The Social Accountability

R E F E R E N C E   M A T E R I A L

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AGILE AND HARMONIZED ASSISTANCE
FOR DEVOLVED INSTITUTIONS

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ABOUT THIS BOOKLET

This reference material offers guidance on how to make use of social accountability approaches and tools in increasing public accountability and responsiveness to citizens.

The reference material provides a broad summary of social accountability as an approach in development. Whereas there are numerous social accountability processes and tools, this reference material covers Social Audits, the Citizen Report Card, Public Expenditure Tracking Surveys and the Community Scorecard.
The reference material is structured into two main sections.

Section 1 introduces social accountability and contextualizes it within the Kenyan setting.

Section 2 highlights the different tools and processes of social accountability.

It is expected that the reference material will be useful to citizens, organized groups, governments, private sector and other stakeholders in advancing accountability in public governance, use of public resources and service delivery.

1. INTRODUCTION TO SOCIAL ACCOUNTABILITY

1.1 What is Social Accountability?

This is an approach bringing together community members, service providers, and local government to identify service provision and utilization challenges, and to mutually generate solutions, and work in partnership to implement and track the effectiveness of those solutions in an ongoing process of quality improvement (CARE Malawi, 2013). The process should be an ongoing assessment, planning, monitoring and evaluation of services.

What Makes Social Accountability Successful?

CITIZEN ACTION

These are all organised activities undertaken by citizens to provide feedback, raise concerns and pro-actively interact with service providers and decision-makers.

REPUBLIC OF KENYA

STATE ACTION

These are processes undertaken by state actors, decision-makers and service providers to solicit feedback from citizens and respond to their concerns.

ACCESS TO INFORMATION (ATI)

This entails availing and provision of information on request by decision-makers/state actors/service providers. The information should be simple, accessible and in formats that can help both sides make informed decisions.

REDRESSING GRIEVANCES AND CONCERNS

These involve public mechanisms that can receive, respond to and address grievances raised by citizens.

CITIZEN-PUBLIC AUTHORITY INTERACTION

This entails interaction between citizens and state actors/ service providers/ decision-makers. It is at the interface stage where feedback from both citizens and state actors is negotiated into collective actions aimed at resolving outstanding issues. It can be collective or individual, face-to-face or virtual.

The importance of Access to Information in Social Accountability: The Challenges involved and how to address them

INFORMATION CHALLENGE	POSSIBLE ACTION
The document exists but you cannot gain access to it	1. Invoke the Constitution's Article 35, the Access to Information Act, 2016, the County Government Act and the PFM Act. 2. Lobby government information and public participation offices (if established) 3. Ask the media to report your denial of access to information 4. Talk to powerful stakeholders inside or outside government (e.g. MCAs, MPs) 5. Develop closer relationships with key people in relevant government departments and convince them that they can benefit from your work 6. Report the refusal to the Commission of Administrative Justice (CAJ)
You can access the document, but it is incomplete or unreliable	Supplement the document with information from other sources, including reports or data from other government departments e.g. the Controller of Budget, CSOs etc Interview government officials to clarify and fill in what is missing from documents or explain discrepancies
The information you need does not exist	Develop your own survey to gather relevant information Advocate for better information: call on the level of government to begin recording the kind of data needed to conduct social accountability

1.2 Social Accountability in the Kenyan context

Within the Kenyan context, social accountability can be used to strengthen citizen-centred development and for reducing corruption and wastage of public resources.

Kenya's Constitution and other legal and regulatory frameworks among them the County Governments Act 2012, the Public Finance Management Act 2012, the Urban Areas and Cities Act 2011 and the County Public Participation Guidelines of 2016 provide for inclusion in the County service delivery processes including management of funds and access to information within the Kenyan context.

These frameworks place obligations on all public institutions in the country, both at the national and county government levels to encourage the participation of the public in the decisions that the institutions undertake, and citizens can take this opportunity to promote social accountability.

2. TOOLS AND PROCESSES IN SOCIAL ACCOUNTABILITY

2.1 A word on tools and processes in Social Accountability

In starting off social accountability, citizens, organised groups, state actors, the private sector and other stakeholders employ numerous tools and processes. The tools used include social audits, community scorecards, public expenditure tracking surveys and citizens' juries among many others. Processes on the other hand involve the steps through which the various tools are broken down and implemented. For instance, the Community Scorecard as a tool has five steps which constitute processes within the tool. Although the tools and processes in social accountability are varied and diverse, they are guided by key standards across them. These standards include the following:

1. A comprehensive understanding of local happenings context
2. Knowledge of needs and requirements of the community
3. A good understanding of how government develops and implements its priorities
4. An organisation, group, or individuals that can facilitate the process
5. Mobilisation of community; continuous and effective engagement; institutionalization of necessary changes

