

# **SUPPORT SUPERVISION GUIDE** for orphans and other vulnerable children (OVC) service delivery



MINISTRY OF GENDER LABOUR AND SOCIAL DEVELOPMENT

Financial support for this publication was provided by the President's Emergency Plan for AIDS Relief through the United States Agency for International Development (USAID) under Cooperative Agreement 617-A-00-05-00002-00 supporting the CORE Initiative Uganda Project.



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CORE Initiative Uganda is implemented by CARE International in Uganda, the International HIV/AIDS Alliance, the International Center for Research on Women, and the Johns Hopkins Bloomberg School of Public Health Center for Communication Programs in support of the Government of Uganda's Ministry of Gender, Labour, and Social Development.

## FOREWORD

The development of this orphans and other vulnerable children (OVC) support supervision guide is a key step in complementing the ongoing efforts aimed at ensuring delivery of comprehensive quality services to orphans and other vulnerable children in Uganda.

This guide aims to facilitate provision of technical support and quality assurance for OVC services and interventions by different stake holders. My ministry, which is responsible for managing the national response, will use this tool to supervise Technical Services Originations (TSOs), local governments and stakeholders. The higher local government, particularly the Community Based Service Departments (CBSDs), will use this tool to provide support supervision to lower local government and the community level OVC service providers.

Government shall utilize the guide to enhance its role of technical backstopping to all players offering OVC services. The recommended integrated support supervision approach will allow utilization of multi-disciplinary teams to ensure delivery of quality services.

I extend my sincere appreciation to all our partners in and outside Uganda who contributed in the successful development of this guide. We are indebted to members of the Technical Working Group members, USAID, International HIV/AIDS Alliance, CARE International in Uganda, government sectors, Local Governments, Civil Society Organizations (CSOs) and public sector organizations.

I urge Programme implementers to utilize this guide and support delivery of comprehensive quality services for all orphans and other vulnerable children in Uganda.

“HOPE NEVER RUNS DRY!”



Christine Guwatudde Kintu

**Permanent Secretary, Ministry of Gender, labour and social Development**

## **ACRONYMS AND ABBREVIATIONS**

CBOs	Community-based Organisations
CBSD	Community Based Services Department
CDO	Community Development Office
CPA	Core Programme Area
CSOs	Civil society organisations
IEC	Information, education and communication
M&E	Monitoring and evaluation
MGLSD	Ministry of Gender Labour and Social Services
NGO	Non-government organisation
NOP	National Orphans and other Vulnerable Children Policies
NSPPI	National Strategic Programme Plan of Implementation
OVC	Orphans and other vulnerable children
PDC	Parish Development Committee
SS	Support supervision
TSOs	Technical services organisations

## TABLE OF CONTENTS

FOREWORD.....	ii
TABLE OF CONTENTS .....	iii
ACRONYMS AND ABBREVIATIONS .....	iv
1 ORIENTATION TO THE NATIONAL OVC SUPPORT SUPERVISION GUIDE .....	1
1.1 Background .....	1
1.2 Purpose .....	2
1.3 Who will use the guide? .....	2
1.4 Key related documents .....	2
2 UNDERSTANDING SUPPORT SUPERVISION .....	3
2.1 Definition .....	3
2.2 Objectives .....	3
2.3 What do we expect to achieve from using this guide? .....	3
2.4 Guiding principles for support supervision .....	3
2.5 The support supervision process .....	3
2.6 Types of support supervision .....	5
2.6.1 Integrated support supervision .....	5
2.6.2 Technical support supervision .....	5
2.6.3 Emergency support supervision .....	6
3 IMPLEMENTATION FRAMEWORK FOR SUPPORT SUPERVISION.....	7
3.1 OVC support supervision levels .....	7
3.1.1 Centre/national (MGLSD) to District/Municipality .....	7
3.1.2 District/Municipality to Sub-County .....	7
3.1.3 Sub-County to community structures .....	7
3.2 Support supervision teams.....	8
3.3 Support supervision operational structure.....	9
3.4 Frequency of support supervision .....	9
3.5 Essential technical areas for support supervision .....	11
3.6 Technical and emergency support supervision .....	11
3.6.1 Centre/national (MGLSD) to technical services organisations .....	12
3.6.2 Technical services organisations to District/municipalities .....	13
3.6.3 District to Sub-County.....	15
3.6.4 Sub-counties to community .....	18
4 PLANNING FOR SUPPORT SUPERVISION.....	20
5 PROCESS FOR CONDUCTING SUPPORT SUPERVISION .....	21
5.1 Support supervision schedule .....	21
5.2 Conducting field visits .....	21
5.3 Feedback and reaching consensus .....	21
5.4 Follow up.....	22
5.5 Monitoring and evaluating support supervision .....	22
APPENDIX 1: CHECKLIST FOR SS FROM MGLSD TO DISTRICTS/MUNICIPALITIES ...	23
APPENDIX 2: CHECKLIST FOR SS FROM DISTRICT/MUNICIPALITY TO SUB- COUNTY/DIVISIONS.....	29
APPENDIX 3: CHECKLIST FOR SS FROM SUB-COUNTIES TO COMMUNITY STRUCTURES .....	35
APPENDIX 4: SUPPORT SUPERVISION REPORTING FORMAT .....	39
APPENDIX 5: OUTLINE OF THE NSPPI OBJECTIVES, PRINCIPLES AND STRATEGIES .....	40
APPENDIX 6: CHECKLIST FOR ASSESSING VULNERABILITY .....	41
APPENDIX 7: THE OVC QUALITY STANDARDS .....	42

## 1 ORIENTATION TO THE NATIONAL OVC SUPPORT SUPERVISION GUIDE

### 1.1 Background

The Ministry of Gender, Labour and Social Development (MGLSD), is mandated to protect and promote child rights. The National Orphans and Other Vulnerable Children Policy (NOP) and National Strategic Programme Plan of Interventions (NSPPI) specify the role of MGLSD in managing the national OVC response. The policy and strategic plan recommend a multi-sectoral, co-ordinated approach to OVC programme management. The NSPPI defines mechanisms for programme planning, co-ordination, monitoring and evaluation focused on partnership in delivery of quality comprehensive services. Implementation of the ten Core Programme Areas (CPAs)<sup>1</sup> as defined in the NSPPI requires the involvement of multiple and multi disciplinary partners. This multi-sectoral approach calls for a well co-ordinated technical support and supervisory effort that guarantees adherence to OVC quality standards.



The support supervision (SS) system will be based on the defined institutional mandate and the decentralisation service delivery framework. MGLSD will lead the national response providing the overall policy direction and technical support (including support supervision) to OVC programmes as defined in the NSPPI. MGLSD will oversee the following areas: OVC national programming, technical support, quality assurance and backstopping, and co-ordination and monitoring. The top levels within local government will carry out programme planning, co-ordination, provide technical back stopping to lower levels, monitor and assess programme implementation. Lower levels of local government and partners will largely be responsible for implementing the different intervention activities.

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<sup>1</sup> The ten CPAs are: socio-economic security; food and nutrition security; care and support; conflict management; education; health; psycho-social support; child protection; legal advice and representation; and capacity enhancement.

## **1.2 Purpose**

This Support Supervision Guide has been developed to direct provision of technical support and quality assurance in OVC service delivery by different stakeholders. The guide will enhance technical management of the national OVC programme and ensure delivery of well planned and co-ordinated comprehensive quality services.

## **1.3 Who will use the guide?**

The guide is a tool for supervisors and providers of technical support to OVC programme implementers at different levels. Users of this guide should be knowledgeable in key OVC programming principles, practices and quality standards, and the technical areas to be supervised.

## **1.4 Key related documents**

When using this guide reference should be made to operational and technical provisions in national OVC policies and other OVC service delivery documents, including the NOP, NSPPI, national quality standards and quality assessment tool kits.

## **2 UNDERSTANDING SUPPORT SUPERVISION**

### **2.1 Definition**

Support supervision is a process of guiding, helping, teaching, coaching, and mentoring employees or programme implementers at their place(s) of work to improve their work performance using joint problem solving methods with emphasis on a two-way communication between a supervisor/person with superior competence and the supervisee/programme implementer.

### **2.2 Objectives**

#### **Overall**

Enhance on-the-job technical support for improved delivery of quality services for orphans and other vulnerable children.

