): To confirm that there are well-thought-out and documented policies, procedures, and practices that safeguard the payment process.

Procedures:

- Confirm that the organization has policies, procedures, and practices in place regarding the segregation of duties to ensure that funds above a certain threshold can only be disbursed with dual signatures and are supported by documentation.
- Request the payments policy and verify that the following were addressed:
  - The process for payments is adequately outlined (e.g., request, approval, release/ payment)
  - Individuals responsible for each step
  - Timelines for payment (maximum cycle time)

- Verify that the policy makes provision for auxiliary procedures (e.g., in case key individuals take leave, one person may perform two normally incompatible duties but with supervision from another/ stand-in to fulfill the segregated duty).

16.11 Organizational Risk Assessment

Objective(s): To confirm that an organization-wide fraud risk assessment is performed involving all key individuals (across the organization) and addressing all the steps of a risk assessment process, and results are completely and accurately applied organization-wide and used to inform updates to the policy.

Procedure:

- Review Annual Risk Assessments.

16.12 Staff Attrition

Objective(s): To verify whether staff attrition is low for the organization's size, type, and location.

Procedures:

- Request the organization's Staff Retention Policy and review it for adequacy.
- Check with management, and review any other official documents/reports, about staff attrition.

16.13 IT Assessment

Objective(s): To verify whether staff attrition is low for the organization's size, type, and location.

Procedures:

- Enquire with management whether an IT risk assessment is performed.
- Obtain the assessment and verify the important aspects, such as security, segregation of duties, and expansion as well as that key individuals were involved.

16.14 Gender Equity Policy

Objective(s): To verify whether the organization has a Gender Equality Policy, and implementation guidelines and consistently uses them to mainstream gender into policies and practices.

Procedure:

- Check the Gender Equity Policy.

16.15 Gender Budget

Objective(s): To verify whether 100% of needed financial resources are available for the implementation of the organization's gender policy both at the institutional and programmatic levels.

Procedure:

- Check the budget and ask if the budget is allocated to implement the gender policy.

16.16 Gender Focal Person

Objective(s): To verify if the organization has assigned at least one full-time gender focal person with clear roles and responsibilities.

Procedure:

- Check the organogram of the organization or position descriptions.

16.17 Data Use

Objective(s): To confirm whether the organization has a data use plan for its PEPFAR-funded project and conducts regular data review meetings, whether the data use plan is fully implemented, and whether routine data is used to design effective remedial measures.

Procedure:

- Proof by data use plan, data review meeting notes, and action items/work plans emanating from data review meetings.
- Check minutes/notes, presentations, or dashboards, and ask how they used data.

16.18 Performance

Objective(s): To confirm whether most targets and progress are reviewed monthly and appropriate course correction measures are taken.

Procedure:

- Determine if targets and progress are reviewed monthly and appropriate course correction actions are taken.

16.19 Technical Reporting

Objective(s): To confirm the organization's capacity to prepare technical/progress reports for the donor that are complete, reliable, and on time.

Procedures:

- Obtain sample reports for the donor and assess the quality and timeliness.
- Check for required data analysis, such as target vs. achievement and indicator disaggregation, from the Monitoring, Evaluation, and Reporting (MER) indicators guide.

Key Risks to Be Considered

1. Strategic planning not performed
2. No External Communications Policy
3. No Advocacy and Influence Plan

MODULE 17: MANDATORY STANDARD PROVISIONS

Background:

This domain requires reviewing the organization's understanding and application of the Mandatory Standard Provisions (MSPs), especially for recipients of USAID funding.

Estimated time for execution of this domain: 26 hours (including the interviews and review of relevant supporting documents, where the MSP is applicable.)

Skills and experience required for effective execution of this domain: preferably an assessor with up-to-date knowledge of the Standard Provisions for Non-U.S. Nongovernmental Organizations, focusing on Mandatory Standard Provisions.

Overall Objective(s):

To verify whether the organization is complying with Mandatory Standard Provisions as specified in their award/subaward.

Important Note: Visit the Standard Provisions website from time to time to verify whether any amendments or additions (usually highlighted in yellow) have taken place.

Furthermore, the procedures listed below refer to the most important and general situations encountered. We strongly advise you to consult the latest Standard Provisions when performing assessments, due to technicalities that may affect compliance requirements.

NUPAS Plus 2.0 MANDATORY STANDARD PROVISIONS EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
M1 Allowable Costs	Determine whether the organization incurred costs in accordance with the prescriptions of the prime /subaward.	Donor Agreement Representative sample of purchases Document retention register
M2 Accounting, Audit, and Records	Determine whether the organization accounted for expenditure in terms of recognized accounting frameworks, was subject to a federal audit if expenditure exceeded the established threshold, and whether records are maintained for all charges to the award.	Accounting policy Document retention register
M3 Amendment of Award and Revision of Budget	Determine whether the organization deviated from the original agreement only in	Modifications to the original agreement

	terms of revisions to the original award and the original budget.	
M4 Notices	Determine whether communications are directed to the USAID AO or the recipient, via mail/e-mail/in person.	Communications to the prime/AO
M5 Procurement Policies	Determine whether the recipient has its own policies and procedures for the procurement of commodities and services necessary for the award.	Procurement Policy Sample of procurement transactions
M6 USAID Eligibility Rules for Procurement of Commodities and Services	Determine whether certain types of goods, which are prohibited or require prior approval, were not purchased without prior approval.	Donor Agreement Sample of procurement transactions
M7 Title to And Use of Property	Determine whether the title rests in the party as per the award terms and conditions and whether the property is used in accordance with the award prescriptions.	Donor Agreement Fixed Assets Register Fixed Assets Verification Property Disposition Report
M8 Submissions to The Development Experience Clearinghouse and Data Rights	Determine whether any intellectual property (IP) developed by the recipient using donor funding submitted the IP to USAID via the prescribed portal.	Proof of submission of IP to the Development Experience Clearinghouse
M9 Marking and Public Communications Under USAID-Funded Assistance	Determine whether marking (branding) recipient items (e.g., vehicles, tents) are in accordance with USAID prescriptions.	Photos of USAID-branded material (if the review is performed virtually)/physical inspection of USAID-branded items.
M10 Award Termination and Suspension	Determine whether the recipient is aware that the award may be terminated/suspended at any time.	Award termination/suspension letters
M11 Recipient and Employee Conduct	Assess whether the recipient has written policies and procedures to prevent personal conflicts of interest and to prevent its	Human Resources Policy

	officers, employees, or agents from using their positions for personal gain or presenting the appearance of a personal conflict of interest.	Conflict of Interest Policy Code of Conduct
M12 Debarment and Suspension	Verify that the recipient does not transact with debarred or suspended individuals or entities under a USAID award unless prior approval is received from the Agreement Officer (AO).	SAM Verifications are performed on employees, contractors, subrecipients, vendors, and any other parties involved with the execution of the USAID award.
M13 Disputes and Appeals	Determine if the recipient is aware of the process to raise disputes/appeals.	Disputes/Appeal letters Other related correspondence
M14 Preventing Transactions With, Or the Provision of Resources or Support To, Sanctioned Groups and Individuals	Verify that the recipient will not engage in transactions with, or provide resources or support to, any individual or entity that is subject to sanctions administered by OFAC or the United Nations (UN), including any individual or entity that is included on the Specially Designated Nationals and Blocked Persons List maintained by OFAC.	Proof of OFAC verifications performed Proof of UN verifications performed
M15 Trafficking in Persons	Verify that the organization, sub awardee, or contractor, at any tier, or their employees, labor recruiters, brokers, or other agents are not engaging in any trafficking of persons (as defined in the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, especially Women, and Children, supplementing the UN Convention against Transnational Organized Crime).	Trafficking in Persons policy
M16 Voluntary Population Planning Activities – Mandatory Requirements	Verify that the organization does not use USAID funds to pay for involuntary sterilization or Abortion-Related Activities.	None – will be guided by interviews with management
M17 Equal Participation by Faith-Based Organizations (FBO)	Verify that FBOs may participate on the same basis as any other organization, in any USAID program for which they are otherwise eligible, and that explicitly religious activities are prohibited.	None – will be guided by interviews with management

M18 Nondiscrimination	Verify that no U.S. citizen or legal resident shall be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination based on race, color, national origin, age, disability, or sex under any program or activity funded by this award when work under the grant is performed in the U.S. or when employees are recruited from the U.S.	Procurement policy (otherwise interviews with management in the absence of a procurement policy)
M19 USAID Disability Policy – Assistance	Verify that the recipient does not discriminate against people with disabilities in the implementation of USAID- funded programs and determine whether they demonstrate a comprehensive and consistent approach for including men, women, and children with disabilities.	Disability policy
M20 Limiting Construction Activities	Verify that the recipient does not engage in construction activities unless explicitly approved by the AO.	Donor Agreement (and modifications) Construction-related expenses (to compare with prescriptions in the donor agreement/modifications)
M21 USAID Implementing Partner Notices (IPN) Portal for Assistance	Verify that the recipient has registered on the IPN Portal after receiving an assistance award.	Proof of registration on the IPN (Not required for subrecipients)
M22 Pilot Program for Enhancement of Grantee Employee Whistleblower Protections	Verify that the recipient has notified its employees working under this award, in the predominant native language of the workforce, that they are afforded the employee whistleblower rights and protections provided under 41 U.S.C. § 4712; and that they include this requirement in any subaward or subcontract made under this award.	Fraud Management Policy Whistleblower Policy (if not included in the Fraud Management Policy)
M23 Submission of Datasets to The Development Data Library	Verify that Intellectual Work (IW) (similar to M8) is submitted to the Data Development Library (DDL).	Proof of submissions to the DDL

M24 Prohibition on Requiring Certain Internal Confidentiality Agreements or Statements	Verify that employees, subrecipients, or contractors are not prevented from lawfully reporting waste, fraud, or abuse, related to the performance of a Federal award, to a designated investigative or law enforcement.	HR Policy (also to inquire with management)
M25 Child Safeguarding	Verify that activities that include the risk of child abuse, exploitation, or neglect within USAID-funded programs are adequately mitigated.	HR Policy (also to inquire with management) Child Safeguarding Policy (if separate)
M26 Mandatory Disclosures	Verify that applicants and recipients must disclose, in writing and a timely manner, to the USAID Office of the Inspector General, with a copy to the cognizant Agreement Officer, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Subrecipients must also disclose, in writing and a timely manner, to the USAID Office of the Inspector General and to the prime recipient (pass-through entity) all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award.	Any communications relating to what is stipulated in the objective column sent to the correct address
M27 Nondiscrimination Against Beneficiaries	Verify that the recipient does not discriminate against any beneficiaries in implementing the award (such as, but not limited to, by withholding, adversely impacting, or denying equitable access to the benefits provided through this award based on any factor not expressly stated in the award).	Procurement Policy
M28 Conflict of Interest	Verify that the recipient has a policy in place to prevent/manage potential conflicts of interest (e.g. when office-bearers have financial interests in vendors).	Conflict of Interest Declarations (all implicated parties)
M29 Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment	Verify that the recipient does not procure telecommunication and video surveillance services or equipment from prohibited vendors, using grant funds, including direct and indirect costs, program income, and any cost share.	Purchase documentation of telecommunication and video surveillance equipment

M30. Exchange Visitors Visa Requirements	To verify that the organization:	Documentation of inclusion of and compliance with all relevant provisions in all sub awards and contracts
	• Has a full understanding of the provision requirements, and consistently includes this provision in all sub awards and contracts.	
	• Complies with this provision with no gaps for all Exchange Visitors, Participant Training, or Invitational Travel activities, and accurately reports Exchange Visitors' and Participants' progress through TraiNet.	
	• Is accurate and consistent in (i) considering health and Accident Insurance coverage in line with Department of State and USAID minimum coverage requirements for Exchange Visitors traveling to the United States, (ii) obtaining health and accident insurance coverage for all Participants traveling to a third country, and (ii) determining whether specific in-country participant training activities subject them to any risk of health and accident liability for medical costs.	
	• Is accurate and consistent with no gaps in ensuring (i) that all USAID-sponsored Exchange Visitors obtain, use, and comply with the terms of the J-1 visa, issued in conjunction with a USAID-issued Certificate of Eligibility for J-1 Visa Status (DS-2019) for Exchange Visitors traveling to the United States, and (ii) that all Participants obtain, use, and comply with the terms of all applicable immigration, visa, and other similar requirements for Participants traveling to a third country or within the host country.	
	• Accurately and consistently, with no gaps, verifies (i) English language proficiency for Participants in a U.S.-based activity, and (ii) Proficiency in the language of training for Participants of third-country or host-country training (and makes arrangements for an interpreter).	
	• Accurately and consistently conducts pre-departure orientation for U.S-	

	bound Exchange Visitors and Participants of third-country training programs with no gaps. • Accurately and consistently, with no gaps, ensures (i) that all Exchange Visitors read and sign the Conditions of Sponsorship for U.S.-Based Activities, (ii) that all Participants of long-term (six months or longer) third-country training read and sign the form Conditions of Sponsorship for Third-Country Training, and (iii) that the Agreement Officer is notified of any known violations by Exchange Visitors of visa or other immigration requirements or conditions." • Accurately and consistently comply with the "International Air Travel and Air Transportation of Property" provision.	
M31. Contract Award Term and Condition for Recipient Integrity and Performance Matters (December 2022)	To verify that the organization: • Consistently complies with the contract award terms and conditions for recipient integrity and performance matters, • Always maintains the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS), and • Is accurately aware of reporting procedures and reporting frequency, and the proceedings about which it must report including proceedings in connection with the award or performance of a grant, its final disposition, a criminal proceeding resulting in a conviction, a civil proceeding that resulted in a finding of fault, or administrative proceeding as defined in the standard provisions.	Documentation of inclusion of and compliance with all relevant provisions in all sub awards and contracts

M1 Allowable Costs

Objective(s): To determine whether the organization incurred costs in accordance with the prescriptions of the prime/subaward.

