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# **Pathways to Accountability II**

**The Global Accountability Indicator Framework 2011  
- Indicators**

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## Background information

In 2005 the One World Trust published its first full Global Accountability Framework<sup>i</sup>, which structured accountability around four key dimensions: transparency, participation, evaluation and complaint and response mechanisms. Based on the experiences from the 2003 pilot report<sup>ii</sup>, the consultation with a wide range of global organisations, researchers, and stakeholders identified a set of 68 indicators capturing what constituted good accountability practice at the time.<sup>iii</sup> The indicators allowed the detailed measuring of an organisation's capability to be accountable to its stakeholders with a focus on those who were most affected by an organisation's work and decisions. From 2006 to 2008 the One World Trust implemented and published a full cycle of Global Accountability Reports, assessing close to 100 global organisations from the intergovernmental, non-governmental and corporate business spheres against this framework.

The dynamics in the field of accountability research, standards and practice however also highlighted the need for an evaluation and review of the assessment framework to ensure that it moved with the dynamics it had itself helped to create. In 2009 and 2010 the One World Trust therefore invited participating organisations, experts and stakeholders to join a broad review process, with workshops held in Washington DC, London and Geneva, an open online survey and a range of individual consultative discussions. The outcomes of this consultation process were taken into consideration in the revised version of the Global Accountability Framework.

## The Global Accountability Framework II

The new framework differs from the 1<sup>st</sup> Global Accountability Framework in a few aspects:

### ***Five core accountability dimensions***

In addition to the four dimensions from the 1<sup>st</sup> Global Accountability Framework - transparency, participation, evaluation and complaint and response mechanisms –, the new Global Accountability Framework introduced a fifth dimension. The new dimension of 'accountability strategy' provides evidence on the position of an organisation's ability to exercise leadership on accountability and related reforms.

### ***A graded scoring system***

In contrast to the 1<sup>st</sup> Global Accountability Framework which was based on a binary scoring system, in the new Global Accountability Framework a graded scoring system is employed for all indicators. The basic principle along which the scoring system is built is that an indicator is scored 0 if no evidence for its fulfilment is present, and from 1-3 if relevant evidence is present, but to varying degrees of fulfilment of good practice standards.

The subsequent framework displays the complete set of indicators of the new Accountability Framework. It should be read in conjunction with

Hammer, M.; Lewis, A. (2011): The Global Accountability Framework II. An introduction to the framework, assessment process, approach to scoring and data collection, One World Trust Briefing paper number 128, May 2011, London, One World Trust.

We are grateful for the assistance of the following team members during the consultation process, development of the indicators and finalisation of the publication:

Virginia Lopez Clavo, Ashley Lewis, Davina Rai and Friederike Hanisch.

<sup>i</sup> Pathways to Accountability (2005): The Global Accountability Framework, London, One World Trust.

<sup>ii</sup> Power without Accountability (2003): The Global Accountability Report, London, One World Trust.

<sup>iii</sup> One World Trust (2007): 2007 Global Accountability Indicator List, London, One World Trust.

| Indicator   | Explanation   | Score |
|---|---|-------|
| <b>1 Accountability Strategy</b>  |   |       |
| 1.1 Stakeholder mapping and prioritisation                                      | The organisation has limited or no understanding of who its stakeholders are  | 0     |
|   | The organisation has an understanding of who its stakeholders are, but there is no evidence to suggest that this has been informed by a systematic mapping process  | 1     |
|   | The organisation has a clear understanding of who its stakeholders are and which ones are priority; this has been informed by a systematic mapping process which has been documented; a description of this process is not made public  | 2     |
|   | The organisation has a clear understanding of who its stakeholders are and which ones are priority; this has been informed by a systematic mapping process which has been documented; a description of this process is made publicly available  | 3     |
| 1.2 Accountability mapping and action plan                                      | The organisation has no or limited understanding of the mechanisms and processes it currently has in place for delivering accountability to each of its stakeholders  | 0     |
|   | The organisation has an understanding of the mechanisms and processes it currently has in place for delivering accountability to its stakeholders, but there is no evidence to suggest that this has been informed by a systematic mapping process  | 1     |
|   | The organisation has a clear understanding of the mechanisms and processes it currently has in place for delivering accountability to each of its stakeholder groups; this has been informed by a systematic mapping process which has been documented; there is no evidence that a plan of action for plugging gaps has been developed   | 2     |
|   | The organisation has a clear understanding of the mechanisms and processes it currently has in place for delivering accountability to each of its stakeholder groups; this has been informed by a systematic mapping process which has been documented; based on this mapping a plan of action has been developed that identifies how gaps will be plugged; a plan for monitoring implementation is in place and the action plan has been resourced                 | 3     |
| 1.3 Commitment to and awareness of existing external accountability commitments | The organisation makes no external accountability commitments (e.g. it has not signed up to any codes of conduct, principles or standards)  | 0     |
|   | The organisation has an understanding of some of its external accountability commitments (e.g. the codes of conduct, principles and standards it is a member of) but this is not comprehensive; only some are listed on its website   | 1     |
|   | The organisation has a good understanding of all its external accountability commitments (e.g. the codes of conduct, principles and standards it is a member of), these are listed in one place on its website; there is no evidence however that compliance with these commitments is monitored and reported on  | 2     |
|   | The organisation has a clear understanding of all of its external accountability commitments (e.g. the codes of conduct, principles and standards it is a member of), these are listed in one place on its website with information on the countries / operations where these are applied; a clear plan is in place for monitoring and reporting on compliance with each of these commitments with key people responsible for overseeing each initiative identified | 3     |

| Indicator   | Explanation  | Score |
|---|--|-------|
| <b>2 Transparency</b>                                 |  |       |
| <i>Policy Indicators</i>                              |  |       |
| 2.1 Transparency Policy                               | The organisation has no formal position on information disclosure or only makes a vague commitment to being transparent in its communication material (Website, Annual Report)   | 0     |
|   | The organisation makes a commitment to transparency in a core organisational document (e.g.. Code of Conduct, mission, vision, values) but provides no guidance on how this commitment is implemented; <b>or</b> the organisation has a formal policy on information disclosure but it only applies to some activities and functions (e.g. finances, customer care, user details etc.) | 1     |
|   | The organisation has a formal policy which guides what and when it will make information public; the policy is mandatory and applies to all activities and functions; it is not supported by guidelines to help staff interpret and implement its provisions   | 2     |
|   | The organisation has a formal policy which guides what and when it will make information public; the policy is mandatory and applies to all activities and functions; it is supported by guidelines (e.g. toolkit) to help staff interpret and implement its provisions  | 3     |
| 2.2 Commitment to respond to all information requests | The organisation makes no commitment to respond to requests for information  | 0     |
|   | The organisation makes a public commitment to respond to information requests, but only from certain stakeholders (e.g. media, shareholders, donors)   | 1     |
|   | The organisation makes a public commitment to respond to information requests from any stakeholder and provide a justification for any denial; the process for making requests however is not clear and no timeframes for responding are defined   | 2     |
|   | The organisation makes a commitment to respond to all requests for information from any stakeholder and provide a justification for any denial; the process to request information is clearly detailed and there are clear timeframes for responding.  | 3     |
| 2.3 Narrowly defined conditions for non-disclosure    | The organisation does not identify the conditions under which information will not be disclosed / kept confidential  | 0     |
|   | The organisation identifies the conditions under which information will not be disclosed / kept confidential, but these are very broad in scope  | 1     |
|   | The organisation identifies the conditions under which information will not be disclosed / kept confidential and these are both narrow and well defined; its approach to transparency however is not grounded in the presumption of disclosure (that all information, other than what is deemed confidential, is open to the public either upon request or proactively disclosed).     | 2     |
|   | The organisation identifies the conditions under which information will not be disclosed / kept confidential and these are both narrow and well defined; its approach to transparency is grounded in the presumption of disclosure (that all information, other than what is deemed confidential, is open to the public either upon request or proactively disclosed).                 | 3     |

