Installation of a Cross-Border Basic Service Infrastructure

The User’s Guide

African Union Border Programme (AUBP)
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Glossary

**Basic service** — Service covering the basic needs of the people: for example, health, education, energy, water, etc.

**Board of directors** — Strategic management body of the infrastructure.

**Capitalisation** — Information system that draws on experience to obtain knowledge which can be shared. Capitalisation on experiences should help to build the capacities of organisations responsible for implementing projects of the same type or nature.

**Community-based approach** — All the methods used to enable the participation of communities in a project.

**Contracting authority** — Owner of the project, who decides the type of project for implementation, based on objectives and resources.

**Community approach** — The sum of means used to enable the participation of the population in a project.

**Controlling** — Method used to monitor the activities of an organisation using qualitative and quantitative indicators, with a view to optimising its performance.

**Field of study** — Area to which the monitoring and evaluation of a project applies.

**Final evaluation** — Evaluation of the implementation of the project and its subsequent performance.

**Impact evaluation** — Evaluation carried out a few years after the project has ended with a view to determining its impact on society.

**Implementation structures** — Administrative bodies, which implement project-relevant tasks.

**Indicators** — Measurements, consisting of qualitative or quantitative data, which provide information on activities, effects, impacts, etc.

**Infrastructure** — Construction housing the necessary equipment for the provision of a basic service.

**Invitation to tender** — Process of hiring a service provider, carried out according to public procurement regulations.

**Lessons learnt** — Generalisations based on experiences, which can highlight the strengths and weaknesses of activities carried out.

**Local authorities** — Decentralised public authorities appointed through regional and local elections.

**Local authority agents** — Staff working for the local authorities.

**Management bodies** — All the structures put in place for management of the
infrastructure (general assembly, board of directors, management committee and monitoring committee).

Management committee ▶▶ ▶▶ Operational management body for the infrastructure.

Monitoring committee ▶▶ ▶▶ Body responsible for monitoring the management of the infrastructure.

Ownership ▶▶ ▶▶ According to the OECD (Paris Declaration on Aid Effectiveness (2005), and the Accra Agenda for Action (2008)), ownership involves handing over responsibility to developing countries for their own development processes, so that they can achieve their own economic, social and environmental objectives.

Project manager ▶▶ ▶▶ Entity which designs the project and oversees its implementation.

Regulatory authorities ▶▶ ▶▶ Central public authorities (ministries, national bodies) and those which are decentralised in the regions (governorates, cercles (administrative units), high commissions), responsible for ensuring the legality of actions and bodies, and offering advisory support to the local authorities.

Scope statement ▶▶ ▶▶ Set of methods and technical standards for the execution of construction.

Stakeholders ▶▶ ▶▶ All the people and organisations concerned by and involved in the project, without having any direct involvement in decision-making.

Steering committee ▶▶ ▶▶ Entity responsible for coordinating the installation of the infrastructure. It is composed of municipal officials from the countries involved (local elected representatives, regulatory authorities, decentralised technical services staff of the state or local authorities).

Support team ▶▶ ▶▶ Agents or advisors appointed by one or several technical and financial partners, who are made available to the local authorities for the implementation of the project.

Technical acceptance ▶▶ ▶▶ Document recording the delivery of a service and assessing its suitability for its intended purpose.

Technical and financial partners ▶▶ ▶▶ Sponsors providing the financing for the project and offering a support team.

Technical services ▶▶ ▶▶ Specialised state structures which are decentralised, so as to accomplish certain functional projects on the ground at the regional and local level.

Terms of reference ▶▶ ▶▶ Document that sets forth the reasons, needs, objectives and expected results of a requested service. It constitutes the basis of a contract with a provider.

Village authorities ▶▶ ▶▶ Traditional and/or administrative village leaders.
Foreword


The Ouarokuy-Wanian Cross-Border Health Centre came into being at the initiative of the political and administrative authorities of Burkina Faso and Mali. Its installation was supported technically and financially by the Government of the Federal Republic of Germany through the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH, as part of the ongoing implementation of the African Union Border Programme (AUBP).

The guide at hand shares the experiences acquired during the installation of this Cross-Border Health Centre and outlines concrete steps to be followed for the implementation of similar cross-border projects between African Union Member States.

The publication serves a tool not only for governments, national institutions, as well as administrative and local authorities in border regions, but also for those working in the field, directly involved in the development process. The objective is to offer support to parties implementing cross-border cooperation projects in general, and specifically those relating to the healthcare sector. Hence, this publication provides a set of templates and operational tools which are meant to serve as inspiration and guidance for authorities and practitioners alike.

The lessons learnt during the creation of the Cross-Border Health Centre between the villages Ouarokuy (Burkina Faso) and Wanian (Mali), situated in the border region of the two countries, are of great value for the replication and enhancement of such cross-border cooperation projects. It is hoped that the description of this ground-breaking initiative will inspire similar action across the continent.

African Union Commission, 2013
Summary of the objectives of the African Union Border Programme (AUBP) in the area of cross-border cooperation

Facilitating cross-border cooperation is one of the core components of the African Union Border Programme (AUBP), which is committed to the delimitation and demarcation of borders in Africa. Following the demarcation of the Burkina Faso–Mali border, the installation of the Health Centre, shared between the villages Ouarokuy (Burkina Faso) and Wanian (Mali), serves as a concrete example of:

- Cross-border cooperation based on local initiative and involvement in the establishment of peaceful relations;
- Strengthening of the integration process and development dynamics in Africa.

According to the experience of the AUBP, cross-border cooperation is a transnational activity, which involves local players and communities linked by the proximity of direct contacts and varying forms of everyday relationships. In most cases, its reference framework unites the neighbouring administrative districts of two or more countries. Various categories of local players interact and cooperate. This form of cooperation creates a favourable environment for local development and fosters a popular form of integration through a community-based approach. Locally elected representatives of communities from both states support these initiatives by matching them with twin cross-border projects. The same approach is taken centrally by the states’ regulatory authorities, through their services in border regions. It has often been observed that healthcare centres treat patients from local areas across the border differently from national patients. This might also be the case with border schools and markets frequented by traders from two or more countries. In order to obviate such incidents of unequal treatment, more attention should be drawn to the benefits of cross-border cooperation initiatives, which involve not only local communities, but also public and private operators in the process of strengthening new forms of regional solidarity.

In this vein, the AUBP perceives cross-border cooperation as a lever for:

- The promotion of peace, security and stability on the one hand, and ensuring the social and economic development of local border communities, on the other;
- The development and reinforcement of good neighbourly relations between local authorities in border regions, resulting from the will of two or more AU Member States to cooperate, as well as the formalisation of agreements and the necessary arrangements for this purpose;
- The contribution to increased coherence of policies at the community level.

The promotion of local cross-border cooperation has undoubtedly gained significant momentum in the past decades. For example, in the field of documentation, a number of atlases, telephone directories and different manuals on cross-border cooperation have been compiled in West Africa. Community radio networks have been set up to provide information and raise awareness on cross-border issues. On both sides of borders, organisations and groups are being formed under the cross-border label, with informal joint action and fundraising plans in place. Cross-border projects are being implemented – by state and non-state actors across the African continent – in various fields, which include the sectors of cultural tourism, transport, health, agro-pastoral planning, drinking water, etc. Indeed, quite a wide range of both formal and informal cross-border cooperation activities is already in existence.

Today’s challenge is to define and enable the implementation of cross-border projects managed directly by local actors through the support of states, Regional Economic Communities (RECs), the African Union (AU) and development partners.

Cross-border cooperation offers real added value. From a political point of view, it contributes significantly to African integration through the construction of a climate based on trust and good neighbourly relations. From an institutional point of view, it encourages the active participation and ownership of citizens, local and decentralised authori-
ties, and social groups on both sides of the borders. Finally, from an economic point of view, it enables the mobilisation of the inbuilt potential of development: a crucial contributing factor to the fight against poverty.

Not only should existing and planned cross-border initiatives be supported and encouraged; they should also be recorded in formal institutional frameworks. The AUBP, which works to achieve this, has created a legal instrument which was adopted by the Third Conference of African Ministers in Charge of Border Issues (Niamey, Niger, May 2012), and by the African Ministers of Justice during the Specialised Technical Committee Meeting of Government Experts, held in Addis Ababa, May 2014: The Niamey Convention on Cross-Border Cooperation. This instrument will give cross-border cooperation its own legal basis to support the creation of African local hubs of integration, and to develop border regions into areas of complementarity, solidarity, peaceful coexistence and stability.
How to Use this Guide

The approach presented in this guide is generalised so as to apply to all types of infrastructure for the purpose of providing a basic service to cross-border communities. Given that conditions in cross-border regions tend to be extremely diverse, there is room for adjustment of the phases described in this publication, dependent on the specific reality on the ground in any region or infrastructure project.

The five phases in the process of the installation of a basic service infrastructure are divided into steps, from the formalisation of decentralised cross-border cooperation, to the empowerment of those involved; in other words, the establishment of a long-term operational approach. Some of the phases with their individual steps can be implemented simultaneously.

Each type of basic service has its own particular operation mode which cannot be generalised. This is why no infrastructure management methodology is presented in this guide. However, experiences and lessons learnt from the installation of the Ouarokuy-Wanian Cross-Border Health Centre are outlined step-by-step with complementary recommendations.

The guide finishes with a chapter on monitoring and evaluation, which is a cross-functional activity that should be undertaken from the first stage of the project.

After each step, certain tools which the guide makes reference to are proposed. Developed based on practical experience, these tools are designed as models which can be adapted to the reality of each cross-border infrastructure.

Finally, the text is written in masculine form to keep it clear and concise. However, it goes without saying that we are referring to persons who could be female or male. The active participation of women in any project is highly desirable and encouraged.
Introduction
Context

Cross-border cooperation is defined as good “neighbourly relations between local communities and authorities on either side of land and sea borders” (*Practical Guide to Transfrontier Cooperation*, A Cross-Border Operational Mission Commissioned by the Council of Europe, 2006).


General challenges of cross-border cooperation

Border regions are contact areas between two or more countries. In Africa, they are generally characterised by isolation from the central state, a shortage of basic social services (health, drinking water, education, etc.) and lacking management of natural resources. Unfortunately, these aspects are not fully taken into account in the sector-specific programmes in most countries.

Border communities generally maintain secular, non-political, socio-cultural and economic links. In these border regions, local communities share and live off the exploitation of the same natural resources which can be found on both sides of the border. Economic and environmental pressure during recent decades has sometimes led to disputes between these border communities regarding access to natural resources. While the communities may have maintained good neighbourly relations based on family ties, such disputes might lead to interstate conflicts.

Furthermore, the delimitation and demarcation of borders generally follows lines inherited from colonial divisions that failed to take into account the ways in which populations have made and continue to make traditional use of natural resources (fields, pastures, forests, water sources, fishing zones, quarries, etc.). This factor has the potential to aggravate conflicts.

Cross-border cooperation therefore offers solutions to these problems, by encouraging and facilitating the peaceful and coordinated development of border regions.
Cross-border challenges between Burkina Faso and Mali

The Kossi Province in Burkina Faso and the Tominian Cercle in Mali are no exception to the realities described above. In this case, demarcation has caused entire villages and habitual living spaces to ‘shift’ across from one to the other side of the border.

In 2006, a border conflict arising from the contentious management of natural resources (farming lands) caused a clash between the villages of Ouarokuy in Burkina Faso and Wanian in Mali.

This conflict led to a breakdown of the socioeconomic relations maintained by these two villages, whilst also creating a climate of suspicion and mistrust between the communities.

Context and justification of the Cross-Border Health Centre project

With a view to reuniting the populations, sealing the peace between these two sister villages and preventing potential future border confrontations, the Council of the Tominian Cercle in Mali and the Municipal Council of Djibasso in Burkina Faso identified the need to engage in joint actions for integration and development. The two respective authorities sought and obtained support from the Federal Republic of Germany through the project ‘Support to the African Union Border Programme’, financed by the German Federal Ministry of Foreign Affairs and implemented by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH.
A community-based assessment process, carried out in this border region, identified the various needs of the population. As a result, the local border authorities decided to establish a Cross-Border Health Centre between the Kossi Province and the Tominian Cercle. The creation of this Centre, on a site agreed by common consent, on Burkinabé land (equidistant between the villages of Wanian and Ouarokuy) is the result of the authorities’ desire to not only restore peace in the region but also to initiate a movement for local cross-border development. This initiative is experimental in the sense that it is the first of its kind in Africa.

Objectives of the Cross-Border Health Centre

The objectives of the Cross-Border Health Centre are:

- to ensure better healthcare coverage of the populations in the region through care that is remedial, preventative and promotes quality treatment at the lowest possible rates;
- to promote social cohesion between the populations on both sides of the border.
Implementation challenges

For the Malian and Burkinabé parties, the implementation of this project has given rise to challenges linked to the two countries’ differing sectoral policies in the fields of decentralisation and health. These challenges required finding the right approach to align the respective decentralisation and health policies, and in order to establish the Health Centre as well as bases for cooperation to ensure the Centre’s smooth operation.

Objective of the User’s Guide

The objective of this User’s Guide is to make the experiences gained through this project available to those involved in cross-border cooperation, with a view to facilitating the implementation of other projects of this type as part of an overall aim to achieve the objectives of the African Union Border Programme.

Legal aspects

Cross-border cooperation activities rely on the instruments in place, which establish their legal basis. They draw their legitimacy from the national law of countries, inter-state agreements and, to a certain extent, from community law. This is the reality in the West African sub-region.

Knowledge of and respect for the different legal provisions of States is of capital importance for the success of cross-border cooperation projects. Such provisions determine the reference framework, areas of expertise and terms of intervention.

In the specific case of the experience between Mali and Burkina Faso, the two states are linked by different legal instruments in place, which determine the competency levels as regards decentralised cross-border cooperation.