Procedures: Verify that the organization has:

- Incurred expenses within the terms of the award and the cost principles (if a cooperative agreement) and that these expenses were (1) reasonable, (2) allocable, and (3) allowable.

- Not paid any profit or fee to the recipient or subrecipients of a grant or cooperative agreement.

- Retained documentation for a minimum of three years from the date of submission of the final expenditure report.

- Included the requirements of the MSP in its awards to subrecipients.

M1.1 Budget

Objective(s): To determine whether 1) the requests for funding for activities include appropriate budget line item, and 2) costs do not exceed the amount of variance allowed.

Procedure:

- Verify that project activities are based on the costs of the planned activities.

M1.2 Cost Principles

Objective(s): To determine whether the costs are 1) reasonable: costs which are generally recognized as ordinary and necessary and would be incurred by a prudent person in the conduct of normal business; 2) allocable: incurred specifically for this award; and 3) allowable: conform to any limitations in this award.

Procedure:

- Verify that the costs incurred are in accordance with applicable cost principles.

M1.3 Prior Approval

Objective(s): To confirm prior written approvals from the AO that are required by the applicable cost principles. The recipient may obtain the AO's written determination on whether specific costs not clearly addressed in the applicable cost principles are allowable or allocable. The AO reserves the right to make a final determination on the allowability of costs.

Procedure:

- Verify that prior written approval from AO is on file for any expenses outside of cost principles.

M1.4 Profit

Objective(s): To confirm that the organization does not accumulate profit or charge fees as per bank statements.

Procedure:

- Verify that no profit or fee is accumulated.

M1.5 Record Keeping

Objective(s): To confirm whether the Operations Manual includes a statement that financial records must be kept for 3 years.

Procedure:

- Verify appropriate plans for record keeping.

M1.6 Flow Downs

Objective(s): To confirm that all standard provisions are incorporated into all sub awards and contracts, which are paid on a cost reimbursement basis.

Procedure:

- Verify flow-downs to subs.

M2 Accounting, Audit, and Records

Objective(s): To determine whether the organization accounted for its expenditures with recognized accounting frameworks, was subject to a federal audit if expenditure exceeded the established threshold, and whether records are maintained for all charges to the award.

Procedures: Verify that the organization has:

- Maintained records of expenses incurred for the award.

- Conformed its accounting practices to accepted frameworks.

- Ensured the ability to grant timely access to USAID, the USAID Inspector General, the Comptroller General of the United States, or any of their authorized representatives.

- Had an annual federal audit performed no later than nine months after the recipient's year-end if more than $750,000 was expensed in that fiscal year.

- Ensured that systems are in place for monitoring if any subawards or contracts exist.

- Verify inclusion of the provisions detailed in the MSP to all subawards and contracts with non-U.S. organizations that have a value of $10,000 or more.

M2.1 Accounting Records

Objective(s): To confirm whether accounting records and supporting documentation adequately show all costs incurred under this award; receipt and use of goods and services acquired under this award; the costs of the program supplied from other sources.

Procedure:

- Review Records and Accounting System.

M2.2 Audit

Objective(s): To confirm that an external audit is conducted annually with due regard to the mandatory provision. Written processes are comprehensive and cover all types of audits, and the audit is unqualified and submitted to USAID within 30 days.

Procedure:

- Audit (if the award is >$750,000 excluding Fixed Amount Awards).

M3 Amendment of Award and Revision of Budget

Objective(s): To determine whether the organization deviated from the original agreement in terms of revisions to the original award and budget.

Procedure:

- Inquire with management whether any modifications were issued and verify that the organization acted accordingly.

M3.1 Amendments

Objective(s): To determine whether there is a good understanding of award amendment provisions, all the requests are made with sufficient lead time and approval granted. No costs were incurred while awaiting approval.

Procedure:

- Check Award Amendments.

M3.2 Delegation of Authority

Objective(s): To determine whether AO has not disapproved any costs.

Procedure:

- Check policy on delegation of authority in place but it is not followed.

M3.3 Solicitation

Objective(s): To determine whether the organization avoids conflicts of interest, including bias and unfair competitive advantage. The organization's standards of conduct provide for disciplinary actions for violations of such standards by officers, employees, or agents of the organization. The organization ensures that competitions are not biased in favor of one offeror over another. The organization ensures that no potential contractor has unequal access to information that may provide that contractor with an unfair competitive advantage.

Procedure:

- Review Solicitation process and Selection.

M3.4 Procurement

Objective(s): To determine whether the Organization retains all procurement records related to awards in accordance with the Standard Provision, "Accounting, Audit and Records," and makes such records available to USAID upon request.

Procedure:

- Review Procurement Records.

M3.5 Procurement Instrument

Objective(s): To determine whether the organization chooses the appropriate type of procurement instrument (fixed price contracts, cost reimbursable contracts, purchase orders, incentive contracts) and for promoting the best interest of the program or project. Contracts above the organization's micro-purchase threshold contain provisions that allow for administrative, contractual, or legal remedies if a contractor violates the contract terms. For all contracts for construction or facility improvement awarded for more than $100,000, the organization observes generally accepted bonding requirements.

Procedure:

- Review selection of types of procurement instruments (fixed price contracts, cost reimbursable contracts, purchase orders, incentive contracts).

M4 Notices

Objective(s): To determine whether communications, including notices, are directed to the USAID Agreement Officer (AO) or other recipient via mail, email, or in person.

Procedure:

- Verify that communications are directed to USAID AO or other recipients via mail, email, or in person.

M5 Procurement Policies

Objective: To determine whether the recipient has policies and procedures for procuring commodities and services necessary for the award.

Procedures: Verify that:

- The organization has procurement policies and procedures for the procurement of commodities and services necessary for this award, and these include applicable thresholds (including micro-purchase thresholds) with approvals.

- The price, fair competition, and other factors are considered when procurement decisions are made.

- Adequate documentation exists to properly support expenditures and deviations from standard policy.

- The contract tools being used are appropriate to the organizations, e.g., contracts, lease agreements, once-off purchases, etc.

- Conflicts of interest are properly declared and managed, with a particular emphasis on bias and unfair competitive advantage.

- All provisions were included as specified by the award for contracts under this award.

- All M6 USAID Eligibility Rules for Procurement of Commodities and Services were followed.

M6 USAID ELIGIBILITY RULES FOR PROCUREMENT OF COMMODITIES AND SERVICES (MAY 2020)

Objective: To determine that the organization did not purchase prohibited goods or any that require prior approval, without such approval.

Procedures:

- Verify that the organization has not procured:
    - Military equipment,
    - Surveillance equipment,
    - Commodities and services for support of police or other law enforcement activities,
    - Abortion equipment and services,
    - Luxury goods and gambling equipment, or
    - Weather modification equipment.
- Verify that the organization has not procured from ineligible suppliers.
- Verify that the organization has not procured the following, unless with prior approval:
    - Agricultural commodities,
    - Motor vehicles,
    - Pharmaceuticals,
    - Pesticides,
    - Used equipment,
    - U.S. Government-owned excess property,
    - Fertilizer.
- Verify that procurement took place from the correct geographic region (source/nationality).
- Verify the inclusion of any subawards in the sub-agreement.

M6.1 Restricted Commodities

Objective: To determine whether there is consistent compliance with ineligible and restricted commodities and services with no gaps and a full understanding of the mandatory provision.

Procedure:

- Ineligible and Restricted Commodities and Services.

M6.2 Ineligible Suppliers

Objective: To determine whether the organization is consistently in compliance with Ineligible Suppliers with no gaps. There is a full understanding of the mandatory provision.

Procedure:

- Ineligible Suppliers.

M6.3 Source

Objective: To determine whether the organization is fully compliant with Source and Nationality /Geographical Code or requests AO approval in advance. There is a full understanding of the mandatory provision.

Procedure:

- Source and Nationality /Geographical Code.

M7 Title to and Use of Property

Objective: To determine whether title rests in the party as per the award terms and conditions and whether the property is used in accordance with the award prescriptions.

Procedures:

- Select a sample of property items (e.g., vehicles, computer equipment, etc.), and verify that these are used for the purpose of the award.

- Verify that the title resides in the party as prescribed by the award terms and conditions.

- Verify that a physical inventory is taken at least every two years.

- Verify that property is disposed of in accordance with the organization's internal procedures and AO-approved disposition plans.

M7.1 Title

Objective: To determine whether the title of all property is under the organization. The organization always uses the property for the program for which it was acquired and does not provide a third-party legal or financial interest.

Procedure:

- Title and use of the property.

M7.2 Use of Property

Objective: To determine whether the organization always uses the property in connection with its other activities as per the following order: (i) Activities funded by USAID, then (ii) Activities funded by other United States Government (USG) agencies, then (iii) As directed by the Agreement Officer (AO).

Procedure:

- Proper use of the property is no longer needed.

M7.3 Management

Objective: To determine whether the organization has a written policy for managing property and a system for cataloging and tracking inventory that is consistently applied with no gaps. A physical inventory and reconciliation with accounting records is done annually ahead of an annual audit. There is a sufficient safeguard to prevent the loss, damage, or theft of property.

Procedure:

- Compliant property management procedures.

M7.4 Disposition

Objective: To determine whether the organization is fully in compliance with the disposition of property. There is a common understanding of the mandatory provision, and the organization has prepared a property disposition report.

Procedure:

- Disposition of Property.

M7.5 Understanding Provision

Objective: To determine whether the organization is fully in compliance with maintaining custody and control of the property. There is a full understanding of the mandatory provision. The organization provides the AO with an annual inventory and follows any additional instructions on protection and maintenance as provided by the AO.

Procedure:

- Check understanding of compliant procedures when property vests in the USG or the cooperating country.

M8 Submissions to The Development Experience Clearinghouse and Data Rights

Objective: To determine whether any intellectual property (IP) developed by the recipient using donor funding was submitted to USAID via the prescribed portal.

Procedures:

- Verify whether any intellectual property developed by the recipient, using USAID funding, was submitted as per the instructions at https://dec.usaid.gov.

- Verify that any applicable rights to the data (by the recipient) are guaranteed, if applicable.

M8.1 DEC

Objective: To determine whether the organization is consistently in compliance with the provision of submissions to the development experience clearinghouse and data rights.

Procedure:

- Submissions to the development experience clearinghouse and data rights.

M8.2 Rights

Objective: To determine whether the organization is fully in compliance with Rights in Data and consistently shares data. There is a full understanding of the mandatory provision.

Procedure:

- Review Rights in Data.

M8.3 Copyedit

Objective: To determine if the organization is fully in compliance with the Copyright mandatory provision. There is a full understanding of the provision.

Procedure:

- Review Copyright.

M9 Marking and Public Communications Under USAID-Funded Assistance

Objective: To determine whether marking (branding) of recipient items (e.g., vehicles, tents) is in accordance with USAID prescriptions.

Procedures:

- Verify that the logo the recipient uses on items that involve USAID branding is the same size or larger than that of its own organization.
- Verify compliance with any specific instructions issued by the Agreement Officer (AO).

M9.1 Branding

Objective: To determine whether the organization is consistently in compliance with Marking and Public Communications under USAID-funded assistance mandatory provision. There is a full understanding of the provision, and the organization consistently acknowledges the support of the "American People". The standard USAID logo is always used unless the award requires the use of an additional or substitute logo. When the USAID Identity cannot be displayed, the recipient otherwise acknowledges USAID and the support of the "American People".

Procedure:

- Review Marking and Public Communications under USAID-funded assistance.

M9.2 USAID Logo

Objective: To determine whether the organization is consistently in compliance with the USAID identity provision. There is a full understanding of the provision. The organization uses the USAID Identity of a size and prominence equivalent to or greater than any other identity or logo displayed, as appropriate.

Procedure:

- Review the use of USAID Identity Logos.

M9.3 Marking Plan

Objective: To determine whether the organization has an approved marking plan for implementation. The organization is aware of the need to pre-produce materials and public communications for AO approval and the need for sufficient lead time in submitting copies of notices for approval by AOR and USAID's Office of Legislative and Public Affairs and follows the approved marking plan with no exceptions. The organization gives the public notice of the receipt of their award and announces progress and accomplishments. Press releases or other public notices always include a statement substantially as follows:

"The U.S. Agency for International Development administers the U.S. foreign assistance program providing economic and humanitarian assistance in more than 80 countries worldwide."

Procedure:

- Review Approved Marking Plan.

M9.4 Disclaimer

Objective: To determine whether the organization is consistently in compliance with the Disclaimer provision. There is a full understanding of the provision. All consultants contracted that produce studies, reports, audio/visual materials, and any other information/media products have instructions on how to use the Disclaimer. Any "public communication" in which the content has not been approved by USAID contains the following disclaimer:

"This study/report/audio/visual/other information/media product (specify) is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of [insert recipient name] and do not necessarily reflect the views of USAID or the United States Government."

Procedure:

- Verify Disclaimer on "public communication" in which the content has not been approved by USAID.

M9.5 Exceptions

Objective: To determine whether the organization is consistently in compliance except for USAID marking requirements and Marking Plan Waiver provisions. There is a full understanding of the provisions. The organization has requested for Marking Plan Waiver as necessary. This is included in all sub-awards and contracts.

Procedure:

- Check for exceptions from USAID marking requirements and Marking Plan Waivers.

M10 Award Termination and Suspension

Objective: To determine whether the recipient is aware that the award may be terminated or suspended at any time.

Procedures:

- Verify that the recipient is aware that the award may be terminated or suspended at any time.

- Verify that a clause about termination/suspension is included as a provision in any sub-agreements.

M10.1 Award Termination and Suspension

Objective: To determine whether the organization is consistently in compliance with the Award Termination and Suspension mandatory provision, there is a full understanding of the provision and the termination and suspension procedures, and the organization does not incur additional obligations during the period of suspension.