| Indicator   | Explanation   | Score |
|---|---|-------|
| 2.4 Information appeals process                   | The organisation has no process through which a stakeholder can formally appeal a rejected request for information  | 0     |
|   | The organisation has a process through which a stakeholder can formally appeal a request for information that is rejected, however the appeals process only involves internal stakeholders  | 1     |
|   | The organisation has a process through which a stakeholder can formally appeal a request for information that is rejected; the appeals process is made up of a mix of internal and external stakeholders  | 2     |
|   | The organisation has a process through which a stakeholder can formally appeal a request for information that is rejected; the appeals process is made up of a mix of internal and external stakeholders; and the body reports directly to the board  | 3     |
| 2.5 Stakeholder involvement in policy development | There was no consultation with stakeholders in the development of the organisation's approach to / policy on transparency   | 0     |
|   | Some internal stakeholders were involved in the development of the organisation's approach to / policy on transparency  | 1     |
|   | A wide range of internal stakeholders were involved in the development of the organisation's approach to / policy on transparency; and informal / ad hoc consultations were held with some external stakeholders  | 2     |
|   | A wide range of internal stakeholders were involved in the development of the organisation's approach to / policy on transparency; and a systematic consultation was also held with a representative sample of external stakeholders  | 3     |
| <i>Quality Management Systems</i>                 |   |       |
| 2.6 Roles, responsibilities and leadership        | There is (are) no named senior executive(s) in charge of ensuring the organisation is open and transparent  | 0     |
|   | There is (are) a named senior executive(s) that is(are) responsible for ensuring the organisation is open and transparent, however this responsibility is not a formal part of his/her/their job description.   | 1     |
|   | There is (are) a named senior executive(s) that is (are) responsible for ensuring the organisation is open and transparent, and this responsibility is a formal part of his/her/their job description; roles and responsibilities for ensuring transparency are not clearly mapped out at different levels of the organisation (national, regional, international)    | 2     |
|   | There is (are) a named senior executive(s) that is (are) responsible for ensuring the organisation is open and transparent, and this responsibility is a formal part of his/her/their job description; roles and responsibilities for ensuring openness and transparency are clearly mapped out at all levels of the organisation (national, regional, international) | 3     |
| 2.7 Building staff capacity                       | The organisation provides no guidance or support to staff in implementing its commitments to transparency   | 0     |
|   | There is a toolkit/guidelines to support staff in implementing the organisation's commitments to transparency, but no formal training is provided to relevant staff   | 1     |
|   | Formal training is provided to relevant staff on how to implement the organisation's commitments to transparency  | 2     |
|   | Formal training is provided to relevant staff on how to implement the organisation's commitments to transparency; and an overview of the organisation's commitments to transparency is included in the induction of all new staff   | 3     |

| Indicator                        | Explanation   | Score |
|----------------------------------|---|-------|
| 2.8 Dissemination of commitments | The organisation's transparency policy/commitment to transparency is not mentioned on the website or public reports   | 0     |
|                                  | The organisation's transparency policy / commitment to transparency is made publicly available through the website, but there is no evidence to suggest there is a dissemination plan for making it widely available to key stakeholders  | 1     |
|                                  | The organisation's transparency policy / commitment to transparency is made publicly available through the website, and a basic dissemination plan is in place for making it more widely available; this does not recognise the accessibility needs of different stakeholders   | 2     |
|                                  | The organisation's transparency policy / commitment to transparency is made publicly available through the website, and there is a dissemination plan that recognises the accessibility needs of key stakeholders and proposes appropriate strategies for making the commitments accessible to them   | 3     |
| 2.9 Rewards and incentives       | No formal system exists to reward and incentivise open and transparent behaviour among staff  | 0     |
|                                  | No formal system exists to reward and incentivise open and transparent behaviour among staff, but there is evidence of ad hoc practices to this effect  | 1     |
|                                  | A formal system exists to reward and incentivise open and transparent behaviour among staff   | 2     |
|                                  | A formal system exists to reward and incentivise open and transparent behaviour among staff; and relevant staff have transparency related targets built into their job descriptions and are appraised against these annually  | 3     |
| 2.10 Quality management systems  | The organisation has no organisation wide system in place for monitoring and reviewing implementation of its commitments to transparency  | 0     |
|                                  | The organisation has no formal organisation wide system in place for monitoring and reviewing the implementation of its commitments to transparency, but there is evidence of monitoring among individual departments / units / sections  | 1     |
|                                  | The organisation has a formal organisation wide system in place for monitoring and reviewing the implementation of its commitments to transparency; performance reports are produced periodically and disseminated internally   | 2     |
|                                  | The organisation has a formal organisation wide system in place for monitoring and reviewing the implementation of its commitments to transparency; performance reports are produced periodically for internal and external dissemination (these report on the number of information requests received, number denied and the justifications) | 3     |

| Indicator  | Explanation   | Score |
|--|---|-------|
| <b>3a Participation - External Stakeholders</b>    |   |       |
| <i>Policy Indicators</i>                           |   |       |
| 3.1a Stakeholder engagement policy                 | The organisation has no strategy for guiding its engagement with external stakeholders, or only makes a commitment to stakeholder engagement in communications material (website, Annual Reports)   | 0     |
|  | The organisation makes a commitment to engage with external stakeholders in core organisation documents (e.g. Code of Conduct, mission, vision, values) or has a strategy that guides engagement with <b>either of</b> the external stakeholder groups  | 1     |
|  | The organisation has a strategy(ies) that guides engagement with external stakeholders; the strategy(ies) applies to <b>both</b> external stakeholder groups  | 2     |
|  | The organisation has a strategy(ies) in which guides engagement with external stakeholders; the strategy(ies) applies to <b>both</b> external stakeholder groups; <b>and</b> it is supported by implementation guidelines which provide support to staff on how to engage   | 3     |
| 3.2a Process commitments                           | The organisation makes no commitments on how it will consult with stakeholders  | 0     |
|  | The organisation makes a commitment to <b>one</b> of the following in relation to <b>either</b> of external stakeholder groups:<br>*Ensuring a balance of stakeholder voices in a consultation process<br>*Providing necessary information to stakeholders in advance of a consultation<br>*Feeding back the outcomes of a consultation to stakeholders once it is complete | 1     |
|  | The organisation makes a commitment to <b>two</b> of the following in relation to <b>both</b> external stakeholder groups:<br>*Ensuring a balance of stakeholder voices in a consultation process<br>*Providing necessary information to stakeholders in advance of a consultation<br>*Feeding back the outcomes of a consultation to stakeholders once it is complete      | 2     |
|  | The organisation makes a commitment to <b>all</b> of the following in relation to <b>both</b> external stakeholder groups:<br>*Ensuring a balance of stakeholder voices in a consultation process<br>*Providing necessary information to stakeholders in advance of a consultation<br>*Feeding back the outcomes of a consultation to stakeholders once it is complete      | 3     |
| 3.3a Stakeholder involvement in policy development | There was no consultation with stakeholders in the development of the organisation's strategy on external stakeholder engagement  | 0     |
|  | Some internal stakeholders were involved in the development of the organisation's strategy on external stakeholder engagement   | 1     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's strategy on external stakeholder engagement; and informal / ad hoc consultations were held with some external stakeholders   | 2     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's strategy on external stakeholder engagement; and a systematic consultation was also held with a representative sample of external stakeholders   | 3     |