#### **Specific objectives**

- To ensure adherence to methods and proven practices for OVC programming
- To improve technical capacity of the OVC programme implementers
- To jointly identify/assess issues affecting quality in programme implementation
- To devise means/measures for improved work processes for timely delivery of quality services
- To communicate current OVC quality programming and service delivery issues
- To promote accountability and service delivery values
- To consolidate and review decisions taken during previous support supervision

### **2.3 What do we expect to achieve from using this guide?**

- Enhanced technical backstopping for the OVC quality service delivery
- Improved communication and feedback on service provision from supervisor, supervisee, and service recipient clients
- Improved team work, joint action and consensus among programme implementation and management teams
- Identification and rewarding of successful practices, recognition of results achieved

### **2.4 Guiding principles for support supervision**

Successful support supervision shall adhere to the following basic principles:

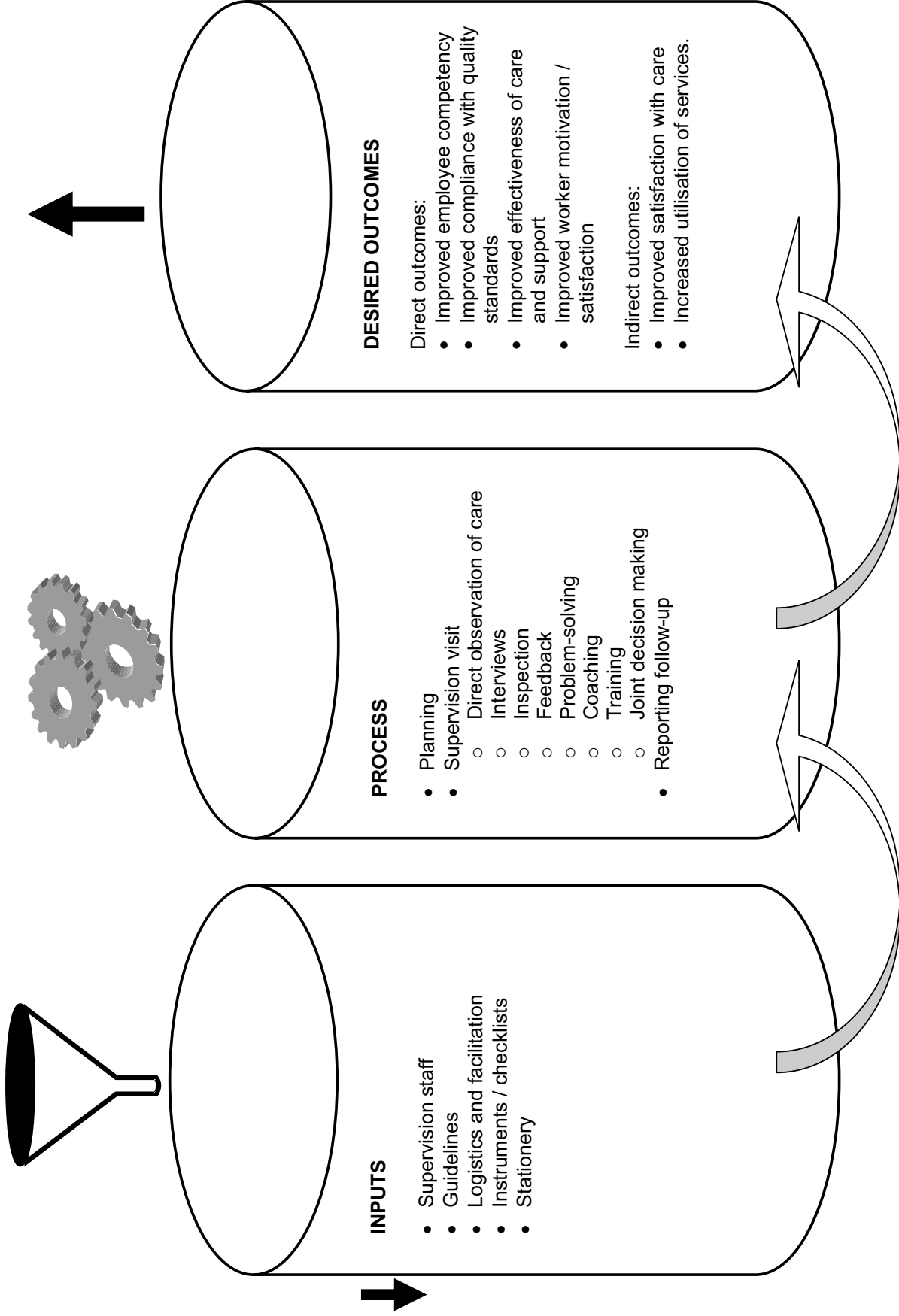
- Professional conduct for both the supervisor and supervisee to gain from the experience
- Mutual agreement and acceptance of outcome; jointly generated solutions
- Commitment of both the supervisor and supervisee to making the exercise worthwhile, positive, honest, objective, and unbiased
- Consideration to policy, technical, and quality requirements of the programme at individual, organisation and programme level
- Promotion of equity and trust.

### **2.5 The support supervision process**

Effective support supervision involves three key elements: inputs, relevant processes, and desired outcomes. As illustrated in the diagram overleaf, inputs support and facilitate process activities (e.g. planning, budgeting, preparation, actual visit, reporting, follow-up). Actions taken during the process should result in measurable tangible outcomes. An example of this could be improved programme implementation, compliance with standards, improved staff motivation and team work, increased communication and improved and effective service delivery.



Summary of the support supervision process



## 2.6 Types of support supervision

There are many types of support supervision. In this guide the following classification has been identified as simple to understand, practical, and relevant to OVC programme activities:

- **Integrated** support supervision
- **Technical** support supervision
- **Emergency** support supervision

### 2.6.1 Integrated support supervision

Integrated SS covers a comprehensive range of programme areas and is the recommended method of SS for OVC programmes. Although not all services can be supervised at one time, the intention is that every area will be supervised during the course of the year. Integrated SS requires a multi-disciplinary team using an integrated checklist. Teams can be changed from time to time in order to spread the different skills among the different technical service providers.



Integrated SS allows sharing of scarce resources (e.g. human resources, vehicles, etc.) and for support supervision of a wide range of services at the same time. In addition, it offers an opportunity to supervisors or persons with superior competence to have a broad awareness of different programmes, and to share information. It facilitates priority-setting and makes support supervision easier.

In all cases, the support supervision team should find out what is happening and establish processes that are going well. They should carry out in-depth analysis and identify specific issues. Integrated support supervision is relevant when support is required for the whole programme cycle, including the preliminary and administrative programme activities that may not be technical.

### 2.6.2 Technical support supervision

Technical SS provides assistance in specific management or OVC technical areas. It is required when a previous visit has identified a need, problem or gap.

Technical SS should be planned for. However, it may also be in response to a request by a SS team or by the supervisees/programme implementers. Technical SS has the advantage of allowing specialists to work together with the supervisees or activity performers and the integrated SS teams to address particular technical or specialised services. Technical support supervision is mainly focused on service delivery, e.g. assisting the service providers in their specialised areas of OVC service. It is sometimes carried out when the time or resources are insufficient for integrated SS.

Objectives of the technical SS will be to assess, support and empower non-governmental organisations (NGOs), parish development committees (PDCs), faith-based organisations (FBOs), community-based organisations (CBOs), communities and households in:

- Participating in the District OVC mapping exercises

- Planning and programming for OVC (i.e. compliance to NSPPI and OVC quality standards)
- Participating in the District and Sub-County co-ordination mechanism
- Advocating and mobilising communities in support of OVC
- Building capacity to implement planned OVC activities
- Managing OVC data
- Assessing and providing quality OVC services
- Ensuring services reach the most vulnerable (see Appendix 6)

### **2.6.3 Emergency support supervision**

Emergency SS provides support to a specific emergency problem such as a strike, an epidemic outbreak, or a disaster situation. The planning, objectives, methods, and outcomes of emergency SS are all contingent on the nature of the emergency, available resources, and expected outcome of the supervision. It can be integrated, technical or any other form.

### **3 IMPLEMENTATION FRAMEWORK FOR SUPPORT SUPERVISION**

#### **3.1 OVC support supervision levels**

The main levels of support supervision are as follows:

- Centre/national (MGSLD) to TSOs<sup>2</sup> and from TSOs to District/municipalities
- District (CBSDs, local government) to Sub-County (lower levels of local government)
- Sub-counties to community structures (PDCs, schools, health centres, NGOs, CBOs, households, FBOs and police).

##### **3.1.1 Centre/national (MGLSD) to District/Municipality**

MGLSD leads the national OVC response. The Ministry provides the overall direction and guidance on OVC programming and service delivery. The Ministry - through the National Implementing Unit and Technical Department - is responsible for policy decisions, technical support, setting standards, guidelines, supervision, quality assurance, monitoring and evaluation. The Ministry - through an existing arrangement - supervises top levels of local governments through TSOs. MGLSD support supervision areas include: OVC situation analysis and assessment, capacity building in tools/policy dissemination, support to OVC co-ordination mechanisms, review and support to District OVC plans.