Procedure:

- Check Termination and Suspension Procedures.

M10.2 Termination and Suspension Procedures

Objective: To determine whether the organization is fully aware of the termination and suspension procedures. The organization is not entitled to costs incurred after the effective date of termination.

Procedure:

- Check Termination and Suspension Procedures.

M10.3 A Drug-Free Workplace

Objective: To determine whether the organization is consistently in compliance with a drug-free workplace provision. There is a common understanding of the provision and that failure to do so may cause termination and suspension. The organization makes a good-faith effort to maintain a drug-free workplace and includes a provision in all subawards and contracts.

Procedure:

- Check drug-free workplace provisions.

M11 Recipient and Employee Conduct

Objective(s): To assess whether the recipient has written policies and procedures in place to prevent personal conflicts of interest and to prevent its officers, employees, or agents from using their positions for personal gain or presenting the appearance of a personal conflict of interest.

Procedures:

- Verify that the recipient has such policies and procedures in place (relating to human resources, conflicts of interest, and codes of conduct) to guide recipient and employee conduct.

- Verify that this provision was also included in any sub-agreements.

M12 Debarment and Suspension

Objective(s): To assess whether the recipient does not transact with debarred or suspended individuals or entities under a USAID award unless prior approval is received from the Agreement Officer (AO).

Procedures:

- Check a sample of transactions with vendors and employees to verify that a check was performed using www.sam.gov and that the entity/individual did not have an active exclusion.

- Verify that this provision (for debarment and suspension) is included in all sub-agreements.

M12.1 Debarment and Suspension

Objective: To confirm whether the organization consistently complies with the debarment and suspension provision.

Procedure:

- Check compliance with Debarment and Suspension provisions.

M12.2 SAM

Objective: To assess whether the organization is consistently in compliance with the provision not to transact with an individual or entity with an active exclusion on System for Award Management (SAM) and has vetted its principals and suppliers/service providers in compliance with this provision. The provision is always contained in the sub-grants and contracts issued under the award.

Procedure:

- Check compliance with the provision of System for Award Management (SAM).

M13 Disputes and Appeals

Objective: To assess whether the recipient is aware of the process that exists to raise disputes/appeals.

Procedure:

- Inquire with management whether they are aware of the process of disputes/appeals.

M14 Preventing Transactions with, or the Provision of Resources or Support to, Sanctioned Groups and Individuals, including terrorists

Objective(s): To assess whether the recipient will not engage in transactions with, or provide resources or support to any individual or entity that is subject to sanctions administered by the Office of Foreign Assets Control (OFAC) of the US Department of the Treasury or the United Nations (UN), including any individual

or entity that is included on the Specially Designated Nationals and Blocked Persons List maintained by OFAC.

Procedures:

- Check a sample of transactions with vendors, and employees to verify that the following checks were performed: (https://www.treasury.gov/resource-center/sanctions/SDNList/Pages/default.aspx/, and (https://www.un.org/securitycouncil/content/un-sc-consolidated-list).

- Verify that the entity/individual is not blocked/sanctioned.

- Verify that this (M14) provision was included in any sub-agreements.

M15 Trafficking in Persons

Objective(s): To verify that the organization, subawardee, or contractor, at any tier, or their employees, labor recruiters, brokers, or other agents are not engaging in any trafficking of persons (as defined in the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, especially Women, and Children, supplementing the UN Convention against Transnational Organized Crime).

Procedures:

- Verify that the organization is aware of this provision and does not engage in prohibited activities.

- Verify that this provision is also included in any sub-agreements.

M15.1 Trafficking of Persons

Objective(s): To verify that the organization has written a policy on the trafficking of persons (as defined in the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, especially Women, and Children, supplementing the UN Convention against Transnational Organized Crime). The policy includes the procurement of a commercial sex act, the use of forced labor in the performance of the award, and Acts that directly support or advance human trafficking. The policy is consistently followed with no gaps.

Procedure:

- Check compliance with the provision.

M15.2 Compliance Plan

Objective(s): To verify that the organization has a comprehensive compliance plan (appropriate to the size of the award) that has been approved by AO. The compliance plan is consistently followed.

Procedure:

- Check Compliance Plan.

M15.3 Staff/Employee Awareness Sessions

Objective(s): To verify that the organization has held sessions to inform staff/employees of trafficking-related prohibitions. Staff are aware of the reporting process. HR policies and procedures support

competitive hiring and wages are in line with host country laws. The organization ensures that the provisions are with the subaward and prevents sub awardees from engaging in trafficking in-person activities and monitors the sub awardees.

Procedure:

- Check compliance with this provision.

M15.4 Notifying USAID of Violation

Objective(s): To verify that the organization is fully aware of the process of notifying USAID of violation of the provision of trafficking in persons including cooperating with federal agencies responsible for audit, investigation, and corrective actions relating to trafficking in persons. The provision is included in all sub-awards and contracts issued under the award.

Procedure:

- Check if USAID is notified of the violation of this provision.

M16 Voluntary Population Planning Activities – Mandatory Requirements

Objective(s): To verify that the organization complies with the mandatory requirements on Voluntary Population Planning Activities, and does not use USAID funds to pay for involuntary sterilization or abortion-related activities.

Procedures:

- Review a sample of general ledger transactions to verify that sterilization or abortion-related activities were not paid for using USAID funds.

- Verify that this provision is also included in any sub-agreements.

M16.1 Requirements for Voluntary Sterilization Programs

Objective(s): To verify that the organization has a full understanding of the prohibition of Requirements for Voluntary Sterilization Programs.

Procedure:

- Check compliance with this provision.

M16.2 Prohibition on Abortion-Related Activities

Objective(s): To verify that the organization has a full understanding of the prohibition of Abortion-Related Activities, including biomedical research which relates, in whole or in part, to methods of, or the performance of, abortions or involuntary sterilizations as a means of family planning. Epidemiologic or descriptive research to assess the incidence, extent, or consequences of abortions is not precluded.

Procedure:

- Check compliance with this provision.

M17 Equal Participation by Faith-Based Organizations

Objective(s): To verify that Faith-Based Organizations (FBOs) may participate on the same basis as any other organization in any USAID program for which they are otherwise eligible and that explicitly religious activities are prohibited.

Procedures:

- Inquire with management whether they require specific religious affiliation when transacting with individuals/entities and whether they practice any explicitly religious activities during the performance of this award.

- Verify that the Secretary of State waived the requirements of this section in whole or in part if noncompliance is found with the first procedure.

- Verify that this provision is also included in any sub-agreements.

M17.1 Equal Participation by Faith-Based Organizations

Objective(s): To verify that the organization has a full understanding of the mandatory provision of Equal Participation by Faith-Based Organizations and awards sub-grants based on merit. It does not discriminate against FBOs / FBOs are encouraged.

Procedure:

- Verify compliance with this provision and that it is also included in any sub-agreements.

M17.2 Explicitly Religious Activities Prohibited

Objective(s): To verify that the organization understands the mandatory provision of Equal Participation by Faith-Based Organizations and awards sub-grants based on merit. It does not discriminate against FBOs. The FBO may retain its independence and may continue to carry out its mission, may use its facility without removing religious icons, and retain its authority over its internal governance.

Procedure:

- Verify compliance with this provision and that it is also included in any sub-agreements.

M17.3 Implementation as per the Establishment Clause

Objective(s): To verify that the organization does not use USAID funds for activities that are not permitted by Establishment Clause jurisprudence or otherwise by law.

Procedure:

- Verify compliance with this provision and that it is also included in any sub-agreements.

M17.4 Discrimination Based on Religion Prohibited

Objective(s): To verify that the organization is fully aware that Discrimination Based on Religion is Prohibited. There are service delivery standard operating procedures preventing discrimination that are consistently applied.

Procedure:

- Verify compliance with this provision and that it is also included in any sub-agreements.

M17.5 Exemption from Federal Prohibition on Religion-Based Employment Discrimination

Objective(s): To verify that for FBOs - the organization is fully aware of the exemption from the Federal prohibition on employment discrimination on the basis of religion and how to request a waiver for the Secretary of State. This provision is consistently included in all subawards and contracts issued under the award.

Procedure:

- Verify compliance with this provision and that it is also included in any sub-agreements.

M18 Nondiscrimination

Objective(s): To verify that no U.S. citizen or legal resident shall be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination based on race, color, national origin, age, disability, or sex under any program or activity funded by this award when work under the grant is performed in the U.S. or when employees are recruited from the U.S.

Procedures:

- Inquire with management whether they have specific requirements when employing individuals. Evaluate whether this may be discriminatory based on race, color, national origin, age, disability, or sex.

- Inspect relevant policies and procedures (such as Human Resources) to verify that non-discrimination is addressed. Also, verify that country-specific laws are respected.

M19 USAID Disability Policy - Assistance

Objective(s): To verify that the recipient does not discriminate against people with disabilities in the implementation of USAID-funded programs demonstrates a comprehensive and consistent approach for including men, women, and children with disabilities.

Procedure:

- Verify that the organization has a disability policy and determine whether it is adhered to (this is not limited to employees; it relates to all individuals who may visit/use the premises).

M20 Limiting Construction Activities

Objective(s): To verify that the recipient does not engage in construction activities unless these activities are explicitly approved by the AO.

Procedures:

- Verify that the organization has not spent any funds on construction activities unless prior approval was obtained.

- For subawards involving construction, verify that the AO authorized the construction to be performed by the subawardee.

M21 USAID Implementing Partner Notices Portal for Assistance

Objective(s): To verify that the recipient has registered on the Implementing Partner Notices (IPN) Portal after receiving an assistance award.

Procedures:

- Verify that the recipient has registered on the IPN Portal, via https://sites.google.com/site/usaidipnforassistance after receiving an assistance award.

- Verify that recipients have performed one of the following, within 15 days, after having received a notification email from the IPN Portal:

  o Confirmed the applicability of the proposed amendment for their award(s) per the instructions provided with each amendment; (b) downloaded the amendment and incorporated the following information on the amendment form: award number, organization name, and organization mailing address as it appears in the basic award; (c) signed the hardcopy version; and (d) sent the signed amendment (by email or hardcopy) to the AO for signature. The recipient must not incorporate any other changes to the IPN Portal amendment. Bilateral amendments provided through the IPN Portal are not in effect until both the recipient and the AO sign the amendment.

  o Notified the AO in writing if the amendment requires negotiation of additional changes to the terms and conditions of the award; or

  o Notified the AO that the recipient declines to sign the amendment.

M22 Pilot Program for Enhancement of Grantee Employee Whistleblower Protections

Objective(s): To verify that the recipient has notified its employees working under this award, in the predominant native language of the workforce, that they are afforded the employee whistleblower rights and protections provided under 41 U.S.C. § 4712; include this requirement in any subaward or subcontract made under this award.

Procedure:

- Verify that the recipient has notified its employees accordingly and that a whistleblower (or other) policy is in place guaranteeing whistleblower protections.

M23 Submission of Datasets to The Development Data Library

Objective(s): To verify that Intellectual Work (IW) (similar to M8) is submitted to the Data Development Library (DDL) and that the organization consistently submits datasets to the DDL including supporting documentation describing the Dataset, such as code books, data dictionaries, data gathering tools, notes on data quality, and explanations of redactions. Datasets submitted to the DDL do not contain proprietary or personally identifiable information or classified information.

Procedures:

- Verify that the recipient has uploaded any IW to the following portal: www.usaid.gov/data.

- Verify that classified data has not been uploaded to the DDL.

M24 Prohibition on Requiring Certain Internal Confidentiality Agreements or Statements

Objective(s): To verify that employees, subrecipients, or contractors are not prevented from lawfully reporting waste, fraud, or abuse related to the performance of a federal award to a designated investigative or law enforcement representative of a federal department or agency authorized to receive such information (for example, the Agency Office of the Inspector General).

Procedure:

- Verify that a contradictory clause is not included in employee contracts, vendor contracts/agreements, subrecipient agreements, etc., nor any other contractual arrangement between the recipient and any other parties.

M25 Child Safeguarding

Objective(s): To verify that activities that include the risk of child abuse, exploitation, or neglect within USAID-funded programs are adequately mitigated.

Procedures:

- Verify that the organization has an established a Child Safeguarding Policy that is communicated to all stakeholders and addresses (1) ensuring compliance with the host country and local child welfare and protection legislation or international standards, prohibiting all personnel from engaging in child abuse, exploitation, or neglect; (2) taking child safeguarding into account when project planning and implementation to determine potential risks to children that are associated with project activities and operations, (3) applying measures to reduce the risk of child abuse, exploitation, or neglect, including, but not limited to, limiting unsupervised interactions with children; (4) prohibiting exposure to pornography; and (5) complying with applicable laws, regulations, or customs regarding the photographing, filming, or other image-generating activities of children.

- Verify that the above has been incorporated into the Code of Conduct and a Child Safeguarding Policy, with the same contents as the Code of Conduct, destined for external users (e.g., contractors).
- Verify the inclusion of the same provisions in any sub-agreements.

M26 Mandatory Disclosures

Objective(s): To verify that applicants and recipients must promptly disclose in writing to the USAID Office of the Inspector General, with a copy to the cognizant Agreement Officer, all violations of Federal criminal

law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Subrecipients must promptly disclose in writing to the USAID Office of the Inspector General and the prime recipient (pass-through entity) all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award.

Procedure:

- Verify that the organization has disclosed the abovementioned violations, as applicable, to the following address:

  U.S. Agency for International Development
  Office of the Inspector General
  P.O. Box 657
  Washington, DC 20044-0657
  Phone: 1-800-230-6539 or 202-712-1023
  Email: ig.hotline@usaid.gov
  Website: https://oig.usaid.gov/content/usaid-contractor-reporting-form

M27 Nondiscrimination Against Beneficiaries

Objective(s): To verify that the recipient does not discriminate against any beneficiaries in the implementation of the award by withholding, adversely impacting, or denying equitable access to the benefits provided through this award based on any factor not expressly stated in the award.