| Indicator                                   | Explanation  | Score |
|---|--|-------|
| <i>Quality Management Systems</i>           |  |       |
| 3.4a Roles, responsibilities and leadership | There is (are) no named senior executive(s) in charge of overseeing the process of engaging with external stakeholders   | 0     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing the process of engaging with external stakeholders, however this responsibility is not a formal part of his/her (their) job description.   | 1     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing engagement with external stakeholders, and this responsibility is a formal part of his/her (their) job description; roles and responsibilities for ensuring stakeholder engagement however are not clearly mapped out at different levels of the organisation (national, regional, business unit etc.) | 2     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing engagement with external stakeholders, and this responsibility is a formal part of his/her (their) job description; roles and responsibilities for overseeing stakeholder engagement are clearly mapped out at all levels of the organisation (national, regional, business unit etc.)                 | 3     |
| 3.5a Building staff capacity                | The organisation provides no support or guidance to staff in engaging with external stakeholders   | 0     |
|   | There are guidelines/toolkits to support staff in engaging with external stakeholders, but no training (either in house or external) is provided to relevant staff on engagement best practice   | 1     |
|   | Training (either in house or external) is provided to relevant staff on engagement best practice; no overview of the organisation's commitments to engaging external stakeholders is included in staff inductions  | 2     |
|   | Training (either in house or external) is provided to relevant staff on engagement best practice; and an overview of the organisation's commitments to engaging external stakeholders is included in staff inductions  | 3     |
| 3.6a Dissemination of commitments           | The organisation's strategy on external stakeholder engagement and details of the opportunities open to external stakeholders for engagement are not mentioned on the website or in public reports   | 0     |
|   | The organisation's strategy on external stakeholder engagement and details of the opportunities open to external stakeholders for engagement is made publicly available through the website, but there is no evidence to suggest a dissemination plan is in place for making it widely available to key stakeholders   | 1     |
|   | The organisation's strategy on external stakeholder engagement and details of the opportunities open to external stakeholders for engagement are made publicly available through the website, and a basic dissemination plan is in place for making it more widely available, this does not however recognise the accessibility needs of different stakeholders                            | 2     |
|   | The organisation's strategy on external stakeholder engagement and details of the opportunities for external stakeholders to engage are made publicly available through the website; dissemination plans are also in place that recognise the accessibility needs of different external stakeholders and proposes appropriate strategies for making the commitments accessible to them     | 3     |

| Indicator   | Explanation  | Score |
|---|--|-------|
| 3.7a Rewards and incentives                           | No system exists to reward and incentivise staff to engage with external stakeholders  | 0     |
|   | No system exists to reward and incentivise staff to engage with external stakeholders, but there is evidence of ad hoc practices to this effect  | 1     |
|   | A system exists to reward and incentivise staff to engage with key stakeholders  | 2     |
|   | A system exists to reward and incentivise staff to engage with key stakeholders; relevant staff have engagement related targets built into their job descriptions and are appraised against these annually   | 3     |
| 3.8a Quality management systems                       | The organisation has no system in place for monitoring and reviewing if and how staff are engaging with external stakeholders  | 0     |
|   | The organisation has no formal system in place for monitoring and reviewing if and how staff are engaging with external stakeholders in activities and processes; but there is evidence of monitoring among individual departments / units / sections                                    | 1     |
|   | The organisation has a formal organisation wide system in place for monitoring and reviewing if and how staff are engaging with external stakeholders in activities and processes; reports on performance are produced periodically, but only disseminated internally                    | 2     |
|   | The organisation has an organisation wide system in place for monitoring and reviewing if and how staff are engaging external stakeholders in activities and processes; reports on performance are produced periodically and disseminated both internally and externally.                | 3     |
| 3.9a Stakeholder engagement in senior decision making | The organisation has no mechanism(s) through which external stakeholders can engage directly with senior management / governing bodies   | 0     |
|   | The organisation has a mechanism through which <b>either</b> external stakeholder group can engage with senior management / governing bodies   | 1     |
|   | The organisation has a mechanism through which <b>both</b> external stakeholder groups can engage with senior management / governing bodies and the process for becoming involved in the mechanism is clear; its advice/input to senior management / governing bodies is not made public | 2     |
|   | The organisation has a mechanism through which <b>both</b> external stakeholder groups can engage with senior management / governing bodies; the process for becoming involved in the mechanism is clear and its advice to senior management / governing bodies is made public           | 3     |

| Indicator   | Explanation   | Score |
|---|---|-------|
| <b>3b Participation - Internal member control/good governance</b> |   |       |
| 3.1b Member Control of highest decision-making body               | Not all members are represented in the highest decision making body   | 0     |
|   | The organisation ensures that all members are represented at the highest decision making body; all members can add items to the agenda; but, a single member can block changes to the governing articles or members do not hold an equal number of votes  | 1     |
|   | The organisation ensures that all members are represented at the highest decision making body; all members can add items to the agenda; no single member can block changes to the governing articles; but, members do not hold an equal number of votes   | 2     |
|   | <p>The organisation ensures that all members are represented at the highest decision making body; all members can add items to the agenda; no single member can block changes to the governing articles; all members hold an equal number of votes or if they do not the organisation is:</p> <ul style="list-style-type: none"> <li>*Clear as to the criteria upon which votes are allocated</li> <li>*Has put in place measures to counteract the imbalances this causes (e.g. double majority, regional thresholds, caps, codecision making etc.)</li> </ul>   | 3     |
| 3.2b Member Control at executive body                             | <p>The organisation's members:</p> <ul style="list-style-type: none"> <li>*Are unable to nominate candidates for all executive board seats</li> <li>*Are unable to initiate a process of dismissal of individuals on the executive</li> <li>*Candidates for the executive are elected by a minority of members</li> <li>*Are not equally represented on the executive</li> <li>*Do not have an equal number of votes</li> </ul>   | 0     |
|   | <p>The organisation ensures <b>two</b> of the following at its executive body:</p> <ul style="list-style-type: none"> <li>*Members are able to nominate candidates for all executive board seats</li> <li>*Members are able to initiate a process of dismissal of individuals on the executive</li> <li>*Candidates for the executive are elected by a majority</li> <li>*That members have no unequal representation</li> <li>*That members have an equal number of votes or if they do not, have put in places measures to counteract the imbalances this causes (e.g. double majority, regional thresholds, caps, codecision making etc.)</li> </ul> | 1     |
|   | <p>The organisation ensures <b>three</b> of the following at its executive body:</p> <ul style="list-style-type: none"> <li>*Members able to nominate candidates for all executive board seats</li> <li>*Members are able to initiate a process of dismissal of individuals on the executive</li> <li>*Candidates for the executive are elected by a majority</li> <li>*That members have no unequal representation</li> <li>*That members have an equal number of votes or if they do not, have put in places measures to counteract the imbalances this causes (e.g. double majority, regional thresholds, caps, codecision making etc.)</li> </ul>   | 2     |