Currently the MGLSD has delegated to TSOs the function of providing support supervision to Districts. Support supervision from TSOs to Districts focuses on support to the CBSDs, line District departments involved in OVC activities, and the District leadership for OVC programme management roles. District targets for SS may include: District leaders, the District Technical Planning Committee, Sub-Counties, NGOs, the private sector and community representatives.

The aim of SS at this level is to enhance quality service management to orphans and other vulnerable children. This is done through supporting the District Community Based Services Department and line departments develop the required managerial and technical capacities to meet their role and function in service delivery to OVC.

##### **3.1.2 District/Municipality to Sub-County**

To improve the quality of OVC service delivery at the Sub-County level, SS is focused on providing technical support to the technical team at the Sub-County. At the Sub-County level, both the managerial and direct technical services are delivered.

##### **3.1.3 Sub-County to community structures**

Community structures include PDCs, NGOs, CBOs, households, FBOs and police.

The aim of technical supervision at this level is to relate to and work with the community-based OVC service providers in order to improve the quality of the services they provide. SS is the responsibility of the CBSD staff and other line departments and stakeholders at the Sub-County level, e.g. health, education, police, and CSOs. Supervisees/programme implementers include the PDCs, NGOs and CBOs carrying out OVC activities and individual households caring and supporting OVC. Technical support supervision may also be given to community structures set up to support other sectors that relate to OVC.

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<sup>2</sup> A Technical Services Organisation is an organisation supervised and delegated by the MGSLD to provide technical support to local government, civil society and community based organisations.

Examples of these include:

- Parish Development Committee
- Local Council
- Community health workers
- Health Centres
- Village Health Committees
- Education Committees
- Schools
- FBOs/CBOs.

SS to the community structures requires a diligent and well-considered approach as service provision at this level is voluntary and less defined. SS here is done through a negotiated approach because the Community Development Officer (CDO) does not have any direct management or administrative responsibility for community structures.



### 3.2 Support supervision teams

At national level, integrated SS is carried out by multi-disciplinary teams composed of key stakeholders. Within the current arrangement the possible team membership could be:

- MGLSD Senior Management/National Implementation Unit Technical Programme staff
- Development Partners/TSOs
- Selected resources persons.

The team shall consists of at least 3 members drawn from the following categories

- Management
- OVC programming
- M&E
- Other technical areas depending on requirements.

### **3.3 Support supervision operational structure**

The diagram overleaf shows the comprehensive SS structure to support OVC service delivery.

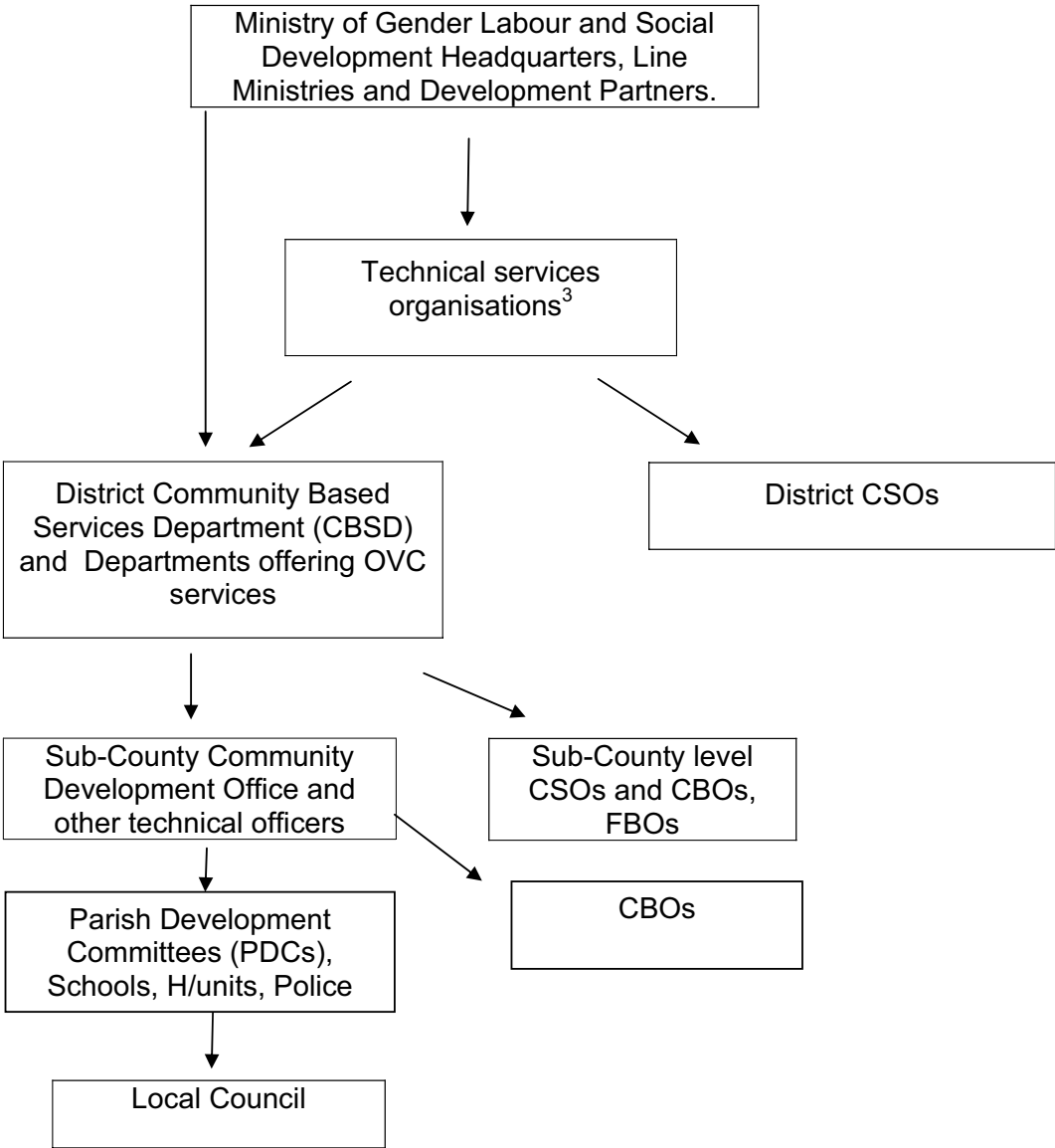
### **3.4 Frequency of support supervision**

In order to give the necessary support to the District Technical Team, quarterly integrated SS from the Centre/MGLSD to the TSOs, and TSOs to Districts will take place. The duration of integrated and other types and levels of SS will depend on the following:

- Available logistical, human resource, and financial support
- Nature of observed problems/issues
- Choice of supervisor or supervisee.

The guide will therefore not attempt to prescribe the time required.

**Comprehensive support supervision structure to support OVC service delivery**



<sup>3</sup> 2008 – 2009 MGLSD has delegated its support supervision responsibilities to the TSOs

### **3.5 Essential technical areas for support supervision**

The tables on the following pages give details of the technical areas that need to be covered for integrated support supervision for each level.

### **3.6 Technical and emergency support supervision**

Technical and emergency SS required at this level follows similar considerations as per the previous level. In addition, the following deserve attention:

- Emergency SS cuts across all levels; it has no particular predictable patterns but will be in response to an emergency and will be related to a particular community
- Emergency SS can also be in response to an emergency in a District e.g. internal displacement of people. Its objectives, planning and implementation will depend upon the nature of the emergency and the required response. It may take the form of an integrated or a technical SS and the frequency and duration of SS cannot be predicted in advance.