Procedures:

- Review policies, procedures, and subaward agreements to verify that discrimination is not implied, based on (for example) race, color, religion, sex (including gender identity, sexual orientation, and pregnancy), national origin, disability, age, genetic information, marital status, parental status, political affiliation, or veteran status.

- Verify that this provision is also included in any sub-agreements.

M28 Conflict of Interest

Objective(s): To verify that the recipient has a policy to prevent/manage potential conflicts of interest, such as when office-bearers have financial interests in vendors.

Procedures:

- Verify that a Conflict-of-Interest Policy is in place, especially for the board of directors and procurement personnel.

- Verify that Conflict of Interest Declarations are signed, at least annually.

M28.1 COI

Objective(s): To verify that the organization has comprehensive policies and procedures that safeguard the organization against conflict of interest. The policies and procedures that are consistently applied contain: standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award, and administration of subawards, organizational conflicts of interest, procedures for

identifying, addressing, resolving, and disclosing to USAID any conflict of interest and procedures for reporting to USAID and appropriate follow-up steps.

Procedure:

- Conflict of Interest (check against M11).

M28.2 Signed COI for Proposals

Objective(s): To verify that the organization consistently requires staff/employees involved in the grant awarding process to sign a conflict-of-interest form. All the sub-award agreements under this award have a conflict of interest requirement.

Procedure:

- Check the signed COI form.

M28.3 Signed COI for All Staff

Objective(s): To verify the organization consistently signs a conflict-of-interest disclosure form in the grant awarding process.

Procedure:

- Organizational COI Disclosure form.

M28.4 Disclosures

Objective(s): To verify that the organization frequently uses a system or systems to identify, address, resolve, and disclose to USAID any conflicts of interest as described in this provision that affect any subaward, regardless of the amount funded under the award.

Procedure:

- COI System.

M28.5 Reporting

Objective(s): To verify that the organization has a full understanding of the reporting procedures to the OIG. The organization consistently includes this provision in all subawards and contracts.

Procedure:

- Office of Inspector General (OIG).

M29 Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment

Objective(s): To verify that the recipient does not procure (using grant funds, including direct and indirect costs, program income, and any cost share) telecommunication and video surveillance services or equipment from prohibited vendors.

Procedure:

- Verify that procurement for this provision is from acceptable vendors as indicated in the latest Standard Provisions (and provision M29) at www.ecfr.gov.

M30. Exchange Visitors Visa Requirements

Objective(s): To verify that the organization:

- Has a full understanding of the provision requirements, and consistently includes this provision in all subawards and contracts.
- Complies with this provision with no gaps for all Exchange Visitors, Participant Training, or Invitational Travel activities, and accurately reports Exchange Visitors' and Participants' progress through TraiNet.
- Is accurate and consistent in (i) considering health and Accident Insurance coverage in line with Department of State and USAID minimum coverage requirements for Exchange Visitors traveling to the United States, (ii) obtaining health and accident insurance coverage for all Participants traveling to a third country, and (ii) determining whether specific in-country participant training activities subject them to any risk of health and accident liability for medical costs.
- Is accurate and consistent with no gaps in ensuring (i) that all USAID-sponsored Exchange Visitors obtain, use, and comply with the terms of the J-1 visa, issued in conjunction with a USAID-issued Certificate of Eligibility for J-1 Visa Status (DS-2019) for Exchange Visitors traveling to the United States, and (ii) that all Participants obtain, use, and comply with the terms of all applicable immigration, visa, and other similar requirements for Participants traveling to a third country or within the host country.
- Accurately and consistently, with no gaps, verifies (i) English language proficiency for Participants in a U.S.-based activity, and (ii) Proficiency in the language of training for Participants of third-country or host-country training (and makes arrangements for an interpreter).
- Accurately and consistently conducts pre-departure orientation for U.S-bound Exchange Visitors and Participants of third-country training programs with no gaps.
- Accurately and consistently, with no gaps, ensures (i) that all Exchange Visitors read and sign the Conditions of Sponsorship for U.S.-Based Activities, (ii) that all Participants of long-term (six months or longer) third-country training read and sign the form Conditions of Sponsorship for Third-Country Training, and (iii) that the Agreement Officer is notified of any known violations by Exchange Visitors of visa or other immigration requirements or conditions."
- Accurately and consistently comply with the "International Air Travel and Air Transportation of Property" provision.

Procedures:

- "Visa Compliance Requirement: Inquire with management awards that contain funding for any exchange visitor activities or participant training, as defined in ADS 252 and 253, respectively, conducted or paid for by the recipient with USAID funds under this award."

- "Program Monitoring and Data Reporting: Inquire with management whether they report through TraiNet and if so, obtain corroborative evidence."

- "Health and Accident Insurance: Inquire with management whether they are aware of the requirement to get health and accident insurance for the US, third country, or domestic country for the exchange visitors and participant training to be attended."

- "Immigration Requirements: Inquire with management whether the organization is aware of the USAID immigration requirements for participants traveling for the USAID-funded exchange visitors and participant training."

- "Language Proficiency: Inquire whether the organization conducts a language proficiency assessment for participants i.e., English for US-based trainings and any other language for other third part countries or host country."

- "Pre-arrival Orientation: Inquire with management whether they conduct the pre-departure orientation and request for evidence, if any. "

- "Conditions of Sponsorship:
    - Inquire and corroborate whether the participants sign the Conditions of Sponsorship for U.S.-Based Activities and Conditions of Sponsorship for Third-Country Training.
    - Inquire and corroborate the reporting of known violations by Exchange Visitors of visa or other immigration requirements or conditions to the AO. "

- "Fly America: Inquire with management whether they are aware of the provision and their extant of compliance."

M31. Contract Award Term and Condition for Recipient Integrity and Performance Matters (December 2022)

Objective(s): To verify that the organization:

- Consistently complies with the contract award terms and conditions for recipient integrity and performance matters,
- Always maintains the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS), and
- Is accurately aware of reporting procedures and reporting frequency, and the proceedings about which it must report including proceedings in connection with the award or performance of a grant, its final disposition, a criminal proceeding resulting in a conviction, a civil proceeding that resulted in a finding of fault, or administrative proceeding as defined in the standard provisions.

Procedures: If the total federal share of the award is more than $500,000 over the period of performance, inquire with the management to verify that:

- Matters related to recipient integrity and performance are reported,
- The currency of information is maintained with proof of loading onto FAPIIS (submission confirmation), and
- The organization is aware of the proceedings/ reporting requirements.

Key Risks to Be Considered

1. Non-Compliance with any Mandatory Standard Provision violates the terms of the contract.

2. Local organization do not t "flow down" all provisions to subrecipients.

MODULE 18: REQUIRED AS APPLICABLE PROVISIONS

Background:

This domain requires reviewing the organization's understanding and application of the Required As Applicable Provisions (RAAPs), especially for recipients of USAID funding.

Estimated time for execution of this domain: 24 hours (including the interviews and review of relevant supporting documents, where RAAPs are applicable.)

Skills and experience required for effective execution of this domain: preferably an assessor with up-to-date knowledge of the Standard Provisions for Non-U.S. Nongovernmental Organizations, focusing on RAAPS.

Overall Objective:

To assess the organization's understanding and compliance with the RAAP requirements, where applicable.

Procedure:

Inquire and confirm whether the organization's personnel received recent training on the USG Rules and Regulations, including the MSPs and RAAPs.

NUPAS Plus 2.0 REQUIRED AS APPLICABLE PROVISIONS EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
RAA1. Advance Payment and Refunds (Nov. 2020)	Assess the applicability of the provision to the organization under review, as well as the organization's understanding of the provision and implementation of, and compliance with, the provision's requirements.	• Award agreement • Bank statement(s) – (confirmation of interest income earned)
RAA2. Reimbursement Payment and Refunds (Dec. 2014)	Same as above.	Award agreement
RAA3. Indirect Costs – Negotiated Indirect Cost Rate Agreement (NICRA) (Nov. 2020)	Same as above.	• Award agreement • NICRA Agreement • Cost Policy Statement
RAA4. Indirect Costs – Charged as a Fixed Amount (Nonprofit) (June 2012)	Same as above.	Award agreement
RAA5. Indirect Costs – 10% de minimis rate (Nov. 2020)	Same as above.	• Award agreement • Cost Policy Statement

RAA6. Universal Identifier and System for Award Management (Nov. 2020)	Same as above.	• Award agreement • Proof of an active SAM registration
RAA7. Reporting Subawards and Executive Compensation (Nov. 2020)	Same as above.	• Award agreement • Proof of reporting first-tier subawards to www.fsrs.gov • Proof of reporting recipient's and subrecipient's total compensation
RAA8. Subawards (Dec. 2014)	Same as above.	• Award agreement • Subaward agreements • Pre-award assessment results
RAA9. Travel and International Air Transportation (Dec. 2014)	Same as above.	• Award agreement • Travel Policy
RAA10. Ocean Shipment of Goods (June 2012)	Same as above.	Award agreement
RAA11. Reporting Host Government Taxes (June 2012)	Same as above.	Award agreement Proof of submission of Host Government Taxes (report to USAID)
RAA12. Patent Rights (June 2012)	Same as above.	• Award agreement • Subawards (flow downs) • Proof of disclosure of the invention to the National Institutes of Health (NIH) EDISON Patent Reporting and Tracking System
RAA13. Exchange Visitors and Participant Training (June 2012)	Same as above.	• Award agreement • Proof of health and accident insurance for the U.S., third-country visitors • Signed Conditions of Sponsorship for U.S.-Based Activities and Conditions of Sponsorship for Third-Country Training

RAA14. Investment Promotion (Nov. 2003)	Same as above.	• Award agreement • AO's written approval (If the organization used USAID funding for investment promotion • Subawards (flow downs)
RAA15. Cost Share (June 2012)	Same as above.	• Award agreement • Cost share plan • Cost share reports
RAA16. Program Income (Aug. 2020)	Same as above.	Award agreement Program General Ledger(s) (review whether there is program income)
RAA17. Foreign Government Delegations to International Conferences (June 2012)	Same as above.	Award agreement AO's written approval (If the organization used USAID funding to finance the travel)
RAA18. Standards for Accessibility for The Disabled In USAID Assistance Awards Involving Construction (Sept. 2004)	Same as above.	Award agreement AO approved the program budget
RAA19. Protection of Human Research Subjects (June 2012)	Same as above.	• Award agreement • Consent forms/documentation • Submission to the AOR for USAID approval, a justification memorandum asserting that research conducted outside the United States provides protection at least equivalent to those in 22 CFR 225
RAA20. Statement for Implementers of Anti-Trafficking Activities On Lack of Support for Prostitution (June 2012)	Same as above.	Award agreement

RAA21. Eligibility of Subrecipients of Anti-Trafficking Funds (June 2012)	Same as above.	• Award agreement • Subawards (flow downs)
RAA22. Prohibition On the Use of Anti-Trafficking Funds To Promote, Support, or Advocate for the Legalization or Practice of Prostitution (June 2012)	Same as above.	• Award agreement • Project Plan (review of program activities) • Subawards (flow downs)
RAA23. Voluntary Population Planning Activities – Supplemental Requirements (Jan. 2009)	Same as above.	• Award agreement • Consent forms • Subawards (flow downs)
RAA24. Conscience Clause Implementation (Assistance) (Feb. 2012)	Same as above.	Award agreement
RAA25. Condoms (Assistance) (Sept. 2014)	Same as above.	• Award agreement • Organization's educational material on the use of condoms • Subawards (flow downs)
RAA26. Prohibition On The Promotion Or Advocacy of The Legalization Or Practice of Prostitution Or Sex Trafficking (Assistance) (Sept. 2014)	Same as above.	• Award agreement • Any policy that may have the organization's position on prostitution or sex trafficking or the organization's website • Subawards (flow downs)
RAA27. Limitation On Subawards to Non-Local Entities (July 2014)	Same as above.	Award agreement
RAA28. Contract Provision for Dba Insurance under Recipient Procurements (Dec. 2014)	Same as above.	• Award agreement • Proof of DBA insurance (work done abroad) • Subawards (flow downs)
RAA29. Contract Award Term And Condition for Recipient	Same as above.	• Award agreement

Integrity And Performance Matters (April 2016)		• Reports on civil, criminal, or administrative proceedings that have taken place • Proof of FAPIIS submission
RAA31. Never Contract with The Enemy (Nov. 2020)	Same as above.	• Award agreement • Proof of (SAM, U.N. Sanctions list, OFAC Checks • Subawards (flow downs)

RAA1. Advance Payment and Refunds (November 2020)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when awards that authorize advance payments, which may be authorized when the recipient's accounting and financial management systems conform to the accounting principles generally accepted for funds control and accountability required under the Standard Provision, "Accounting, Audit, and Records," and meet the pre-award responsibility requirements in ADS Chapter 303.

Procedures:

- For organizations currently implementing USAID projects, inquire with management whether they receive funding on an advance basis.

- If the organization is not exempt, confirm whether the organization maintains the advance funding in an interest-bearing bank account.

- Confirm whether there are controls to keep track of interest earned and whether the excess of the minimum threshold for the organization's 12-month reporting period is remitted to the prime recipient or donor.

- Confirm whether the organization is aware of the forms to complete for the request and liquidation of advances.

RAA1.1 Bank Account

Objective(s): To confirm whether the organization has an account with a reputable bank and a financial system that can track funding per donor. Funds received are consistently reported well with no gaps.

Procedure:

- Inquire with management whether they receive advance payments on any of their awards.

RAA1.2 Interest-Bearing Accounts

Objective(s): To confirm the organization maintains advances of USAID funds in an interest-bearing account and consistently tracks interest to report to USAID.

Procedure:

- Inquire and inspect the bank reconciliations whether it is maintained in an interest-bearing account.