2.2 THE SOCIAL AUDIT

2.2.1 What is a Social Audit?

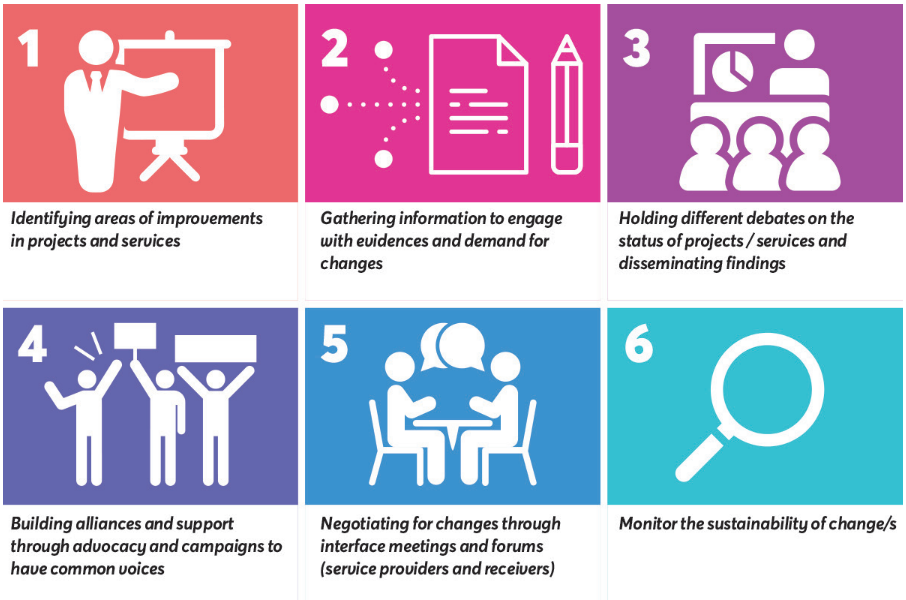
A social audit is a community led process that facilitates public participation in the monitoring of public service delivery and expenditure. During the social audit process, communities study relevant documents from development stakeholders such as government, the private sector, NGOs and others and compare them to their experiences as recipients of a public services. Evidence and experiences are collected, presented, and then discussed with relevant officials from the development stakeholder agencies.

- Social audits are usually conducted by residents living in a village/ward/county and focus on development issues identified by that community.
- They are conducted in a language that is accessible to most of the participants and are inclusive processes in which everybody, especially women and young people, actively participate.
- Social audits require residents to gather, analyse and disseminate information, mobilize public support and advocate and negotiate for change.

Social audits should be used as a tool for communities to engage constructively with development stakeholders, including governments, NGOs, the private sector and UN development bodies among others to improve public participation. If used well, social audits should lead to increased community organisation and empowerment, as well as improved community participation and involvement in governance and improved service delivery.

2.2.2 The Social Audit Process

Generally, the application of social audit involves the 6 steps highlighted in the graphic below:



Stage 1: Preparation and planning

Define the Social Audit Objectives and establish its legitimacy. This can be done by:

1. Identify interested individuals, whether from local CSO networks or from the wider community, who can support the Social Audit process.
2. Working with the individuals to mobilise community members, leaders and other stakeholders for the Social Audit process.

Determine the focus of the Social Audit: this involves,

1. Working with the individuals and the target community to identify an issue to audit.
2. Constituting a Social Audit team which is necessary to facilitate the audit process, and which should come from among the target community.
3. Deciding the logistics of the Social Audit process including the dates, mobilisation of participants and engaging other relevant stakeholders for the Social Audit exercise.

Social Audit Team

Social audit team members can be drawn from among community/county/ward stakeholders including residents. Once identified, social audit team members will have to be trained by social audit experts. To be effective, the social audit team must:

1. Seek clarifications from the implementing development agencies (government, private sector or NGO) about any decision-making, activity, scheme, income and expenditure incurred by the contractor.
2. Consider and scrutinize existing scopes and local activities or services of the projects.
3. Access registers and documents relating to all development activities undertaken by the contractor or by any other development agency.
4. Reaching out to all relevant development agencies and gathering all the relevant documents such as project budgets, Bills of Quantities, contracts etc.

Stage 2: Conducting the Social Audit

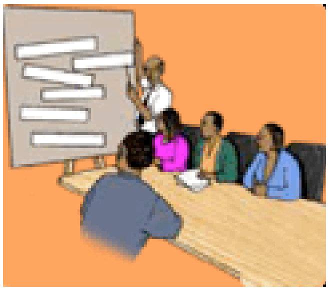
Holding Community Meeting and Organizing Participating Group: This involves,

1. Letting the community take a leading role in the social audit on an agreed upon issue.
2. The community should be clear on the aim of the social audit, the process for conducting it, and have a chance to ask questions and share their expectations.
3. Site visits should be made to projects and services being evaluated.

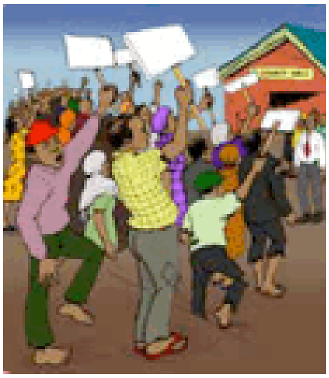
Gathering Evidence from the Recipient Community:

Different methods of evidence gathering can be used, including,

1. Residents' testimonies,
2. Interviews,
3. Physical verification, and
4. Photography.



Organizing Findings and Evidence: The social audit team should,



1. Ensure that as much as possible the findings are supported by the evidence and testimonies gathered.
2. Ensure that findings which are likely to have a significant influence on the identified problems are ranked first while those with less influence and which can be addressed within short period can be dropped.
3. Share drafts of the findings with relevant officials prior to the public engagement.
4. Decide who will present at the public engagement and these individuals will need to practice before the event.