At the African Union level (AU)

The cross-border cooperation initiative was launched by the Executive Council during its 11th Ordinary Session held in Accra, Ghana, from 25 to 29 June 2007. It was this body that approved the Declaration on the African Union Border Programme and its implementation modalities, as adopted by the First Conference of African Ministers in Charge of Border Issues, held in Addis Ababa on 7 June 2007.
As stated in the Declaration, the African Union Border Programme has three main objectives:

- to facilitate and support the delimitation and demarcation of African borders which, instead of being sources of conflict, should become spaces of development and cross-border cooperation;
- to reinforce institutional integration dynamics and promote the governance of cross-border territories through:
  - cross-border intercommunality,
  - cooperation between state services,
  - cooperation between civil society organisations and non-governmental organisations;
- to put in place African mechanisms for building capacities and to encourage sharing of good practices that lead to cross-border cooperation on the ground.

The Declaration which establishes the African Union Border Programme encourages “transcending borders as barriers and promoting them as bridges, linking one State to another”, as well as seizing the opportunity to build African unity by strengthening the regional integration process.


The main vision of the AUBP is to transform border regions into bridges between neighbouring communities, rather than perceiving them as barriers or areas of conflict between different peoples.

At the level of the Economic Community of West African States (ECOWAS)

The Economic Community of West African States (ECOWAS) has also incorporated the cross-border cooperation process into its agenda by adopting a memorandum entitled ‘Cross-Border’ Concept or Local Integration (2005). Today the ECOWAS Cross-Border Initiatives Programme (CIP), adopted later through Decision A/DEC.2/O1/O6 is in operation. It takes into account both the Cross-Border Concept, and the development of cross-border cooperation within ECOWAS.

The aim of the Cross-Border Initiatives Programme is to place cross-border cooperation at the heart of the regional integration process, by encouraging an increase in cross-border initiatives and projects defined and implemented by local players in the public and private spheres. A major objective of this is to limit the diffusion of instability and insecurity, and to accelerate the regional integration process.

As part of the Cross-Border Initiatives Programme, many West African countries are involved in cross-border cooperation processes to strengthen their good neighbourly relations and also to contribute to the acceleration of the regional integration process. In this context, it is easy to understand why Burkina Faso and Mali are so committed to officially supporting the pilot schemes. The development of cross-border initiatives is seen as a means to achieving the regional integration of West Africa.

Finally, the Cross-Border Initiatives Programme is committed to the transition from an ECOWAS of States to an ECOWAS of People, through the promotion and dissemination of local initiatives.

At the inter-state level

The notion of cross-border cooperation between Burkina Faso and Mali came to the fore as part of the Cross-Border Areas concept at the initiative of former Malian President Alpha Oumar Konaré. The main idea was to transform borderlands into spaces of “suture et couture” (lit.
“stitching and sewing”). Since 2002, the concept has been consecrated and defined as “a geographical space astride the shared lines of two or more bordering states, which are home to populations linked by socioeconomic and cultural relations” (Definition from the Sikasso sub-regional seminar in March 2002). It is used to describe shared spaces and cooperative relations between different players on both sides of borders.

The objective of the Cross-Border Areas concept was to strengthen cooperation and good neighbourly relations between populations living on both sides of borders through the transformation of cross-border spaces into areas of peace, security, stability and solidarity.

Besides the instruments of community law, many bilateral cooperation agreements relating to areas such as trading and tourism, livestock breeding and agriculture, etc. link Burkina Faso and Mali. As part of the implementation of these different agreements, the analysis of cross-border cooperation has resulted in the identification of two main types:

- **Administrative cross-border cooperation**: this represents the form of cooperation applied by administrative border authorities at the different levels within their administrations. It takes place through periodic meetings between administrative border authorities;
- **Decentralised cooperation**: this is based mainly on the action of several groups of players, including, among others:
  - local authorities,
  - economic operators,
  - civil society organisations.

Many fields are committed to decentralised cross-border cooperation, among others: twinning/cooperation initiatives, different sectors of production and marketing, service provision, migration, child protection, etc. These dynamics manifest themselves through business twinning activities in each of the countries concerned, consultations between economic operators, exchanges between associations and cooperatives; in short, all the actions which contribute to the formation of socio-economic capital in the cross-border region.

Decentralised cross-border cooperation focuses as much on relations between local authorities, as it does on those between economic and civil society actors in border regions.
At the local level

In cross-border projects, the most important level is local. At this scale, the process is lengthy because it involves consultations, the formalisation of agreements which link partners in their areas of expertise, and the implementation of structural frameworks. In the case of the Cross-Border Health Centre project, the process that led to the conclusion of the Cross-Border Health Agreement was significant. This Agreement was based on the desire of two States to develop spaces for interaction, exchanges and the development of joint activities.

In the creation of a Cross-Border Health Cooperation Group (CHCG)\(^1\), the Agreement functions as a structural framework with specific objectives and missions for the Local Authorities of Burkina Faso and Mali, working in partnership through a flexible and innovative group forum. The establishment of a Cross-Border Health Agreement between the countries thereby enables a long-lasting and simplified approach to cooperation and the joint decision-making mechanisms involved.

As a public interest association, the Cross-Border Health Cooperation Group (CHCG) has the mission to promote the joint coordination of healthcare provision and to oversee the management of the Health Centre.

The Steering Committee was the first instrument to be established as part of the promotion of cross-border cooperation between the Tominiyan Cercle (Mali) and the Kossi Province (Burkina Faso). It is the structure responsible for the development of all areas necessary for cross-border cooperation. Created by the Regional Authority, its mission is to encourage, coordinate and promote cross-border projects. It thereby guides the cooperation approach, builds a partnership between the different actors on both sides of the border and oversees the execution of the planned actions.

The main driver for this process, however, is the political will of the authorities in the two countries involved to support the cooperation dynamics between local authorities and border communities. The main aim of the process is to strengthen the climate of peace, trust and understanding between the border populations through the implementation of joint projects.

\(^1\) Groupement de Coopération Sanitaire Transfrontalière (GCOSAT) in French.
It is therefore the different agreements made at inter-state level which form the basis of cross-border cooperation. These give the two states, as well as regional and local players, the required legitimacy to develop joint initiatives.

The Ouarokuy-Wanian Cross-Border Health Centre reflects the spirit of the various fundamental formal documents on cooperation and local integration.

The cooperation structures presented may vary according to context. It is therefore important to verify that they conform to the reality on the ground, based on the requirements of local populations, and that they are in legal accordance with the Cross-Border Cooperation Initiative.
Part I

Implementation of a Cross-Border Basic Service Infrastructure
Phase 1:
Launch of the cross-border cooperation initiative

**STEP 1: FORMALISATION OF DECENTRALISED CROSS-BORDER COOPERATION**
- A1. Seek the support of regulatory authorities and civil society
- A2. Designate focal points
- A3. Formalise a decentralised cross-border cooperation agreement
- A4. Identify technical and financial partnerships

**STEP 2: ESTABLISHING PARTNERSHIP**
- A1. Verify the coherence of the request for support
- A2. Define the intervention principles
- A3. Seek support from the respective regulatory authorities in the two countries
- A4. Sign a partnership agreement

**MONITORING AND EVALUATION:** Development of the project and running of the cross-border infrastructure
Summary

The project’s launch phase begins with the **formalisation of decentralised cross-border cooperation** between the neighbouring countries’ local authorities, in line with the joint development plans prepared in collaboration with the populations. They agree on a construction project for an **infrastructure that provides a basic service** to the border communities. Such an infrastructure may be a health or training centre, energy or water facility, or hydro-agricultural facilities, to name a few examples.

The **regulatory authorities** express their support for this cross-border cooperation project; they encourage the respective communities to be actively involved.

The local authorities establish contacts with potential technical and financial partners to secure a support team. A **partnership contract** is formalised between the local authorities and one or more technical and financial partners.

Steps in the phase

1. Formalisation of decentralised cross-border cooperation based on common concerns of the border populations;
2. Establishment of a partnership with one or more technical and financial partners.

Products

A **decentralised cross-border cooperation agreement** formalises the desire for cooperation between the local authorities.

An **approval of resolutions** on decentralised cross-border cooperation by the regulatory authorities demonstrates their support for the project.

A **partnership contract** between the local authorities and one or more technical and financial partners establishes the lines of collaboration.
Main actors and roles

The **local authorities** are the initiators of the cross-border cooperation project. They prepare and sign a decentralised cross-border cooperation agreement and seek an agreement with one or more technical and financial partners.

The **regulatory authorities** are the highest authorities in view of the formal relations between the neighbouring countries. They support the cross-border cooperation project.

The **technical and financial partners** are the sponsors. They establish the lines of collaboration and intervention principles with the local authorities and agree to provide a support team.

The **local populations** are the beneficiaries. They participate in the definition of requirements and ensure that their concerns are taken into account.

**Step 1:**
Formalisation of a decentralised cross-border cooperation agreement based on common concerns of local populations

Cross-border cooperation encourages peaceful coexistence between the populations of the countries concerned, by uniting them around a common project to create an **infrastructure for the provision of a basic service**. An initial meeting between the local authorities and civil society representatives involves reaching a **consensus on the populations’ common needs** and deciding on the type of infrastructure to be built. The acquisition and installation of the infrastructure is costly, time-consuming and complex. This is why it is essential to **call on technical and financial partners** who are able to support the initiative.
Objective

**Formalise a cross-border cooperation agreement** between the local border authorities and one or more technical and financial partners.

Activities

1. Seek the support from regulatory authorities and populations for the infrastructure project;
2. Designate focal points;
3. Formalise a decentralised cross-border cooperation agreement;
4. Identify possible technical and financial partners and seek an agreement on the establishment of a partnership.

Methodology

To start with, the mayor of the local authorities which initiated the project organises a **consultation session** with the neighbouring local authorities, the regulatory authorities and local civil society representatives to identify an area for cross-border cooperation. Next, the regulatory authorities designate their focal persons, who are tasked with promoting and facilitating the project, among others, by providing regular feedback on its progress.
This consultation session lays the foundations for a **decentralised cross-border cooperation agreement**. A project is implemented by one of the parties or by a delegated structure, which then organises a working group to validate the project agreement. During this session, a **Cross-Border Health Cooperation Group** is created, which is in charge of coordinating the tasks in the following steps. This validated project agreement is then submitted to the appropriate **local authorities** concerned.

Once it has been accepted by the various local councils, **the regulatory authorities approve the result of these deliberations**. The local authorities then organise a signing ceremony for the decentralised cooperation agreement, which the regulatory authorities are invited to attend. The terms of the decentralised cross-border cooperation agreement are then brought to the attention of the populations during meetings in the respective villages.

Once the decentralised cross-border cooperation agreement has been signed, it is next advisable to **appeal to local and national donors, followed by technical and financial partners** to invite their support for the implementation of the project.

The mayors of the local authorities meet these potential partners before formulating and sending them **a request for support**.

**Summary: Step 1**

**Methodology:** Hold a consultation session, conduct a validation workshop, ensure the deliberation of local councils, obtain the approval of the regulatory authorities, visit technical and financial partners, organise a signing ceremony, send a partnership request.

**Parties involved:** Local authorities, regulatory authorities, technical and financial partners, civil society.

**Results:** Cooperation between the local authorities is formalised in a decentralised cross-border cooperation agreement. The support of the regulatory authorities is obtained. Potential technical and financial partners are identified and secured with a partnership request.

**Duration:** One to two months.
Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

In the specific case of the Cross-Border Health Centre, the conclusion of the cross-border basic service agreement preceded that of the decentralised cross-border cooperation agreement. This reversal led to delays in the installation of management systems. The decentralised cross-border cooperation agreement defines the main strategic lines of cooperation. For this reason, it is preferable to respect the logic of the cross-border basic service agreement acting as a reference framework.

Recommendations

Identify the local authority or delegated structure in charge of the preparation of the project agreement during the consultation session, to clearly define the roles and responsibilities from the beginning.

Identify potential local supporters/donors and technical/financial partners, and define the main areas where support is needed during the agreement validation session, to ensure that the processes can be initiated quickly.

Identify technical and financial partners based on their priority areas, to ensure involvement of those who are interested in cross-border cooperation projects.

Compile a dossier for the support request containing an analysis of requirements/technical needs assessment and a copy of the decentralised cross-border cooperation agreement. The request for support should demonstrate the feasibility of the project and justify its relevance and benefits to make it easier to obtain funding.

Step 2: Establishment of partnerships with one or more technical and financial partners

Establishing partnerships between local authorities and one or more technical and financial partner(s) lays the foundation for the intervention of the support team. The infrastructure installation project must be integrated into the development plans of the local authorities and approved by the regulatory authorities.
The partnership must assume an official legal form, which links the parties in a legally binding manner.

The support and commitment of the regulatory authorities in charge of cross-border cooperation at the national, regional and local level are indispensable for establishing the legitimacy of the project. **Border management effectively falls under national sovereignty.** These authorities must therefore be able to express their support through written binding documentation, resulting from an exchange of correspondence with the local authorities.

**Objective**

Legalise collaboration between the local authorities and technical and financial partner(s).

**Activities**

1. Verify the coherence of the support request in relation to the development plans of the local authorities concerned, as well as the realities on the ground, to ensure the request is well-founded and feasible;
2. Define the intervention principles, in order to establish the lines of collaboration in a partnership agreement protocol;
3. Seek the support from the regulatory authorities in the countries concerned through concrete actions;
4. Legalise collaboration between the local authorities and the technical and financial partner(s) by signing a partnership agreement protocol.

**Methodology**

Upon receipt of the support request issued by the local border authorities, the technical and financial partner(s) analyse its relevance in terms of context and coherence with the local authorities’ development plans. Before deciding to support the initiative, the technical and financial partner(s) begin by exchanging information with the Cross-Border Health Cooperation Group and carry out field visits.

During a **consultation workshop between the technical and financial partners, the local authorities and the regulatory authorities**, the lines of collaboration which define the intervention principles are established and the main aspects of a **partnership agreement protocol** are
prepared. The regulatory authorities are encouraged to offer their support. A support team is then provided to the project by the technical and financial partner(s).

The support team, in collaboration with agents of the local authorities, then forms a partnership to establish and formalise the agreement.

A validation session and the signing of a partnership agreement protocol are organised, including participation of the regulatory authorities from the countries concerned. This session is announced to the local populations.

Summary: Step 2

Methodology: Analysis of the relevance of the request, field visits, organisation of a consultation workshop, actions to seek support from the regulatory authorities, signature of a partnership agreement protocol, diffusion of information to local populations.