| Indicator  | Explanation  | Score |
|--|--|-------|
|  | The organisation ensures <b>all</b> of the following at its executive body:<br>*Members are able to nominate candidates for all executive board seats<br>*Members are able to initiate a process of dismissal of individuals on the executive<br>*Candidates for the executive are elected by a majority<br>*That members have no unequal representation<br>*That members have an equal number of votes          | 3     |
| 3.3b Good governance (to be used when an organisation does not have members) | The organisation:<br>*Has no clear procedure for recruitment of board members which is open to a broad field of candidates<br>*Has no clear term limits and number of consecutive terms a board member can serve<br>*Does not have a majority of the board that can demonstrate their independence from the organisation<br>*Has a CEO and Chair that are the same person  | 0     |
|  | The organisation ensures <b>two</b> of the following at its governing body:<br>*A clear procedure for recruitment of board members which was open to a broad field of candidates<br>*Clear term limits and number of consecutive terms a board member can serve<br>*That the majority of the board can demonstrate their independence from the organisation<br>*That the CEO and Chair are not the same person   | 1     |
|  | The organisation ensures <b>three</b> of the following at its governing body:<br>*A clear procedure for recruitment of board members which was open to a broad field of candidates<br>*Clear term limits and number of consecutive terms a board member can serve<br>*That the majority of the board can demonstrate their independence from the organisation<br>*That the CEO and Chair are not the same person | 2     |
|  | The organisation ensures <b>all</b> of the following at its governing body:<br>*A clear procedure for recruitment of board members which was open to a broad field of candidates<br>*Clear term limits and number of consecutive terms a board member can serve<br>*That the majority of the board can demonstrate their independence from the organisation<br>*That the CEO and Chair are not the same person   | 3     |

| Indicator   | Explanation   | Score |
|---|---|-------|
| <b>3b Participation - Shareholder control/good governance</b> |   |       |
| 3.4b Equitable shareholder control at the AGM                 | Not all shareholders are represented at the AGM   | 0     |
|   | The organisation ensures that all shareholders are represented at the AGM   | 1     |
|   | The organisation ensures that all shareholders are represented at the AGM; and that all shareholders with 1% or more of shares can add items to the agenda of the AGM   | 2     |
|   | The organisation ensures that all shareholders are represented at the AGM ; that all shareholders with 1% or more of shares can add items to the agenda of the AGM; and that there is no exception to the one share one vote rule   | 3     |
| 3.5b Shareholder control of the Board of Directors            | <p>The organisation's:</p> <ul style="list-style-type: none"> <li>*Shareholders are unable to initiate a process of dismissal of individuals on the Board of Directors</li> <li>*Board of Directors are not elected by a majority vote of the shareholders</li> <li>*Shareholders are unable to nominate candidates to the Board individually or in aggregate with other shareholders, if they have 3% or less of shares</li> </ul>               | 0     |
|   | <p>The organisation ensures <b>one</b> of the following:</p> <ul style="list-style-type: none"> <li>*Shareholders are able to initiate a process of dismissal of individuals on the Board of Directors</li> <li>*Board of Directors are elected by a majority vote of the shareholders</li> <li>*Shareholders holding, individually or in aggregate with other shareholders, 3% or less of shares can nominate candidates to the Board</li> </ul> | 1     |
|   | <p>The organisation ensures <b>two</b> of the following:</p> <ul style="list-style-type: none"> <li>*Shareholders are able to initiate a process of dismissal of individuals on the Board of Directors</li> <li>*Board of Directors are elected by a majority vote of the shareholders</li> <li>*Shareholders holding, individually or in aggregate with other shareholders, 3% or less of shares can nominate candidates to the Board</li> </ul> | 2     |
|   | <p>The organisation ensures <b>all</b> of the following:</p> <ul style="list-style-type: none"> <li>*Shareholders are able to initiate a process of dismissal of individuals on the Board of Directors</li> <li>*Board of Directors are elected by a majority vote of the shareholders</li> <li>*Shareholders holding, individually or in aggregate with other shareholders, 3% or less of shares can nominate candidates to the Board</li> </ul> | 3     |

| Indicator   | Explanation  | Score |
|---|--|-------|
| 3.6b Good governance (to be used when an organisation is private or family owned) | The organisation:<br>*Has no clear procedure for recruitment of board members which is open to a broad field of candidates<br>*Has no clear term limits and number of consecutive terms a board member can serve<br>*Does not have a majority of the board that can demonstrate their independence from the organisation<br>*Has a CEO and Chair that are the same person  | 0     |
|   | The organisation ensures <b>two</b> of the following at its governing body:<br>*A clear procedure for recruitment of board members which was open to a broad field of candidates<br>*Clear term limits and number of consecutive terms a board member can serve<br>*That the majority of the board can demonstrate their independence from the organisation<br>*That the CEO and Chair are not the same person   | 1     |
|   | The organisation ensures <b>three</b> of the following at its governing body:<br>*A clear procedure for recruitment of board members which was open to a broad field of candidates<br>*Clear term limits and number of consecutive terms a board member can serve<br>*That the majority of the board can demonstrate their independence from the organisation<br>*That the CEO and Chair are not the same person | 2     |
|   | The organisation ensures <b>all</b> of the following at its governing body:<br>*A clear procedure for recruitment of board members which was open to a broad field of candidates<br>*Clear term limits and number of consecutive terms a board member can serve<br>*That the majority of the board can demonstrate their independence from the organisation<br>*That the CEO and Chair are not the same person   | 3     |

| Indicator  | Explanation  | Score |
|--|--|-------|
| <b>4a Evaluation (IGOs and INGOs)</b>                                |  |       |
| 4.1a Evaluation policy & framework                                   | The organisation makes no commitment to evaluating its activities  | 0     |
|  | The organisation makes a public commitment to evaluation, but does not have a policy which guides when and how it evaluates its activities   | 1     |
|  | The organisation has a policy on when and how it evaluates its activities  | 2     |
|  | The organisation has a public policy on when and how it evaluates its activities; this is supported by an organisation wide framework / system for monitoring, evaluating, learning and reporting  | 3     |
| 4.2a Stakeholder engagement, transparency and learning in evaluation | The organisation commits to none of the following:<br>*Engaging external stakeholders in evaluations<br>*Publicly disclosing the results of evaluations<br>*Using the results from evaluations to influence future decision making   | 0     |
|  | The organisation commits to <b>one</b> of the following:<br>*Engaging external stakeholders in evaluations<br>*Publicly disclosing the results of evaluations<br>*Using the results from evaluations to influence future decision making   | 1     |
|  | The organisation commits to <b>two</b> of the following:<br>*Engaging external stakeholders in evaluations<br>*Publicly disclosing the results of evaluations<br>*Using the results from evaluations to influence future decision making   | 2     |
|  | The organisation commits to <b>all</b> of the following:<br>*Engaging external stakeholders in evaluations<br>*Publicly disclosing the results of evaluations<br>*Using the results from evaluations to influence future decision making   | 3     |
| 4.3a Independence in evaluations                                     | The organisation makes no commitment to and does not have any procedures in place to ensure the independence of evaluations  | 0     |
|  | The organisation makes a general commitment to ensuring the independence of evaluations  | 1     |
|  | The organisation has an independent evaluation function that conducts periodic evaluations of organisational activities and policy   | 2     |
|  | The organisation has an independent evaluation function; the evaluation function and its staff are not under the control or influence of decision-makers who have responsibility for the activities being evaluated; The unit reports evaluation results to the head or deputy head of the organisation or its governing Board | 3     |