Preparing and Holding Public Engagement: At this stage,

i. The community needs to be mobilised to attend the social audit public engagement event.

ii. The social audit team should plan well for the logistics including a properly functioning public address system, timing of the event as well as venue to ensure the best outcome.

iii. The findings need to be presented in a clear and accessible way to ensure that everyone can understand them.

Agreed actions, Follow Up and Advocacy:

The success of social auditing depends on the follow-up actions taken to respond to the gaps identifies in the social audit report and the receptiveness of the departments/ organisations to adopt the recommendations in the social audit report. For the social audit process to be concluded successfully, it requires,

1. Having a clear joint action plan for dealing with the gaps identified, with clear roles and responsibilities for those involved
2. Follow up with both the community – to keep them actively involved in the process – and development agencies – to hold them accountable to their commitments.
3. Reflection on the process as a whole and consider ways in which the social audit could be refined or improved upon
4. Building a collaborative relationship with all relevant stakeholders beyond the social audit phase in order to institutionalise the results.

Dos and Don'ts in Social Audits: Lessons from Bomet County

'I attended a social audit session today. The project being audited was laced with heavy politics. Most duty bearers involved in the project distanced themselves from it, and even the area MCA confided in me his misgivings about how the project was executed. The project taught me several lessons in social auditing processes, which I wish to share here:

Rule 1: *In planning the social audit process, involve local leaders such as Mzee wa Mtaa, the local Chief, the ward administrator and others. Let them understand the social audit process and what it seeks to achieve. If you ambush them with the process without informing them, they will dismiss it as aimed at politics.*

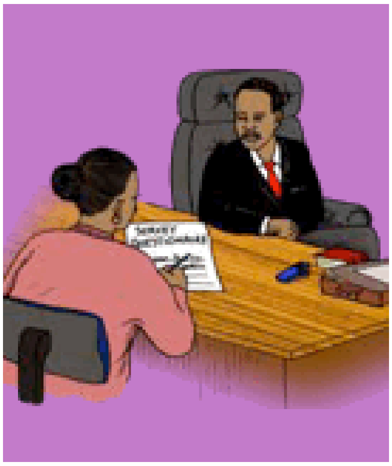
Rule 2: *Inform the public what the process is about, anchoring it in devolution and the obligations of government in public service provision.*

Rule 3: *Agree to the agenda of the process early enough. Make it clear to everyone. If this is not done, people will introduce other agendas in the process, and in this way, the social audit process will not achieve much.*

Rule 4: *Let the social audit process be led by a group with local legitimacy. Avoid having a non-local take leadership of the process. Tap into local CSO groups and ask them to lead the process*

Rule 5: *Do not take sides in the emerging deliberations. Seek to establish the right answers that will help solve problems regarding the audited project. Kirui, I Choose Life, Bomet County*

2.3 The Citizen Report Card (CRC)



2.3.1 What is a Citizen Report Card?

The Citizen Report Card (CRC) is a tool used to measure how satisfied users of services are with the services they are receiving from development agencies. Under it, the users give scores indicating their satisfaction with services against indicators such as availability, accessibility, quality and reliability of public services like education and health.

2.3.2 Process in the Citizen Report Card

The key steps involved in conducting CRCs are:

Step 1: Identification of Scope of Survey: This involves:

1. Identifying the what the survey will cover (i.e. the service, facility or sector to be assessed based on the report card).
2. The choice can be based on a number of criteria, among them services that are closest to the people or those faced with service delivery problems.

TAKE NOTE: Given that the survey is usually technical, it is advised that a team which carries it out is given the necessary capacity to conduct it.

Design the questionnaire: This requires,

1. Interactions with certain focus groups like service providers and service users. Meetings with servicer providers give an indication about the mandate of the service which they provide and areas where feedback from the users would help in improvement of service delivery.
2. The service users on the other hand provide indication of problems and issues in various services and areas that deserve more probing.
3. Before the CRC can be launched full-scale, the questionnaire needs to be tested.
4. The data collection questionnaire should be as clear as possible so that it is not cumbersome for people answering it
5. Next, the sample size needs to be decided to ensure a representative sample.

Execution of the survey: This involves,

1. Selection and training of enumerators, the people who will use the questionnaire to gather answers from the respondents.
2. Pre-testing the work of enumerators and preliminary feedback used to modify the tactics for questioning.
3. Conducting the actual survey by having the enumerator go out to the field and gather answers from all the identified

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respondents based on the sample chosen..

4. Carrying out random spot-checking by a lead enumerators to ensure that the information being filled is accurate.

Analysis of the survey results: This involves

1. Having enumerators transcribing their data.
2. Going through the data, sorting out inconsistencies, filling the data into tables and reporting templates.
3. Analysing, aggregating and averaging the scores to produce a satisfaction score (in percentage). This is the report card.

Using the survey results:

Once the scores have been established, the data in the report card needs to be used constructively.