Parties involved: Technical and financial partners, local authorities, regulatory authorities, civil society.

Results: One or more technical and financial partners responded positively to the request for support. The lines of collaboration were established. The support of the regulatory authorities in the countries concerned was obtained through correspondence and meetings. A partnership agreement protocol is put in place between the local authorities and the technical and financial partner(s). All stakeholders are informed.

Duration: One to two months.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The partner supporting the Cross-Border Health Centre installation process was already involved in the delimitation and demarcation of the border between Burkina Faso and Mali. Hence, this partner was able to offer more targeted expertise and support towards the creation of the Health Centre. In order to increase the chances of obtaining support from potential technical and financial partners, it is advisable for the projects to already be included in the development plans of the local border authorities. It is also important to target technical and financial partners according to their areas of expertise to avoid wasting time.
Moreover, if technical and financial partners already operate within the states of the respective local authorities, it is crucial to appeal to these potential supporters immediately and simultaneously in order to establish synergetic relationships between them.

**Recommendations**

Divide the roles and responsibilities of the technical and financial partners if several of them respond positively; define the support systems and sign a single document which links the different parties to standardise the various interventions.

Request the support of local and national backers, as well as technical and financial partners, to make it easier to obtain the support for the project from the regulatory authorities.

Make reference to cross-border cooperation in the local authorities’ development plans in order to facilitate the planning of projects of this kind.

**Phase 2:**

**Preparation of the infrastructure installation**

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Summary

The project must be led by a steering committee which plans, supervises, coordinates, monitors and evaluates the different phases and activities of the project.

The steering committee’s first task is to perform a diagnostic assessment of the local populations’ needs to which the infrastructure must respond.

Once this needs assessment is complete and the populations have been informed about the conclusions, the steering committee then proceeds with operational planning and embarks on activities to mobilise financial resources. The local authorities negotiate and sign a financing contract with one or more technical and financial partners.

Steps in the phase

1. Creation of a steering committee;
2. Collection of information for a diagnostic assessment of issues linked to the populations’ needs;
3. Planning of the installation and operation of the infrastructure;
4. Mobilisation of financial resources.

Products

A regulatory act bringing about the creation of the steering committee guarantees the management of the project.

A brochure assessing the populations’ needs and recommending solutions raises awareness of the current situation and determines the rationality for the project.

A planning document for the installation and operation of the basic service infrastructure prioritises the actions to be implemented.

A financing contract for the installation and operation of the infrastructure enables mobilisation of funds.
Main actors and roles

The regulatory authorities are the highest authority. They officially appoint the members of the steering committee.

The local authorities are the principal actors. They negotiate and sign the financing contract(s) for the infrastructure with the technical and financial partner(s).

The steering committee undertakes the project management. It leads the processes for the diagnostic needs assessment, planning and mobilisation of financial resources.

The agents of the local authorities and the support team form the executive structure, offering support to the local authorities and the steering committee. They organise the work to be carried out at every stage of the phase.

Civil society and local populations are stakeholders. They are encouraged to offer their opinions on the establishment of the steering committee and the planning of the project. Local needs are assessed and determined, based on the information provided by these grassroots actors.

Step 1: Creation of a steering committee

As a cross-border cooperation initiative involves issues of national sovereignty, the responsibility of establishing the project steering committee falls to the regulatory authorities of the adjacent States. Each regulatory authority enacts its own regulation to bring about the creation of a joint steering committee.

The steering committee has a multiple-actors structure. It is composed of elected representatives of the local authorities, technical agents of the local authorities and regulatory authorities, civil society representatives and specialists in the field, originating from the countries which benefit from the cross-border cooperation project.

The steering committee manages all the phases, steps and activities of the project from its inception right through to the end.
The steering committee takes over from the Cross-Border Health Cooperation Group, which is then dissolved. At the end of the project, the steering committee itself is also dissolved. All the parties involved form a cross-border cooperation consultation framework (See the illustration below showing Cross-Border Cooperation Structures). These structures trigger the formation of joint public policies in countries within the border region.

**Objective**

Put in place a management structure for the cross-border infrastructure project.

**Activities**

Establish a steering committee in charge of the supervision, coordination and monitoring/evaluation of cross-border cooperation activities.

**Methodology**

The regulatory authorities establish criteria and, based on this, choose the members of the steering committee. The criteria for appointment vary depending on the project type. The regulatory authorities then
implement an act bringing about the creation of the steering committee, before appointing agents of the local authorities and the support team to organise an official meeting to introduce the members of the committee to the different stakeholders. The technical agents, local authority and civil society representatives are invited. The results of this meeting are shared with the local populations during general meetings in each village.

Summary: Step 1

Methodology: Establish criteria, select members of the steering committee, implement regulations for the creation of the steering committee, circulate information.

Parties involved: Regulatory authorities, local authorities, local authority agents and support team, civil society.

Results: A multiple-actors steering committee is put in place and begins to operate.

Duration: Two to three weeks.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The selection of members of the steering committee according to their availability and expertise has played a considerable part in the implementation of the infrastructure project. Taking into account the busy schedule of the administrative authorities sharing joint chairmanship, some delay has often been noted in the progress of activities. As a result, it would be desirable for a locally-elected representative to occupy the role of vice chairman.

Recommendations

In order to facilitate activities: Incorporate project leaders into the steering committee, including the responsible local authorities, and various groups of actors (specialist technical services working in the field, farmers, civil society representatives, etc.).

The steering committee should be made up of the same number of members from both sides of the border to enhance equal involvement.
Step 2: Assessment of issues linked to the populations’ needs

This step mobilises all the actors and stakeholders concerned by the project. It establishes a consensus on the area of coverage of the basic service, as well as the choice of the site for installation of the infrastructure. This consensus is vital to the success of the project, because it reflects the decision of the entire local population, in the broader sense of the term, on both sides of the border. This step is therefore of major symbolic significance that is conveyed through a brochure of requirements and solutions for mass circulation.

Objective
Determine the populations’ needs, as well as the area of coverage of the basic service and the site for installation of the infrastructure.

Activities

1. Define the challenges linked to the populations’ needs, the size and characteristics of the infrastructure, the geographical area of coverage, the choice of site for installation;
2. Inform the populations, share the results of the diagnostic needs assessment to obtain their support and take their concerns into account;
3 Publish a brochure in the local languages and have the content broadcast widely on local radio networks.

Methodology

At the request of the steering committee, the agents of the local authorities, backed by the support team, are responsible for ensuring that the assessment of the populations’ needs through a diagnostic workshop runs smoothly. This involves defining the objectives of the workshop, and preparing the programme and resources during a preparation session with the concerned parties (technical services, civil society) and two or three consultants/moderators who have been recruited in advance.

The chairman of the steering committee then invites the concerned parties to the diagnostic workshop: Local authorities, village authorities, technical services personnel, civil society, representatives of the village communities, other technical and financial partners, and human resources specialists in this particular field.

The workshop itself may last for two or three days. On the first day, the reporting programme in the villages is established, those responsible are appointed and the diagramme charting the schedule for reporting is made available. By the end of the workshop, the area of geographical coverage of the basic service should be defined and the site for installation of the infrastructure chosen. Once the workshop has finished, the challenges and recommended solutions are recorded in a diagnostic assessment report.

After the end of the workshop, the diagnostic assessment report is drafted, printed and made available to those responsible for reporting. The latter, with the support of technical services, go to the villages to inform the populations and attempt to obtain their support for the project. Each party responsible should provide a feedback report including not only the observations and recommendations of the populations but also statements of support for the project. These reports will be analysed and summarised. Any resistance to the project will be highlighted, with a view to returning to people who are not convinced in order to understand their reluctance and to try to find acceptable solutions.
Finally, a **brochure of challenges linked to the populations’ needs and recommended solutions** is produced and circulated among the relevant stakeholders.

**Summary: Step 2**

**Methodology:** Organise and hold a diagnostic workshop, draft a report assessing the populations’ needs, obtain feedback from local populations/villages, draft a brochure on challenges and solutions, circulation among stakeholders.

**Objectives:** Identify the challenges and which villages will be included in the area of coverage of the basic service. Choose the site for installation of the infrastructure. Obtain the support of the populations and take their concerns into account. Widely circulate information obtained through the diagnostic needs assessment.

**Parties involved:** Steering committee, support team, local authorities, regulatory authorities, civil society, local population.

**Tools:** Model statement of support.

**Results:** The challenges and recommended solutions are recorded in a diagnostic needs assessment report. The area of coverage of the basic service is defined and the site for installation of the infrastructure is chosen. The feedback reports and statements of support from the populations are available. The diagnostic report is circulated widely.

**Duration:** One month.

**Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre**

The diagnostic workshop, which identified the construction of the Cross-Border Health Centre as a concern of the local people, covered several subject areas (health, education, water accessibility, cross-border natural resource management). It is therefore interesting to expand the scope of the diagnostic needs assessment according to the main lines of action defined in the decentralised cross-border cooperation agreement. This allows for better prioritisation of the infrastructure to be installed according to the populations’ needs.

It is worth noting that the strong participation of border villages (10 people/village) in the assessment phase and feedback on this in all the
villages concerned, made a considerable contribution to the populations’ sense of ownership of the infrastructure.

Also, the information and health awareness meetings organised in the villages were of capital importance in securing their support for this area.

**Recommendations**

Limit the number of participants (6-8 people) at the workshop preparation session, for greater efficiency.

The number of participants at the diagnostic workshop ranged from 50 to 80. However, if the number exceeds 80 people, several groups should be formed, aiming at good representation between the countries in each group. A concluding workshop meeting can then take place to summarise the groups’ results, and thereby achieve better management of a large number of people.

Appoint people responsible for reporting from the first day of the workshop, to enable them to understand the importance of the tasks assigned to them and how to act accordingly.

Schedule reporting to the local people at the latest to the week following the diagnostic workshop in order to avoid any loss of information.

Clearly explain to the populations how their support influences the area of coverage of the basic service and the installation site for the infrastructure, and take their concerns into account to increase their sense of ownership of the project and, above all, to boost efficiency.

Refer to the model tool in appendix 1.

**Step 3: Planning the installation and operation of the infrastructure**

Planning is essential for the successful completion of the project. This includes a timetable which charts the schedule for the implementation of the project (buildings, equipment, water conveyance, electrification, operation, etc.).
Objective
Work out an operational plan for the installation of the infrastructure.

Activities
1 Establish a planning document;
2 Inform the stakeholders.

Methodology
Under the supervision of the steering committee, the agents of the local authorities and the support team organise a meeting covering the strategic and operational planning of the installation of the infrastructure. This is managed by the steering committee. It includes the local authorities, regulatory authorities, technical services agents and representatives of civil society. A planning document for the installation of the infrastructure is drafted and circulated to all stakeholders.

Summary: Step 3

Methodology: Hold a planning meeting, draft a planning document, and circulate this document.

Parties involved: Steering committee, local authority agents and the support team, local authorities, regulatory authorities, civil society.

Results: A planning document for the installation of the cross-border infrastructure is made available and circulated to all parties concerned.

Duration: Two to three weeks.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The planning of the installation of the Cross-Border Health Centre enjoyed participation from all parties (local authorities, regulatory authorities, technical services agents and steering committee) except for civil society representatives. However, the participation of local civil society is a way of boosting the populations’ ownership of the project and increasing its effectiveness. Hence, civil society should always be involved in this step.
Recommendations

Devote enough time to the preparation of the project in the planning document before the meeting (several work sessions), to guarantee its success.

Planning is an iterative process. From the start, it is therefore important to consider reviewing the plan as the steps are implemented, to ensure it is in line with the realities on the ground.

Prepare an initial estimated project budget during the preparation of the plan and discuss it during the meeting, to anticipate financial requirements.

Step 4: Mobilisation of financial resources

Without financing, there can be no project. The responsibility for obtaining the necessary financial resources for the implementation of the project therefore falls to the highest level of authority, the steering committee. The contract itself is signed at the political level, between the local authorities and the technical and financial partners.

Objective

Mobilise the financial resources needed for the construction and operation of the infrastructure.

Activities

1. Establish an estimated budget;
2. Formalise a financing contract.

Methodology

At the request of the steering committee, the local authority agents with the assistance of the support team and the technical services staff, establish an estimated budget and prepare the financing request with the technical and financial partners, who have already given their agreement in principle (see phase 1, step 2).
The local authorities sign the request, which is accompanied by the estimated budget for the installation of the infrastructure. The steering committee sends it to the technical and financial partners. Once the financing agreement is obtained, a **financing contract for the construction and operation of the infrastructure** is prepared. A validation session between the local authorities and the technical and financial partners is organised to determine the details of the contract. Signing the financing contract takes place at the end of the session, during a ceremony.

### Summary: Step 4

**Methodology:** Formulate an estimated budget for the execution of the project, prepare and issue a request for financing, sign the financing contract.

**Parties involved:** Steering committee, local authority agents, support team and technical services staff, local authorities, regulatory authorities, civil society, members of local populations, technical and financial partners.

**Tools:** Estimated project budget, financing contract.

**Results:** A financing contract for the construction and operation of the infrastructure is signed.

**Duration:** One to two months.

### Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The financial resources needed for the installation of the Cross-Border Health Centre were underestimated, which resulted in the need to seek additional resources on several occasions. It is therefore essential to ensure a realistic estimate of financial resources before submitting the request for financing. It is also desirable for the technical and financial partners to have flexible procedures and principles which enable them to take into account strategic activities identified during the process.
Recommendations

Establish the estimated budget as accurately as possible, with a view to avoiding unexpected additional costs.

Plan for alternate sources of funding after the original funding is depleted in order to ensure the infrastructure’s continuous maintenance and sustainability.

Phase 3:
Institutional organisation of the infrastructure

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<td>A3. Put in place official management structures for the infrastructure and inform all stakeholders</td>
<td>A4. Train the members of the management bodies and infrastructure staff</td>
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Summary

This phase starts with the establishment of the legal bases for management of the infrastructure which will be recorded in a **cross-border basic service agreement** involving all the parties concerned at the national, regional and local level.

This is followed by the implementation of a regulatory framework which guarantees consensual and transparent management of the infrastructure by preparing the **articles of association and internal regulations**.