| Indicator  | Explanation  | Score |
|--|--|-------|
| 4.4a Level of evaluation                           | The organisation does not commit to conducting evaluations in relation to specific issues  | 0     |
|  | The organisation's framework for monitoring, evaluating, learning and reporting on performance requires evaluations take place at <b>one</b> of the following levels:<br>*Operational / field<br>*Policy / thematic<br>*Strategic  | 1     |
|  | The organisation's framework for monitoring, evaluating, learning and reporting on performance requires evaluations take place at <b>two</b> of the following levels:<br>*Operational / field<br>*Policy / thematic<br>*Strategic  | 2     |
|  | The organisation's framework for monitoring, evaluating, learning and reporting on performance requires evaluations take place at <b>all</b> of the following levels:<br>*Operational / field<br>*Policy / thematic<br>*Strategic  | 3     |
| 4.5a Stakeholder involvement in policy development | There was no consultation with stakeholders in the development of the organisation's approach to / policy on evaluation  | 0     |
|  | Some internal stakeholders were involved in the development of the organisation's approach to / policy on evaluation   | 1     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's approach to / policy on evaluation; and informal / ad hoc consultations were held with some external stakeholders   | 2     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's approach to / policy on evaluation; and a systematic consultation was also held with a representative sample of external stakeholders   | 3     |
| <i>Quality Management Systems</i>                  |  |       |
| 4.6a Roles, responsibilities and leadership        | There is (are) no named senior executive(s) in charge of overseeing evaluation practices and processes in the organisation   | 0     |
|  | There is (are) a named senior executive that is (are) responsible for overseeing evaluation practices and processes in the organisation, however this responsibility is not a formal part of his/her/their job description.  | 1     |
|  | There is (are) a named senior executive that is (are) responsible for overseeing evaluation practices and processes in the organisation, and this responsibility is a formal part of his/her/their job description; roles and responsibilities for ensuring evaluation however are not clearly mapped out at different levels of the organisation (national, regional, business unit etc.) | 2     |

| Indicator                       | Explanation  | Score |
|---------------------------------|--|-------|
|                                 | There is a named senior executive that is responsible for overseeing evaluation practices and processes in the organisation, and this responsibility is a formal part of his/her job description; roles and responsibilities for ensuring evaluation at other levels within the organisation are clearly mapped out (regional, national)                                       | 3     |
| 4.7a Building staff capacity    | The organisation provides no support to staff on monitoring and evaluation   | 0     |
|                                 | There are guidelines/toolkit to support staff in monitoring and evaluation, but no training (either in house or external) is provided to relevant staff on evaluation practice   | 1     |
|                                 | Training (either in house or external) is provided to relevant staff on evaluation practice; however no overview of the organisation's approach to evaluation is included in staff inductions  | 2     |
|                                 | Training (either in house or external) is provided to relevant staff on evaluation practice and an overview of the organisation's approach to evaluation is included in staff inductions   | 3     |
| 4.8a Rewards and incentives     | No system exists to reward and incentivise reflection and learning from evaluation among staff   | 0     |
|                                 | No formal system exists to reward and incentivise reflection and learning from evaluation among staff , but there is evidence of ad hoc practices to this effect   | 1     |
|                                 | A formal system exists to reward and incentivise reflection and learning from evaluation among staff (e.g. acting upon evaluation results), but staff do not have learning and evaluation related targets built into job descriptions  | 2     |
|                                 | A formal system exists to reward and incentivise reflection and learning from evaluation among staff (e.g. rewards for acting upon evaluation results); and staff have learning and evaluation related targets built into their job descriptions and are appraised against these annually  | 3     |
| 4.9a Quality management systems | The organisation has no system in place for monitoring and reviewing the quality of its evaluation practices   | 0     |
|                                 | The organisation has no formal system in place for monitoring and reviewing the quality if its evaluation practices, but there is evidence of monitoring among individual departments / units / sections   | 1     |
|                                 | The organisation has a formal system in place for monitoring and reviewing the quality of its evaluation practices; however this does not include a process for management to follow up on evaluation recommendations and oversee their implementation   | 2     |
|                                 | The organisation has a formal system in place for monitoring and reviewing the quality of its evaluation practices; this includes a systematic process for management to follow up on evaluation recommendations (e.g. action plan and/ or agreement clearly stating responsibilities) and oversee their implementation (e.g. periodic report on the status of implementation) | 3     |

| Indicator                                | Explanation   | Score |
|--|---|-------|
| 4.10a Disseminating learning and lessons | The organisation has neither mechanisms in place for sharing lessons and evaluation results internally nor does it share the results of evaluation with key external stakeholders   | 0     |
|  | The organisation only has mechanisms in place for sharing lessons and evaluation results internally, <b>or</b> evaluation results are shared with external stakeholders on an ad hoc basis  | 1     |
|  | The organisation has mechanisms in place for disseminating and sharing lessons and evaluation results internally <b>and</b> there is evidence that evaluation results are shared with external stakeholders on an ad hoc basis  | 2     |
|  | The organisation has a wide range of mechanisms in place for disseminating and sharing lessons and evaluation results internally; it also develops communications plans for making the results of key evaluations available to external stakeholders; these plans recognise the accessibility needs of different stakeholders and propose appropriate outreach strategies | 3     |

## 4b Social and environmental evaluation (TNCs)

### *Environmental Impact Policy Commitments*

|  |   |   |
|--|---|---|
| 4.1b Environmental Policy                            | The organisation makes no commitment to monitoring and minimising its impact on the environment   | 0 |
|  | The organisation makes a commitment to monitoring and minimising its impact on the environment in publicity material  | 1 |
|  | The organisation has an organisation wide policy on monitoring and minimising its impact on the environment   | 2 |
|  | The organisation has a publicly available organisation wide policy on monitoring and minimising its impact on the environment   | 3 |
| 4.2b Process commitments (transparency and feedback) | The organisation does not commit to publicly reporting on its environmental performance, engaging external stakeholders in the assessment of its environmental impact, or using the results of reviews to inform future decision making                             | 0 |
|  | The organisation commits to <b>one</b> of the following:<br>*Publicly reporting on its environmental performance<br>*Engaging external stakeholders in the assessment of its environmental impact<br>*Using the results of reviews to inform future decision making | 1 |
|  | The organisation commits to <b>two</b> of the following:<br>*Publicly reporting on its environmental performance<br>*Engaging external stakeholders in the assessment of its environmental impact<br>*Using the results of reviews to inform future decision making | 2 |
|  | The organisation commits to <b>all</b> of the following:<br>*Publicly reporting on its environmental performance<br>*Engaging external stakeholders in the assessment of its environmental impact<br>*Using the results of reviews to inform future decision making | 3 |

| Indicator  | Explanation  | Score |
|--|--|-------|
| 4.3b Environmental performance targets             | The organisation does not set any environmental performance targets  | 0     |
|  | The organisation sets performance targets in <b>at least three</b> of the following areas that are material to its activities:<br>*Material usage<br>*Energy usage<br>*Water usage (energy saved due to conservation and efficiency improvements)<br>*Emissions (initiatives to reduce greenhouse gas emissions and reductions achieved)<br>*Products and services (initiatives to mitigate environmental impacts of products and services)<br>*Transport<br>*Biodiversity | 1     |
|  | The organisation sets performance targets in <b>at least four</b> of the following areas that are material to its activities:<br>*Material usage<br>*Energy usage<br>*Water usage (energy saved due to conservation and efficiency improvements)<br>*Emissions (initiatives to reduce greenhouse gas emissions and reductions achieved)<br>*Products and services (initiatives to mitigate environmental impacts of products and services)<br>*Transport<br>*Biodiversity  | 2     |
|  | The organisation sets performance targets in <b>all</b> of the following issues that are material to its activities:<br>*Material usage<br>*Energy usage<br>*Water usage (energy saved due to conservation and efficiency improvements)<br>*Emissions (initiatives to reduce greenhouse gas emissions and reductions achieved)<br>*Products and services (initiatives to mitigate environmental impacts of products and services)<br>*Transport<br>*Biodiversity           | 3     |
| 4.4b Stakeholder involvement in policy development | There was no consultation with stakeholders in the development of the organisation's approach to / policy on monitoring and minimising its impact on the environment   | 0     |
|  | Some internal stakeholders were involved in the development of the organisation's approach to / policy on monitoring and minimising its impact on the environment  | 1     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's approach to / policy on monitoring and minimising its impact on the environment and informal / ad hoc consultations were held with some external stakeholders   | 2     |

