



INTERNATIONAL CONFEDERATION OF MIDWIVES
Member Association Capacity Assessment Tool (MACAT)

Name of Association:

Name of person completing the questionnaire:

Position in the Association:

Date completed:

Please place a tick in the appropriate column. Answer **All** questions in each section.

A. Governance	Yes	No	N/A
A1. Board			
1. The association has a Board and/or an Executive Committee governed by a constitution and by laws.			
2. The association has clearly defined roles and responsibilities for the Board/Executive and members.			
3. The Board/Executive meets at least twice a year.			
4. The Board/Executive Committee carries out the roles of strategy development.			
5. The Board/Executive Committee carries out the roles of policy formulation.			
6. The Board/Executive Committee carries out the roles of fund raising.			
7. The Board/Executive Committee carries out the roles of public relations.			
8. The Board/Executive Committee carries out the roles of financial oversight.			
9. The Board/Executive Committee carries out the roles of lobbying.			

A2. Vision, Mission	Yes	No	N/A
10. The association has clearly stated vision and mission statements.			
11. The mission is developed in collaboration with members in some way (email, or meetings).			
12. New members are have access and are orientated to the association's vision, mission, and goals.			
13. The activities of the association are consistent with the mission and vision.			
14. The vision and mission statements are shared with members, giving a sense of purpose and direction to the association.			
15. The vision and mission statements are reviewed and updated regularly with input from members at least every 3-5 years.			
A3. Goals and Strategies			
16. The association has a clear strategic planning process.			
17. The association has a clearly written strategic plan with achievable long term and short term goals.			
18. The association's goals and strategies, developed with input from members, are in line with the mission and vision.			
19. Mechanisms exist for reviewing and updating association goals with input from members.			
20. The association has realistic budgeted operational work plans, aligned with the strategic planning process.			
21. The association monitors and evaluates the quality and impact of its work.			
22. The association uses evaluation results to influence service delivery planning.			
A4. Legal Status			
23. The association is registered as an autonomous organisation according to the country's legislation.			
24. The association is part of another health care professional association: <ul style="list-style-type: none"> a. Obstetric association b. Nursing association c. Other 			
25. If yes, to 24 above , the association has its own structure and decision making processes and tools that are documented and transparent.			

	Yes	No	N/A
26. The association has a constitution developed and shared with members.			
27. The constitution is reviewed with input from members every 5 to 10 years.			
28. All new members have access to or are given a copy of the constitution.			
Additional comments:			
B. Management Practices and Leadership			
B1. Administrative policies and procedures			
29. The association has policies and procedures for electing leaders and office bearers.			
30. The association has operational policies and procedures in place.			
31. The association has defined roles and responsibilities for the leaders, for staff, if any, and for members.			
B2. Infrastructure and information systems			
32. The association has office/space to support and facilitate its daily work.			
33. The office /space is well equipped and maintained with relevant communication systems (telephone, email, fax, internet).			
34. The association has systems in place to process/manage information including an updated list of its members.			
B3. Authority and accountability			
35. Guidelines for the working relationship between the Board/Executive Committee, staff and members are clearly outlined in the policy documents.			
36. The Board/Executive Committee regularly informs members on the association's activities and at the annual general meeting.			

B4. Human Resources	Yes	No	N/A
37. The association staff, if any, are recruited in a transparent, competitive manner, to fulfil its needs.			
38. The association, if it has staff, has clear human resources and employment policies in place (employment contracts, salary structures and benefits, job descriptions).			
39. The association incorporates capacity building /development of staff as part of its annual plan.			
40. The association has information kits, policy manuals etc for its staff and members available on request.			
Additional comments:			
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C. Financial Resource Management			
C1. Accounting			
41. The association has an accounting system.			
42. The association has regular audits conducted yearly.			
43. The association's accounting system enables it to produce a financial report when required.			
C2. Budgeting			
44. The association has an annual budget which is approved by the Board/Executive Committee.			
45. The association has a person specifically responsible for budget management.			
C3. Financial Information			
46. Donors, members, or others can access financial information on request.			
47. The association produces annual financial reports which are reviewed and approved by the Board/ Executive Committee.			
48. The association presents a full financial statement in its annual report.			