### 3.6.1 Centre/national (MGLSD) to technical services organisations

Functional area	TSO tasks for support supervision	Key output/s	Measure of quality
1) OVC programme planning	1 Technical support to higher local government in OVC Service delivery mapping	An approved and harmonised 3 or 5 year District OVC Strategic Plan	Compliance of the strategic plan with the NOP, NSPPI and OVC quality standards
	2 TA to higher local government in OVC situational analysis		
	3 Facilitation of District OVC Coordination committee		
	4 Technical support in the development and review of District OVC operational plan		
	5 Support to integration of the OVC plan into the District Development Plan		
	6 Facilitating dissemination of the OVC response roll out plan to all stakeholders		
	7 Monitoring and evaluation of the OVC activities		
	8 Reporting on OVC Programme planning process.		
2) Facilitating the OVC co-ordination mechanism	1 Establishment of a multi-sector and multi-disciplinary District OVC co-ordination mechanism (Internal and external)	A functional District OVC co-ordination mechanism	A District co-ordination mechanism that meets the set requirements
	2 Facilitation of the OVC co-ordination mechanism		
	3 Facilitating the District review meetings		
3) Capacity building for District OVC service management and delivery	1 Capacity building needs assessment in the OVC specific technical areas.	3 year OVC Capacity building plan	Relevance of training to the implementation of the District OVC Strategic Plan
	2 Development of OVC Capacity building plan for key players		
	3 Development of guidelines for Implementing the OVC capacity building plan		
	4 Monitoring implementation of the OVC capacity building plan		
Monitoring and evaluating implementation of all OVC activities in the District	1 Develop an M&E framework and Plan	A Functional District OVC M&E System	Compliance to the District M&E framework work and national OVC M&E framework
	2 Train Sub-County CBS staff, and other OVC service provider staff in OVC M&E		
	3 Orient and adapt OVC M&E tools to Sub-County CBS office operations		
	4 Supervise and support OVC data collection		
	5 Analyse OVC data		
	6 Disseminate analysed data to national, District, Sub-counties and other stakeholders		
	7 Utilise data in planning and management of OVC services		

### 3.6.2 Technical services organisations to District/municipalities

Functional area	District tasks/activities for support supervision	Key output/s	Measure of quality
1) District OVC planning	<ol style="list-style-type: none"> <li>1. Development of the District OVC service provider map.</li> <li>2. District OVC situational analysis</li> <li>3. Periodic update and review of District OVC planning committee</li> <li>4. Facilitation of District OVC planning committee.</li> <li>5. OVC activity planning</li> <li>6. Development and review of District OVC operational plan</li> <li>7. Development of the District OVC strategic plan</li> <li>8. Integrate the OVC plan into the main District development plan</li> <li>9. Disseminate the plan to all stakeholders</li> <li>10. Monitoring and evaluation of the OVC activities.</li> <li>11. Reporting on OVC implementation and results</li> <li>12. Review of OVC plan.</li> </ol>	An approved and harmonized 3 or 5 year District OVC Strategic Plan	Compliance of the strategic plan compliant to NSPPI
2) District OVC Coordination	<ol style="list-style-type: none"> <li>1. Establishment of a multi-sector and multi-disciplinary District OVC co-ordination mechanism (Internal and external)</li> <li>2. Facilitation of OVC services</li> <li>3. District co-ordination and review meetings</li> <li>4. Manage the implementation of the co-ordination mechanism resolutions</li> </ol>	A Functional District OVC co-ordination mechanism	A District co-ordination mechanism that meets the set requirements
3) Promote mobilisation and advocacy for OVC	<ol style="list-style-type: none"> <li>1. Mobilisation and sensitisation of District leaders on OVC issues</li> <li>2. Advocacy of OVC issues.</li> <li>3. Monitor all service sectors to address OVC issues, concerns and needs</li> <li>4. Promote mobilisation and advocacy on OVC issues</li> </ol>	Stakeholders awareness of OVC issues	Depth of knowledge about and participation in OVC issues at the District
4) OVC resource (financial and human) mobilisation and tracking	<ol style="list-style-type: none"> <li>1. Develop an OVC resource mobilisation strategy</li> <li>2. Implementation of the resources mobilisation plan</li> <li>3. Conduct OVC resource tracking on an annual basis</li> <li>4. OVC resource utilisation in the District</li> </ol>	Resource Mobilisation Strategy	Compliance to the resource mobilisation guidelines set by MGLSD
5) Capacity building for District OVC service management and delivery	<ol style="list-style-type: none"> <li>1. Capacity building needs assessment.</li> <li>2. Development of OVC Capacity building plan for key players</li> <li>3. Implementing the OVC capacity plan</li> <li>4. Monitoring implementation of the OVC capacity building plan</li> </ol>	3 year OVC capacity building plan	Relevance of training to implementation of District OVC Strategic Plan

Functional area	District tasks/activities for support supervision	Key output/s	Measure of quality
6) District SS of Sub-counties and District level OVC services providers	<b>District tasks/activities for support supervision</b> 1. Develop a SS plan to Sub-Counties and other service providers at District level 2. Conduct SS visits to Sub-Counties and other OVC service providers 3. Prepare SS reports and provide feedback to Sub-Counties and other service providers 4. Facilitate and follow up implementation of SS recommendations	Support supervision reports and recommendations	Sub-counties and other users' satisfaction with SS received and the recommendations made
7) Monitoring and evaluating implementation of all OVC activities in the District	1. Develop an M&E framework and Plan 2. Train Sub-County CBSD staff/other OVC service provider staff in OVC M&E 2. Orient and adapt OVC M&E tools to Sub-County CBS office operations 3. Supervise and support OVC data collection 4. Analyse OVC data 5. Disseminate analysed data to national, District, Sub-Counties and other stakeholders 6. Utilise data in planning and management of OVC services	A functional District OVC M&E system	Compliance to the District M&E framework and national OVC M&E framework
8) Ensure adherence to OVC service Quality Standards	1. Disseminate OVC quality standards guidelines to all OVC services providers in the District 2. Train OVC services providers in the use of OVC quality standards 3. Conduct OVC services quality audits (providers and users) every quarter 4. Document, report and provide feedback on quality audits	Regular quality audits for OVC service providers	Compliance to OVC quality standards
9) Ensure programming for delivery of comprehensive OVC services	1. Promote socio-economic security (CPA 1) 2. Food security and nutrition (CPA 2) 3. Care and support (Refer to CPA 3) 4. Conflict management (CPA 4) 5. Education (CPA 5) 6. Psychosocial support (CPA 6) 7. Health (CPA 7) 8. Child protection (CPA 8) 9. Legal advice and representation (CPA 9) 10. Capacity enhancement and resources mobilisation (CPA 10)	OVC Services delivered according to District priorities	Services meet OVC quality standards set for each CPA

### 3.6.3 District to Sub-County

Functional area	Sub-County tasks/activities for support supervision	Key output/s	Measure of quality
1) Planning	<ol style="list-style-type: none"> <li>1. Developing a Sub-County OVC situational analysis from the Sub-County OVC service delivery mapping (stakeholder and services)</li> <li>2. Lead the establishment of a multi-sector and multi-disciplinary Sub-County OVC co-ordination and planning committee</li> <li>3. Provision of administrative and secretarial services to the Sub-County OVC committee</li> <li>4. Provision of administrative and secretarial services to the Sub-County OVC planning committees.</li> <li>5. Organising annual OVC operational planning workshop</li> <li>6. Development of the Sub-County OVC operational plan document</li> <li>7. Integrate the plan into the main Sub-County operational plan</li> <li>8. Distribute the plan to CBSD</li> <li>9. Distribute the plan to all key stakeholders</li> <li>10. Monitor performance of plan implementation</li> <li>11. Give feedback on plan implementation to all involved in implementation</li> <li>12. Redirect the plan in accordance with findings of the performance monitoring process</li> </ol>	Annual Operational Plan	Compliance to the District OVC Strategic Plan
2) Sub-County OVC co-ordination	<ol style="list-style-type: none"> <li>1. Lead the development of a multi-sector and multi-disciplinary Sub-County OVC co-ordination mechanism on the basis of the District one</li> <li>2. Provision of administrative and secretarial services to the Sub-County co-ordination mechanism</li> <li>3. Organize regular co-ordination meetings</li> <li>4. Taking of minutes and provide timely distribution</li> <li>5. Encourage and receive feedback from the members</li> <li>6. Manage the implementation of the co-ordination mechanism resolutions</li> </ol>	A functional Sub-County OVC co-ordination mechanism	A Sub-County co-ordination mechanism that meets the set requirements
3) Mobilisation, advocacy and promotion (Ref NSPPI)	<ol style="list-style-type: none"> <li>1. Mobilise communities to support OVC</li> <li>2. Advocate for OVC issues at parish, village and household level</li> <li>3. Facilitate, support, lobby and monitor social sectors to address OVC issues, concerns and needs</li> <li>4. Use all popular media to promote prevention, mitigation and care efforts</li> </ol>	Stakeholders awareness of OVC issues	Depth of knowledge about and participation in OVC issues at the Sub-County