| Indicator   | Explanation   | Score |
|---|---|-------|
|   | A wide range of internal stakeholders were involved in the development of the organisation's approach to / policy on monitoring and minimising its impact on the environment; and a systematic consultation was also held with a representative sample of external stakeholders   | 3     |
| <i>Environmental Quality and Management Systems</i> |   |       |
| 4.5b Roles, responsibilities and leadership         | There is (are) no named senior executive(s) in charge of overseeing the monitoring and assessment of the organisation's environmental impact  | 0     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing the monitoring and assessment of the organisation's environmental impact, however this responsibility is not a formal part of his/her/their job description.  | 1     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing the monitoring and assessment of the organisation's environmental impact, and this responsibility is a formal part of his/her/their job description; there is however a lack of clarity around roles and responsibilities for monitoring and assessing environmental impact at other levels with the organisation (regional, national, business unit) | 2     |
|   | There is a named senior executive(s) that is (are) responsible for overseeing the monitoring and assessment of the organisation's environmental impact, and this responsibility is a formal part of his/her/their job description; roles and responsibilities for monitoring and assessing environmental impact at other levels within the organisation are clearly mapped out (regional, national, business unit)                        | 3     |
| 4.6b Building staff capacity                        | The organisation provides no support to staff on monitoring and minimising environmental impact   | 0     |
|   | On the job support is provided to relevant staff on monitoring and minimising environmental impact, but no formal training (either in house or external) is provided on good practice   | 1     |
|   | Training (either in house or external) is provided to relevant staff on good practice in assessing and minimising environmental impact; however no overview of the organisation's commitment and approach to monitoring and minimising environmental impact is included in staff inductions   | 2     |
|   | Training (either in house or external) is provided to relevant staff on good practice in assessing and minimising environmental impact; and an overview of the organisation's commitment and approach to monitoring and minimising environmental impact is included in staff inductions   | 3     |
| 4.7b Quality management systems                     | The organisation has no system in place for monitoring and reviewing its impact on the environment  | 0     |
|   | The organisation has no formal system in place for monitoring and reviewing its environmental impact, but there is evidence of ad hoc monitoring among individual departments / units   | 1     |
|   | The organisation has a formal system in place for monitoring and reviewing its environmental impact; this includes regular external reporting of performance on key environmental performance indicators; the accuracy and reliability of this information is only assured through internal systems   | 2     |

| Indicator  | Explanation  | Score |
|--|--|-------|
|  | The organisation has a formal system in place for monitoring, reviewing and reporting on its environmental impact; this includes regular external reporting of performance against key environmental performance indicators; the accuracy and reliability of the information is assured through both internal and external systems | 3     |
| 4.8b Rewards and incentives  | No formal system exists to reward and incentivise staff to monitor and reduce the organisation's impact on the environment   | 0     |
|  | No formal system exists to reward and incentivise staff to monitor and reduce the organisation's impact on the environment, but there is evidence of ad hoc practices to this effect   | 1     |
|  | A formal system exists to reward and incentivise relevant staff to monitor and reduce the organisation's impact on the environment , but related targets are not built into their job descriptions   | 2     |
|  | A formal system exists to reward and incentivise relevant staff to monitor and reduce the organisation's impact on the environment; related targets are not built into their job descriptions and they are appraised against these   | 3     |
| 4.9b Disseminating learning and lessons                                      | The organisation has no mechanisms in place for sharing lessons on monitoring and assessing environmental impact   | 0     |
|  | The organisation has a limited set of mechanisms in place for sharing lessons on monitoring and assessing its environmental performance internally   | 1     |
|  | The organisation has a wide range of mechanisms in place for disseminating and sharing lessons on monitoring and assessing its environmental performance internally and there is ad hoc evidence that lessons are also being shared externally as well   | 2     |
|  | The organisation has a wide range of mechanisms in place for disseminating and sharing lessons on monitoring and assessing its environmental performance both internally and externally  | 3     |
| <i>Social Impact Policy Commitments</i>                                      |  |       |
| 4.10b The organisation has a specific policy that guides evaluation practice | The organisation makes no commitment to monitoring, assessing and reporting on its social impact   | 0     |
|  | The organisation makes a general commitment to monitoring, assessing and reporting on its social impact in core organisational documents (values, code of conduct etc.)  | 1     |
|  | The organisation has an organisation wide policy(ies) which guides its approach to monitoring, assessing and reporting on its social impact  | 2     |
|  | The organisation has a publicly available organisation wide policy(ies) which guides its approach to monitoring, assessing and reporting on its social impact  | 3     |

| Indicator                                     | Explanation   | Score |
|---|---|-------|
| 4.11b Stakeholder engagement and transparency | The organisation does not commit to publicly reporting on its social performance, engaging external stakeholders in the assessment of its social impact, or using the results of reviews to inform future decision making   | 0     |
|   | The organisation commits to <b>one</b> of the following:<br>*Publicly reporting on its social performance<br>*Engaging external stakeholders in the assessment of its social impact<br>*Using the results of reviews to inform future decision making   | 1     |
|   | The organisation commits to <b>two</b> of the following:<br>*Publicly reporting on its social performance<br>*Engaging external stakeholders in the assessment of its social impact<br>*Using the results of reviews to inform future decision making   | 2     |
|   | The organisation commits to <b>all</b> of the following:<br>*Publicly reporting on its social performance<br>*Engaging external stakeholders in the assessment of its social impact<br>*Using the results of reviews to inform future decision making   | 3     |
|   |   |       |
| 4.12b Social performance targets              | The organisation does not set performance targets on its social impact  | 0     |
|   | The organisation sets performance targets in <b>one</b> of the following areas that are material:<br>*Human rights (includes: investment & procurement practices, freedom of associations & collective bargaining, child labour, security practices, indigenous rights)<br>*Corruption<br>*Influencing public policy<br>*Community impact | 1     |
|   | The organisation sets performance targets in <b>two</b> of the following areas that are material:<br>*Human rights (includes: investment & procurement practices, freedom of associations & collective bargaining, child labour, security practices, indigenous rights)<br>*Corruption<br>*Influencing public policy<br>*Community impact | 2     |
|   | The organisation sets performance targets in <b>all</b> of the following areas that are material:<br>*Human rights (includes: investment & procurement practices, freedom of associations & collective bargaining, child labour, security practices, indigenous rights)<br>*Corruption<br>*Influencing public policy<br>*Community impact | 3     |
|   |   |       |

| Indicator   | Explanation  | Score |
|---|--|-------|
| 4.13b Stakeholder involvement in policy development | There was no consultation with stakeholders in the development of the organisation's approach to monitoring and assessing its social impact  | 0     |
|   | Some internal stakeholders were involved in the development of the organisation's approach to monitoring and assessing its social impact   | 1     |
|   | A wide range of internal stakeholders were involved in the development of the organisation's approach to monitoring and assessing its social impact; and informal / ad hoc consultations were held with some external stakeholders   | 2     |
|   | A wide range of internal stakeholders were involved in the development of the organisation's approach to monitoring and assessing its social impact; and a systematic consultation was also held with a representative sample of external stakeholders   | 3     |
| <i>Social Impact Quality and Management Systems</i> |  |       |
| 4.14b Roles, responsibilities and leadership        | There is (are) no named senior executive(s) in charge of overseeing the monitoring and assessment of the organisation's social impact  | 0     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing the monitoring and assessment of all aspects of the organisation's social impact, however this responsibility is not a formal part of his/her/their job description  | 1     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing the monitoring and assessment of all aspects of the organisation's social impact, and this responsibility is a formal part of his/her/their job description; there is however a lack of clarity around roles and responsibilities for monitoring and assessing social impact at other levels with the organisation (regional, national, business unit) | 2     |
|   | There is a named senior executive(s) that is (are) responsible for overseeing the monitoring and assessment of all aspects of the organisation's social impact, and this responsibility is a formal part of his/her/their job description; roles and responsibilities for monitoring and assessing social impact at other levels within the organisation are clearly mapped out (regional, national, business unit)                        | 3     |
| 4.15b Building staff capacity                       | The organisation provides no support to staff on monitoring and assessing social impact  | 0     |
|   | On the job support is provided to relevant staff on monitoring and assessing social impact, but no formal training (either in house or external) is provided on good practice  | 1     |
|   | Training (either in house or external) is provided to relevant staff on good practice in monitoring and assessing social impact; however no overview of the organisation's commitment and approach to monitoring social impact is included in staff inductions   | 2     |
|   | Training (either in house or external) is provided to relevant staff on good practice in monitoring and assessing social impact; and an overview of the organisation's commitment and approach to monitoring social impact is included in staff inductions   | 3     |