1. The findings should first be shared with the service providers and their problems in terms of staff and inadequate funding noted in the survey.
2. In sharing the survey findings, target audiences should be considered and appropriate channels of communicating the findings established.
3. Once the findings have been widely shared, face to face meetings between users and providers should be organised to deal with the gaps identified by the findings.

TAKE NOTE: The process can be institutionalized by having County and National Governments use the report cards for instance through consulting the report cards when coming up with county budgets, making the budgets respond to the issues that citizens raised in the report card.

2.4 Public Expenditure Tracking Survey (PETS)

2.4.1 What is Public Expenditure Tracking?

Public expenditure tracking surveys (PETS) is a process by which citizens and/or Civil Society Organizations (CSOs) monitor how monies held by development agencies including government and NGOs are allocated, disbursed and utilised. Also known as budget tracking, PETS is sometimes ordinarily referred to as 'follow the money' (fuatapesa in Swahili), which means that citizens and CSOs track how public funds are transferred from the development agencies, until they reach the end users such as schools and clinics, as well as how those end users then use the funds to deliver public services. PETS can be utilized at various of governance to enhance transparency in budget flows from the national Treasury and county finance departments to service delivery agents at the community level.

2.4.2 Steps in Public Expenditure Tracking Surveys

Step 1 Preparation for Public Expenditure Tracking Survey
This step involves setting up a team of PETS monitors who will guide the process from start to end. The team should ideally come from the communities expected to benefit from the PETS exercise. The team's main role is to facilitate the rest of the PETS process.

Step 2 Literature Review
This steps involves analysis of the goals and policies of the development agency, whether the national government, an NGO or the county government, paying particular attention to the groups, issues or sectors that one is most concerned about. As an example, in case the PETS is being carried out on the County Government (going forward in this section on PETS, reference will be made mostly to the County Government in order to provide greater clarity on how to undertake PETS), the literature review involves analysis and evaluation of County goals in the light of key County Integrated Development Plan (CIDP) and Annual Development Plan (ADP) objectives and their likely impact on these key concerns.

Key documents to analyse and review include:

1. The County Integrated Development Plan
2. The Annual Development Plan
3. The Quarterly Budget Implementation Reports
4. The Annual Budget Implementation Reports
5. The Auditor General Reports
6. The County Financial Estimates and Approved Budgets
7. Respective sector reports (if available)

Step 3 - Map the context of Public Participation process in the budgeting processes at the County level

1. Who participates? (women, men, youth - boys and girls, people living with disability, pastoralists etc.)
2. How do they participate?
3. Whose perspectives/voices are heard most effectively?
4. Are there feedback mechanisms from PP processes?

Step 4 - Talk with key actors about PETS and its advantages
This is involves talking to people in government, who may be open to change. You need to target particular people, and spend time developing a positive working relationship with them. Think about targets in terms of individuals rather than institutions. A good example might be the Chief Officers or County Executive Committee Members (CECMs) responsible for respective sectors.
Find out as much as you can about the individual, and about their aims, objectives and plans. Define your primary targets as those people and seek to influence them. Also think in terms of these three groups of people:

1. Stakeholders – the individuals and groups who do, or will, have an interest in what you want to change through the PETS findings.
2. Decision-makers – the key individuals

that will bring about the change that you want.
3. Influencers – the people who can influence decision makers; they can act on your behalf or against you.

A particular outcome from step 3 is sensitization of key County officials on the statutory obligation they have to share relevant financial information and their availability to adopt/embrace your PETS report.

Step 5 - Convene an introductory PETS meeting

This needs to be over a 1-3-day period (depending on the scope of the PETS), and to provide a time for developing a common understanding of County budget process issues and PETS methodology and share some basic financial information. This step is meant to agree on the scope of the PETS, including the services and projects to be covered under the review. The scope then provides the guidance on the design of the PETS tool to be used in gathering data in the field

Step 6 - Field Work

The purpose of this is to utilize the PETS tool within the selected priority projects, answering the specific questions raised in the tool. Beside gathering quantitative and qualitative data, data gatherers should also take photographic evidence showing the status of projects and services under review.

Step 7 - Data Analysis and Report Writing

This entails putting together the gathered data into a coherent format and analysing it to come up with findings. The findings are then used to generate a comprehensive report detailing the status of projects and services as compared to the funds allocated to them. . This constitutes the PETS report, which should then be used to plan for the next course of action.

Step 8 - Feedback and Advocacy with all relevant stakeholders

This involves:

1. Convening a meeting to discuss the findings at the community level.
2. The meeting allows different actors to reflect on the value that the exercise has had for them.
3. It will be useful for the team of PETS monitors to have a meeting prior to the full feedback meeting, to ensure that there is a common understanding of key messages and priorities.
4. This meeting can be the opportunity for officials from relevant development agencies to agree to improve information sharing, public participation and provide broad feedback.

TAKE NOTE: This meeting should be a win/win situation for all different actors.

Step 9 - On-going Follow Up and Dissemination

It is important that the team of PETS monitors 'stay with the process' rather than seeing PETS as a 'one off' series of activities. This means continuous work on the Public Expenditure Management (PEM) cycle to ensure the PETS findings influence the cycle.