The next task is to choose the members of the **management bodies** (general assembly, board of directors, management committee, monitoring committee) and equip the infrastructure with **qualified staff**. The local populations are heavily involved in the selection of members of the management bodies.

**Steps in the phase**

1. Formalisation of a cross-border basic service agreement;
2. Preparation of the articles of association and internal regulations;
3. Establishment of the management bodies;
4. Appointment of staff for the infrastructure.

**Products**

A **local cross-border cooperation agreement** on the provision of a basic service records the legal bases for the management of the infrastructure.

**Work contracts** formalise the appointment of qualified staff.

A **report confirming the selection of members for the management bodies** officially establishes the management structures for the infrastructure.

**Articles of association and internal regulations** guarantee consensual and effective management of the infrastructure.
Main actors and roles

The steering committee is responsible for the infrastructure’s internal organisation. It manages the preparation of the local cross-border cooperation agreement, organises the appointment of staff and the selection process for members of the management bodies.

The local authorities are the principal actors. Through their signature, they approve the cross-border basic service agreement, the appointment of staff, the selection of members for the management bodies, as well as the articles of association and internal regulations.

The local authority agents and the support team form the executive structure. They are in charge of implementing the activities in the phase.

The local populations are the decision-makers. They are responsible for selecting the members of the management bodies.

Discussion session between the administrative authorities and elected representatives of nine partner communes of Burkina Faso and Mali.
Step 1: Formalisation of a cross-border basic service agreement

The decentralised cross-border cooperation agreement (see phase 1, step 1) enabled the local border authorities from the two respective countries to work together. The cross-border basic service agreement ratifies their firm and decided commitment to carry out the infrastructure installation as required and, with equal firmness and determination, to provide a sustainable basic service to the border populations.

Objective

Record the legal bases of the management of the infrastructure in a cross-border basic service agreement.

Activities

1. Prepare a cross-border basic service agreement;
2. Organise a signing ceremony for the cross-border basic service agreement.

Methodology

The steering committee engages the local authority agents and the support team to prepare a draft cross-border basic service agreement and to organise a validation workshop, which is to be attended by all parties concerned.

Once the agreement is validated, the cross-border basic service agreement document is drafted in its official definitive format. The steering committee then organises a ceremony, if possible on the site of the future infrastructure project, for the signing of the agreement by the local authorities concerned. The media are invited to this ceremony for official recognition of the cross-border basic service provision agreement, to ensure mass circulation of news about the event in the respective countries.
Summary: Step 1

Methodology: Preparation of an agreement project, organisation of a validation workshop, signing ceremony, mass circulation of the agreement.

Parties involved: Steering committee, local authority agents and the support team staff, local authorities.

Tools: Model cross-border basic service agreement

Results: The legal bases for management of the infrastructure are recorded in a cross-border basic service provision agreement signed by the various parties involved. The content of the agreement is brought to the attention of the public.

Duration: Two to three weeks.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The delimitation and demarcation of the border between Burkina Faso and Mali prior to the launch of cross-border cooperation made the overall process much easier. However, the Regulatory Act sanctioning the land tenure of the site for the Cross-Border Health Centre was – due to an oversight – implemented after its construction and provisional acceptance. Ideally, the Act should have been performed right after the site was chosen, in order to avoid any ambiguity regarding the land tenure of the infrastructure site.

Recommendations

Clarify issues linked to the recruitment, status and training of staff for the infrastructure in the cross-border basic service agreement in order to enable swift implementation.

Clarify the legal status of the site and allocation of the infrastructure to avoid any disputes regarding property rights, should the terms of the agreement fail to be respected.

Refer to the model agreement in appendix 2.
Step 2: Preparation of the articles of association and internal regulations

Objective
Design and validate a regulatory framework to ensure consensual and effective management of the infrastructure.

Activities
1. Prepare a regulatory framework to ensure consensual and effective management of the infrastructure;
2. Validate this regulatory framework in the form of articles of association and internal regulations.

Methodology
It is at this stage that the technical services, specialised in the provision of the basic service to be offered by the infrastructure, come into play. They prepare draft articles of association and internal regulations based on pre-existing documents in the countries concerned. Then, they organise a session to exchange views and ideas between the members of the management bodies, in order to finalise these documents.

This is followed by a validation workshop regarding the articles of association and internal regulations. These documents are signed by the local authorities of the neighbouring countries. The signing ceremony is open to the public and broadcast in the media.

Summary: Step 2

Methodology: Prepare a regulatory framework, finalise it with the management bodies, hold a validation workshop and sign the articles of association and internal regulations.

Parties involved: Steering committee, technical services agents, local authorities, management bodies.

Tools: Draft articles of association and internal regulations.

Results: The articles of association and internal regulations are made available.

Duration: Two to three weeks.
Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

Consideration of the articles of association and internal regulations for the management bodies of the community health centres in Burkina Faso and Mali helped produce a document for the management of the Cross-Border Health Centre that was acceptable to both parties. To ensure the smooth operation of any such cross-border infrastructure, a document of this kind is essential.

**Recommendations**

Refer to the documents (articles of association and internal regulations) that govern the management of the basic service infrastructures already in place in the countries concerned, with a view to ensuring coherence with each country’s specific legal framework.

Ensure respect of the legislation in the countries concerned, and if this is not possible, try to reach a consensus so that any future disputes can be resolved in an acceptable way.

Refer to the model articles of association and internal regulations in appendices 3 and 4.

**Step 3:**

**Establishment of the management bodies**

The infrastructure provides a public service under the responsibility of the local authorities. The management bodies for the infrastructure (general assembly, board of directors, management committee, monitoring committee) are therefore composed of delegates from the villages involved, representatives from the infrastructure’s staff and elected officials from the communes in the area served by the basic service of the infrastructure project. These elected officials have a duty of ensuring transparency and accountability towards the populations, and are subject to monitoring by citizens on both sides of the border.

**Objective**

Equip the infrastructure with operational management bodies.

**Activities**

1. Inform the populations about the roles and responsibilities of the management bodies to assist them in selecting members for these bodies;
2 Through mutual consent, identify the members of the management bodies for the infrastructure from each village covered by the basic service and submit the list to the mayor in question;  
3 Put in place official management structures for the infrastructure and inform all stakeholders;  
4 Train the members of the management bodies and infrastructure staff to efficiently manage the provision of the basic service.

Methodology

The local authority agents and the support team staff, at the request of the steering committee, begin by gathering the locally elected representatives from both sides of the border. This meeting establishes the schedule for information-sharing and sensitisation sessions in the villages on the roles and responsibilities of the infrastructure’s management bodies.

The meetings in the villages are coordinated by elected officials, with the support of the technical services agents. The latter will explain what is involved in the provision of the basic service in concrete terms.

During the village meetings, the roles and responsibilities of the management bodies are presented. Potential members of these bodies are identified by mutual consent for each village covered by the basic service, and their names are submitted to the mayor of the commune. This happens in each community within the limits of the local authorities.

The village communities concerned then make the final selection of the representatives of the general assembly, before choosing the members of the other management bodies.

Once all the members have been chosen, the steering committee organises a meeting for the establishment of the cross-border infrastructure management bodies, which will be attended by the village authorities, the selected members of the management bodies, the regulatory authorities and the local authorities. The report on the establishment of the management bodies is signed by the local authorities. The signing ceremony is broadcast in the media.

The staff and members of the infrastructure’s management bodies must be trained so that they can effectively carry out their tasks. Terms of reference for the training sessions must be prepared, trainers selected, training modules designed, and workshops organised. This will ensure that the participants are equipped with the necessary resources to duly fulfil their roles and assume their responsibilities.
Summary: Step 3

Methodology: Organise a meeting of elected officials, schedule information-sharing meetings for the village populations, select the members of the management bodies, arrange a signing ceremony for the report establishing the management bodies, organise training for staff and members of the management bodies.

Parties involved: Steering committee, local elected officials, technical services agents, village authorities, local populations, local authority agents and the support team, local authorities, regulatory authorities.

Results: The populations are aware of the roles and responsibilities of the infrastructure’s management bodies. The list of members of the general assembly from each village within the area of coverage of the basic service is made available and submitted to the mayor concerned. A report confirming the official establishment of the infrastructure’s management bodies is published and circulated. The members of the management bodies and infrastructure staff are equipped to ensure its good management.

Duration: Two to three months.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

In the case of the Cross-Border Health Centre, at the time when the management bodies were being established at the general assembly, the local authorities took into account the absence of women from the list of members. Due to the concern that women’s needs might not be taken sufficiently into account in future decisions of the management bodies, the local authorities decided to hold a session to review the list of members in order to evaluate women’s involvement.
Recommendations

Ensure that the village authorities follow the criteria for balanced selection of the members of the management bodies, by considering the inclusion of women and paying attention to the interests of vulnerable populations. This will help to ensure that all social categories are represented.

Ensure parity in the representation of the countries concerned, to guarantee fair ownership of the infrastructure.

Members of the management bodies should receive different training from that given to general staff, in order to respond to the specific needs of these respective actors.

Step 4: Appointment of staff for the infrastructure

The staff in charge of providing the basic service to the local populations consists of public agents from both sides of the border. The regulatory authorities work with the local authorities to select and appoint staff.

Objective

Equip the infrastructure with qualified staff.

Activity

1. Define the job descriptions;
2. Recruit/hire staff to operate the infrastructure.

Methodology

Human resources agents within the administrations and technical services help the steering committee to compose job descriptions, based on the cross-border basic service agreement. Agents, who have already been appointed in a different location, can be transferred to the new infrastructure. Recruitment of new agents should be carried out through public advertisements in both countries involved. Some agents fall exclusively under the management of the local authorities. In these cases, they are recruited by the authorities themselves with the sup-
port of the steering committee and the support team. If necessary, some agents’ employment may begin before the construction process is completed. This gives them the opportunity to become immediately involved and to support the community-based approach.

**Summary: Step 4**

**Methodology:** Define job descriptions, recruitment, allocation, appointment of staff.

**Parties involved:** Steering committee, agents of the services in charge of human resources and technical services, regulatory authorities, local authorities.

**Results:** The infrastructure is equipped with qualified staff.

**Duration:** Two months.

**Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre**

After technical services from the health sector proposed a list of profiles and names of staff for the Cross-Border Health Centre, it became apparent that the Centre could operate with a limited number of staff in the beginning, before deploying other people in line with the development of the services provided by the centre. For greatest efficiency, it is preferable to begin by hiring a core staff of specialists, and expand the staff as demands become known.

**Recommendations**

Ensure equal distribution of agents from the countries concerned, to make cross-border cooperation effective.

Recruit female and male staff to promote fairness in access to employment, for greater consideration of each client’s needs, as well as to encourage an increased sense of ownership of the infrastructure by the local populations.
Phase 4:
Construction and equipping of the infrastructure

Step 1: Informing the Stakeholders
A1. Inform the stakeholders about the modalities of the infrastructure installation

Step 2: Recruitment of a Research and Monitoring Department
A1. Develop terms of reference
A2. Develop specifications
A3. Float the tender
A4. Designate bid selection commission
A5. Select best financial and technical offer
A6. Draft a service provision contract agreement

Step 3: Performance of Feasibility Studies
A1. Carry out a feasibility analysis
A2. Prepare architectural plans and a cost estimate for the infrastructure

Step 4: Recruitment of a Construction Company
A1. Launch the invitation to tender
A2. Appoint the members of the committee to evaluate the offer
A3. Select the most suitable company
A4. Establish a service provision contract

Step 5: Execution of Works
A1. Issue work orders for the initiation of works
A2. Carry out the construction works
A3. Ensure respect for the technical standards set forth in the scope statement
A4. Proceed with the technical acceptance of the infrastructure on a provisional basis

Step 6: Equipping of the Infrastructure
A1. Evaluate the equipment requirements
A2. Select the most suitable suppliers through a tendering process
A3. Establish a service provision contract
A4. Accept and verify the quality of the equipment

Summary

The construction and equipment phase can start as soon as the financing is in place (see phase 2, step 4) and the cross-border basic service provision agreement is signed (see phase 3, step 1). An exchange meeting between the local authorities, steering committee and technical services of the countries involved lays the foundation for the terms of reference which will be used for the recruitment of a monitoring/evaluation and research department for the construction activities through a public tender.
This department is in charge of preparing the architectural plans and cost estimates for the construction to be able to launch a public procurement process by soliciting bids from construction companies. The quality of the fabrication is controlled by the monitoring and research department.

Once the structural system is in place and the building has been fitted out, suppliers are called upon to install the infrastructural equipment.

**Steps in this phase**

1. Inform the stakeholders;
2. Recruit a research and monitoring department;
3. Perform feasibility studies;
4. Recruit a construction company;
5. Execute and monitor the fabrication;
6. Install the infrastructural equipment.

**Products**

Through a service provision contract with the local authorities, the monitoring and research department carries out feasibility and monitoring studies of the construction process.

A service provision contract between the local authorities and the construction companies enlists the companies to build the infrastructure according to the scope statement.

A service provision contract between the local authorities and the suppliers of equipment and materials enlists the suppliers to deliver the equipment and materials in accordance with the established standards.

A report confirming the provisional acceptance of the fabrication formalises the end of the building process.

A report confirming the acceptance of the equipment and materials vouches for their quality and good working order.

A report confirming the definite acceptance of the works formalises the fulfilment of the contract between the construction company for the infrastructure and the local authorities.
Main actors and roles

The local authorities constitute the contracting authority. They launch the invitations to tender and sign the service provision contracts with the research and monitoring department, construction companies and suppliers.

The technical services staff, local authority agents and the support team represent the executive mechanisms of the local authorities. Together with the research and monitoring department, they prepare a tender portfolio for constructing and equipping the infrastructure.

The monitoring and research department is the project manager. It carries out feasibility studies. It prepares the tender portfolios and monitors the fabrication process.

Step 1: Informing the stakeholders

This step is an essential process given the many different actors involved. It is vital that each of them has a mutual understanding of the roles and responsibilities of the different actors, as well as all the terms used in the project documents.

Objective
Avoid potential misunderstandings relating to the roles and responsibilities, and the comprehension of the financing contract.