RAA1.3 Remittance of Interest

Objective(s): To confirm the organization consistently tracks and remits interest earned in excess of $500 to USAID.

Procedure:

- Inquire with management and corroborate whether there is a system of tracking the interest earned on the account and, if interest in excess of US$ 500 is earned annually, verify that it was remitted to USAID.

RAA1.4 Requesting Advance Payment

Objective(s): To confirm whether the organization has a consistent process for anticipating expenditures and frequently requests for advance payments at time intervals as close as is administratively possible. The cash balance in the bank is low/reasonable.

Procedure:

- Agree on the advance received or requested to the 30 days expenditure projection in support of the relevant request.

RAA1.5 Liquidation of Advances

Objective(s): To confirm that the organization consistently liquidates advances in a timely manner.

Procedure:

- Request the quarterly SF-270, SF-425, or SF-1034 as prepared for relevant previous awards for the liquidation of the advances.

RAA1.6 Upon Expiration of Award

Objective(s): To confirm that the organization is accurately and fully aware that it must refund all unexpended funds that USAID has advanced. The organization can name all of the circumstances under which it can retain the money.

Procedure:

- Unexpended advance payments may be retained only when "advanced funds have already been spent or committed in a legally binding transaction during the period of this award or are required for approved close-out costs."

RAA2. Reimbursement Payment and Refunds (December 2014)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when advanced payments are authorized.

Procedure:

- Inquire whether the organization is aware of the process to follow for reimbursement and the documents they need to complete for requesting reimbursements.

RAA2.1 Submission of Voucher

Objective(s): Determine if the organization accurately knows the process of submitting the payment voucher with no gap, can name all steps in the process, and is experienced in submitting payment vouchers.

Procedures:

- Inquire with management whether they receive advance payments or reimbursements.
- If reimbursement payments, enquire about the process of submitting payment vouchers and request for samples completed and submitted to the payment office.

RAA3. Indirect Costs – Negotiated Indirect Cost Rate Agreement (NICRA) (November 2020)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable if the organization has a Negotiated Indirect Cost Rate Agreement (NICRA).

Procedures:

- Inquire whether the organization has a NICRA.
- Confirm the results of the inquiry through a review of the NICRA agreement, signed by both parties.
- Inquire with the organization whether they are aware of the requirement to submit a new indirect cost proposal, to the cognizant agency, for indirect costs within six months after the close of each fiscal year. Where applicable, confirm whether this was completed.
- Assess the reasonableness of the provisional indirect cost rates that must be established for the recipient's fiscal years during the term of this award.
- Confirm the existence of a Cost Policy Statement that guides the organization's direct and indirect costs.

RAA4. Indirect Costs – Charged as A Fixed Amount (Nonprofit) (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when all four elements apply: (1) the recipient has never received a Negotiated Indirect Cost Rate Agreement (NICRA); (2) the recipient has chosen not to use the 10% de minimis rate authorized in 2 CFR 200.414(f), and (3) the indirect costs are not included as other direct costs in the budget. When using this provision, all indirect costs must be charged as a fixed amount and shown as a separate line item in the budget.

Procedures:

- Inquire with the organization whether they have indirect costs charged as a fixed amount under USAID projects being implemented.
- Review the award budget for the fixed amount for indirect costs and a schedule for payments.
- Confirm whether the award specifies the categories of costs covered by the fixed amount and that the recipient does not charge such costs separately as direct costs.

RAA4.1 Determining the Fixed Amount to Cover the Indirect Costs

Objective(s): Determine if the organization has accurately determined the fixed amount to cover the indirect costs. There is a good understanding of the provision. The costs are prorated equitably and consistently across all programs and activities of the organization using a base that measures the benefits of that particular cost to each program or activity to which the cost applies although there are few gaps.

Procedure:

- Refer to previous audit reports and inspect whether there were any exceptions reported by the auditors on the usage of the fixed amount of recovering indirect costs.

RAA4.2 Charging Fixed Amount Costs

Objective(s): Determine if the organization has an accurate fixed amount for indirect costs and a schedule for payments incorporated in the award budget and consistently charging the costs with no gaps.

Procedure:

- Agree on the fixed amount as per the budget to the payment schedule for the award.

RAA5. Indirect Costs – De Minimis Rate (November 2020)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when the recipient does not have a current negotiated indirect cost rate and has elected to charge a de minimis rate of 10 percent of modified total direct costs (MTDC). When using this provision, the award budget must reflect the de minimis rate of 10 percent if requested by the recipient. The award budget must not include direct costs that the recipient indicated as included in the indirect rate.

Procedures:

- Confirm whether the organization has a Cost Policy Statement that guides direct and indirect costs.
- Review the accuracy of the organization's MTDC (confirm inclusions and exclusions), considering the Cost Policy Statement guide.

RAA6. Universal Identifier and System for Award Management (November 2020)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is required in accordance with 2 CFR 25, Universal Identifier and System for Award Management. Agreement Officers (AOs) must include this provision in all assistance solicitations and all awards, unless the AO exempts an organization from compliance with the provision under one of the following exceptions, from paragraph (d) below:

Exceptions: The requirements of this provision to obtain a Unique Entity Identifier and maintain current registration in the System for Award Management (SAM) do not apply at the prime award or subaward level to:

(1) Awards to individuals,

(2) Awards less than $25,000 to foreign organizations to be performed outside the United States (based on a USAID determination), with no anticipated subawards,

(3) Awards where the AO determines, in writing, that the Agency must protect entity information from disclosure due to national security or foreign policy interests of the United States or that these requirements would cause personal safety concerns.

Procedures:

- Confirm whether the organization has an active SAM.gov registration unless exempt.
- Verify that subrecipients, if applicable, have a Data Universal Numbering System (DUNS) number, unless exempt.

RAA6.1 Requirement for System of Award Management (SAM)

Objective(s): Determine if the organization consistently maintains the currency of information in SAM. It reviews and updates the information annually after registration.

Procedure:

- Proof of SAM Registration and a recent update of the information.

RAA6.2 Data Universal Numbering System (DUNS) number

Objective(s): Determine if the organization consistently requires a DUNS number to subaward an entity.

Procedure:

- Inquire with management if they have sub-recipients, if so, verify whether they have the nine (9) digit DUNS, unless exempt.

RAA7. Reporting Subawards and Executive Compensation (November 2020)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is required in accordance with 2 CFR 170, Award Term for Reporting Subawards, and Executive Compensation. Agreement Officers (AOs) must include this provision in all assistance solicitations and all awards expected to equal or exceed $30,000 unless an exemption applies under paragraph (d) of the provision, or the exemptions listed below in this applicability statement. If the AO determines that an exemption applies, the AO must guide the recipient on reporting with generic information.

Exemptions:

(1) The requirements to report under this provision do not apply to:

      (i) Awards to individuals,

      (ii) Awards less than $30,000.

(2) When the AO determines, in writing, that these requirements would cause personal safety concerns, reporting under this provision can be accomplished using generic information.

Procedures:

Reporting of First Tier Subawards:

- Confirm the timely reporting (within a month of the obligating action) of subawards that equal or exceed $30,000 in Federal funds to www.fsrs.gov.

- Confirm the adequacy of the reporting (i.e., each obligating action that the submission instructions posted at www.fsrs.gov specify).

Reporting total compensation of recipient executives for non-Federal entities:

- Confirm reporting of compensation for the recipient's five most highly compensated executives for the preceding completed fiscal year by the end of the month following the month during which the subaward is made and annually thereafter, if:
  - Total Federal funding authorized to date under this Federal award equals or exceeds $30,000, and
  - The recipient received 80 percent or more of its annual gross revenues, in the preceding year, from Federal procurement contracts, and $25,000,000 or more in annual gross revenues from Federal procurement contracts.

Reporting of Total Compensation of Subrecipient Executives:

- Confirm the reporting of names and total compensation of the five most highly compensated executives for each first-tier non-Federal entity subrecipient under the award, for the subrecipient's preceding completed fiscal year, if:
  - The subrecipient received 80 percent or more of its annual gross revenues, in the preceding year, from Federal procurement contracts, and $25,000,000 or more in annual gross revenues from Federal procurement contracts.

RAA7.1 Reporting of First Tier Subawards

Objective(s): Determine if the organization is consistently reporting when it obligates funds to entities.

Procedure:

- Inquire with management whether they have subrecipients.

RAA7.2 Reporting Total Compensation of Recipient Executives

Objective(s): Determine if the organization is consistently reporting names and total compensation of each of the subrecipient's five most highly compensated executives for the subrecipient's preceding completed fiscal year.

Procedure:

- Inquire with management whether they have subrecipients.

RAA8. Subawards (December 2014)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when subawards are expected to be financed under this award.

Procedures:

- Inquire with management whether they have subrecipients; if so, have the recipient assess the subrecipient to ensure that they have the necessary resources to deliver on the subaward.

- Inspect the sub-agreement to verify the inclusion of the necessary flow-down provisions.

- Inquire with the organization whether a pre-award assessment was performed.

- Obtain pre-award assessment results and verify that all key areas were considered.

- Review the written subaward for completeness, if there was one, by checking whether it contains:
    - Program description, budget, and period of performance,
    - Terms and conditions that define a sound and complete agreement,
    - All provisions from the relevant award that contain a requirement to incorporate that provision into the subawards,
    - Other terms that the recipient determines to be required to ensure compliance with the terms of the award.

- Inquire with the organization how they assess the sub recipients' eligibility to ensure that they do not fund governments or government entities of countries ineligible for assistance under the Foreign Assistance Act of 1961.

RAA8.1 Legal Agreement

Objective(s): Determine if subawards are made with a legal agreement and with no gaps/omissions in the flow-down provisions.

Procedure:

- Inquire with management whether they have sub recipients under them, if so, have the recipient performed an assessment of the sub to ensure it has the necessary resources to deliver on the sub award.

RAA8.2 Due Diligence

Objective(s): Determine if the organization consistently conducts pre-award assessments and establishes a level of risk, requests the sub-award recipient to meet pre-award conditions before making the grant, and plans for capacity building to enhance performance.

Procedure:

- Inquire with management whether a pre-award assessment was performed.

RAA8.3 Written Sub-award

Objective(s): Determine if the sub-award documents have no omissions.

Procedure:

- If any, review the written sub award for completeness by checking whether it contains the following:
    - Program description, budget, and period of performance.

o   Terms and conditions to define a sound and complete agreement.
o   All provisions from the relevant award contain a requirement to incorporate that provision into the subawards.
o   Other terms that the recipient determines are required to ensure compliance with the terms of this award.

RAA8.4 Funding Government

Objective(s): Determine if the organization is fully aware of the standard and describe/discuss how to mitigate the likelihood of funding government/government entities.

Procedure:

- Inquire with management how they assess the eligibility of the sub recipients to ensure they do not fund governments or government entities of countries ineligible for assistance under the Foreign Assistance Act of 1961.

RAA9. Travel and International Air Transportation (December 2014)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when costs for international travel or air transportation of cargo are anticipated to be funded by USAID. This provision is not applicable if the recipient provides international travel costs with private funds as part of a cost-sharing requirement or with program income generated under this award.

Procedures:

- Inquire with management whether they anticipate that costs for international travel or air transportation of cargo will be funded by USAID.

- Request and review the travel policy for guidance on the approval process for domestic and international travel.

- Inspect the travel policy to determine whether it includes guidance on Fly America Act restrictions (refer to RAA8 for the restrictions). Alternatively, inquire with the organization on their understanding of the Fly America Act requirements.

RAA9.1 Travel Costs

Objective(s): Determine if the organization has a travel policy to guide the determination of travel costs, internal travel approval process, covers both domestic and foreign travel, provides for any notification or approval by USAID, travel advances and liquidation, etc. The policy is consistently applied with no gaps.

Procedures:

- Inquire with management whether costs for international travel or air transportation of cargo are anticipated to be funded by USAID, if any.

- Request for the travel policy and verify whether it provides guidance on the approval process for domestic and international travel.

RAA9.2 Fly America Act Restrictions

Objective(s): Determine if the organization has a travel policy that covers both domestic and foreign travel and guides Fly America Act restrictions. It is consistently implemented with no gaps. This provision is included in all subawards and contracts.

Procedure:

- Inspect the travel policy to determine whether it includes guidance on Fly America Act restrictions (Refer to RAA8 for the restrictions).

RAA10. Ocean Shipment of Goods (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision is applicable for awards and subawards for which the recipient contracts ocean transportation for goods purchased or financed with USAID funds. In accordance with 22 CFR 228.21, ocean transportation shipments are subject to the provisions of 46 CFR Part 381.

Procedures:

- Inquire with the organization whether there will be ocean shipment of goods under the USAID-funded projects.

- Inquire if the organization is aware of which USAID office to contact for guidance regarding the flag and class of vessel for the shipment, identified below:

  U.S. Agency for International Development
  Bureau for Management
  Office of Acquisition and Assistance, Transportation Division
  1300 Pennsylvania Avenue, NW
  Washington, DC 20523-7900
  Email: oceantransportation@usaid.gov

RAA11. Reporting Host Government Taxes (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

All USAID agreements that obligate or sub-obligate FY 2003 or later funds except for agreements funded with Operating Expense, Pub. L. 480 funds, trust funds, or agreements where there will be no commodity transactions in a foreign country over the amount of $500. Please insert the address and point of contact at the Embassy, Mission, or M/CFO/CMP as appropriate under section (b) of this provision.

Procedures:

- Inquire and corroborate with management whether they have a system of keeping track of host government taxes.

- Confirm submission of the tax report by April 16 of the relevant year, if applicable.

- Inquire with management whether they have a tax waiver in the country of operation and obtain proof thereof.

RAA11.1 Tax Tracker

Objective(s): Determine if the organization consistently tracks the taxes paid to Host Government and can report timely with no gaps.