	Yes	No	N/A
Additional comments:			
D. Functions			
D1. Membership Services			
49. The association has mechanisms to identify the needs of its members.			
50. The association organises general meetings with its members annually.			
51. The association has a mechanism for recruiting new members.			
52. The association has mechanisms for membership retention.			
53. The association has a membership structure.			
54. The association has a membership fee structure.			
55. The association has mechanisms for updating its membership list.			
56. New members are oriented to the information available and how to request it.			
57. The association has mechanisms in place to make recommendations on salaries, and working conditions of its members.			
58. The association has mechanisms to provide continuing professional education for its members.			
D2. Advancing Professional Practice			
59. The association develops or contributes to the development of professional standards for education and regulation.			
60. The association has capacity to support and publicly recognise positive quality practice by members (e.g. practice, education, research, policy, leadership etc).			
61. The association has mechanisms in place to share best practices and engage in mutual learning opportunities with other organisations.			

D3. Quality control for care	Yes	No	N/A
62. The association has mechanisms for providing guidance, advice and information to its members on quality of care.			
63. The association contributes to /advocates for the development and implementation of midwifery regulation.			
64. The association has mechanisms to assist its members in meeting any continuing competency requirements needed for licensure or renewal of license.			
65. The association has a regularly reviewed Code of Ethics for members or works within the ICM code.			
66. All new members have access to or are given the Code of Ethics in conjunction with other documents.			
67. The association is in attendance in situations where member midwives' professional practice is being questioned.			
68. The association is involved in human resources planning as it relates to MNCH practitioners and quality of health care provision.			
D4. Communication			
69. The association has a clearly defined communication strategy for internal and external relationships.			
- with members			
70. The association has mechanisms for regular (at least quarterly) two way communication with its members.			
- with MoH			
71. The association has a mechanism to regularly inform MoH and other relevant bodies of activities and issues impacting on its members and the midwifery profession.			
72. MoH regularly inform the association of issues impacting on midwives, women, maternal newborn and child health.			
- with Women, Donors, Civic Society			
73. The association has communication systems in place such as newsletter and/or a website to communicate with all stakeholders (members, women, donors, civic society and grassroot NGOs such as WRA).			

D5. Advocacy	Yes	No	N/A
74. The association has systems in place to facilitate advocacy for women, midwives and newborns.			
75. There is a mechanism to provide advocacy training to association leadership and members (negotiation, public speaking, information kit, etc.).			
76. The association has representatives in key government committees and policy making bodies on maternal, newborn and child health and midwifery			
77. The association has guidelines for how to involve NGO partners in advocacy networks serving the interests of its beneficiary groups.			
D6. Service Delivery			
78. The association has the relevant resources (human, capacity, financial material) to achieve its mission.			
79. The association has the tools to monitor and evaluate the quality and impact of its work.			
80. The association uses evaluation results to influence service delivery planning.			
Additional comments:			
E. Collaboration, Partnerships and Networks			
E1. With women, government and other NGOs			
81 The association involves women and families as true partners in service provision including planning, decision making, and civic activities.			
82 The association has established a collaborative relationship with the government.			
83 The association has collaborative relationships with national and international NGOs, including women's organisations.			
84 The association collaborates and networks with other health care professions associations in the country.			

E2. Relationship with donors and the private sector	Yes	No	N/A
85 The association has mechanisms for maintaining relationships with current donors and establishing contact with potential ones.			
86 The association engages donors in a free and open dialogue.			
87 The association engages the private sector in open dialogue relating to health issues.			
Additional comments:			
F. Visibility including Media Relations			
88 The association is approached by women and their families for information and advice on women's health issues.			
89 The Board/ Executive Committee and staff are recognised by their stakeholders as being highly skilled and credible in their field.			
90 The association is invited by government to provide midwifery expertise and contribute to policy and decision making in midwifery issues.			
91 The association promotes its image and uses the media for public education.			
92 The association develops positive relationships with the media.			
93 The association is invited to take part in civic matters organised by other organisations and by government.			
Additional comments:			

G. Sustainability	Yes	No	N/A
94 The association has a diversified funding base capable of sustaining its programs over the long-term.			
95 The association actively engages in fund raising and other resource mobilisation activities as a means of limiting its dependence on donors.			
96 The association regularly seeks expertise (among its leaders and members when possible) to write fundraising proposals and to help generate ideas for resource mobilisation.			
Additional comments:			