| Indicator                                | Explanation  | Score |
|--|--|-------|
| 4.16b Rewards and incentives             | No formal system exists to reward and incentivise staff to monitor and assess the organisation's social impact   | 0     |
|  | No formal system exists to reward and incentivise staff to monitor and assess the organisation's social impact, but there is evidence of ad hoc practices to this effect   | 1     |
|  | A formal system exists to reward and incentivise relevant staff to monitor and assess the organisation's social impact, but related targets are not built into their job descriptions  | 2     |
|  | A formal system exists to reward and incentivise relevant staff to monitor and assess the organisation's social impact; related targets are built into their job descriptions and they are appraised against these   | 3     |
| 4.17b Quality management systems         | The organisation has no system in place for monitoring and assessing its social impact   | 0     |
|  | The organisation has no formal system in place for monitoring and assessing its social impact, but there is evidence of monitoring among individual departments / units / sections   | 1     |
|  | The organisation has a formal system in place for monitoring and assessing its social impact; this includes regular external reporting of performance on key social performance indicators; the accuracy and reliability of this information however, is only assured through internal systems         | 2     |
|  | The organisation has a formal system in place for monitoring and assessing its social impact; this includes regular external reporting of performance against key social performance indicators; the accuracy and reliability of the information is assured through both internal and external systems | 3     |
| 4.18b Disseminating learning and lessons | The organisation has no mechanisms in place for sharing lessons on monitoring and assessing social impact  | 0     |
|  | The organisation has a limited set of mechanisms in place for sharing lessons on monitoring and assessing its social impact internally   | 1     |
|  | The organisation has a wide range of mechanisms in place for disseminating and sharing lessons on monitoring and assessing its social impact internally and there is ad hoc evidence that lessons are also being shared externally as well   | 2     |
|  | The organisation has a wide range of mechanisms in place for disseminating and sharing lessons on monitoring and assessing its social impact both internally and externally  | 3     |

| Indicator                                    | Explanation  | Score |
|--|--|-------|
| <b>5a Complaints and Response - External</b> |  |       |
| <i>Policy Indicators</i>                     |  |       |
| 5.1a External complaints policy              | The organisation make no commitment to respond to complaints from external stakeholders  | 0     |
|  | The organisation makes a commitment to respond to complaints from external stakeholders  | 1     |
|  | The organisation has specific policy(ies) on receiving and handling complaints from <b>one</b> external stakeholder group  | 2     |
|  | The organisation has a policy(ies) on receiving and handling complaints from <b>both</b> external stakeholder groups   | 3     |
| 5.2a Process (channels and procedure)        | The organisation has no policy or procedures on handling complaints from external stakeholders   | 0     |
|  | The organisation provides a single channel (e.g. email address or tel. number) for complaints from external stakeholders to be made; it provides no description of the process for investigating and responding to complaints  | 1     |
|  | The organisation offers multiple channels for external stakeholders to make complaints and provides a basic description of the complaints process  | 2     |
|  | The organisation offers external stakeholders with multiple channels for making a complaint; provides a clear description of the stages for handling, investigating and responding to complaints, including timeframes   | 3     |
| 5.3a Independence of investigation           | The organisation makes no commitment to ensure that those handling complaints are independent of the subject of the complaint  | 0     |
|  | The organisation commits to ensure those handling complaints are independent of the subject complaint  | 1     |
|  | The organisation commits to ensure those handling and investigating complaints are independent of the subject of the complaint   | 2     |
|  | The organisation commits to ensure those handling and investigating complaints are independent of the subject of the complaint; there is a mechanisms in place for a complainant to appeal a decision and escalate a complaint <b>or</b> , if the complaints mechanism is functionally independent, the independent complaints mechanism reports directly to the board | 3     |
| 5.4a Protection of external stakeholders     | The organisation makes no commitment to protecting external stakeholders that make complaints  | 0     |
|  | The organisation makes a commitment to <b>one</b> of the following:<br>*ensuring the confidentiality of the complainant and identifying clear exception rules for a confidentiality breach<br>*guaranteeing non-retaliation towards complainants<br>*sanctioning those that retaliate against complainants   | 1     |

| Indicator  | Explanation   | Score |
|--|---|-------|
|  | The organisation makes a commitment to <b>two</b> of the following:<br>*ensuring the confidentiality of the complainant and identifying clear exception rules for a confidentiality breach<br>*guaranteeing non-retaliation towards complainants<br>*sanctioning those that retaliate against complainants  | 2     |
|  | The organisation makes a commitment to <b>all</b> of the following:<br>*ensuring the confidentiality of the complainant and identifying clear exception rules for a confidentiality breach<br>*guaranteeing non-retaliation towards complainants<br>*sanctioning those that retaliate against complainants  | 3     |
| 5.5a Stakeholder involvement in policy development | There was limited or no consultation with stakeholders in the develop of the organisation's policy / approach to handling external complaints   | 0     |
|  | Some internal stakeholders were involved in the development of the organisation's policy / approach to handling external complaints   | 1     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's policy / approach to handling external complaints and informal / ad hoc consultations were held with some external stakeholders  | 2     |
|  | A wide range of internal stakeholders were involved in the development of the organisation's policy / approach to handling external complaints and a systematic consultation was also held with a representative sample of external stakeholders  | 3     |
| <i>Quality Management Systems</i>                  |   |       |
| 5.6a Roles, responsibilities and leadership        | There is (are) no named senior executive(s) responsible for overseeing the handling of complaints from external stakeholders  | 0     |
|  | There is (are) a named senior executive(s) that is (are) responsible for overseeing the handling of complaints from external stakeholders, however this responsibility is not a formal part of his/her/their job description.   | 1     |
|  | There is (are) a named senior executive(s) that is (are) responsible for overseeing the handling of complaints from external stakeholders, and this responsibility is a formal part of his/her/their job description; roles and responsibilities for responding to complaints however are not clearly mapped out at different levels of the organisation (national, regional, business unit etc.) | 2     |
|  | There is (are) a named senior executive(s) that is (are) responsible for overseeing the handling of complaints from external stakeholders, and this responsibility is a formal part of his/her (their) job description; roles and responsibilities for responding to complaints are clearly mapped out at different levels of the organisation (national, regional, business unit etc.)           | 3     |