Functional area	Sub-County tasks/activities for support supervision	Key output/s	Measure of quality
4) OVC Resources Mobilisation	<ol style="list-style-type: none"> <li>1. Develop and document a resource mobilisation strategy and plan</li> <li>2. Mobilise resources from the public and private sectors</li> <li>3. Implement the resources mobilisation plan</li> </ol>	Resource Mobilisation Strategy	Compliance to the Resource Mobilisation guidelines set by MGLSD
5) Capacity Building	<ol style="list-style-type: none"> <li>1. Build capacity of NGOs, FBOs, PDCs, communities and households as outlined in the District OVC Strategic Plan</li> </ol>	Training, SS sessions	Relevance of training to the implementation of the District OVC Strategic Plan
6) SS of PDCs and Technical Supervision of other Sub-County level OVC services providers	<ol style="list-style-type: none"> <li>1. Develop SS plan to Sub-Counties</li> <li>2. Plan SS visits</li> <li>3. Conduct SS visits to Sub-Counties</li> <li>4. Report and give feedback on SS visits</li> <li>5. Monitor and evaluate SS to Sub-Counties</li> </ol>	Support supervision reports and recommendations	Community level OVC service providers' satisfaction with SS received and the recommendations made
7) Monitoring and Evaluating Implementation of the NSPPI in the District	<ol style="list-style-type: none"> <li>1. Train CDA, and other OVC services providers staff in OVC M&amp;E</li> <li>2. Provide M&amp;E tools to CSOs and FBOs providing OVC services</li> <li>3. Collect OVC data</li> <li>4. Analyse District data</li> <li>5. Share analysed data with MGLSD, Sub-Counties and key stakeholders</li> <li>6. Utilise data in planning and management</li> </ol>	A functional Sub-County OVC M&E system	Compliance to the District M&E framework and national OVC M&E framework
8) Ensure adherence to OVC service Quality Standards	<ol style="list-style-type: none"> <li>1. Provide OVC quality standards to all OVC services providers in the District</li> <li>2. Train OVC services providers in the use of OVC quality standards</li> <li>3. Conduct OVC services quality audits at least once a year</li> <li>4. Document, report and provide feedback on quality audits</li> <li>5. Conduct regular SS and technical support supervision to those providing OVC services at Sub-County level</li> </ol>	Regular Quality Audits of OVC services	Compliance to OVC service Quality Standards

Functional area	Sub-County tasks/activities for support supervision	Key output/s	Measure of quality
9) Ensure delivery of comprehensive OVC services	1	Socio-economic security (CPA 1)	Services meet set OVC quality standards set for each CPA
	2	Food security and nutrition (CPA 2)	
	3	Care and support (CPA 3)	
	4	Conflict management (CPA 4)	
	5	Education (CPA 5)	
	6	Psychosocial support (CPA 6 )	
	7	Health (CPA 7)	
	8	Child protection (CPA 8 )	
	9	Legal advice and representation (CPA 9)	
	10	Capacity enhancement and resources mobilisation (CPA 10)	

### 3.6.4 Sub-counties to community

Community here refers to PDCs, schools, health centres, NGOS, CBOS, households, FBOs and police

Functional area	Community tasks/activities for support supervision	Key output/s	Measure of quality
1) Planning	<ol style="list-style-type: none"> <li>1. Participate in District OVC service provider mapping exercise</li> <li>2. Identify and priorities OVC issues at parish level to integrate into the Sub-County annual operational plans</li> <li>3. Develop organisation strategic and operational OVC plans</li> <li>4. Submit operational plans to the Sub-County to be integrated into general Sub-County plans</li> </ol>	<p>Organisation strategic plans harmonised with the District Strategic Plan</p>	<p>Organisation strategic plans that address NSPPI requirements and Sub-County OVC needs</p>
2) Sub-County OVC Coordination	<ol style="list-style-type: none"> <li>1. Participate in the Sub-County OVC stakeholders forum</li> <li>2. Participate in selection of CSO representatives on the Sub-County OVC co-ordination committee.</li> <li>3. Receive and give feedback on the Sub-County co-ordination minutes and resolutions</li> </ol>	<p>A functional Sub-County OVC co-ordination mechanism</p>	<p>A Sub-County co-ordination mechanism that meets the set requirements</p>
3) Mobilisation, advocacy and promotion (refer to NSPPI)	<ol style="list-style-type: none"> <li>1. Mobilise communities around OVC issues specific to CSO mandate</li> <li>2. Facilitate, support, lobby and monitor social sectors to address OVC issues, concerns and needs</li> <li>3. Use all popular media to promote OVC prevention, mitigation and care efforts</li> </ol>	<p>Stakeholders awareness of OVC issues</p>	<p>Depth of knowledge about and participation in OVC issues at the District</p>
4) Capacity building for OVC services delivery	<ol style="list-style-type: none"> <li>1. Develop organisational management and OVC technical capacity according to specific org needs</li> </ol>	<p>Training, SS sessions</p>	<p>Relevance of training to the implementation of the District OVC Strategic Plan</p>
5) SS of smaller CSOs, CBOs, FBOs and communities	<ol style="list-style-type: none"> <li>1. Develop annual SS plan</li> <li>2. Plan individual SS visits</li> <li>3. Conduct support supervision visits to other OVC organisations</li> <li>4. Report and give feedback on SS visits</li> <li>5. Monitor and evaluate SS efforts</li> </ol>	<p>Support supervision reports and recommendations</p>	<p>Community-based OVC service providers' satisfaction with SS received and recommendations made</p>

Functional area	Community tasks/activities for support supervision	Key output/s	Measure of quality
6) Monitoring and evaluating implementation of activities	<ol style="list-style-type: none"> <li>1. Collect data on OVC services provided</li> <li>2. Analyse and share data with other stakeholders</li> <li>3. Integrate the data into Sub-County or District OVC data base</li> <li>4. Utilise data in organisational planning and management</li> <li>5. Disseminate analysed data to Sub-County OVC stakeholders</li> </ol>	Monitoring reports of org. OVC activities	Compliance to the District M&E frame work and national OVC M&E framework
7) Ensure adherence to OVC service Quality Standards	<ol style="list-style-type: none"> <li>1. Support Districts and Sub counties to distribute OVC quality standards to other OVC services providers in the Sub-County and District</li> <li>2. Train OVC services providers in the use of OVC quality standards</li> <li>3. Conduct organisation OVC services quality checks at least once every year</li> <li>4. Document, report and provide feedback on the organisation quality checks to Sub counties or Districts</li> </ol>	Regular Quality Audits of OVC services	Compliance to OVC service Quality standards
Direct OVC Service Delivery (service will differ from organisation to organisation)	<ol style="list-style-type: none"> <li>1. Facilitate, offer or implement the following: <ol style="list-style-type: none"> <li>i. Socio-economic security (CPA 1)</li> <li>ii. Care and support (CPA 3)</li> <li>iii. Conflict management (CPA 4)</li> <li>iv. Psychosocial support (CPA 6)</li> <li>v. Child protection (CPA 8)</li> <li>vi. Legal advice and representation (CPA 9)</li> <li>vii. Capacity enhancement and resources mobilisation (CPA 10)</li> </ol> </li> </ol>	OVC services delivered according to District priorities	Services meet OVC quality standards set for each CPA



## **4 PLANNING FOR SUPPORT SUPERVISION**

To successfully conduct support supervision, the process should be well planned.

### **Setting objectives**

- At the start of planning the visit the objective should be clearly stated and shared with all members of the team
- This process will help in getting the team focused and guide measuring the outputs and outcomes of the SS.

### **Developing teams**

- Team formation will be according to the type and objectives of the SS
- Integrated SS will require a multi disciplinary team
- Technical SS will require specialised persons.

### **Communicating support supervision**

- The SS visit should be planned and communication made well in advance
- Communication will facilitate prior planning and availability of the staff concerned.

### **Logistics (transport, fuel, allowances)**

- This should be well organised to facilitate the visit.
- Duration and distance of the visit should be considered.

### **Pre-visit team meeting**

- The team should have a briefing meeting prior to the visit to clarify objectives, expected outputs, logistics, timelines, methodologies, and tools to be used, as well as to meet team members.

## **5 PROCESS FOR CONDUCTING SUPPORT SUPERVISION**

### **5.1 Support supervision schedule**

- Keep to the agreed SS schedule. If changes need to be made, these must be agreed with all team members and staff being supervised
- At the start of the visit, report to the focal point person in the Ministry/organisation to discuss and agree the programme (sites for visit should be mutually agreed)
- Meet the local leadership (Resident District Commissioner, Local Council chairman, Chief Administrative Officer, etc.) to inform them about the purpose of the visit
- Hold discussions with the relevant technical heads - department heads or other administrative officers

### **5.2 Conducting field visits**

- Field visits may include Sub-County headquarters, sites of activity centres, CSO offices, parish centres and households
- A briefing and debriefing meeting should be held
- Emphasise that the SS tools will be used in a participatory manner to build capacity and identify strengths, weaknesses and gaps
- Acknowledge the positive findings, give constructive feedback and facilitate joint problem-solving for weaknesses, gaps and constraints identified. This may involve conducting a skills building session
- Agree as a team the areas that require improvement and how to give feedback – an important SS process

### **5.3 Feedback and reaching consensus**

The most important aspect of SS is providing feedback and reaching consensus on negative findings. Verbal and technical demonstration feedback should be provided immediately. Written feedback – where relevant- should be communicated not more than two weeks later.