2.5 The Community Scorecard (CSC)

2.5.1 What is a Community Scorecard?

The Community Scorecard (CSC) is tool which the community uses to provide feedback to providers on the state of services through a face to face meeting.

2.5.2 Process in the Community Scorecard

Steps in the CSC approach

The basic steps in the CSC are mainly five and comprise of:

1. Preparatory work
2. Conducting scorecard with the community
3. Conducting the scorecard with service providers
4. Interface meeting
5. Follow up (action planning, implementation & M&E)

Step 1: Planning and preparation for the CSC approach

Prior to conducting a CSC process, adequate planning and preparation must be undertaken. There are two major sets of activities carried out at this stage. The first set of activities involves carrying out the analysis of the context to fully understand the facilities, sectors and services that are being evaluated. There are several tools that should guide the facilitator in carrying out this analysis of the context. They are:

- Problem/solution-tree - for generation of the key areas of focus that the CSC approach should target;
- Stakeholder analysis - to identify key actors and stakeholders that should be part of the CSC problem-solving approach;
- Power analysis - helps the facilitator to establish the influence that each of the identified stakeholders have over the issues of focus under the CSC approach; and,
- Gender analysis - helps the facilitator distinguish how the issues under focus in the CSC approach affect men differently from women.

The second set of activities involves mobilisation of key stakeholders and their preparation to take part in the implementation of the CSC processes. The process followed here involves:

1. Identifying key community gatekeepers that would be important for mobilizing the different members of the community expected to be part of the CSC process
2. Visiting the target community accompanied by the gatekeepers to invite it to the CSC process
3. Introducing the CSC approach to the target community and responding to any of the questions they have over the approach
4. Getting the pledge of the community to be part of the CSC approach
5. Agreeing dates and venues for meetings to start off step two of the CSC approach
6. Clarifying expectations and outputs from the CSC process
7. Identifying key leaders, service providers and duty bearers that would be critical in the CSC process
8. Visiting the target leaders and duty bearers and introducing the CSC process to them
9. Getting the buy-in of the leaders and duty-bearers in the CSC process
10. Agreeing dates and venue of Step 3 of the CSC process

Step 2: Issue generation among communities

Step 2 commences with a visit to the target communities. The process is usually successful if the facilitator uses community gatekeepers as the key entry point persons in target communities. The key processes to undertake under Step 2 include:

ISSUE GENERATION

- Meeting with identified target community members in a specified venue
- Agreeing to the rules for the meeting and key outputs out of the meeting
- Asking community members in a plenary to identify broad issues related to the main objectives of the CSC approach
- Divide the community members into different focus groups for more in-depth discussions on the issues identified
- The groups could be divided on the basis of dynamics such as age, specific location of origin, gender, etc
- Each focus group should identify one or two most important issues that it feels should be addressed by the CSC process
- Convene the groups once again in plenary and have each group present their chosen issue(s)
- Agree to a maximum 8 issues from the community

SCORING ON THE ISSUES

- Once the main issues have been agreed to, introduce a matrix for guiding the discussion around scoring on the issues
- The matrix should have columns comprising of an issue column, an indicator column, a score column and a reason for the score column
- The issue column should be filled with the 8 agreed issues, the indicator column should be filled with the ideal that would be reached if the issue was resolved, the score column should indicate the risk that the issue poses on inter and intra-faith harmony (high, low or medium) and the reason for the score column should provide a brief explanation for the score.

CHOICE OF ANIMATORS AND FINALIZING OF STEP 2

- Once the 8 issues have been placed in the matrix indicated above, the community should be informed of the next steps (Steps 3, 4 and 5)
- The community should be asked to choose animators, basically those it wants to represent it in the interface at Step 4 (usually from amongst those most vocal, visible or with vivid examples of the issues indicated)
- The animators and the community should be informed of the venue, date and expected outputs of the interface with service providers, leaders and duty bearers.

Step 3: Issue generation among leaders, service providers and duty bearers

Step 3 largely mirrors Step 2 in everything except in the target actors. Whereas Step 2 largely works with communities, Step 3 is aimed at the leaders and service providers. The key processes to undertake under step 3 include:

ISSUE GENERATION

- Meeting with identified target leaders, service providers and duty bearers leaders in a specified venue, usually their places of work.
- Agreeing to the rules for the meeting and key outputs out of the meeting.
- Presenting the issues generated in the community meeting under step 2. What should be presented here should be however be only the 8 issues that the community identified as the most important in their relationship with leaders, service providers and duty bearers.
- Leaders, service providers and duty bearers should respond to the issues generated by the communities.

SCORING ON THE ISSUES

- The leaders, service providers and duty bearers should basically give their own score of how they perceive the issues generated by the community.
- They should also provide the reasons for their choice of scores.

CHOICE OF ANIMATORS AND FINALIZING OF STEP 3

- Just as happens in Step 2, step 3 is finalized through informing the leaders, service providers and duty bearers of the next steps of the CSC process - Step 4 where the issues they raised along with those from the community would be discussed in the interface meeting during step 4 to come up with a joint action plan for resolving the issues identified by both sides.