Procedure:

- Inquire and corroborate with management whether they have a system of keeping track of host government taxes.

RAA11.2 Tax Exemption

Objective(s): Determine if the organization has received the necessary tax exemption and is consistently utilizing it.

Procedure:

- Inquire with management whether they have a tax waiver in the country of operation.

RAA11.3 Flow downs

Objective(s): Confirm that the recipient must include this reporting requirement in all applicable sub-agreements, including sub awards and contracts.

Procedure:

- If applicable, review the sub-award for inclusion of the provision.

RAA12. Patent Rights (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision applies to awards to small business firms or nonprofit organizations for the performance of experimental, developmental, or research work supported in whole or in part by USAID funds.

Procedures:

- Confirm whether the organization is aware of the requirement to disclose each subject invention to the National Institutes of Health's (NIH) EDISON Patent Reporting and Tracking System (http://www.iedison.gov), within two months after the inventor discloses it in writing, to recipient personnel responsible for patent matters.
- Inquire with the organization whether they are aware of the rights of the U.S. government in the research work, including conditions when the government may obtain the patent rights title.
- Verify that this restriction is incorporated in sub-agreements, where applicable.

RAA12.1 Patient Rights

Objective(s): Confirm that the organization is consistently in compliance with patent rights provisions with no gaps. There is an accurate understanding of the provision.

Procedures:

- Inquire with management whether the organization is involved in experimental, developmental, or research work funded in whole or in part with USAID funds.

- If applicable, inquire about the management's understanding of the provision.

RAA12.2 Disclosure of each subject invention

Objective(s): Confirm that the organization is consistently in compliance with Disclose each subject invention provision. There is a good understanding of the provision with no gaps.

Procedure:

- Inquire if this invention was made with U.S. Government support under (identify the agreement awarded by USAID). The U.S. Government has certain rights in this invention.

RAA12.3 Conditions When the U.S. Government May Obtain Title

Objective(s): Confirm that the organization has accurate knowledge of the conditions when the U.S. Government may obtain Title.

Procedure:

- Inquire with management whether they know of conditions when the US may obtain the title of the patent rights.

RAA12.4 Flow Down

Objective(s): Confirm that the organization consistently includes this provision in the subawards and contracts and suitably modifies it to identify all parties. The organization retains the same rights as USG and does not obtain more rights in the contractor's or sub-awardee's subject inventions than provided in this provision.

Procedure:

- Inquire whether there are sub-recipients and inspect the contracts for inclusion.

RAA13. Exchange Visitors and Participant Training (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision applies to awards that contain funding for any exchange visitor* activities or participant training* (as defined in ADS 252 and 253, respectively) conducted or paid for by the recipient with USAID funds under this award.

Procedures:

- Inquire with the organization whether they have USAID awards with exchange visitor activities or participant training, as defined in ADS 252 and 253, respectively.

* An **Exchange Visitor** is defined as any host-country or third-country national traveling to the U.S. for any purpose, including Participant Training and Invitational Travel, who is funded by USAID in whole or in part, directly or indirectly.

* Participant Training is defined as a learning activity conducted within the U.S., a third country, or the host country to further USAID development objectives. A learning activity occurs in a setting in which an individual (the participant) interacts with a knowledgeable professional, predominantly to acquire knowledge or skills for the professional or technical enhancement of the individual. Learning activities may be formally structured, such as an academic program or a technical course, or more informal, such as an observational study tour.

- Inquire and corroborate whether the organization reports through TraiNet.
- Inquire with the organization whether they are aware of the requirements to:
  - Get health and accident insurance for the U.S., the domestic country, or a third country, for exchange visitors and participants who will attend the training; and
  - Meet immigration requirements for participants traveling for the USAID-funded exchange visitor and participant training.
- Verify that the following requirements were met for any such training that took place:
  - Participants were assessed for language proficiency (i.e., English proficiency for U.S.-based training and any other language for third-party or host countries).
  - Pre-departure orientation and evidence of the orientation were available, if any.
  - Participants signed the Conditions of Sponsorship for U.S.-Based Activities and Conditions of Sponsorship for Third-Country Training.
- Inquire and corroborate any reports of known violations by Exchange Visitors of visa or other immigration requirements or conditions to the Agreement Officer (AO).
- Inquire with management whether they are prepared to assist USAID missions in conducting Security Risk and Fraud Inquiry (SRFI) if requested.
- Inquire, for U.S.-based training, whether the attending organization is aware of the requirement to give preference to Historically Black Colleges and Universities (HBCU) or Minority Serving Institutions (MSIs) as service providers for the training.

RAA13.1 Visa

Objective(s): Confirm that the organization consistently complies with this provision with no gaps for all Exchange Visitor, Participant Training, or Invitational Travel activities, the recipient must comply with this provision.

Procedure:

- Visa Compliance Requirement: Inquire with management awards that contain funding for any exchange visitor activities or participant training, as defined in ADS 252 and 253, respectively, conducted or paid for by the recipient with USAID funds under this award.

RAA13.2 Insurance

Objective(s): Confirm that the organization is accurate and consistent in (i) considering health and Accident Insurance coverage that meets or exceeds Department of State and USAID minimum coverage requirements for Exchange Visitors traveling to the United States. (ii) obtaining health and accident insurance

coverage for all Participants traveling to a third country. (ii) determining whether specific in-country participant training activities subject them to any risk of health and accident liability for medical costs. Participants may incur, and if so, take appropriate steps according to the local situation, including obtaining health and accident insurance coverage for Participants.

Procedure:

- Health and Accident Insurance: Inquire with management whether they are aware of the requirement to get health and accident insurance for the US, third country, or domestic country for the exchange visitors and participant training to be attended.

RAA13.3 Immigration Requirements

Objective(s): Confirm that the organization is accurate and consistent with no gaps in ensuring (i) that all USAID-sponsored Exchange Visitors obtain, use, and comply with the terms of the J-1 visa, issued in conjunction with a USAID-issued Certificate of Eligibility for J-1 Visa Status (DS-2019) for Exchange Visitors traveling to the United States. (ii) that all Participants obtain, use, and comply with the terms of all applicable immigration, visa, and other similar requirements for Participants traveling to a third country or within the host country.

Procedure:

- Immigration Requirements: Inquire with management whether the organization is aware of the USAID immigration requirements for participants traveling for the USAID-funded exchange visitors and participant training.

RAA13.4 Language

Objective(s): Confirm that the organization accurately and consistently, with no gaps, verifies (i) English language proficiency for Participants in a U.S.-based activity. (ii) Proficiency in the language training for Participants of third-country or host-country training (and making arrangements for an interpreter).

Procedure:

- Language Proficiency: Inquire whether the organization conducts a language proficiency assessment for participants i.e., English for US-based trainings and any other language for other third-party countries or host countries.

RAA13.5 Orientation

Objective(s): Confirm that the organization accurately and consistently conducts pre-departure orientation for U.S-bound Exchange Visitors and Participants of third-country training programs with no gaps.

Procedure:

- Pre-arrival Orientation: Inquire with management whether they conduct the pre-departure orientation and request for evidence, if any.

RAA13.6 Compliance

Objective(s): Confirm that the organization accurately and consistently, with no gaps, ensures (i) that all Exchange Visitors read and sign the Conditions of Sponsorship for U.S.-Based Activities, (ii) that all Participants of long-term (six months or longer) third-country training read and sign the form Conditions of Sponsorship for Third-Country Training. The organization also reports to the Agreement Officer any known violations by Exchange Visitors of visa or other immigration requirements or conditions.

Procedures:

- Conditions of Sponsorship: Inquire and corroborate whether the participants sign the Conditions of Sponsorship for U.S.-Based Activities and Conditions of Sponsorship for Third-Country Training.

- Inquire and corroborate the reporting of known violations by Exchange Visitors of visa or other immigration requirements or conditions to the AO.

RAA13.7 Fly America

Objective(s): Confirm that the organization accurately and consistently complies with the "International Air Travel and Air Transportation of Property" provision.

Procedure:

- Inquire with management whether they are aware of the provision and their extent of compliance.

RAA14. Investment Promotion (November 2003)

Objectives: Determine if this provision applies and, if so, confirm compliance.

The following provision is required for grants and cooperative agreements when the program includes gray-area activities or investment-related activities for which specific activities are not identified at the time of obligation but could be for investment-related activities, as described in **ADS 225** (see 225.3.).

Procedures:

- Inquire with the organization whether they are involved in activities aimed at promoting investment in the country.

- Verify that USAID funding is not used for any investment promotion in the country unless authorized in writing by USAID.

- Verify incorporation of this restriction in sub-agreements.

RAA14.1 Prohibition on Investment Promotion

Objective(s): Confirm that the organization is accurately aware of this prohibition and not likely to support an investment promotion.

Procedure:

- Inquiry with management whether they are involved in activities aimed at the promotion of investment in the country.

RAA14.2 Flow Down

Objective(s): Confirm that the organization accurately and consistently ensures that its employees and subrecipients and contractors providing investment promotion services are made aware of the restrictions and includes this clause in all contracts and other subawards.

Procedure:

- If they are involved in the promotion, inquire and corroborate whether the employees and subrecipients involved are made aware of the restriction.

RAA15. Cost Share (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

Procedures:

- Review USAID Awards for any cost-share requirement.

- Review prior period audit reports for any findings on cost share.

- Check to see if the cost-share contribution aligns with the supporting documents (including cost share in-kind) for cost-share reports on current projects and determine whether the contribution is or is not made from U.S. government sources. The complete criteria for cost-share contributions are:
    - Verifiable from the recipient's records
    - Not included as cost share contributions for any other U.S. government-assisted program
    - Necessary and reasonable for proper and efficient accomplishment of this award's objectives
    - Allowable under the Standard Provision, "Allowable Costs"
    - Not paid by the USG under another grant or agreement (unless the grant or agreement is authorized to be used for cost-share); and
    - Included in the approved budget.

- Inquire with management whether they are aware of the consequences for noncompliance/failure to meet the cost-share requirement. These consequences include:
    - Reduced funding for the following period, or
    - A refund of the difference to USAID when the award is terminated, or
    - A reduction in the amount of cost-sharing required under the award.

RAA15.1 Cost Share Agreement

Objective(s): Determine if the organization has agreed to spend an amount of funds from non-U.S. Government sources specified as Cost Share and provided in the award budget in cash or kind as cost share and accurately and consistently complies with the cost share provision and restrictions.

Procedure:

- Check previous USAID Awards (for inspection whether they include cost share arrangements) to check whether the RAA is applicable.

RAA15.2 Value of Non-U.S. Government In-Kind Contributions

Objective(s): Determine if the organization has established the value of non-U.S. Government in-kind contributions and has accurately followed the required procedures with no gaps.

Procedure:

- Inquire with management whether the value of in-kind contributions was determined and agree to the approved budget.

RAA15.3 Supporting Documentation

Objective(s): Determine if the organization always provides supporting documentation for in-kind contributions from third parties with no gaps.

Procedure:

- If the organization committed to cost share in kind, obtain supporting evidence for the results reported.

RAA15.4 Expending Less

Objective(s): Determine if the organization is accurately aware of the consequences or actions the AO may take for expending less cost share.

Procedure:

- "Inquire with management whether they are aware of the consequences for noncompliance i.e., reduced funding for the following period, refund the difference to USAID when the ward is terminated, or reduce the amount of cost share required under the award.

RAA15.5 Disallowed Funds

Objective(s): Determine when expenditures from USAID award funds are disallowed, the organization is aware that it can substitute expenditures made with funds provided from non-USG sources, or when they do substitute it is eligible in accordance with the standard provisions. The organization has a policy on disallowed funds and funds are almost never disallowed.

Procedure:

- Inquire with management whether they are aware that they can substitute disallowed expenditure with funds made from non-USG sources.

RAA16. Program Income (August 2020)

Objectives: Determine if this provision applies and, if so, confirm compliance.

This provision is applicable when program income is expected to be earned under the award. The Agreement Officer (AO) must specify in the award schedule the approach for the use of program income (for example, deduction, addition, or cost-sharing) (see 2 CFR 200.307 and ADS 303.3.10.4).

Procedures:

- Inquire with management whether they are earning program income, such as:

    o Fees for services performed under the award.

    o Rental or fees income from property acquired under Federal awards.

    o Sale of commodities fabricated under the award.

    o License fees and royalties on patents and copyrights.

    o Principal and interest on loans made with Federal award funds.

- Confirm whether the program income is accounted for per the requirements of this provision. (Program income must be used under the award's conditions to further project objectives, program objectives, or award activities. Program income must be used only for allowable program costs. Interest earned on program income is subject to the same conditions as program income.)

    o Review the program-specific general ledgers for any program income.

RAA17. Foreign Government Delegations to International Conferences (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision applies to agreements funded by:

- Development Assistance, including assistance for sub-Saharan Africa,

- Global Health Programs, and

- Micro and Small Enterprise Development Program Account.

Further information can be found in the Mandatory Reference for ADS 303, "Guidance on Funding Foreign Government Delegations to International Conferences." (http://www.usaid.gov/ads/policy/300/350maa).

Procedures:

- Inquire with the organization whether it funds travel, accommodation, and meals for any government officials attending international conferences sponsored by a multilateral organization.

- Inquire if the organization used USAID funding to finance the travel and confirm AO's written approval.

RAA18. Standards For Accessibility for The Disabled in USAID Assistance Awards Involving Construction (September 2004)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision must be included in solicitations and awards involving construction.

Procedures:

- Ask management whether they have any awards involving construction (except emergency construction intended to be temporary, and routine maintenance, reroofing, painting, wallpapering, or changes to mechanical or electrical systems).

- Inquire with management whether there were or will be alterations to existing structures under the award and whether they are aware of this provision's requirements unless the organization obtains AO's approval in the event of infeasibility.

- Inquire with the organization on the standards of accessibility* for people with disabilities.