Activities
Inform the stakeholders about the infrastructure installation process, the financing contract and the documents in the appendices.

Methodology
Once the local authorities have signed the decentralised cooperation agreement, they send the financing document and any appended documents to the steering committee, the regulatory authorities and the technical services staff.

The agents of the local authorities and the support team organise a discussion meeting, to ensure mutual understanding of the terms of the financing contract and the documents in the appendices.
Summary: Step 1

Methodology: Send the financing contract and documents in the appendices. Hold a discussion meeting.

Parties involved: Local authorities, steering committee, regulatory authorities, technical services staff, local authority agents, support team staff.

Results: Any misunderstandings that might stem from the execution of the financing contract are avoided or resolved.

Duration: Seven days.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The absence of an information meeting led to a lack of communication regarding the roles and responsibilities of the different parties involved. To avoid misunderstandings in the implementation of activities, it was necessary for the contracting authority to gather the various parties to clarify their roles and responsibilities. This made it easier for them to continue in their activities. As a result, before initiating activities, it is strongly advised to make every effort to ensure clarification of the roles and responsibilities of each party.

Recommendations

Clarify the roles and responsibilities, especially as regards project ownership to avoid any misunderstandings.

Use active explanation and listening techniques to achieve mutual understanding of the terms of the financing contracts and the documents in the appendices.

Step 2: Recruitment of staff for the research and monitoring department

The research and monitoring department is the central pillar of the infrastructure’s construction process. It drafts the plans, outlines the cost estimates for the invitation to tender with construction companies, offers technical advice to the contracting authority (the local authorities) and ensures the smooth operation of the works. This department’s staff must therefore be selected as carefully as possible.
Objective
Have in place a reliable structure for carrying out the feasibility studies and monitoring the execution of the construction.

Activities
1 In the terms of reference, set out the framework of the mission of the research and monitoring department;
2 Record the tasks of the different contracting parties in a document entitled ‘scope statement’ for the recruitment of the research and monitoring department staff;
3 Circulate the invitation to tender for the recruitment of the monitoring and research department staff and receive applications;
4 Appoint members of the evaluation committee for the selection of the research and monitoring department staff;
5 Select the best technical and financial offer;
6 In a service provision contract, formalise the partnership between the monitoring and research staff selected and those managing the financing contract.

Methodology
The staff members of the technical services are responsible for public procurement. Upon consulting the local authorities and the support team, the technical services staff members prepare draft terms of reference and a scope statement for the recruitment of a research and monitoring department. These documents are validated by the local authorities, the steering committee and the technical and financial partner(s), and are used in the preparation of a tender portfolio, which will be circulated via the press and Internet.

At the same time, the regulatory authorities put in place a committee for the evaluation of offers that includes at least one representative for each stakeholder. Through this administrative action by the regulatory authorities, the appointment of the evaluation committee members is officialised.

After the deadline for the receipt of offers, the offers are then analysed with a view to identifying the technically and financially most suitable option. The selected staff members are contacted to sign a service provision contract between the different parties.
Summary: Step 2

Methodology: Prepare the terms of reference and scope statement, launch an invitation to tender, set up an evaluation committee, select the research and monitoring department, sign the service provision contract.

Parties involved: Local authorities, steering committee, regulatory authorities, technical services staff members responsible for public procurement, local authority agents, support team, research and monitoring department.

Resources: Model guide for the opening of bids (see appendix 5).

Results: The terms of reference and the scope statement for the recruitment of the research and monitoring staff are made available. The invitation to tender for the recruitment of a research and monitoring department is launched. The members of the evaluation committee are identified. The most suitable staff for the research and monitoring department is selected. The service provision contract is signed with the research and monitoring department.

Duration: Two months.

Recommendations

If there are multiple offers and it is difficult to choose one, select two or three candidates as finalists and invite them for recruitment interviews before making the final selection.

Recruit the research and monitoring department from one country and the construction company from the other, to facilitate close cross-border cooperation.

Refer to the model envelope opening guide in appendix 5.

Step 3: Performance of feasibility studies

As a compulsory step before the initiation of construction, feasibility studies such as the analysis of soil capacity for the support of the infrastructure and the determination of the technical requirements for a sustainable construction must be performed. These studies also include the architectural design of the infrastructure and financial
expertise for construction costs (estimated quotes), which will establish indicators for the subsequent selection of a construction company.

Objective
Determine the technical standards and estimated costs for the installation of the infrastructure.

Activities
1. Carry out a feasibility analysis;
2. Prepare architectural plans and a cost estimate for the installation of the infrastructure.

Methodology
The research and monitoring department oversees the analyses of soil samples, drafts construction plans and estimates the costs, according to its standard intervention methods.

Summary: Step 3
Methodology: Prepare and have soil samples analysed; draft plans and cost estimates.

Parties involved: Research and monitoring department, local authorities, technical services staff, local authority agents and support team.

Results: The research and monitoring department is equipped with the necessary resources to analyse the feasibility of the infrastructure. The plans and cost estimates for the construction process are available.

Duration: One to two months.

Recommendations
Follow the implementation of the feasibility studies step by step, to strengthen local authorities’ sense of project ownership in the infrastructure construction process.
Step 4: Recruitment of a construction company

The recruitment of a construction company follows the same procedure as the recruitment of the research and monitoring department (see step 2 above).

Objective
Secure a reliable company for the construction of the infrastructure.

Activities
1. Launch the invitation to tender for the recruitment of construction companies and receipt of offers;
2. Appoint the members of the committee to evaluate the offers of the different construction companies;
3. Select the most suitable company based on technical and financial criteria;
4. Formalise the partnership between the company and those managing the financing contract in a service provision contract.

Methodology
The research and monitoring department prepares the tender portfolio with the assistance of the technical services in charge of public procurement. The local authorities launch the invitation to tender the recruitment of construction companies via the press and Internet.

At the same time, the regulatory authorities set up an evaluation committee including at least one representative from each stakeholder. Thereby, the administrative action of appointing members of this committee is officially taken.

After the closing deadline, the technical and financial offers are analysed. The company selected is contacted to sign a service provision contract.
**Summary: Step 4**

**Methodology:** Prepare and launch the invitation to tender, receive offers, set up the evaluation committee, evaluate offers, select the company, sign the service provision contract.

**Parties involved:** Research and monitoring department, technical services in charge of public procurement, local authorities, technical and financial partners, regulatory authorities, evaluation committee.

**Results:** The invitation to tender for the recruitment of the construction company is launched. The members of the evaluation committee are identified. The most suitable company is selected. The service provision contract is signed with the company.

**Duration:** One to two months.

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**Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre**

In the spirit of cross-border cooperation, the project was led jointly by the two countries: the companies responsible for the construction works and the conveyance of drinking water were selected from Mali, whilst the research and monitoring department was recruited in Burkina Faso. An added benefit of this was that it encouraged objective monitoring of the quality of the works.

**Recommendations**

Choose at least one representative for each stakeholder group involved in the cross-border cooperation initiative to be part of the evaluation committee.

Do not base the selection of companies solely on lowest price tendering, as the offers must be **technically and financially realistic**.

---

**Step 5:**

**Execution and monitoring of the construction activities**

The time has finally come to lay the first stone – the culmination of months, or even years, of effort! In a few months, the basic service could be available to the local population.
Laying the foundation of the Ouarokuy–Wanian Cross-Border Health Centre (21st December 2010) by the governors of the Boucle du Mouhoun Region in Burkina Faso (right) and the Ségou Region in Mali (left) in the presence of the First Secretary of the Embassy of the Federal Republic of Germany in Mali (middle).

**Objective**

Put in place an infrastructure which meets both the technical standards that have been set and the local populations’ needs.

**Activities**

1. Issue work orders authorising the construction company to commence its works;
2. Execute the construction;
3. Ensure that technical standards set forth in the scope statement are met;
4. Proceed with the technical acceptance of the infrastructure on a provisional basis and plan the definite acceptance three months after its launch.

**Methodology**

The local authorities issue a work order which gives the companies authorisation to start work. The research and monitoring department begins periodic monitoring of the quality of construction and ensures that the technical standards and deadlines are being met (see cross-functional activity: monitoring, field of study 2).
Once the works are finished, the research and monitoring department drafts a **report confirming the provisional acceptance of the works**, which will be signed by the different parties. The infrastructure will be definitively accepted three months after provisional acceptance, following a final inspection of the quality of the construction.

**Summary: Step 5**

**Methodology:** Issue the work order; monitor the construction and provisional acceptance of the infrastructure.

**Parties involved:** Local authorities, companies selected, research and monitoring department, steering committee, technical and financial partners, local populations.

**Resources:** Report confirming provisional acceptance of the construction.

**Results:** Companies are authorised to start construction. The infrastructure is built. The technical standards defined in the scope statement are met. The infrastructure is accepted provisionally, and then definitively (three months after the launch of the infrastructure).

**Duration:** Several months, depending on the type of infrastructure.

**Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre**

The fact that the companies carrying out the construction were slow and under-equipped resulted in delays. Work continued until the day before the start of the winter season. Heavy rains made access to the site difficult. The work was completed five months later than planned, partly due to the inconvenient weather conditions.

**Recommendations**

Ensure that the steering committee oversees the smooth running of the construction, by carrying out site visits with the research and monitoring department in order to keep the local authorities duly informed.

Refer to the model reports for provisional and definitive acceptance of work in appendices 6 and 7.
Step 6: Equipping the infrastructure

The equipment varies greatly according to the type of infrastructure. In the case of a training centre for example, tables, chairs, blackboards, etc. are needed to furnish the classrooms. On the other hand, a hydroelectric facility needs powerful high technology machines and other heavy equipment. The main construction steps, however, remain the same, regardless of the type of infrastructure.

The acquisition of equipment takes place during the installation of the infrastructure. This makes it possible for the infrastructure to begin operating quickly.

Objective

Have quality equipment for the launch of the infrastructure.

Activities

1. Evaluate the equipment requirements by determining the technical specifications;
2. Select suppliers through a tendering process;
3. Through service provision contracts, formalise partnerships between the suppliers and those managing the financing contract;
4. Accept and verify the quality of the equipment.

Methodology

In coordination with the two neighbouring countries concerned, the specialised technical services identify the equipment requirements and compile a list, endorsed by the local authorities. They then prepare a tender portfolio and launch the invitation to tender through the press and the Internet. The regulatory authorities establish the evaluation committee, which selects the suppliers; service provision contracts will then be formalised with the suppliers.

The equipment and materials are delivered and installed by the suppliers. The equipment’s operation is tested by the technical services and infrastructure staff members who were appointed earlier in the process (see phase 4, step 6). The standards and specifications of each material or piece of equipment are verified. Finally, a report confirming acceptance is prepared and signed.
Summary: Step 6

Methodology: Identify the requirements for equipment and materials, prepare and launch an invitation to tender, establish an evaluation committee, select suppliers, sign service provision contracts, receive equipment and materials, verify the standards and specifications and perform operational testing, establish acceptance reports.

Parties involved: Local authorities, technical services, suppliers, evaluation committee, technical and financial partners.

Resources: Tender portfolio, list of equipment needed, model guide for opening of bids.

Results: The requirements for materials and equipment are identified. The invitation to tender for the provision of equipment and materials is launched. The members of the evaluation committee are identified. Suppliers are selected. The service provision contracts are signed with the suppliers. The infrastructure is equipped with functional equipment. A report confirming the acceptance of the equipment and materials in accordance with the standards defined in the scope statement is available.

Duration: Several months, according to the type of equipment required.

Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre

The process of equipping the Centre posed many problems. First and foremost, there was nowhere to store the equipment when the construction of the facility was not completed by the deadline. Then, the chosen provider of the equipment was unable to honour his commitment. His financial offer was not adapted to the realities of the market, and the contract had to be terminated. The contracting authority was forced to hold a second invitation to tender process, and the selection of another company resulted in the reduction of the original quantity of equipment deemed necessary. It is essential to coordinate the execution of construction with the order for equipment, and to choose a reliable supplier.
Recommendations

Choose at least one representative from each of the project’s stakeholders to form an evaluation committee, to ensure that all sides are represented.

During the evaluation, ensure that the financial offers are of a realistic nature.

Ensure the quality of the equipment, especially for long-term use.

Make sure the equipment is adapted to the type of infrastructure and the realities on the ground, and that it is in accordance with the scope statement. This will avoid the acceptance of unsuitable material.

In equipment provision contracts include the training of staff in the use and regular maintenance of the equipment, to guarantee that it is used and maintained correctly.

Phase 5:
Empowerment of actors

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Summary

Once the infrastructure is completed and has begun operating, it must provide its basic service in an independent and sustainable way.

An assessment is made one year after the launch of the infrastructure, during a diagnostic workshop on the organisational and technical aspects of the operation, attended by all stakeholders including the beneficiary populations. Following this analysis of the strengths and weaknesses of the operation, the next step is the reorganisation of the management bodies and retraining of their members and the infrastructure’s staff.
Finally, a year and a half after the launch of operations, the closing ceremony marks the end of the involvement of the support team and the finalisation of the activities of the steering committee (see phase 2, step 1).

**Steps in the phase**

1. Reorganisation of the infrastructure’s management structures and retraining of staff and the management bodies;
2. Closure of the involvement of the support team.

**Products**

A document summarising the **recommendations of the diagnostic workshop** sums up the strengths and weaknesses identified.

A **memorandum on independent management** of the infrastructure demonstrates the responsibility of the authorities in the two countries.

**Main actors and roles**

The **local authorities** are the political entities responsible for the provision of the basic service. They commission the diagnostic assessment of the operation of the infrastructure and decide how to improve the services.

The **steering committee** acts as project manager for a final time. It leads the diagnostic assessment of the operation of the infrastructure, with the assistance of the local authority agents and the support team.

For the last time, the **support team** acts as the executive structure, supporting the local authority agents. With them, it implements the diagnostic process and organises the closing ceremony, which will bring its involvement in the project to an end, thereby marking the definitive disengagement of the technical and financial partners.

The local **populations** are the main beneficiaries. They offer their point of view and proposals for improvement of the services provided by the infrastructure.
Step 1: Reorganisation of the infrastructure’s management structures and retraining of staff and the management bodies

This step consists of evaluating a full year of work and, thanks to the experiences acquired, applying structural reorganisation measures. It is now also time to build the capacities of the members of the management bodies and infrastructure staff through training.