- The leaders, service providers and duty bearers should choose from among themselves an animator who they would wish to have represent and articulate their issues during the interface.
- Leaders, service providers and duty bearers should be requested to attend the interface meeting and help in generating a joint action plan that would address issues of concern to both leaders, service providers and duty bearers and the target communities.

Step 4: The Interface meeting

1. Step 4 is a central part of the CSC approach. Without holding an interface meeting, the entire CSC approach is incomplete. To ensure a successful interface meeting, the organisers and facilitators must pay close attention to the following activities:
2. Preparations for the interface to ensure the interface will be properly attended and action plan agreed;
3. Presentation of the scoresheets to ensure the issues raised by the communities and service providers are exhaustively discussed and resolved;
4. Introduction and agenda setting in the interface to ensure the agenda of the interface is as clear to everyone as possible; and,
5. Facilitation, responsibilities and finalisation during the interface to ensure that at the end of the interface, there are clear actions points agreed and persons given responsibilities to deal with those issues.

Step 5: Follow up actions through a Joint Action Plan

Step 5 basically involves agreeing on a joint action plan between the users and providers on how to resolve the issues generated. It involves the following details:

- Drawing up an action plan with issues discussed, solutions agreed, the persons responsibility for the solutions, the timelines by when they will resolve the issues and the resources required to resolve the issue
- Electing a joint monitoring team drawn from both users and providers to monitor the implementation of the action plan
- A calendar of activities for the joint monitoring team which indicates how frequently the team will meet to discuss the progress of the joint action plan
- The date when the joint action plan will next be reviewed before a second cycle of the CSC process is began again

COMMUNITY SCORE CARD
MACHAKOS COUNTY

GROUP NAME: ______________________________

DATE: ______________________________

WARD: ______________________________

VILLAGE: ______________________________

FACILITY: ______________________________

INDICATOR	SCORES					COMMENTS/REMARKS
	VERY BAD	BAD	FAIR	GOOD	VERY GOOD	

ACTION PLAN INTERFACE MEETING

DATE: ______________________________

LOCATION (SUB-COUNTY, WARD, VILLAGE): ______________________________

PRIORITY THEME/ ISSUE	ACTIVITIES NEEDED TO ADDRESS ISSUE	WHO WILL LEAD IT (NAME + INSTITUTION)	WHEN IT SHOULD BE DONE (BE REALISTIC)	RESOURCES REQUIRED (IF ANY & SOURCE)	NOTES/ COMMENTS/ REMARKS

PUBLIC EXPENDITURE TRACKING SURVEY TOOL

THE USER DETAILS

Group name/individual name ________________ Organization/Category: ________

Gender Male: ________ Female: ________ Sub county of residence: ________

Age/Years in operation Below 35: ________ Above 35: ________ Ward of residence: ________

SECTOR/DEPARTMENT UNDER REVIEW

Name: ________________

DESCRIPTION OF AREA UNDER REVIEW

Sub County: ________________

Ward: ________________

Village: ________________

Date of Survey ________________

PROJECT DETAILS	AMOUNT APPROVED	AMOUNT ALLOCATED	AMOUNT USED	DIFFERENCE/ VARIANCE	COMMUNITY FEEDBACK
Project Description and Objectives					

QUALITY SURVEY QUESTIONS

DESCRIPTION	YES	NO	Detailed explanation to the answer provided by the beneficiaries
Were community members involved in the selection of this project?			
Are community members happy with the location of the project site?			
Have you seen the plans of this project?			
Name of company awarded the contract/tender?			
Was the Ward Development Committee involved during tender/Contract award?			
a) Do you have complaints related to this project ?			What are the complaints:
b) Have you shared them with the implementers?			
c) Have you received any feedback/ redress?			

DESCRIPTION	Time Started	Time Completed	Comment
Is the project on time as per the planned timeline?			

SAMPLE SOCIAL AUDIT TOOL 1

Level 2 Facilities (Dispensaries)

1. Governance

Name of Health Facility:_______________________________

Location:____________ Ward:______Sub-County:________

Date/Year of Establishment:__________________________

Facility registration number:_________________________

Is there a Facility Management Committee (FMC)? Yes ( )

No ( )

How many members does the FMC have?

Male _________Female _______Total: ________

How many PWDs and Youths are in the FMC?

PWDS_______ Youth __________

Have members of the FMC been trained? Yes ( )

No ( )

How often does the FMC meet? Monthly ( )

Quarterly ( ) Bi-annually ( )Annually ( ) Other:

____

Does the facility maintain minutes of meetings held by

FMC? Yes ( ) No ( )

How are FMC members recruited?

Elected by community ( )

Appointment by community leaders ( )

Other (specify):__________________________________

If not complete, do you know why?	Rate the project implementation in the following scale and justify why?			If not complete, do you know why?
Comment	Excellent	Good	Poor	

2. Infrastructure available in the Facility

Infrastructure	Number	Remarks on status of Infrastructure
Treatment Room		
MCH/FP Services Room		
Waiting Room		
Community services room		
Consultation room		
Outpatient Department (OPD) shed		
Store		
Incinerator		
Pit latrine (No. of Doors)		
Installation of ramps - PWDs		
Water storage tank		
Fence and Gate		
Composite pit		
Land size(Acreage)		
Power connection		
Reliable source of water		State sources:

3. Equipment available in the Facility

Infrastructure	Number	Remarks on Equipment Status
Motor Cycle		
Communication equipment		
Fridge – MCH/FP		
Low cost delivery bed		
Locally defined referral transport (ambulance / bicycle) from community to facility.		