A debrief meeting should be held with the political leaders and relevant unit heads at the end of the visit to share major findings and recommendations. Minutes should be taken by the person in charge of OVC service delivery at that level, and circulated.

Supervisors are expected to use reporting formats prescribed by MGLSD and/or Districts. Where these are not developed, supervisors should use the recommended content and format below.

- a) Table of contents
- b) Abstract or Summary (1–20 lines depending on the findings )
- c) Introduction
- d) The aim and objectives of the SS visit (heavily dependent on the findings of the last SS)
- e) The SS visit including planning for the visit
- f) Findings
  - Positive and best practices
  - Areas needing improvement
  - Actions undertaken as a result of the last SS visit and current visit
- g) Recommendations/actions to be taken, by who, by when and the expected output/outcome of each of these actions
- h) Appendices
- i) References

#### **5.4 Follow up**

- Support supervision will have identified actions that need to be taken at community, Sub-County level, District and national levels.
- The supervisor or supervision team will work with those supervised to address some problems that can be solved on site.
- The technical head at each level of the SS system (e.g. Assistant CDO at community level) will be responsible for following up on actions.
- All action points should be documented in supervision reports as recommendations with an identified time frame

#### **5.5 Monitoring and evaluating support supervision**

SS should be monitored regularly and evaluated at preset periods. This is a responsibility of both the SS and the quality assurance units. The M&E systems at the Districts and at MGLSD should be enabled to assess the following SS elements:

- Adherence to this guide
- Availability of SS work plan, budgets and schedules
- Compliance to SS schedules
- Follow up of agreed actions
- Submission of SS reports on time
- Identification of indicators to evaluate the effectiveness of SS
- Support supervision outputs and outcomes

If there are observed improvements due to central level SS to the Districts, assessment of these can be carried out through reviews of annual reports, Annual General Meetings with stakeholders, and assessment of supervisees' feedback on the strength and weaknesses of the SS process.

**APPENDIX 1: CHECKLIST FOR SS FROM MGLSD TO DISTRICTS/MUNICIPALITIES**

Name of the District/Municipality .....  
 Date: .....  
 Supervisor/s: .....  
 Supervisee/s: .....

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>PLANNING</b>				
1. Does the District/Municipality have an OVC service provider map?				
2. Does the District/Municipality carry out and update the OVC baseline data?				
3. What process was used to develop the District Strategic Plan?				
4. Is the Strategic Plan developed using MGLSD guidelines?				
5. Is the District facilitating the OVC planning process?				
6. Is the District OVC Strategic Plan integrated into the main District Development Plan?				
7. Has the Strategic Plan been shared among OVC partners and related departments in the District?				
8. Has the Strategic Plan been distributed to the stakeholders?				
9. Is the implementation of the Strategic Plan being monitored?				
10. Is this monitoring feedback being given to all stakeholders?				
11. Is the Strategic Plan being redirected in accordance with performance monitoring?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>COORDINATION</b>				
1. Does the District/Municipality have a functional multi-sector and multi-disciplinary District OVC co-ordination mechanism that meets the MGLSD guidelines?				
2. Is the CBSD providing administrative and secretarial services to the co-ordination mechanism (evidenced by minutes)?				
3. Is CBSD providing logistical support to the OVC co-ordination committee?				
4. Does the co-ordination mechanism encourage and receive feedback from the members?				
5. Is the co-ordination mechanism fulfilling its roles and functions?				
<b>MOBILISATION, ADVOCACY AND PROMOTION (Refer to the NSPPI)</b>				
1. Does the District/Municipality have an Advocacy and Mobilisation Strategy for OVC?				
2. Does the District/Municipality regularly update this strategy?				
3. Does the CBSD have a strategy and plan for distributing IEC materials?				
4. Are all forms of 'popular' media utilised in promotion prevention, mitigation and care efforts?				
<b>CAPACITY BUILDING</b>				
1. Do Districts/Municipalities have a HRD Plan that was developed using MGLSD guidelines?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
2. Is the HRD plan being implemented and monitored? (Refer to MGLSD guidelines on CBSD HRD Planning)				
3. Are new employees inducted using the standard MGLSD Induction Manual?				
4. Are there efforts aimed at filling vacant positions?				
5. Does the CBSD support the Personnel Office in filling vacant positions in the department and Sub Counties?				
<b>SUPPORT SUPERVISION</b>				
1. Does the District/Municipality have a SS plan for LLG, CSO and community-based institutions e.g. children's homes, transit centres?				
2. Does the District/Municipality team monitor and evaluate SS to Sub-Counties/Divisions, CSOs and Children's Homes, transit centres, etc.?				
3. Do the District/Municipality SS teams report and give feedback on SS visits and guidelines?				
<b>OVC RESOURCES MOBILISATION</b>				
1. Does the District and partners have a resource mobilisation strategy and plan?				
2. Is the District/Municipality mobilising resources from the public and private sectors?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>MONITORING AND EVALUATING THE IMPLEMENTATION OF THE NSPPI</b>				
1. Does the District/Municipality have a functional M&E system?				
2. The M&E manual: <ul style="list-style-type: none"> <li>▪ Promoted</li> <li>▪ Built capacity at all required levels including (CSOs and private sector)</li> <li>▪ Distributed the relevant M&amp;E tools</li> <li>▪ Computerisation</li> </ul>				
3. Is data being managed as per MGLSD M&E Manual (i.e. collection, analysis, sharing and utilised)?				
4. Is analysed data being disseminated to the District/Municipality and Sub-County/Divisions and OVC stakeholders?				
<b>QUALITY ASSURANCE</b>				
1. Has the District/Municipality distributed OVC quality standards to all the OVC service providers?				
2. Has the District/Municipality trained the OVC service providers on the use and importance of the OVC quality standards?				
3. Does the District/Municipality conduct and report and give feedback on annual OVC quality audits?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>DIRECT OVC SERVICES DELIVERY</b>				
<p>1. What OVC service is the District/Municipality directly delivering?</p> <ul style="list-style-type: none"> <li>▪ Socio-economic security (CPA 1)</li> <li>▪ Food security and nutrition (CPA 2)</li> <li>▪ Care and support (CPA 3)</li> <li>▪ Conflict management (CPA 4)</li> <li>▪ Education (CPA 5)</li> <li>▪ Psychosocial support (CPA 6)</li> <li>▪ Health (CPA 7)</li> <li>▪ Child protection (CPA 8)</li> <li>▪ Legal advice and representation (CPA 9)</li> <li>▪ Capacity enhancement and resources mobilisation (CPA 10)</li> </ul>				
<p>2. Are the OVC services being delivered actually meeting the expected quality standard</p> <ul style="list-style-type: none"> <li>▪ Socio-economic security (CPA 1)</li> <li>▪ Food security and nutrition (CPA 2)</li> <li>▪ Care and support (CPA 3)</li> <li>▪ Conflict management (CPA 4)</li> <li>▪ Education (CPA 5)</li> <li>▪ Psychosocial support (CPA 6)</li> <li>▪ Health (CPA 7)</li> <li>▪ Child protection (CPA 8)</li> <li>▪ Legal advice and representation (CPA 9)</li> <li>▪ Capacity enhancement and resources mobilisation (CPA 10)</li> </ul>				



Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>REPORTING</b>				
1. Are regular reports being made and copied to the centre (MGLSD)?				
2. Are Districts receiving regular reports from Sub Counties and District-wide NGOs?				
3. Are the reports generating action? (verify)				
<b>FINANCES AND OTHER RESOURCES</b>				
1. Are 'The Local Government Financial and Accounting Regulations 1998' available in the department?				
2. Is the District/Municipality OVC Plan adequately funded?				
3. Is the District/Municipality getting funding for the District/Municipality OVC Plan from sources other than the central and local government?				
4. Are there attempts by the District/Municipality to secure more funds for the planned OVC activities? (verify)				
5. Are there policies and procedures for managing department assets?				
6. Are these policies and procedures being followed?				

**APPENDIX 2: CHECKLIST FOR SS FROM DISTRICT/MUNICIPALITY TO SUB-COUNTY/DIVISIONS**

Name of the Sub County/Division: .....

Date: .....

Supervisor/s: .....

Supervisee/s: .....