Objectives

Improve the performance of the management bodies and the services provided by the members of the management bodies and the infrastructure staff.

Activities

1. Carry out a participatory diagnostic analysis of the strengths and weaknesses of the management bodies and of the provision of the basic service; this should involve all stakeholders and sectors of society;
2. Decide on solutions addressing the problems identified in the management bodies and monitor their implementation;
3. Carry out retraining programmes for the members of the management bodies and staff.

Methodology

The local authorities finance a diagnostic assessment of the organisational aspects of the technical and management entities. For feedback on the results of this study, they organise a participatory diagnostic workshop with all the stakeholders. During this workshop, the strengths and weaknesses in the operation of the management bodies and provision of the basic services are discussed and recommendations are reported in a summary document.

The members of the management bodies meet after this workshop for an in-depth analysis of the weak points that were identified in order to formulate various solutions. On the one hand, they may concern structural measures for the reorganisation of the management bodies...
such as a change of bodies, their renewal, their functioning, etc. On the other, they may aim to build the capacities of the members of the management bodies and infrastructure staff through training.

Training is carried out under the responsibility of the steering committee and adapted to the specific needs identified during the assessment phase. Given the different needs of the members of the management bodies and staff of the infrastructure, training for these two groups should take place separately.

**Summary: Step 1**

**Methodology:** Perform an assessment, feedback on the results in a participatory diagnostic workshop, draft a summary document, formulate corrective measures, empowerment of the management bodies, perform training.

**Parties involved:** Technical services, local authorities, management bodies, steering committee, local authority agents, support team staff, regulatory authorities, local populations, consultants/moderators, infrastructure staff.

**Resources:** Moderation framework, recommendations in the summary document, training modules.

**Results:** The strengths and weaknesses of the management bodies are identified and recorded in a summary document. The management of the cross-border basic service infrastructure is improved. The services provided by the management bodies and staff are improved.

**Duration:** One to two months.

**Recommendations**

Involve all stakeholders and sectors of society in the diagnostic assessment and during the feedback stage in order to obtain as complete an image as possible of the strengths and weaknesses.

Focus particularly on identifying the needs for building the capacities of staff and members of the management bodies, to carry out training adapted to these needs.
Step 2:  
End of the support team’s involvement

Six months later, the support team’s assistance comes to an end, and therewith the fully independent management of the infrastructure begins. It is also the official end of the activities of the steering committee.

A solemn ceremony marks the official end to the technical and financial support of the partners.

Objective
Mark the end of the project and the beginning of the independent management of the infrastructure.

Activities
Organise and hold a closing ceremony marking the end of the support team’s assistance.
Methodology
The local authority agents and the support team prepare for the end of the support of the technical and financial partner(s) by organising a ceremony.

They prepare the capitalisation documents for transfer, as well as speeches and a memorandum for independent management of the infrastructure. They also send invitations to all the stakeholders and make all the other organisational arrangements for the ceremony.

During the ceremony, the documents are transferred. The ceremony solemnly ends with the signing of a memorandum for independent management of the infrastructure.

Summary: Step 2

Methodology: Prepare the documents to transfer, draft speeches, draft a memorandum for independent management, send invitations, hold the closing ceremony, sign the memorandum for independent management.

Parties involved: Local authority agents support team, steering committee, local authorities, regulatory authorities, technical and financial partners, management bodies, staff, local populations.

Results: The organisational, financial and technical provisions are made for the success of the closing ceremony. The state players and local authorities involved manage the infrastructure in an independent way using transferred resources.

Duration: Eight days.

Recommendations

Engage the respective neighbouring States as strategically as possible in preparing for the end of the support, in order to guarantee long-lasting support by the regulatory authorities in the countries involved.

Take into account the real operational difficulties of the cross-border basic service infrastructure when determining the duration of the support, to ensure the project’s sustainability.
Part II

Monitoring and Evaluation of the Project
General overview of the process

Monitoring is a cross-functional activity because it is carried out at every stage of the project and during the operation of the infrastructure. Monitoring enables (i) real-time measurement of whether the objectives of each step have been achieved and (ii) analysis of the facilitating factors and the challenges/difficulties. Thanks to monitoring, the cross-border cooperation project in its entirety becomes a learning exercise, during which those involved are able to correct errors and improve performance on an ongoing basis.

Three fields of study are the subject of monitoring: (i) the project’s development, (ii) the execution of construction, and (iii) the operation of the infrastructure. For each of them, monitoring indicators are defined and measured in both a qualitative and quantitative way. The frequency of data collection and reporting on each field of study is defined based on information requirements. The reasons for success and difficulties are analysed, and solutions for improvement are proposed and implemented.

The support team is involved in monitoring the operation of the infrastructure in a gradually decreasing way.

A year and a half after the basic service provision activities are launched, an external evaluation is carried out. This field of study offers an insight into the effects of the project in the area covered by the basic service.

Monitoring and evaluation are resources which aid decision-making and enable the regulatory authorities, local authorities and technical and financial partners to make strategic provisions for the smooth operation of the project. These resources should therefore be validated by the decision-makers.

II - Fields of study

1. Monitoring of the development of the project;
2. Monitoring of the installation of the infrastructure;
3. Monitoring of the operation of the infrastructure;
4. Gradually decreasing monitoring by the support team;
5. Final evaluation of the project as a whole.
Products

A report monitoring the community-based approach measures the degree to which the local populations participated in the process and whether their proposals were taken into account.

A report monitoring the performance of the management bodies highlights facilitating factors and stumbling blocks, and proposes solutions for improvement.

Periodic reports on the progress of construction are provided to the contracting authority.

Monthly reports on the operating statement and monitoring registers are brought to the attention of the board of directors to assist them in making appropriate managerial decisions.

A final evaluation report offers insights into the direct and indirect effects of the project.

Main actors and roles

The steering committee is the key actor. It supervises the monitoring processes of all the fields of study and sets the frequency for monitoring activities based on the realities on the ground.

The management committee is responsible for operational monitoring. With the steering committee, it defines the indicators for evaluating the operation, ensures the collection of data and participates in its analysis.

The research and monitoring department is responsible for monitoring the execution of the construction. It monitors the quality of the construction and the contractor’s compliance with technical standards.

The local authorities, regulatory authorities and technical and financial partners are principally involved in the monitoring and evaluation process. They make strategic decisions for the improvement of the project.
The **infrastructure staff members** are the data sources for the operational monitoring. They maintain the activity records using a reporting system.

The **technical and financial partners** are responsible for the final evaluation. They commission external evaluators.

**Field of study 1:**
**Monitoring the development of the project**

As soon as the steering committee is in place, monitoring begins. The responsibility for carrying out this monitoring lies with the steering committee, local authority agents and the support team staff.

Monitoring the development of the project involves **taking into account the community-based approach**. Qualitative and/or quantitative indicators are defined during workshop sessions.

**Objective**

Establish an effective information method for determining the state of progress of the development of the project.

**Activities**

1. Measure the success of the community-based approach (specifically, the enthusiasm and participation of local populations in the infrastructure installation process);
2. Measure the effectiveness of the performance of the infrastructure’s management bodies.

**Methodology**

During the preparation of the diagnostic workshop (see phase 2, step 2), the steering committee outlines **indicators for monitoring the community-based approach** in collaboration with the support team.

The **methods for monitoring the performance of the management bodies** must be presented and discussed during the preparation of the cross-border basic service provision agreement (phase 3, step 1).
The monitoring indicators are then presented to the regulatory authorities, local authorities and technical and financial partners for validation.

The steering committee and support team prepare monitoring records containing the indicators and give them to the parties responsible for the activities (elected representatives and technical services, chairmen of management bodies) who fill in these monitoring documents personally after each activity. The steering committee compiles these documents and analyses them periodically according to requirements. It carries out interviews (focus groups, individual interviews) with civil society representatives and the management bodies if problems arise. Moreover, the steering committee identifies areas for improvement with the parties responsible for activities. Monitoring reports are drafted and circulated to the local authorities, regulatory authorities and technical and financial partners. These reports are incorporated into the project activity assessments.

**Summary: Field of study 1**

**Methodology:** Prepare monitoring records, measure the achievement of objectives, compile monitoring records, analyse data collected, perform interviews, identify areas for improvement, draft and circulate the monitoring reports.

**Parties involved:** Steering committee, local authority agents and the staff of the support team, management bodies, elected representatives, civil society, local populations.

**Resources:** Project development monitoring framework.

**Results:** The degree of participation and enthusiasm of the local populations is determined. The activities of the infrastructure’s management bodies are analysed and areas for improvement are proposed and implemented.
**Recommendations**

Make the members of the steering committee (one per country) aware of their responsibility to oversee the performance on the ground of the monitoring of the project’s development.

Adapt the indicators according to the infrastructure project and ensure that they effectively measure the real areas of interest and that the information is easy to gather, in order to obtain an effective monitoring tool.

Refer to the model project development monitoring framework in appendix 8.

**Field of study 2: Monitoring the installation of the infrastructure**

This monitoring activity has already been referred to in phase 4, step 5. The methodology is outlined below. **The indicators are defined in the service provision contract with the construction company (scope statements, building standards, deadlines).**

**Objective**

Ensure attention to the standards and deadlines according to the service provision contract formalised between the contracting authority and the construction company.

**Activities**

1. Monitor the quality of the work;
2. Monitor how well the execution deadlines are met.

**Methodology**

The research and monitoring department is responsible for monitoring the construction on an ongoing basis. It consults the reports on site visits, comparing what is planned in the provisions contract and the scope statement with what is provided by the construction company. The steering committee is kept up to date about the construction company’s activities through site visits. Moreover, the steering committee facilitates relations with the construction company and the contracting authority. An analysis of factors that led to success and factors that proved to be stumbling blocks is performed jointly by the research and monitoring department and the steering committee. **Periodic reports**
**on the progress of construction** are submitted to the contracting authority (the local authorities).

**Summary: Field of study 2**

**Methodology:** Ongoing monitoring, comparison between reality and expectations, reports on site visits, analyses, reports on the progress of construction.

**Parties involved:** Construction works monitoring office, construction company, steering committee, local authorities.

**Resources:** Site monitoring report.

**Results:** The infrastructure is built according to the contract formalised between the contracting authority and the construction company.

**Lessons learnt from the Ouarokuy-Wanian Cross-Border Health Centre**

The permanent presence of a representative from the research and monitoring department on site raised the quality of the construction. However, there were many misunderstandings between the research and monitoring department and the construction companies, especially with respect to the provision of drinking water, where insufficient constructive dialogue made it difficult for the companies to carry out this task. To overcome this problem, the contracting authority, by playing a mediating role, ensured that the two parties ironed out their differences by establishing permanent dialogue.

**Recommendations**

Regularly inform the contracting authority (the local authorities) of the state of progress of the construction and immediately notify it of any problem which could cause a delay, to allow the authority to make appropriate decisions and provide solutions as soon as possible.

Encourage flexibility in the monitoring process by maintaining dialogue between the monitoring office and the construction companies, for example when deciding on technical changes, to avoid open conflict situations.

Refer to the model site monitoring report in appendix 9.
Field of study 3: Monitoring of the operation of the infrastructure
This activity consists of permanent monitoring of the technical operation of the infrastructure, and of the measures to provide the basic service as soon as the infrastructure is opened.

Permanent monitoring (or controls) functions as a dashboard that provides an overview of every aspect of the operation of the infrastructure and the activity of its agents. It helps to detect problems early on, so that the necessary corrective measures can be taken quickly.

Objective
Obtain information on the quality and efficiency (cost-effectiveness) of the operation of the infrastructure.

Activities
Monitor the operation of the infrastructure and the agents’ activities.

Methodology
It is the responsibility of the infrastructure’s management committee to control the infrastructure’s activities. Quantitative and qualitative indicators are put in place. The indicators are prepared by the management bodies (board of directors, management committee, monitoring committee).

An initial inventory is carried out, which constitutes the opening assessment of the infrastructure. According to the type of infrastructure, the inventory may be done every quarter, every six months or once a year. The operating statements are closed monthly (accounting software performs this operation in a few seconds), at least during the first six months of the infrastructure’s operation.

Activity records are prepared by the management committee, with the help of staff members who have the task of filling them out. They include quantitative and qualitative indicators (for example, the number of services provided and assessment of agents). They are recorded in a monitoring register or in an electronic database.

Monthly monitoring reports analysing accounting and quantitative and qualitative indicators highlight the facilitating factors and stumbling blocks. The management committee can reduce the frequency of these reports once the operation of the infrastructure has been deemed satisfactory.
Each week, the management committee supervises the implementation of controlling tools until the monitoring activity is sufficiently developed. The board of directors reviews the periodic monitoring reports and makes the decisions it deems necessary for improvement. The steering committee and the local authorities are called upon should any major problems arise.

**Summary: Field of study 3**

**Methodology:** Establish the inventory and opening assessment, periodic inventories, periodic closures of operating statements, produce activity records and monitoring registers, supervise the implementation of controlling, prepare monitoring reports, decision-making on improvements.

**Parties involved:** Management committee, board of directors, monitoring committee, staff, steering committee, local authorities.

**Resources:** Monitoring framework for the operation of the infrastructure.

**Results:** The quality and efficiency (cost-effectiveness) of the operation of the infrastructure and the agents’ activities is increased. Corrective measures are taken if necessary.

**Recommendations**

Refer to the model framework for monitoring the operation of the infrastructure in appendix 10.

**Field of study 4:**

**Gradually decreasing monitoring by the support team**

Once the project begins operating, the support team gradually ceases monitoring and ultimately withdraws from operational activities after it has prepared the infrastructure for full independence.

**Objective**

Ensure the empowerment of the management bodies and infrastructure staff by assessing the management and making suggestions for correcting shortfalls.
Activities
Ensure the management bodies of the infrastructure operate effectively by gradually decreasing support and transferring authority (or building capacities) at the appropriate time.

Methodology
The support team assists the management committee in its activities to monitor the operation of the infrastructure by gradually decreasing their field visits; in other words, initially visiting frequently, then less regularly over time.