4. Staffing in the Facility

Staff Cadre	Number	Remarks on Staffing
Registered Nurses		
Community Health Extension Workers		
General Attendants		
Watchman		

5. Availability of Drugs in the Facility

Drugs		Remarks on Drugs
How often does the facility request for replenishing of drugs?	Monthly ( ) Quarterly ( ) Other: ______	
Does the facility receive all drugs requisitioned?	Yes ( ) No ( )	
Does the facility receive drugs requested on time?	Yes ( ) No ( )	
Does the facility have a system for managing drug inventory?	Yes ( ) No ( )	

6. Access to Information in the Facility

Service Charter		Remarks on Service Charter
Is there a service charter in the health facility?	Yes ( ) No ( )	
Is the service charter written in a language that is easy for users to understand?	Yes ( ) No ( )	
Does the service charter provide relevant information to (services offered, fees charged, complaints contact, queuing time, operational hours etc)	Yes ( ) No ( )	

Service Charter

Remarks on Service Charter

Is the facility able to provide all services listed on the charter?	Yes ( ) No ( )	If no, why?
Is the facility able to serve patients within the duration specified on the service charter?	Yes ( ) No ( )	If no, why?
Does the facility open and close as indicated on the charter?	Yes ( ) No ( )	If no, why?

Notice Boards

Remarks on Notice Boards

Does the facility have a notice board?	Yes ( ) No ( )	
Does the facility display financial information on the notice board?	Yes ( ) No ( )	
Is financial information accessible to the public upon request?	Yes ( ) No ( )	

7. Financial Support from County Government

Remarks on Notice Boards

Financial Support		Remarks on Financial Support
Does the facility receive AIE (authority to incur expenditure) support from the county government?	Yes ( ) No ( )	
What other financial support does the facility receive from the county government?	HSSF ( ) RBF ( ) Other: _______	
Does the facility receive the financial support on time?	Yes ( ) No ( )	If No, how long does the facility wait to receive funds?

8. Public Participation

Remarks on Notice Boards

Community Open Days		Remarks on Public Participation
Does the facility hold community open days?	Yes ( ) No ( )	
If yes, how often does the facility hold community open days?	Yes ( ) No ( )	
Complaint handling and feedback mechanisms		
Are there suggestion boxes installed in the facility?	Yes ( ) No ( )	
Does the facility maintain a register of complains raised by users?	Yes ( ) No ( )	
Does the facility provide feedback to users on complains raised?	Yes ( ) No ( )	

SAMPLE SOCIAL AUDIT TOOL 2

Level 3 Facilities (Health Centres)

1. Governance

Name of Facility:		
Location:	Ward:	Sub-County:
Date/Year of Establishment:		
Facility registration number:		
Is there a Facility Management Committee (FMC)	Yes ( ) No ( )	
How many members does the FMC have?	Male_____ Female_____ Total_____	
How many PWDs and Youths are in the FMC?	PWDs_____ Youths_____	
Have members of the FMC been trained?	Yes ( ) No ( )	
How often does the FMC meet?	Monthly( ) Quarterly( )Bi-annually( ) Annually( ) Other( )	
Does the facility maintain minutes of meetings held by FMC?	Yes ( ) No ( )	

How are FMC members recruited?	Elected by community____________ Appointment by community leaders _______________ Other(specify)____________________
Does the facility have a Procurement / Tendering Committee?	Yes ( ) No ( )
If yes, how many members does the procurement committee have?	Male_____ Female_____ Total_____
Does the facility maintain minutes of meetings held by procurement committee?	Yes ( ) No ( )

2. Infrastructure in the Facility

Infrastructure	Number	Remarks on status of Infrastructure
Consultation Rooms		
Treatment Room/ injection room		
Minor theatre at outpatient		
Records Room		
Male wards		
Female wards		
Stores (general / drugs store)		
Laboratory Room		
Labour Ward		
Delivery Room		
Community Service Room		
Staff Houses		
Patients latrine/ toilets		
Staff latrine/ toilets		
Incinerator		
Placenta pit		

Infrastructure	Number	Remarks on status of Infrastructure
Supply service units (kitchen & laundry)		
Installation of ramps - PWDs		
Power and power back up		
Reliable source of water		
Antenatal Ward		
Post-natal ward		
Triage section		
Staff changing room		
Sterilization room		
Pharmacy		
Waiting Bay		
Land size (Acreage)		

3. Equipment in the Facility

Equipment	Number	Remarks on condition
Delivery beds		
Motor Cycle		
Communication equipment		
Beds in inpatient (maternity)		
Mobility equipment e.g. wheelchairs/stretchers		
Fridge – lab		
Fridge – MCH		
Fridge – Pharmacy		
Centrifuge		
Microscope		
Resuscitation equipment		
Delivery sets		