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>PLANNING</b>				
1. Does the Sub-County/Division have OVC service provider mapping data?				
2. Does the Sub-County/Division have an OVC Situational Analysis Report?				
3. Did the Sub-County hold an Operational Planning Workshop?				
4. Is the Operational Plan developed in compliance with the District 3 year OVC Strategic Plan?				
5. Is the Sub-County OVC Operational Plan integrated into the main Sub-County Development Plan?				
6. Is the CDO providing secretarial services to the Sub-County OVC Planning Committee?				
7. Has the Operational Plan been distributed to the CBSD and all other OVC related Departments in the Sub-County?				
8. Has the Operational Plan been distributed to stakeholders?				
9. Is the implementation of the Operational Plan being monitored?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
10. Is feedback on the result of monitoring the implementation of the Operational Plan given to all the stakeholders?				
<b>COORDINATION</b>				
1. Does the Sub-County/Municipality have a functional multi-sectoral and multi-disciplinary OVC co-ordination mechanism that meets the MGLSD guidelines?				
2. Is the CDO providing the leadership, administrative and secretarial services to the Sub-County co-ordination mechanism (evidenced by minutes)?				
3. Does the mechanism encourage and receive feedback from the stakeholders?				
4. Is the mechanism fulfilling its roles and functions				
<b>MOBILISATION, ADVOCACY AND PROMOTION (refer to the NSPPI section 6 page 29)</b>				
1. Does the Sub County/Division have OVC advocacy and mobilisation tools for the public and private sectors, CSOs, communities, and households?				
2. Does the Sub-County/Municipality have a strategy and plan for distributing OVC IEC materials?				
3. Do they use all 'popular' media to promote prevention, mitigation and care efforts?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>CAPACITY BUILDING</b>				
1. Is the District HRD plan being implemented and monitored at the Sub-County level? (Refer to MGLSD guidelines on CBSD HRD Planning)				
2. Are new employees being inducted using the standard MGLSD Induction Manual?				
3. Are vacant positions being filled?				
4. Are CDO staff appraised annually?				
<b>SUPPORT SUPERVISION</b>				
1. Does the Sub-County/Division have a SS plan for PDCs, NGOs, FBOs, communities and households?				
2. Are SS visits planned in advance?				
3. Does the Sub-County/Municipality conduct regular SS visits to community service providers using the MGLSD SS guidelines?				
4. Does the team report and give feedback on SS visits as per the MGLSD SS guidelines?				
5. Does the CDO monitor and evaluate SS to Sub-Counties and children's homes?				
<b>OVC RESOURCES MOBILISATION</b>				
1. Does the Sub-County/Division have a Resource Mobilisation Strategy and Plan?				
2. Is the Sub-County/Division mobilising resources from the public and private sectors?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>MONITORING AND EVALUATING THE IMPLEMENTATION OF THE NSPPI</b>				
1. Has the CDO operationalised the MGLSD M&E system in the Sub-County? (Refer to MGLSD M&E manual) <ul style="list-style-type: none"> <li>▪ Promoted</li> <li>▪ Built capacity at all required levels including (CSOs and private sector)</li> <li>▪ Distributed the relevant M&amp;E tools</li> <li>▪ Computerisation</li> </ul>				
2. Is data being managed as per MGLSD M&E Manual (i.e. collection, analysis, sharing and utilised)?				
3. Is analysed data being disseminated to all Sub-County stakeholders?				
<b>QUALITY ASSURANCE</b>				
1. Has the CDO distributed OVC quality standards to all the OVC services providers in the Sub-County?				
2. Has the CDO trained the OVC services providers on the use and importance of the OVC quality standards?				
3. Does the CDO conduct, report and give feedback on annual OVC quality audits?				
<b>DIRECT OVC SERVICES DELIVERY</b>				
1. What OVC service is the Sub-County directly delivering? <ul style="list-style-type: none"> <li>▪ Socio-economic security (CPA 1)</li> <li>▪ Food security and nutrition (CPA 2)</li> </ul>				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
<ul style="list-style-type: none"> <li>▪ Care and support (CPA 3)</li> <li>▪ Conflict management (CPA 4)</li> <li>▪ Education (CPA 5)</li> <li>▪ Psychosocial support (CPA 6)</li> <li>▪ Health (CPA 7)</li> <li>▪ Child protection (CPA 8)</li> <li>▪ Legal advice and representation (CPA 9)</li> <li>▪ Capacity enhancement and resources mobilisation (CPA 10)</li> </ul> <p>2. Are the OVC services being delivered meeting the expected quality standards</p> <ul style="list-style-type: none"> <li>▪ Socio-economic security (CPA 1)</li> <li>▪ Food security and nutrition (CPA 2)</li> <li>▪ Care and support (CPA 3)</li> <li>▪ Conflict management (CPA 4)</li> <li>▪ Education (CPA 5)</li> <li>▪ Psychosocial support (CPA 6)</li> <li>▪ Health (CPA 7)</li> <li>▪ Child protection (CPA 8)</li> <li>▪ Legal advice and representation (CPA 9)</li> <li>▪ Capacity enhancement and resources mobilisation (CPA 10)</li> </ul>				
<b>REPORTING</b>				
1. Are regular reports being made and shared among stakeholders copied to the District?				
2. Are Sub-Counties/Divisions receiving regular reports and considering them for development?				

Programme Area	Indicators for measuring actions/outputs	Rating 1 lowest, 5 highest	NA	Comments
3. Are the reports generating action? (verify)				
<b>FINANCES AND OTHER RESOURCES</b>				
1. Are 'The Local Government Financial and Accounting Regulations 1998' available in the department?				
2. Is the Sub-County/Division OVC Plan adequately funded?				
3. Is the Sub-County/Division getting funding for the Sub-County OVC Plan from sources other than the central and local government?				
4. Are there attempts by the Sub-County/Division to secure more funds for the planned OVC activities? (verify)				
5. Are there policies and procedures for managing department assets?				
6. Are these policies and procedures being followed?				

**APPENDIX 3: CHECKLIST FOR SS FROM SUB-COUNTIES TO COMMUNITY STRUCTURES**

Name of the community and structure:.....  
 Date: .....  
 Supervisor/s: .....  
 Supervisee/s: .....

Programme Area	Indicators for measuring actions / outputs	Rating 1 lowest, 5 highest	NA	Comments
<b>PLANNING</b>				
1. Did the community structure participate in the District OVC mapping exercise?				
2. Does the community structure have a strategy for service delivery?				
3. Have community members received any training in OVC planning and programming?				
<b>COORDINATION</b>				
1. Do community members feel they are well represented on the Sub County/Division OVC Co-ordination Structure?				
2. Do community members receive and give feedback on Sub-County/Division OVC co-ordination minutes and resolutions?				
<b>MOBILISATION, ADVOCACY AND PROMOTION (refer to the NSPPI section 6 page 29)</b>				
1. Does the community structure have a strategy and plan for mobilisation and advocacy that complies with the MGLSD Advocacy Strategy?				
2. Do the community members get OVC IEC materials?				
3. Does the community structure carry				



Programme Area	Indicators for measuring actions / outputs	Rating 1 lowest, 5 highest	NA	Comments
out any mobilisation and advocacy activities? If yes under what CPA?				
4. Do community members receive any training in mobilisation and advocacy?				
<b>CAPACITY BUILDING</b>				
1. Does the community structure have a capacity building programme?				
2. Do community members have the required management and technical competencies to implement the NSPPI?				
<b>SUPPORT SUPERVISION</b>				
1. Does the community structure receive regular SS visits from the CDO?				
2. Are these SS visits done according the MGLSD SS guidelines? (probe)				
3. Is there evidence of follow up action/s? (verify)				
4. Are supervision visits and outcomes documented?				
5. Is there evidence of follow up action/s? (verify)				
<b>MONITORING AND EVALUATING THE IMPLEMENTATION OF THE NSPPI</b>				
1. Does the community structure have an M&E system?				
2. Is there a mechanism to capture and integrate OVC data gathered by the community structure into the Sub-County and District OVC data?				
3. Have members of the community structure received any training in				

Programme Area	Indicators for measuring actions / outputs	Rating 1 lowest, 5 highest	NA	Comments
OVC M&E?				
4. What M&E tools are being used to monitor organised OVC activities?				
5. Where is reporting of OVC activities done?				
<b>QUALITY ASSURANCE</b>				
1. Does the community structure have the OVC quality standards?				
2. Has the community structure received any training in the use and application of the quality standards?				
3. Does the community structure conduct and report on internal OVC quality audits to the CDO and/or CBSD?				
<b>DIRECT OVC SERVICES DELIVERY</b>				
1. What OVC services is the community structure providing?				
<ul style="list-style-type: none"> <li>▪ Socio-economic security (CPA 1)</li> <li>▪ Food security and nutrition (CPA 2)</li> <li>▪ Care and support (CPA 3)</li> <li>▪ Conflict management (CPA 4)</li> <li>▪ Education (CPA 5)</li> <li>▪ Psychosocial support (CPA 6)</li> <li>▪ Health (CPA 7)</li> <li>▪ Child protection (CPA 8)</li> <li>▪ Legal advice and representation (CPA 9)</li> <li>▪ Capacity enhancement and resources mobilisation (CPA 10)</li> </ul>				

Programme Area	Indicators for measuring actions / outputs	Rating 1 lowest, 5 highest	NA	Comments
<p>2. Are the OVC services that are being delivered meeting the expected quality standard?</p> <ul style="list-style-type: none"> <li>▪ Socio-economic security (CPA 1)</li> <li>▪ Food security and nutrition (CPA 2)</li> <li>▪ Care and support (CPA 3)</li> <li>▪ Conflict management (CPA 4)</li> <li>▪ Education (CPA 5)</li> <li>▪ Psychosocial support (CPA 6)</li> <li>▪ Health (CPA 7)</li> <li>▪ Child protection (CPA 8)</li> <li>▪ Legal advice and representation (CPA 9)</li> <li>▪ Capacity enhancement and resources mobilisation (CPA 10)</li> </ul>				
<b>REPORTING</b>				
1. Are regular reports being made and copied to the CDO and CBSD?				
2. Are the reports generating action or appropriate feedback?				