During each field visit, the support team assesses the levels of achievement of the indicators and the level of ownership of the roles of the management bodies. It will pay special attention to any stumbling blocks that could prevent the infrastructure from becoming fully autonomous in the future.

Summary: Field of study 4
Methodology: Gradually decreasing operational involvement; evaluate the levels of achievement of the indicators and ownership of the infrastructure project.
Parties involved: Steering committee, management bodies, staff, local authorities, support team.
Results: An assessment is made of the management of the infrastructure project and suggestions are formulated to correct any shortfalls.
Duration: Once a quarter during the first six months and twice a year until the final evaluation of the basic service.

Recommendations
Ensure proper implementation of the documents for administrative and accounting management, as well as the resources to monitor the infrastructure’s activities, to ensure its logical management.

Coordinate the gradually decreasing monitoring with the steering committee, with a view towards autonomy.
Field of study 5: Final evaluation of the project as a whole
The final evaluation coincides with the **definitive disengagement of the technical and financial partner(s)**, approximately a year and a half after the infrastructure project begins operating. It brings the **project to an end and finalises the activities of the steering committee** (see phase 2, step 1). This evaluation should provide the necessary information to gain an overview of the decentralised cross-border cooperation project.

**Objective**
Appreciate the effects of the project as a whole (direct or indirect, positive and negative, intentional and unintentional) and provide recommendations.

**Activities**
Carry out an external evaluation.

**Methodology**
The steering committee and the technical and financial partner(s) prepare the terms of reference (TORs) for the recruitment of evaluators. These terms of reference are discussed and validated with the local authorities and the infrastructure’s board of directors, taking their information needs into account. Evaluation questions are prepared, including these topics:

- successes, problems, challenges;
- effects on the collaboration between the local authorities and the regulatory authorities of the two countries;
- direct impacts on the populations; and
- indirect impacts on the development of the region involved in the project.

The external evaluators recruited carry out **field research** with the infrastructure agents, agents of the local authorities, the support team, technical services staff, local authorities, regulatory authorities, village authorities and local populations.

An **evaluation report** is prepared and presented during a feedback workshop involving all the stakeholders, including the local populations (community-based approach).
Following this workshop, the evaluators provide **recommendations for the continuation of the provision of the basic service and future developments**. They include these recommendations in the final evaluation report.

**Recommendations**

Plan an evaluation of the impact of the provision of the basic service two or three years later, ideally sponsored by the technical and financial partner(s), to better understand the reasons for the project’s successes and/or difficulties and the development of public policy as a whole.

**Conclusion**

In the cross-border region formed by the Tominian Cercle in Mali and the Kossi Province in Burkina Faso, the driving force behind the cooperation initiative was the confirmed consensus of all the stakeholders – regulatory authorities, local authorities, civil society and development partners – all strongly committed to finding solutions to the various concerns shared by the populations in the region.

The establishment of the Cross-Border Health Cooperation Group (CHCG)\(^2\) in November 2011, representing 14 villages and 11,678 inhabitants, by the three Burkinabé and Malian communities of Djibasso, Mafouné and Mandiakuy is a tangible testimony to this. Indeed, the Ouarokuy-Wanian Cross-Border Health Centre can be cited as a so far unique example of local cross-border cooperation.

The cross-border community group, with the same objective in mind, places local players at the forefront of local cooperation for the fulfilment of common needs. The implementation of an institutional framework for local governance and the adoption of legal resources such as the Cross-Border Health Cooperation Agreement and the local agreement on cross-border natural resource management, as well as the management bodies in place, render this cross-border relationship highly effective. Moreover, the various agreements undoubtedly vouch for the fact that integration has been established at the level of both the state and local authorities.

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2 Groupement de Coopération Sanitaire Transfrontalière (GCOSAT) in French.
The local authorities have been able to implement the basic infrastructure project thanks to their ability to pool their efforts, as well as human and material resources. Through their joint commitment, the local authorities have established effective synergies among themselves and solved problematic issues linked to their geographical location.

As the first of its kind in Africa, the Ouarokuy (Burkina Faso) – Wanian (Mali) Cross-Border Health Centre represents a commonality of interests and serves as a melting pot offering an enriching experience for all parties involved in its installation, namely: the African Union Commission, the Economic Community of West African States (ECOWAS), the Governments of Burkina Faso and Mali, their Local Authorities, locally elected representatives, the financial and technical partners, other development practitioners and the stakeholders at the grassroots level.

This Health Centre has become a symbolic landmark of an integrated Africa, which is resolutely committed to development. It is a vehicle for peace and stability in the region, and it serves as concrete proof that Africa is capable of transforming borders inherited from colonisation, which have often been sources of conflict, into borders as bridges for peaceful cohabitation, linking communities already united by history, culture and geography. Hence, the installation of such an infrastructure as the one described in the guide at hand, on the border between two countries, marks the achievement of the motto of the African Union Border Programme: “From barriers to bridges – for a united and integrated Africa with open and prosperous borders!”
Appendix 1:
Model acceptance certificate for the choice of site and support for the area of coverage of the basic service

Tools (models)

REGION OF
PREFECTURE OF
COUNTRY
CURRENCY

MODEL ACCEPTANCE CERTIFICATE FOR THE CHOICE OF SITE AND SUPPORT FOR THE AREA OF COVERAGE OF THE BASIC SERVICE

We, the undersigned, the populations of the village of ................................................
(Commune of ........................................) accept the choice of site and support the area of coverage of the basic service provided by ....................... (type/name of infrastructure).

In witness whereof, we issue this certificate for all intents and purposes.

........................................................................
(place),

on ................................................................. (date)

............................................................. (signatory name)

(signature)

Village Authority
Appendix 2: 
Model agreement

Tools (models)

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MODEL AGREEMENT

Agreement

FOR THE ESTABLISHMENT OF A CROSS-BORDER HEALTH COOPERATION GROUP

between

THE COMMUNE(S) OF ..........., PROVINCE OF ..........., REGION OF ..........., ............... (COUNTRY NAME).

AND

THE COMMUNE(S) OF ..........., PROVINCE OF ..........., REGION OF ..........., ............... (COUNTRY NAME).

(Month and Year)

The commune(s) of ..........., province of ..........., region of ..........., .............. (country), on the one hand,

and

The commune(s) of ..........., province of ..........., region of ..........., .............. (country), on the other hand,

• Given the Addis Ababa Declaration of 07 June 2007, relating to the implementation of the African Union Border Programme;

• Given Decision A/DEC.2/01/06 of 12 January 2006, relating to the adoption of the cross-border areas concept [and the development of cross-border
cooperation in the ECOWAS region];

- Considering the links of friendship and solidarity existing between .................. (country) and .................. (country);

- Considering the cooperation agreements formalised between .................. (country) and .................. (country);

- Considering the legal provisions pertaining to decentralised cooperation in the legislations of .................. (country) and .................. (country);

- Considering the political will and commitment of the highest authorities of the two countries to promote cross-border cooperation in general, and local cross-border cooperation based on local initiative in particular;

- Considering the effectiveness of this form of cooperation in the emergence of a culture of peace, security and regional integration, as sine qua non conditions for the harmonious socio-economic development of the populations in border regions or “border areas”;

- Considering the commitment of the ..... (number of local authorities involved in the initiative) Local Authorities to jointly implement local cooperation actions as part of a long-lasting partnership in their common interest;

Have agreed as follows:

CHAPTER I: NATURE AND DESIGNATION OF THE COOPERATION STRUCTURE

**Article 1:**

A Cross-Border Health Cooperation Group known as a “CHGC” is created for the purposes of managing the Cross-Border Health Centre .................. (name of the Health Centre).

**Article 2:**

The Cross-Border Health Cooperation Group is an associative public interest structure which enjoys its own legal capacity and self-governance.
CHAPTER II: REGISTERED OFFICE AND JURISDICTION

Article 3:

The registered office of the Cross-Border Health Cooperation Group is established at ................., the administrative centre of the commune of ................., province of ................., .................(country).

Article 4:

Chairmanship of the Group is assumed on a rotational basis by one of the member communes.

Under no circumstances may the chairmanship of the group and that of the management committee be held concurrently by one country.

Article 5:

The area of intervention of the Cross-Border Health Cooperation Group includes the villages which form the area of coverage of the Health Centre, i.e.

......... (number) in ................. (country), namely: ................. (village(s)) and
......... (number) in ................. (country), namely: ................. (village(s)).

CHAPTER III: OBJECTIVE AND MISSION

Article 6:

The main objective of the Group is to promote cross-border cooperation in the health sector with the exclusive aim of improving the state of health of the populations.

Article 7:

The main objective of the Group is to promote cross-border cooperation in the health sector with the exclusive aim of improving the state of health of the populations:

• ensure notification, awareness-raising and mobilisation of the populations with a view to securing their support and acceptance of the project;

• establish and oversee the operation of the management bodies of the Health Centre;
• ensure the maintenance and enhancement of the technical support of the Health Centre;

• equip the Health Centre with staff either through direct recruitment by the Group or by secondment or provision of agents by the States concerned;

• encourage the member Communes to incorporate a budgetary approach that takes into consideration their participation in the operation of the centre when planning their budgets;

• undertake the necessary actions in terms of expanding the partnership with the centre;

• ensure training and research activities on health matters.

Article 8:

The Group acts through a management committee with its own legal personality and financial independence. Under no circumstances may it directly manage the healthcare structure.

CHAPTER IV: STATUS OF THE SITE OF THE HEALTH CENTRE

Article 9:

The site of the Health Centre covers an area of .......... (number) hectares situated in the village of ............... commune of ................. .

Article 10:

The competent administrative authority of ............... (country where the Health Centre site is located) shall proceed with the allocation of said property to the Cross-Border Health Cooperation Group of the communes of ............... and ............... in ............... (country) and ............... in ............... (country).
CHAPTER V: MEMBERS OF THE CROSS-BORDER HEALTH COOPERATION GROUP

Article 11:

Members of the Group:

1. for the party .................. (country), the local authorities of .................., namely:
   - the Mayor of the commune of ..................
   - the Chairmen of the permanent committees, ..................;
   - the Village Leaders of the .......... (number) villages concerned;
   - the head Doctor of the health district of ............... .

2. for the party .................. (country), the local authorities of .................., namely:
   - the Mayor of the commune of ..................
   - the Chairmen of the permanent committees, .................. ;
   - the Village leaders of the .......... (number) villages concerned;
   - the head Doctor of the health district of ............... .

Article 12:

The members of the Group mutually recognise their capacity, rights and obligations pursuant to this Agreement and its articles of association and internal regulations in respect of the cooperation agreements linking the two countries.

CHAPTER VI: OPERATION AND FINANCING

Article 13:

The procedures for the Group’s operation, financing and financial control will be outlined in the articles of association and internal regulations adopted unanimously by its members.
CHAPTER VII: DURATION

Article 14:

The Group is established for an unlimited term.

CHAPTER VIII: MODIFICATION OF THE AGREEMENT
AND DISSOLUTION OF THE GROUP

Article 15:

Any requests for modification of this Agreement are submitted to the members of the Group for consideration.

Such requests are adopted with a two-thirds majority of the members. Modifications may result in a revision of the articles of association and internal regulations.

Article 16:

The Group may only be dissolved at the decision of a two-thirds majority of its members or the competent authorities in the two countries.

Article 17:

In the event of dissolution of the Group, its rights are transferred to the management committee of the .................. (designation) Cross-Border Health Centre until a new Group has been established.

CHAPTER IX: MISCELLANEOUS PROVISIONS

Article 18:

The law applicable to the interpretation and application of this Agreement is the law of .................. (country where the Cross-Border Health Centre is located) notwithstanding community rights (ECOWAS, WAEMU, AU) and the law of .................. (name(s) of the country/countries) in force when integration is necessary due to the material or affected subjects.
Article 19:

This Agreement comes into effect on the date it is approved by the Regulatory Authorities.

Article 20:

This Agreement is issued in three original copies in ........................................ (languages), each of which are authentic versions.

Signed at ................ (place), on ............... (date)

Signed by:

The Mayor of the commune of ..................
The Mayor of the commune of ..................

(Signature) (Signature)
(First and Last name) (First and Last name)
Appendix 3:  
Model articles of association for a Cross-Border Community Health Organisation

Tools (models)

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MODEL ARTICLES OF ASSOCIATION FOR A COMMUNITY CROSS-BORDER HEALTH ORGANISATION (CCHO)

CHAPTER I: CREATION

Article 1:

With a view to contributing to the protection and improvement of their state of health, the populations of the communes of ................. (commune, country) and ............... (commune, country) have jointly created .......................................................... .........................................................., an apolitical organisation known as a Cross-Border Community Health Organisation, with the acronym **CCHO**.

The **CCHO** is an apolitical, secular not-for-profit organisation, with its own legal personality.

It is established for an unlimited duration. The registered office is at ........................................... (place, country name).

CHAPTER II: AIMS

Article 2:

The aims of the **CCHO** are to:

• facilitate the access of the populations in the district (villages, hamlets, etc.) to essential care which is remedial, preventative or promotional in nature;

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3 Groupement de Coopération Sanitaire Transfrontalière (GCOSAT) in French.
• arouse the active and responsible participation of the populations to protect and improve their state of health;

• make essential medication available to its members at relatively low prices.

CHAPTER III: OBJECTIVES AND FORMS OF ACTION

Article 3:

The CCHO implements its objectives in close collaboration with the technical services of the Ministries in charge of Health of ................. (country) and ................. (country). To be precise, this involves:

• ensuring the creation, and then the operation of a Cross-Border Health Centre designed for the entire population living in the geographical target area;

• ensuring the management of the Centre to guarantee a balance of its remedial, preventative and promotional aspects, in accordance with the directives of the Ministries responsible for Health;

• ensuring the training and retraining of medical staff to improve the quality of care;

• promoting the prescription of essential medication in International Non-proprietary Name (INN) form;

• collaborating with any body or organisation working towards the same objectives.

CHAPTER IV: MEMBERS

Article 4:

A member is any person who adheres to these articles of association, holds a membership card and regularly pays a subscription fee.