Stethoscope		
Foetoscope		
Oxygen gas &Mask		
Dressing Kits		

4. Staffing at the facility

Staff Cadre	Number	Remarks on Staffing
Clinical Officers		
Nurses (Delivery/Maternity, MCH, Dressing)		
Lab technicians		
Pharmaceutical technologist		
Statistical Clerks		
Cashier		
General attendants		
Cook		
Watchmen		
Counsellors		
Community Health Volunteers		

5. Availability of Drugs in the Facility

Drugs		Remarks on Drugs
How often does the facility request for replenishing of drug inventory?	Monthly ( ) Quarterly ( ) Other: ______	
Does the facility receive all drugs requisitioned?	Yes ( ) No ( )	If no, why?
Does the facility receive drugs requested on time?	Yes ( ) No ( )	If no, after how long do drugs arrive at the facility?
Does the facility have a system for managing drug inventory?	Yes ( ) No ( )	If yes, is it manual or computerized?

6. Access to information in the facility

Service Charter		Remarks Service Charter
Is there a service charter in the health facility?	Yes ( ) No ( )	
Is the service charter written in a language that is easy for users to understand?	Yes ( ) No ( )	
Does the service charter provide relevant information to (services offered, fees charged, complaints contact, queuing time, operational hours etc?)	Yes ( ) No ( )	
Is the facility able to provide all services listed on the charter?	Yes ( ) No ( )	If no, why?
Is the facility able to serve patients within the duration specified on the service charter?	Yes ( ) No ( )	If no, why?
Does the facility open as indicated on the charter?	Yes ( ) No ( )	If no, why?
Notice boards		**Remarks Notice Boards**
Does the facility have a notice board?	Yes ( ) No ( )	
Does the facility display financial information on the notice board?	Yes ( ) No ( )	
Is financial information accessible to the public upon request?	Yes ( ) No ( )	

7. Financial Support from County Government

Financial Support		Remarks on Financial Support
Does the facility receive AIE (authority to incur expenditure) support from the county government?	Yes ( ) No ( )	
What other financial support does the facility receive from the county government?	HSSF ( ) RBF ( ) Other: ______	

Financial Support		Remarks on Financial Support
Does the facility receive the financial support on time?	Yes ( ) No ( )	If No, how long does the facility wait to receive funds?
Does the facility collect fees from users?	Yes ( ) No ( )	If yes how much?
Are patients issued with the receipt after any payments?	Yes ( ) No ( )	

8. Public Participation

Community Open Days		Remarks on Public Participation
Does the facility hold community open days?	Yes ( ) No ( )	If yes, how often does the facility hold community open days?
Complaint handling and feedback mechanisms		
Are there suggestion boxes installed in the facility?	Yes ( ) No ( )	
Does the facility maintain a register of complains raised by users?	Yes ( ) No ( )	
Does the facility provide feedback to users on complains raised?	Yes ( ) No ( )	

SAMPLE SOCIAL AUDIT TOOL 3

Infrastructural Projects

Date of Assessment: ______________________ **Venue:** ______________________

A. FACILITATORS' DETAILS

Name of the T.o.T ______________________

Gender: Male ______________ Female ______________

Age ______________ Below 35 years ______________ Above 35 years ______________

B. BASIC INFORMATION-TO BE OBTAINED FROM THE GOVERNMENT DOCUMENTS

Official name of service/project under review: ____________________

____

Project Identification No:__________ Implementing Department:__________

Sub-county: ____________________

Ward: ____________________

Village: ____________________

Financial year of approval:__________ Budget allocation: __________

Amount disbursed (Financial years):__________ Amount Used:__________

Objective of the project/service: ____________________

____

Name of the contractor/service provider:____________________

____

Contract Amount: __________ Start Date: __________ End date: __________

C. FEEDBACK FROM THE BENEFICIARIES

Are you aware of this project? Yes ( ) No ( )

Did you participate in the identification/planning of this project? Yes ( ) No ( )

How were you involved in the identification of the project?

Attended Meetings( ) Represented( ) Complained to the government( )

Demonstrated/picketing( )

What problem was/is the project aimed at solving ____________________

____

Are you satisfied with the project's location?Yes ( ) No ( )

Explain you response ____________________

Is there a Project Management Committee for this project? Yes ( ) No ( )

Does the Project Management Committee have the Bills of Quantity? Yes ( ) No ( )

Do you know how much was/is in the approved budget for this project? Yes ( ) No ( )

If yes, how much and source of information ____________________

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Do you know the actual contract cost of the project? Yes ( ) No ( )

If yes, how much ______________________________

Is the cost reasonable? (value for money) Yes ( ) No ( )

Explain your response ______________________________

Have you seen the approved plans and project bill of quantities? Yes ( ) No ( )

Is/was the project implemented on time as per the planned timeline? Yes ( ) No ( )

Explain your response ______________________________

Are you satisfied with the quality of the project/service? Yes ( ) No ( )Explain your response ______________________________

If complete, is the project or service functioning? (Ask this question only for the completed projects) ______________________________

____

Is the project accessible to you and community members? Yes ( ) No ( )

Has the project served the intended need or solved the community problem?

Yes ( ) No ( ) Explain your response ______________________________

____

Accountability issues identified by the ToT ______________________________

____

____