**APPENDIX 4: SUPPORT SUPERVISION REPORTING FORMAT**

Name of organisation/institution/District/Sub-County/community				
Date				
Supervisor/s				
Supervisee/s				
<b>Positive findings</b> <i>(Include all actions that were taken as a result of the last supervision + best practices)</i>				
<b>Areas requiring improvement/gaps/lessons/best practices observed</b>				
<b>Recommendations</b>	<b>Action(s) to be taken</b>	<b>Who to take action?</b>	<b>When to take action?</b>	<b>Expected outcome(s)</b>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

## **APPENDIX 5: OUTLINE OF THE NSPPI OBJECTIVES, PRINCIPLES AND STRATEGIES**

### **The NSPPI strategic programme objectives are:**

1. To create an environment conducive for the survival, growth, development and participation of vulnerable children and households
2. To deliver integrated and equitable distributed essential services to vulnerable children and households that are of sufficient quality
3. To strengthen the legal, policy, and institutional frameworks for programme that seek to protect orphans and other vulnerable children and households at all levels
4. To enhance the capacity of households, communities, other implementing agents and agencies to deliver integrated, equitable and quality services for vulnerable children and households.

### **Guiding principles are:**

1. Participation and empowerment building on the human rights-based approach to programming
2. Making the family and community the first line of response
3. Focusing on the most vulnerable children and communities
4. Reducing vulnerability
5. Facilitating community
6. Promoting gender equity
7. Treating recipients with respect
8. Reducing discrimination and stigmatisation
9. Ensuring the social inclusion of marginalised groups
10. Ensuring the participation of vulnerable children and families
11. Strengthening partnerships
12. Delivering integrated and holistic services
13. Supporting services delivery through decentralisation
14. Designing age-sensitive programmes.

### **The NSPPI strategies are:**

1. Direct interventions reaching the children and their households
2. Mobilisation of resources, advocacy at various levels and promotion of best practices realised
3. Collaborations of the Ministry with other Ministries, CSOs, the private sector and local government
4. Provision of leadership and co-ordination of implementation of activities
5. Monitoring and evaluation of the implementation process and intervention.

## APPENDIX 6: CHECKLIST FOR ASSESSING VULNERABILITY

### Five broad criteria for selection of vulnerable households with children

- ✓ Single/widowed caregiver or head of household or chronically ill adult in household
- ✓ Female caregiver or head of household
- ✓ Elderly caregiver or head of household
- ✓ In need as determined by consensus
- ✓ Orphaned or other vulnerable children in household

### Definitions of the broad criteria for selection above:

#### In need/impoverished

- Inadequate food (one meal or less)
- Inadequate clothing (less than three sets including uniform)
- Poor shelter (grass thatch and mud walls)
- Lack of/irregular education
- Regular cash income < US \$ 1.00 equivalent per day

#### Orphan

- Single maternal (mother known to be dead)
- Single paternal (father known to be dead)
- Double orphan (both parents known to be dead)

#### Other vulnerability

- Abandoned (parents known to be alive or assumed alive but cannot be located)
- Parents or guardians cannot be located or are absent (parents are assumed dead or known to be missing and cannot be located)
- Chronically ill parents or child
- Illiterate/not going to school
- Disability
- Conflict environment

## APPENDIX 7: THE OVC QUALITY STANDARDS

Building Block	Core programme area (CPA)	Standards
<p><i>Building Block I</i></p>	<p>1. Socio-economic security</p> <p><i>‘OVC and their households are able to sustain their livelihood, accessing short term emergency assistance where needed’</i></p>	<p>1. The most vulnerable children and households receive priority protection, care and support services</p> <p>2. Basic livelihood resources, such as agricultural inputs, are provided to needy households</p> <p>3. Training and capacity building programmes</p> <p>4. Equip vulnerable children and households with skills to improve their socio-economic security</p>
	<p>2. Food and nutrition security</p> <p><i>‘All household members access adequate and appropriate food to meet their nutritional needs’</i></p>	<p>1. Early warning systems and services and safety nets exist to identify and meet emergency food security requirements of vulnerable children and households</p> <p>2. Household members acquire skills and resources to improve food security</p> <p>3. Community programmes reduce food insecurity experienced by vulnerable households</p>
	<p>3. Care and support</p> <p><i>‘The basic physical, cognitive and psychosocial needs of OVC and their care givers are met, on a sustainable Basis’</i></p>	<p>1. OVC and their households have basic commodities such as shelter, food, clothing and bedding</p> <p>2. Families and communities access support and services to provide quality care to OVC</p> <p>3. Alternative care facilities meet nationally approved standards</p>
	<p>4. Conflict management</p> <p><i>‘Children affected by conflict enjoy the same rights as children elsewhere in Uganda’</i></p>	<p>1. All actors work collaboratively to secure an environment in which essential social services reach vulnerable children affected by conflict</p> <p>2. Conflict affected and displaced children are resettled into non-conflict areas or alternative care</p> <p>3. Family tracing and reintegration services and child soldier demobilisation programmes reach vulnerable children</p>
<p><i>Building Block II</i></p>	<p>5. Education</p> <p><i>‘All OVC have equitable access to education and to formal and informal systems of information acquisition, skills building and technical experience’</i></p>	<p>1. Education access and retention for OVC is supported materially and financially</p> <p>2. Alternative or non-formal basic education is available to vulnerable children who are educationally marginalized</p> <p>3. Systems are in place to ensure significant and permanent gains in achieving equitable access to education at all levels</p>

Building Block	Core programme area (CPA)	Standards
	<p>6. Psychosocial support</p> <p><i>‘OVC and vulnerable households access assistance to positively and meaningfully affect their psychological and social situation’</i></p>	<ol style="list-style-type: none"> <li>1. Psychosocial support is an integral part of all care and support programmes for OVC</li> <li>2. An appropriate range of psychosocial support services is available to vulnerable children and family members including therapeutic, succession planning, and recreational activities</li> <li>3. Referral systems and networks are in place to ensure access to psychosocial support services.</li> </ol>
	<p>7. Health</p> <p><i>‘All OVC enjoy a state of physical, mental and emotional wellbeing that allows them to be productive and to achieve their potential’</i></p>	<ol style="list-style-type: none"> <li>1. OVC access preventive, curative and rehabilitative health services on an equal basis with other children</li> <li>2. Children who are living with HIV access appropriate specialised care</li> <li>3. Health status of vulnerable children is monitored, e.g. through inclusion of key information on immunisation cards and clinic and hospital forms</li> </ol>
<i>Building Block III</i>	<p>8. Child protection 9. Legal advice and representation</p> <p><i>‘OVC are protected from all forms of abuse and exploitation and from hazards and harm’</i></p>	<ol style="list-style-type: none"> <li>1. OVC access legal assistance in cases related to inheritance, property and guardianship</li> <li>2. There are immediate responses to circumstances and conditions that grossly violate the rights of children, subjecting them to serious risks and hazards</li> <li>3. Vital registration (birth, death, etc) and information systems that support children’s rights are in place and/or strengthened</li> </ol>
<i>Building Block IV</i>	<p>10. Capacity Enhancement and Resource mobilisation</p> <p><i>‘Capacity – individual, household, community and national is improved to deliver integrated care to OVC’</i></p>	<ol style="list-style-type: none"> <li>1. Infrastructure, personnel, training and management are adequate to deliver care, support and services to OVC</li> <li>2. Interagency linkages, communication and co-ordination effectively support policies, planning and programming for OVC</li> <li>3. Meaningful community involvement in OVC-related matters takes place at all stages and levels</li> </ol>