| Indicator                         | Explanation  | Score |
|-----------------------------------|--|-------|
| 5.7a Building staff capacity      | The organisation provides no support to staff in how to handle complaints from external stakeholders   | 0     |
|                                   | There are guidelines/toolkit to support staff in handling complaints from external stakeholders, but no training (either in house or external) is provided to relevant staff   | 1     |
|                                   | Training (either in house or external) is provided to relevant staff on handling complaints from external stakeholders; however no overview of the organisations commitment to receiving and handling complaints from external stakeholders is included in staff inductions.   | 2     |
|                                   | Training (either in house or external) is provided to relevant staff on handling complaints from external stakeholders; and an overview of the organisation's commitments to receiving and handling complaints from external stakeholders is included in staff inductions  | 3     |
| 5.8a Dissemination of commitments | The organisation's complaints and response policy/process is not mentioned on the website and/or public reports  | 0     |
|                                   | The organisation's complaints and response policy/process is made publicly available through the website, but there is no dissemination plan for making it widely available to key stakeholders  | 1     |
|                                   | The organisation's complaints and response policy/process is made publicly available through the website, and a basic dissemination plan is in place (one-size-fits-all, no contextualisation, no provision for local languages)   | 2     |
|                                   | The organisation's complaints and response policy/process is made publicly available through the website, and there is a dissemination plan that recognises the accessibility needs of key stakeholders and proposes an outreach strategy that addresses these (e.g.. translation into appropriate languages); furthermore, this policy expresses a commitment for overcoming access barriers and discrimination | 3     |
| 5.9a Quality Management Systems   | The organisation has no organisation wide system in place for monitoring and reviewing implementation of complaints and response policies  | 0     |
|                                   | The organisation has no formal organisation wide system in place for monitoring, reviewing and learning from complaints from external stakeholders, but there is evidence of monitoring among individual departments / units / sections  | 1     |
|                                   | The organisation has a formal organisation wide system in place for monitoring, reviewing and learning from complaints from external stakeholders; performance reports are produced periodically for internal dissemination  | 2     |
|                                   | The organisation has a formal organisation wide system in place for monitoring, reviewing and learning from complaints from external stakeholders; performance reports are produced periodically for internal and external dissemination (these report on the number of complaints received, resolved and rejected, lessons learnt)  | 3     |

| Indicator                                    | Explanation  | Score |
|--|--|-------|
| <b>5b Complaints and Response - Internal</b> |  |       |
| Indicator                                    | Explanation  | Score |
| <i>Policy Indicators</i>                     |  |       |
| 5.1b Whistle-blower Policy                   | The organisation make no commitment to respond to complaints from internal stakeholders or provide appropriate protections   | 0     |
|  | The organisation makes a commitment to respond to complaints from internal stakeholders and provide appropriate protections  | 1     |
|  | The organisation has specific policy(ies) on receiving and handling complaints from internal stakeholders (whistle-blower policy)  | 2     |
|  | The organisation has a policy(ies) on receiving and handling complaints from internal stakeholders (whistle-blower policy); this applies to all types of staff (fulltime, part-time, volunteers, interns) and all types of contractors | 3     |
| 5.2b Process (channels and procedure)        | The organisation has no policy or procedures on handling complaints from internal stakeholders   | 0     |
|  | The organisation provides a single channel (e.g. email address or tel. number) for complaints from internal stakeholders to be made; it provides no description of the process for investigating and responding to complaints          | 1     |
|  | The organisation offers multiple channels for internal stakeholders to make complaints and provides a basic description of the complaints process  | 2     |
|  | The organisation offers internal stakeholders with multiple channels for making a complaint; provides a clear description of the stages for handling, investigating and responding to complaints, including timeframes                 | 3     |
| 5.3b Independence of investigation           | The organisation makes no commitment to ensuring that those handling complaints are independent of the subject of the complaint  | 0     |
|  | The organisation commits to ensuring those handling complaints are independent of the subject complaint  | 1     |
|  | The organisation commits to ensuring those handling and investigating complaints are independent of the subject of the complaint   | 2     |
|  | The organisation commits to ensuring those handling and investigating complaints are independent of the subject of the complaint; there is a mechanism in place for a complainant to appeal a decision and escalate a complaint        | 3     |

| Indicator                                   | Explanation   | Score |
|---|---|-------|
| 5.4b Protection of whistle-blowers          | The organisation makes no commitments to protecting external stakeholders that make a complaint   | 0     |
|   | The organisation makes a commitment to <b>one</b> of the following:<br>*ensuring the confidentiality of the complainant and identifying clear exception rules for a confidentiality breach<br>*guaranteeing non-retaliation towards complainants<br>*sanctioning those that retaliate against complainants  | 1     |
|   | The organisation makes a commitment to <b>two</b> of the following:<br>*ensuring the confidentiality of the complainant and identifying clear exception rules for a confidentiality breach<br>*guaranteeing non-retaliation towards complainants<br>*sanctioning those that retaliate against complainants  | 2     |
|   | The organisation makes a commitment to <b>all</b> of the following:<br>*ensuring the confidentiality of the complainant and identifying clear exception rules for a confidentiality breach<br>*guaranteeing non-retaliation towards complainants<br>*sanctioning those that retaliate against complainants  | 3     |
|   | <i>Quality Management Systems</i>   |       |
| 5.5b Roles, responsibilities and leadership | There is (are) no named senior executive(s) in charge of overseeing compliance with the policy on handling complaints from internal stakeholders  | 0     |
|   | There is (are) a named senior executive(s) that is (are) responsible for overseeing compliance with the policy on handling complaints from internal stakeholders, however this responsibility is not a formal part of his/her (their) job description.  | 1     |
|   | There is (are) a named senior executive(s) that is responsible for overseeing compliance with the policy on handling complaints from internal stakeholders, and this responsibility is a formal part of his/her (their) job description; roles and responsibilities for responding to internal complaints however are not clearly mapped out at different levels of the organisation (national, regional, business unit etc.) | 2     |
|   | There is (are) a named senior executive(s) that is responsible for overseeing compliance with the policy on handling complaints from internal stakeholders, and this responsibility is a formal part of his/her (their) job description; roles and responsibilities for responding to internal complaints are clearly mapped out at different levels of the organisation (national, regional, business unit etc.)             | 3     |
| 5.6b Building staff capacity                | The organisation provides no support to staff in relation to handling complaints from internal stakeholders   | 0     |
|   | There are guidelines/toolkit to guide staff in handling complaints from internal stakeholders, but no training (either in house or external) is provided to relevant staff  | 1     |
|   | Training (either in house or external) is provided to relevant staff on handling complaints from internal stakeholders; however no overview of the protections offered to internal stakeholders is included in staff inductions.  | 2     |

| Indicator                         | Explanation   | Score |
|-----------------------------------|---|-------|
|                                   | Training (either in house or external) is provided to relevant staff on handling complaints from internal stakeholders; and an overview of the protections offered to internal stakeholders is provided in the staff inductions   | 3     |
| 5.7b Dissemination of commitments | The organisation's policy(ies) on receiving and handling complaints from internal stakeholders is not disseminated among staff  | 0     |
|                                   | The organisation's policy on receiving and handling complaints from internal stakeholders is only disseminated among staff through one or two mediums (e.g. staff handbook, brochures, intranet)  | 1     |
|                                   | The organisation's whistle-blower policy is published internally through a number of different channels and published on website and public reports   | 2     |
|                                   | The organisation's whistle-blower policy is published internally through different channels: intranet, brochures, staff handbook; the policy is published on the website and public reports and the whistle-blower policy is translated into different local staff languages.                                 | 3     |
| 5.8b Quality Management Systems   | The organisation has no organisation wide system in place for monitoring and reviewing implementation of its internal complaints procedures   | 0     |
|                                   | The organisation has no formal organisation wide system in place for monitoring and reviewing the implementation of its internal complaints procedures, but there is evidence of monitoring among individual departments / units / sections   | 1     |
|                                   | The organisation has a formal organisation wide system in place for monitoring and reviewing the implementation of its internal complaints procedures; performance reports are produced periodically for internal dissemination   | 2     |
|                                   | The organisation has a formal organisation wide system in place for monitoring and reviewing the implementation of its internal complaints procedures; performance reports are produced periodically for internal and external dissemination (these report on the number of complaints received and resolved) | 3     |