N.B.* Standards of accessibility for people with disabilities could be host country or regional if at least substantially equivalent accessibility and usability as the standard provided in the Americans with Disabilities Act (ADA) of 1990 and the Architectural Barriers Act (ABA) Accessibility Guidelines of July 2004. Where there are no host country or regional standards for universal access, or the host country or regional standards fail to meet the ADA/ABA threshold, the standard prescribed in the ADA and the ABA will be used.

RAA18.1 For New and Renovation Construction

Objective(s): Determine if the organization consistently complies with the standard for accessibility for the disabled in USAID assistance involving the construction of at least substantially equivalent accessibility and usability as the standard provided in the Americans with Disabilities Act (ADA) of 1990 and the Architectural Barriers Act (ABA) Accessibility Guidelines of July 2004.

Procedure:

- Inquire with management whether they have any awards involving construction except emergency construction intended to be temporary or normal maintenance, reroofing, painting, wallpapering, or changes to mechanical or electrical systems.

RAA18.2 Alterations

Objective(s): Determine if the organization consistently complies with the standards for alterations and accurately understands the circumstances under which the AO may grant in advance written approval that compliance is technically infeasible.

Procedure:

- Inquire with management whether there were or will be alterations to existing structures under the award and whether they are aware of the requirements of this provision.

RAA19. Protection Of Human Research Subjects (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision applies when human subjects are involved in research financed by this award, as defined in 22 CFR 225 and ADS 200 Mandatory Reference, "Protection of Human Subjects in Research Supported by USAID." The AO should confer with the Activity Manager to determine if any research with human subjects will be included in the award.

Procedures:

- Inquire whether the organization is managing USAID funding to conduct any research that involves human subjects.

- Confirm whether consent documents have been signed by the research subjects.

- Confirm whether the organization obtained the Federal-Wide Assurance from the U.S. Department of Health, or submitted to the AOR for USAID approval, a written statement of assurance about principles governing the recipient's responsibilities, designation of one or more Institutional Review Boards (IRB), a list of the IRB members, written procedures that the IRB will follow, and written procedures for ensuring prompt reporting of unanticipated problems to the IRB. Alternatively, confirm that the organization has submitted to the AOR, for USAID approval, a justification memorandum asserting that research conducted outside the United States provides protection at least equivalent to those in 22 CFR 225. ([22 CFR §225 Protection Of Human Subjects - Code of Federal Regulations (ecfr.io)](#))

RAA20. Statement for Implementers of Anti-Trafficking Activities On Lack of Support For Prostitution (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision must be included in any award that:

1. Uses funds made available to carry out the Trafficking Victims Protection Act of 2000, Division A of P.L. 106-386; and

2. Covers a program that targets victims of severe forms of trafficking in persons (as defined below) and provides services to individuals while they are still engaged in activities that resulted from such victims being trafficked. According to the Trafficking Victims Protection Act, "severe forms of trafficking in persons" refers to:

   o sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or

   o the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

Procedures:

- Inquire with the organization on their position regarding promotion, supporting, and advocating for the legalization or practice of prostitution.

- Confirm the above inquiry through a review of the organization's policies.

- Review the organization's website for any publications on prostitution.

RAA21. Eligibility of Subrecipients of Anti-Trafficking Funds (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision must be included in any award that uses funds made available to carry out the Trafficking Victims Protection Act of 2000, Division A of P.L. 106-386, for a program that targets victims of severe forms of trafficking in persons.

Procedures:

- Inquire whether there are subrecipients for USAID anti-trafficking funds managed by the organization.

- Review the subaward agreements or grant application by the sub awardee for the inclusion of a position not contrary to RAA20 Statement For Implementers Of Anti-Trafficking Activities On Lack Of Support For Prostitution (June 2012)

RAA22. Prohibition On the Use of Anti-Trafficking Funds to Promote, Support, or Advocate for the Legalization or Practice of Prostitution (June 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision must be included in any award that uses funds made available specifically under the Trafficking Victims Protection Act of 2000, Division A of P.L. 106-386.

Procedures:

- Confirm that the organization does not use USAID funds to promote, support, or advocate the legalization or practice of prostitution.

- Review any sub-agreements the organization has for the inclusion of this RAAP.

RAA23. Voluntary Population Planning Activities – Supplemental Requirements (January 2009)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision applies to all awards involving any aspect of voluntary population planning activities.

Procedures:

- Inquire with the organization to determine whether consent has been obtained from the program participants and retained for at least three years.

- Confirm that no payment of incentives, bribes, gratuities, or financial rewards was made to:
    - any individual in exchange for becoming a family planning acceptor, or
    - any personnel performing functions under the project for achieving a numerical quota or target of the total number of births, number of family planning acceptors, or acceptors of a particular contraception method.

- Inquire with management and inspect the project budget/expenditure to ensure that no USAID funds were for the:
    - Procurement or distribution of equipment intended to be used to induce abortions as a method of family planning.
    - Special fees or incentives to any person to coerce or motivate them to have abortions.
    - Payments to persons to perform abortions or to solicit persons to undergo abortions.
    - Information, education, training, or communication programs that seek to promote abortion as a family planning method.

- o Lobbying for or against abortion
- Review any sub-agreements for the inclusion of this RAAP.

RAA23.1 Voluntary

Objective(s): Determine if the organization consistently complies with voluntary population planning activities supplemental requirements.

Procedure:

- Inquire with management whether they received funds for voluntary population planning activities.

RAA23.2 Voluntary Participation and Family Planning Methods

Objective(s): Determine if the organization strongly agrees to take any steps necessary to ensure that funds made available under this award will not be used to coerce any individual to practice methods of family planning inconsistent with such individual's moral, philosophical, or religious beliefs.

Procedures:

- Inquire with management whether they retain the consent forms and certificates for at least three (3) years after the performance of the sterilization procedure.
- Inquire whether there are set performance targets.
- If so, for a sample of reported beneficiaries, request the consent forms and certificates as evidence.

RAA23.3 Requirements for Voluntary Family Planning Projects

Objective(s): Determine if the organization consistently complies with the requirements for voluntary family planning projects and has never: set quotas or other numerical targets of a total number of births, payment of incentives, access to services, or participation based on the decision to accept or not FP services, etc., and notifies USAID if these requirements are violated.

Procedures:

- Inquire with management whether they retain the consent forms and certificates for at least three (3) years after the performance of the sterilization procedure.
- Inquire whether there are set performance targets.
- If so, for a sample of reported beneficiaries, request the consent forms and certificates as evidence.

RAA23.4 Additional Requirements for Voluntary Sterilization Programs

Objective(s): Determine if the organization consistently ensures that sterilization programs are voluntary and based on informed consent.

Procedures:

- Inquire with management whether they retain the consent forms and certificates for at least three (3) years after the performance of the sterilization procedure.

- Inquire whether there are set performance targets.

- If so, for a sample of reported beneficiaries, request the consent forms and certificates as evidence.

RAA23.5 Informed Consent Documentation

Objective(s): Determine if the organization consistently complies with the informed consent documentation and always retains the documentation.

Procedures:

- Inquire with management whether they retain the consent forms and certificates for a period of at least three (3) years after the performance of the sterilization procedure.

- Inquire whether there are set performance targets.

- If so, for a sample of reported beneficiaries, request the consent forms and certificates as evidence.

RAA23.6 Prohibition on Abortion-Related Activities

Objective(s): Determine if the organization consistently complies with abortion-related activities prohibition.

Procedure:

- Inquire with management and inspect the project budget to ensure no funds were used as follows:
  - Procurement or distribution of equipment intended to be used for the purpose of inducing abortions as a method of family planning.
  - Special fees or incentives to any person to coerce or motivate them to have abortions.
  - Payments to persons to perform abortions or to solicit persons to undergo abortions.
  - Information, education, training, or communication programs that seek to promote abortion as a method of family planning.
  - Lobbying for or against abortion.
  - Research as a method of family planning.

RAA23.7 Flow Downs

Objective(s): Determine if the organization always includes this provision in all subawards and contracts, involving family planning for population activities that will be supported, in whole or in part, from funds under the award.

Procedure:

- Inquire with management whether they have subrecipients under the award, if any, and inspect the agreements for inclusion of the RAA requirements.

RAA24. Conscience Clause Implementation (Assistance) (February 2012)

Objective(s): Determine if this provision applies and, if so, confirm compliance, including with the religious or moral objections for faith-based organizations.

This provision must be included in any new assistance award or any amendment to an existing award (if not already incorporated into the agreement), obligating FY04 or later funds made available for HIV/AIDS activities, regardless of the program account. Further guidance is found in Acquisition and Assistance Policy Directives (AAPD) 14-04, Section 2.D.

Procedures:

- Inquire with the organization about the conditions for receiving HIV/AIDS prevention, treatment, or care, and:
  - o Confirm that there is no requirement to endorse or utilize a multisectoral or comprehensive approach to combating HIV/AIDS, or to endorse, utilize, make a referral to become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection.
  - o Confirm nondiscrimination on the above basis in the solicitation or issuance of grants, contracts, or cooperative agreements.

RAA25. Condoms (Assistance) (September 2014)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision must be included in any new Request for Applications (RFA) or Annual Program Statement (APS), as well as any new assistance award or amendment to an existing award obligating or intending to obligate (in the case of solicitations) FY 2004 or later funds made available for HIV/AIDS activities, regardless of the program account.

Procedures:

- Review the organization's education material on the use of condoms and confirm adequacy compared to USAID guidance.
- Review sub-agreements, if the organization has any, for inclusion in this RAAP.

RAA25.1 Compliance with Guidance

Objective(s): Determine if the organization consistently complies with condom assistance requirements and if the information provided about the use of condoms is medically accurate and includes public health benefits and failure rates and is consistent with the USAID fact sheet; the provision is flowed down in all subawards.

Procedure:

- Inquire with management whether they have an award for HIV/AIDS activities, if so:
  - o Inquire whether the organization conducts programs to educate the beneficiaries of the program on the information as per the fact sheet (refer to link on RAA24).
  - o If sub-recipients, inquire whether the provision was communicated as part of the sub-award.

RAA25.2 Flow down – Condoms

Objective(s): Determine if the organization consistently flows this provision down in all subawards, procurement contracts, or subcontracts for HIV/AIDS activities.

Procedure:

- If sub recipients, inquire whether the provision was communicated as part of the subaward, subcontract, or procurement contracts for HIV/AIDS activities.

RAA26. Prohibition on the Promotion or Advocacy of the Legalization or Practice of Prostitution or Sex Trafficking (Assistance) (September 2014)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision must be included in any new Request for Applications (RFA) or Annual Program Statement (APS), and any new assistance award or amendment to an existing award obligating or intending to obligate (in the case of solicitations) FY 2004 or later funds made available for HIV/AIDS activities, regardless of the program account. Further guidance is found in AAPD 14-04, Section 2.E. 014)

Procedures:

- Inquire about the organization's position on prostitution and sex trafficking (and confirm information received through a review of existing policies) to verify that the organization does not promote or advocate for the legalization or practice of prostitution or sex trafficking.

- Review the organization's website for any information on the organization's position on prostitution and sex trafficking.

- Review any sub-agreements the organization has for inclusion in this RAAP.

RAA27. Limitation On Subawards to Non-Local Entities (July 2014)

Objective(s): Determine if this provision applies and, if so, confirm compliance.

This provision applies when subawards eligibility is restricted to local entities in accordance with USAID's statutory "Local Competition Authority" (see 303.3.6.5.c for additional guidance and 303.6 for the definition of local entity).

Procedures:

- Verify that at least 50 percent of personnel costs were expended for the prime/local entity employees.

- Confirm that the organization:

  - Is legally organized under the laws that pertain to the country in which the award will primarily be performed.

  - Has as its principal place of business or operations in that country.

  - Is majority-owned by individuals who are citizens or lawful permanent residents of that country; and

  - Is managed by a governing body, the majority of whom are citizens or legal permanent residents of the country in which the award will primarily be performed.

RAA28. Contract Provision for DBA Insurance Under Recipient Procurements (December 2014)

Objectives: Determine if this provision applies and confirms compliance.

This provision is applicable when recipients are expected to procure services that will be performed overseas.

Procedures:

- Inquire whether the organization is expected to procure services that will be performed overseas.

- Confirm DBA insurance procurement for any that have already been procured, unless the foreign country was on the Defense Base Act (DBA) waiver list. If no procurement yet, inquire with the organization whether they are aware of this provision's requirements.

- Review subcontracts, where applicable, for inclusion in this RAAP.

RAA29. Contract Award Term and Condition for Recipient Integrity and Performance Matters (April 2016)

Objectives: Determine if this provision applies and confirm compliance.

This provision is applicable when the total federal share of the award may include more than $500,000 over the period of performance.

Procedures:

- Inquire with management whether any civil, criminal, or administrative proceedings have taken place. If so, verify loading onto the Federal Awardee Performance and Integrity Information System (FAPIIS) (submission confirmation).

- Ask management if they are aware of the reporting procedures and the frequency of reporting required.

RAA29.1 Compliance

Objective(s): Determine if the organization consistently complies with the contract award term and conditions for recipient integrity and performance matters.

Procedure:

- Review Award Terms and Conditions.

RAA29.2 SAM and FAPIIS

Objective(s): Determine if the organization always maintains the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS).

Procedure:

- Reporting of Matters Related to Recipient Integrity and Performance.

RAA29.3 Reporting Requirements

Objective(s): Determine if the organization is accurately aware of the proceedings about which it must report including proceedings in connection with the award or performance of a grant, its final disposition, a criminal proceeding resulting in a conviction, a civil proceeding that resulted in a finding of fault, or administrative proceeding as defined in the standard provisions.

Procedure:

- Proceedings About Which You Must Report.

RAA29.4 Reporting Frequency

Objective(s): Determine if The organization is accurately aware of reporting procedures and reporting frequency.

Procedure:

- Reporting Procedures and Reporting Frequency.

RAA30. Reserved for a New Policy

The policy will be available online at www.ecfr.gov.

RAA31. Never Contract with the Enemy (November 2020)

Objectives: Determine if this provision is applicable and confirm compliance.

This provision is applicable when the award exceeds $50,000 and activities are performed outside the US. See 2 CFR 183.3

Procedures:

- Review the organization's procedures for engaging subrecipients and trading suppliers.

- Confirm whether the organization allows for the identification of suppliers suspended or debarred from doing business with the USG. (SAM checks [sam.gov], U.N. sanctions list [un.org/securitycouncil/content/un-sc-consolidated-list], OFAC checks [sanctionssearch.ofac.treas.gov]).

- Review any sub-agreements valued over $50,000 for inclusion of this RAAP's substance.

Key Risks to be Considered

1. Lack of understanding or outdated knowledge of the RAAPs

2. Advance funding that met RAA1 criteria not kept in an interest-bearing bank account

3. Poor controls for reporting Host Government Taxes (RAA11)

MODULE 19: ENVIRONMENTAL MONITORING AND MITIGATION PLAN

Background:

This domain requires a fair understanding of USAID rules on Environmental Monitoring and Mitigation Plans (EMMPs).

Estimated time for execution of this domain: 4 hours

Skills and experience required for effective execution of this domain: an assessor with a fair understanding of USAID rules on Environmental Monitoring and Mitigation Plans.

Overall Objective(s):

To assess if the organization complies with the EMMP requirements in their award agreement.

NUPAS Plus 2.0 EMPP Domain Categories:

1. **Plan**
2. **Project/Activity Data**
3. **Organizational/Administrative Data**
4. **Initial Submission**
5. **Environmental Conditions**
6. **Workplan**
7. **Corrective Action Plan**
8. **Timely Annual Submissions**

Procedures to be undertaken for a review of the EMMP domain:

- Document review (Estimated time required: 3.5 hours)
- Interviews (Estimated time required: 0.5 hours)

Documents to be requested for effective review of EMMP:

- Refer to the "Documents list" tab in the NUPAS Plus 2.0 tool.

Members to be considered for Interviews:

- Executive Director/Chief Executive Director
- Chief of Party
- Program Director
- Program Manager
- Compliance Manager

NUPAS Plus 2.0 ENVIRONMENTAL MONITORING AND MITIGATION PLAN EXAMPLE

CATEGORY/ SUB-CATEGORY	OBJECTIVE(S)	KEY DOCUMENTS FOR ASSESSMENT
Plan	Confirm that the organization has a fully completed EMMP and has submitted it annually to USAID, with all its components addressed accurately: Identified Environmental Aspects/Impacts, Mitigation Measures, Monitoring Indicators, Monitoring Frequency, Responsible Parties, and Monitoring Issues Resolutions.	EMMP
Project/Activity Data	Confirm that the Project/Activity Data section on the EMMP is fully and accurately completed.	EMMP
Organizational/Administrative Data	Confirm that the Organizational/Administrative Data section on the EMMP is fully and accurately completed.	EMMP
Initial Submission	Confirm if the EMMP was submitted to USAID or Prime Recipient in the time specified in the award or subaward.	Confirmation of EMMP submission
Environmental Conditions	Confirm that the EMMP addresses all of the conditions in the approved IEE or EA.	EMMP IEE or EA
Workplan	Confirm whether the EMMP is adequate and includes the following for implementation of corrective action: "EMMP includes all: o Responsible Person for the implementation of corrective actions o Mitigation Measures o Monitoring Indicators o Monitoring Method o Monitoring Frequency	EMMP Implementation Workplan

Corrective Action Plan	Confirm if the EMMP report includes all: 1) status of mitigation measures, 2) action implementation dates 3) outstanding issues, and 4) any remarks.	EMMP
Timely Annual Submissions	Confirm if all EMMP reports are submitted by the deadline.	Confirmation of EMMP submission

19.1 Plan

Objective(s): To confirm that the organization has a fully completed EMMP and has submitted it annually to USAID, with all its components addressed accurately: Identified Environmental Aspects/Impacts, Mitigation Measures, Monitoring Indicators, Monitoring Frequency, Responsible Parties, and Monitoring Issues Resolutions.

Procedures:

- Review EMMP to see that all components of the EMMP are addressed: Identified Environmental Aspects/Impacts, Mitigation Measures, Monitoring Indicators, Monitoring Frequency, Responsible Parties, and Monitoring Issues Resolutions.

- Verify if the EMMP is updated and annually submitted to USAID or the prime recipient.

19.2 Project/Activity Data

Objective(s): To confirm that the Project/Activity Data section on the EMMP is fully and accurately completed.

Procedure:

- Review the Project/Activity Data section of the EMMP for completeness and accuracy.

19.3 Organizational/Administrative Data

Objective(s): To confirm that the Organizational/Administrative Data section on the EMMP is fully and accurately completed.

Procedure:

- Review the Organizational/Administrative Data section of the EMMP for completeness and accuracy.

19.4 Initial Submission

Objective(s): To confirm if the EMMP was submitted to USAID or Prime Recipient in the time specified in the award or subaward.

Procedure:

- Verify when EMMP was submitted to USAID.

19.5 Environmental Conditions

Objective(s): To confirm that the EMMP addresses all of the conditions in the approved IEE or EA.

Procedure:

- Verify if the EMMP addresses all the conditions in the approved Initial Environmental Examination (IEE) or Environmental Assessment (EA).

19.6 Work Plan

Objective(s): To confirm whether the EMMP is adequate and includes the following for implementation of corrective action: "EMMP includes all:

  o Responsible Person for the implementation of corrective actions
  o Mitigation Measures
  o Monitoring Indicators
  o Monitoring Method
  o Monitoring Frequency

Procedure:

- Review the EMMP to ensure it includes the:
  o Responsible Person for the implementation of corrective actions
  o Mitigation Measures
  o Monitoring Indicators
  o Monitoring Method
  o Monitoring Frequency

19.7 Corrective Action Plan

Objective(s): To confirm if the EMMP report includes all: 1) status of mitigation measures, 2) action implementation dates 3) outstanding issues, and 4) any remarks.

Procedure:

- Verify EMMP reports including the status of mitigation measures, action implementation dates, outstanding issues, and any remarks.

19.8 Timely Annual Submissions

Objective(s): To confirm if all EMMP reports are submitted by the deadline.

Procedures:

- Verify whether EMMP reports are submitted annually or as required by USAID or Prime Recipient.

Key Risks to be Considered

1. EMMPs are not prepared as required by the award.
2. Late submission of EMMPs.
3. EMMPs do not address all environmental risks from the program activities.

SECTION V: CAPACITY DEVELOPMENT PLAN

Click here for a link to the USAID/Accelerating Support For Advanced Local Partners (ASAP) Capacity Development Plan worksheet.

ASAP CAPACITY DEVELOPMENT PLAN

Name of Organisation

Country
Date

	DOMAN AND CRITERIA	NUPAS SCORES	KEY ACTIVITIES	EXPECTED RESULTS	NAME OF CAPACITY ADVISOR OR INITIALS	LOCAL PARTNER COUNTERPART	TOOLK USED OR DEVELOPED	START DATE	END DATE	REASSESSMENT DATE	REASSESSMENT SCORE BETWEEN 3-6 MONTHS
	INSTRUCTIONS	CUT and PASTE NUPAS PLUS SCORES	REFER TO ASAP TECHNCIAL APPROACH AND SELECT ACTIVITIES OR CUSTOMIZE AN ACTIVITY								
	Domain and Categories										
	1. Legal										
1	Definition of Local Organization										
2	Compliance with legal requirements										
3	Organizational Structure										
4	Governance										
5	Control Environment										
	Other										
	Average Score										
	2. Financial										
6	Banking Relationship and Accounts										
7	Accounting Bookkeeping System										
8	Chart of Accounts General Ledger										
9	Variance Analysis										
10	Allowable and unallowable costs										
11	Direct and Indirect										
12	Payments – Segregation of Duty										
13	Accounting – Segregation of Duty										
14	Financial Records Management										
15	Sources of Funding										
16	Financial Reporting										
17	Audit and Review of Financials										
18	Financial Management Personnel										
	Other										
	Average Score										
	3. Procurement										
19	Procurement Policies, Procedures and Practices										
20	Compliance with Policies and Procedures – Reasonableness of Price										
21	Procurement and Sub-awards										
	Other										

SECTION VI: FACILITATION GUIDANCE

Your responsibility as the facilitator is to present each session's content and activities as clearly as possible. You are also responsible for maintaining a comfortable learning environment for participants. Therefore, we recommend that you thoroughly familiarize yourself with this training manual, the materials, and the activities before each session so you feel confident about presenting the content and process.

Participatory Techniques

Think about the kinds of participatory techniques you have used before as you read through this section and be sure to consider the size of the group you will be training.

- Plan how you will use participatory techniques to facilitate your NUPAS Plus training.

- Be attentive to the amount of time you have for each module. It is important to plan how much time you think each activity will take, how much time you want to leave for feedback and discussion, and how much time you will need for wrap-up and transitions.

Overall Aims and Learning Objectives

The aims of the NUPAS Plus training are the following:

1. Become familiar with and understand the NUPAS Plus tool whether you will be assessing one or more modules.
2. Understand the methods for administering and scoring the NUPAS Plus and the process for reporting writing and capacity development plan.
3. Practice using the NUPAS Plus tool with colleagues and ask open-ended or probing questions from the facilitator and colleagues to encourage group discussion.

At the end of the training, participants will be able to:

1. Describe the processes and methods to conduct the NUPAS Plus.

2. List the main sections of the NUPAS Plus report and what are common mistakes to avoid when writing the report.

3. Explain the content of a specific module and describe a few challenges that may be encountered using the module and provide solutions to the challenges.

4. Discuss what is the link between the scores and the capacity development plan.

TRAINING AGENDA

NUPAS Plus Training Agenda Example

Adapt this example agenda to fit the learning objectives of your training.

DC Time	Local Time	Activity	Facilitator(s)	Presentations, tools, or handout(s) to be used
Day 1 (May 17, 2021)				
07:30	02:30	Opening the meeting and welcoming participants		N/A
07:40	02:40	Introduction of training attendees Objectives of the training Overview of NUPAS Plus		PowerPoint Slides
08:10	03:10	USG rules and regulations on Pre-Award Surveys, NUPAS, and ADS		PowerPoint Slides
08:25	03:25	Q&A		
08:40	03:40	NUPAS/Plus: Legal and Governance; Finance; HR; Procurement; Property Mgt and Fraud (Including Exercise/Role Playing)		NUPAS Modules (1, 2, 3 & 4) NUPAS Plus Modules (1, 2, 3, 4, 5, 7 & 10)
09:45	04:45	Q&A		
07:30	02:30	NUPAS/Plus: Performance Monitoring, M&E (Including Role Playing)		NUPAS 6, NUPAS Plus Modules 8
8:05	03:05	Gender and Social Inclusion (Including Exercise and Role Play)		NUPAS Plus Module 9
8:45	03:45	Q&A		
09:00	04:00	Writing a report Developing a Capacity Building Plan		PowerPoint Slides
09:45	04:45	Q&A Wrap-up Closing remarks		

EVALUATION OF THE TRAINING

Sample Evaluation Form

1. Which session(s) did you find most useful? Please list sessions.

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[blank box]
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2. Which session(s) did you find least useful? Please list sessions.

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[blank box]
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3. Name one skill you learned that stands out in your mind. Please describe.

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[blank box]
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4. Please tell us whether you agree or disagree with the following statements:

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. I learned how to administer the NUPAS Plus during this training.	q	q	q	q	q
b. I had a positive experience learning with my peers in this training.	q	q	q	q	q
c. The training met my expectations.	q	q	q	q	q
d. The facilitator was [OR the facilitators were] effective in meeting the training's learning objectives.	q	q	q	q	q

5. We value your comments. Please provide additional feedback here:

APPENDICES

NUPAS Plus 2.0 Training PowerPoint Slides

NUPAS Plus 2.0 Tool in Excel

Capacity Development Plan

GLOSSARY

The following terms and definitions apply to the NUPAS, NUPAS Plus, and NUPAS Plus 2.0:

Capacity: the ability of a prospective recipient to perform and achieve the objectives of the award in accordance with applicable requirements; this includes technical, operational, financial management and reporting, procurement, subaward management, legal, policy, and other requirements of the award including any special award conditions.

Local organization: USAID considers a "local" organization an entity that must:

- Be organized under the laws of the recipient country;

- Have its principal place of business in the recipient country;

- Be majority-owned by individuals who are citizens or lawful permanent residents of the recipient country or be managed by a governing body, the majority of whom are citizens or lawful permanent residents of a recipient country; and

- Not be controlled by a foreign entity or by an individual or individuals who are not citizens or permanent residents of the recipient country.

Regional or Indigenous organization: USAID considers regional organizations the ones that meet the following criteria:

- Be organized under the laws of a country in the region served by the platform.

- Have its principal place of business in the region.

- Be majority-owned by individuals who are citizens or lawful permanent residents of the region or be managed by a governing body, the majority of whom are citizens or lawful permanent residents of the region, and

- Not be controlled by a foreign entity or by an individual or individuals who are not citizens or permanent residents of the region.

Foreign entity: An organization that fails to meet any part of the "local organization" definition.

Deficiency: A material failure to meet a requirement of the award or a combination of "Significant Weaknesses" that increases the risk of unsuccessful performance of the award to an unacceptable level.

Risk: The probability of occurrence and the potential magnitude of the impact of an adverse attribute, vulnerability, threat, transaction, or other event that will or may have an adverse impact on the achievement of objectives, or otherwise result in loss or harm.

Risk management: the overall process concerned with the systematic identification, analysis, measurement, control, and minimization of risks with an expectation of decreasing the probability of their occurrence.