Article 5:

The membership status may be lost:
Throughout the year:

- due to resignation or exclusion
- in the event of death of the member, the card remains valid for beneficiaries until the end of the year.

At the end of the year:

- due to failure to renew the membership card.

CHAPTER V: AUTHORITIES AND BODIES

Article 6:

The authorities and bodies of the CCHO are:

- General Assembly (GA);
- Board of Directors (BD);
- Management Committee (MAC);
- Monitoring Committee (MOC).

Article 7:

The General Assembly is the highest authority of the CCHO. It defines the Organisation’s general policy. It is called to ordinary session twice a year by the Board of Directors. The General Assembly may meet in extraordinary session at the request of the President or a two-thirds majority of the Board of Directors.

It adopts its agenda based on proposals from the Board of Directors. The General Assembly approves the financial report of the Board of Directors, sets the amount for membership subscription fees and the pricing of services offered by the Centre. It makes all proposals regarding the organisation, management and development of the activities of the Organisation and sets the Board of Directors’ different missions. The General Assembly decides on modifications of the articles of association based on the conditions set forth in Article 21. It elects the members of the Board of Directors and the Monitoring Committee.

Article 8:

The Board of Directors, elected by the General Assembly for a period of three
(3) years which may be extended, includes:

- 1 Chairman
- 1 Vice-chairman
- 1 Administrative Secretary
- 1 General Treasurer
- 1 Deputy General Treasurer
- 2 Organisational Secretaries
- 2 Statutory Auditors
- 2 Conflict Resolution Officers

The following are members by law with an advisory role:

- the High Commissioner/Prefect or his representative
- the Mayors of the Communes concerned or their respective representatives
- the Prefects / Sub-prefects or respective representatives
- the Leaders of the villages involved
- the Head of the Cross-Border Health Centre
- the members of the Monitoring Committee.

**Article 9:**

The Board of Directors exercises the necessary powers for the smooth operation of the Organisation. It meets once a quarter and may hold extraordinary sessions at the request of its Chairman or the simple majority of its members. Its remit includes:

- informing the General Assembly of all decisions made
- ensuring the application of the general policy defined and recorded in a report by the General Assembly
• proposing all measures aimed at improving the quality of the CCHO’s services and its proper management

• opening discussions on all problems which may have an impact on the existence of the CCHO

• approving in principle the recruitment and dismissal of staff or the end of the secondment or provision of the agents by the State

• determining the second level disciplinary actions for all staff including the head of the Cross-Border Health Centre.

Article 10:

The Management Committee meets once a month in ordinary session and as many times as necessary for extraordinary sessions.

• Within two meetings of the Board of Directors, it makes the obligatory expenses for the smooth operation of the Cross-Border Health Centre.

• It justifies the expenses made during the quarter before the Board of Directors.

• It determines the first level disciplinary sanctions for all staff.

Article 11:

The Monitoring and Research Committee, responsible for overseeing the activities of the bodies of the Organisation, consists of five members elected by the General Assembly. It meets at the request of its Chairman as required.

CHAPTER VI: FUNDS

Article 12:

The Organisation’s funds come from:

• The sale of membership cards / subscriptions

• Events generating resources for the Organisation

• Revenue resulting from the activities of the Community Health Centre
• Subsidies from the public authorities of ………………………………… (countries concerned), charity organisations and national and international bodies

• Donations and legacies.

Article 13:

The annual report and accounts are sent to all partners, the Administration and the health services of ………………………………… (communes concerned). Accounting takes place with the production of an operating statement and balance sheet on an annual basis.

Article 14:

The financial year begins on 1 January and finishes on 31 December each year.

CHAPTER VII: RATES FOR SERVICES

Article 15:

The rates for services are set annually by the General Assembly.

CHAPTER VIII: DISCIPLINE

Article 16:

Failure to comply with these articles of association and internal regulations by any member, exposes them to the following sanctions:

• warning

• reprimand

• suspension

• exclusion.

CHAPTER IX: RESIGNATION

Article 17:

The CCHO acknowledges the right of any elected member to present their resignation from their position of responsibility. A written request should be sent
to the Chairman of the Board of Directors who will take the appropriate action.

**Article 18:**

The **CCHO** acknowledges the right of the Board of Directors to present its resignation following a decision taken by a two-thirds majority of the members of the Board of Directors. The resignation letter and minutes of the meeting are read before the General Assembly, which will make the final decision.

**CHAPTER X: SPECIFIC PROVISIONS**

**Article 19:**

General Meetings should be announced at least one week in advance.

**CHAPTER XI: FINAL PROVISIONS AND MODIFICATIONS OF THE ARTICLES OF ASSOCIATION AND INTERNAL REGULATIONS**

**Article 21:**

All proposals for modifications of these articles of association and internal regulations of the **CCHO** must be notified in writing to the Board of Directors at least three (3) months before a General Assembly. The Board of Directors has a duty to inform the members of the **CCHO** in this regard at least thirty (30) clear days before the General Assembly.

**Article 22:**

The dissolution of the CCHO may only take place by decision of the General Assembly based on a two-thirds majority of its members. In this case, the General Assembly will determine the provisions to be made for the devolution of assets.

Signed at .................. (place), on .................. (date)

**Signed by:**

The Mayor of the commune of ..................
The Mayor of the commune of ..................

(Signature) (Signature)
Appendix 4:
Model internal regulations for a Cross-Border Community Health Organisation

REGION | COUNTRY
--- | ---
PROVINCE/CIRCLE | CURRENCY
COMMUNE

MODEL INTERNAL REGULATIONS FOR A CROSS-BORDER COMMUNITY HEALTH ORGANISATION

CCHO

CHAPTER I: GENERAL PROVISIONS

Article 1:

The purpose of these internal regulations is to:

1. specify and supplement the statutory provisions of the Organisation
2. define the different bodies, as well as their roles and functions
3. determine the operational procedures of the Health Centre and the remit of the Head of the Cross-Border Health Centre
4. define the disciplinary measures and the range of sanctions
5. specify the external relations of the Organisation and the Health Centre
6. specify the procedures to promote the Organisation and the Health Centre.
Article 2:

As a not-for-profit organisation, the CCHO advocates easy access to essential healthcare for the populations at a low cost.

It encourages their active and voluntary participation in the improvement of their own health.

Article 3:

Membership in the Organisation is voluntary but required for the acquisition of a membership card. The membership fee is set by the General Assembly.

All members have the right to:

• vote during General Assemblies
• be elected to the Board of Directors
• enjoy access to preferential rates for themselves and their beneficiaries
• benefit from research activities for themselves and their beneficiaries.

All members must:

• pay their annual subscription
• attend General Assemblies
• respect the texts of the articles of association and internal regulations of the CCHO in the event of any problems arising in their geographical area
• defend the interests of the CCHO in all places and at all times.

CHAPTER II: AUTHORITIES AND BODIES

Article 4:

The General Assembly is the highest authority of the Organisation, which can negate the decisions of the Board of Directors at the last resort. It decides disputes between the different bodies and rules on cases where members are to be excluded. The General Assembly votes on the budget of the Organisation.
at the proposal of the Board of Directors. It meets in ordinary session once a year and in extraordinary session at the request of the Chairman or a two-thirds majority of the members of the Board of Directors.

**Article 5:**

The General Assembly elects the Board of Directors for a mandate of three (3) years which may be extended. This elected Board of Directors ensures the smooth operation of the CCHO according to the health policy set forth in the articles of association.

**Article 6:**

The Board of Directors meets once a quarter in ordinary session at the request of its Chairman or its Members.

The Board of Directors votes on the budget of the Centre at the proposal of the Management Committee. Each year, it is obliged to present a Monitoring and Financial Report in writing, as well as a written operational plan. The Board consists of nine (9) members.

The responsibilities of the members of the Board of Directors are as follows:

**The Chairman:**

Legal representative of the Organisation. He oversees the appropriate execution of the decisions made by the General Assembly and the Board of Directors. He makes all contacts necessary for the promotion of the Organisation and the performance of its activities. He chairs the General Assemblies and the meetings of the office of the Board of Directors. The Chairman signs all the cheques jointly with the General Treasurer of the Organisation. He also signs the work contracts, agreements and conventions formalised by the General Assembly.

**The Vice-Chairman:**

Replaces the Chairman in the event of absence or impediment.

**The Administrative Secretary:**

Responsible for any legal or administrative problems within the Organisation. For this purpose, he maintains all the accounting, administrative, legal and technical records for the Organisation.
The General Treasurer:
Responsible for the funds, assets and accounting documents of the Organisation and the Health Centre. He is in charge of allocating membership cards and receiving payments. He manages the calendar of the Organisation. He receives the money for the Centre in exchange for receipts; transfers the available funds under his control at least once a week into the bank of .................. (place) and immediately if they exceed ........................................ (amount in words and numbers; currency).

The Deputy Treasurer:
Replaces the General Treasurer in the event of absence or impediment. He is in charge of inventory accounting.

The Organisational Secretaries:
Responsible for organising the meetings, General Assemblies and events of the Organisation. They organise delegation visits.

The Statutory Auditors:
In charge of verifying the accounting and financial documents for the Organisation and the Cross-Border Health Centre.

The Conflict Resolution Officers:
In charge of settling conflicts within the Organisation and within the Cross-Border Health Centre.

Article 7:
The Management Committee:
Elected from within the Board of Directors for a mandate of three (3) years. It consists of five (5) members. It is in charge of preparing the budget, and monitoring and executing the Centre’s activity programmes.

Its composition is as follows:
- The Chairman of the Organisation
- The General Treasurer of the Organisation
- The Head of the Cross-Border Health Centre
- The Statutory Auditors.

The Management Committee meets in ordinary session once a month and in extraordinary session at the request of its Chairman or two-thirds of the members.

Article 8:
The Monitoring Committee:
The Monitoring Committee is in charge of monitoring the activities of the Board of Directors and the Management Committee, and ensuring the appropriate
application of the articles of association and internal regulations. In its activities it is answerable to the General Assembly.

CHAPTER III: THE CROSS-BORDER COMMUNITY HEALTH CENTRE

Article 9:
The objectives of the Cross-Border Health Centre are to:
• cover all populations within the target area by remedial, preventative and promotional care
• ensure the quality of the services it offers
• offer its services at the lowest rates possible
• promote social cohesion between the populations on both sides of the border.

Article 10:
The Head of the Cross-Border Health Centre is the main clinical coordinator who ensures the smooth administrative and financial operation of the Centre. He is in charge of ensuring compliance with the regulations in force in the two countries, and the preparation and application of the internal regulations of the CCHC. He prepares the organisation chart for the services of the Centre.

CHAPTER IV: SANCTIONS

Article 11:
The disciplinary sanctions taken by the Board of Directors against members are at two levels:
The first includes:
• warning
• reprimand
The second includes:
• suspension
• exclusion

Article 12:
In the event of a dispute between the Head of the Cross-Border Health Centre and the Management Committee, the Board of Directors rules in last resort.

Article 13:
These internal regulations may only be modified during a General Assembly at the proposal of the Board of Directors.

Signed at .................... (place), on .................... (date)
The Mayor of the commune of ..............
The Mayor of the commune of ..............

(Signature)                    (Signature)
(First and Last name)         (First and Last name)

For the chairman of the Management Committee

(Signature)
(first and last name)
Appendix 5:
Model guide for opening of bids and evaluation of a tender for which project ownership is assumed by a Cross-Border Health Cooperation Group

Tools (models)

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<td>COMMUNE</td>
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1. PREREQUISITES

1.1 Composition of an evaluation committee:
(According to the regulations in the countries involved)

• The Mayors, or their representatives
• The Deputy Mayors responsible for finances
• The Deputy Mayors responsible for tender processes
• Two (2) non-member advisors of the Office appointed on a revolving basis by the Mayors
• Those responsible for financial services on both sides of the border
• One specialist in the field from each side of the border
• Two (2) representatives of the beneficiary populations per commune (at least one female) are present in operations, but have no deciding vote.

1.2. Receipt of offers
The committee sets up a place for the tenderers to submit their offers; each offer is numbered and recorded in order of arrival in the incoming mail (date and time of delivery).

1.3. Notification of the tenderers
Notify the tenderers of the date on which the envelopes will be opened if this was not indicated in the consultation dossier (or in the case of deferment).

2. OPENING OF THE ENVELOPES

Step 1: Count the number of envelopes received.

Step 2: Verify that the envelopes are anonymous and fully sealed, and remove any envelopes which fail to meet these requirements.
NB: If the number of conforming envelopes is less than three (3), the tender process must be re-launched and the current tenderers will have their envelopes returned; the opening session is deferred.

The same will happen if this situation arises again after the second launch. However, the third will not be interrupted even if there are still not 3 conforming envelopes.

**Step 3:** Open the envelopes in accordance with step 1, in increasing order of the numbering used to identify the tenderers.

**Step 4:** State out loud the content of each envelope without taking their conformity into account.

NB: Reinsert the letter into its original envelope before opening the next one.

**Step 5:** Re-read aloud the table of items found for each of the tenderers.

**Step 6:** Give the tenderers or their representatives the opportunity to speak, to confirm the list of items and documents provided.

### 3. EVALUATION OF OFFERS

These operations concern all envelopes opened during the envelope opening session.

The tenderers do not attend the evaluation operations.

**Step 1:** Establish the list of members present at the committee, specifying their capacity.

**Step 2:** Establish the list of tenderers concerned.

**Step 3:** Verify the conformity of the administrative and financial items requested from the tenderers.

Any tender containing a non-compliant item (validity, conformity and signature), is eliminated (in other words it will not be processed during the steps to follow). The same applies to any tenders which fail to include all the items.

**Step 4:** Technical Scoring (out of 70)

<table>
<thead>
<tr>
<th>Technical criteria</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>I Similar experiences /10</td>
<td>A At least three copies of a Report on definitive acceptance of similar works and three statements of good execution of similar works</td>
</tr>
<tr>
<td></td>
<td>B Only one report on definitive acceptance of similar works and one statement of good execution of similar works</td>
</tr>
<tr>
<td>Column</td>
<td>Description</td>
</tr>
<tr>
<td>--------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>C</td>
<td>No report on definitive acceptance of similar works and no statement of good execution of similar works</td>
</tr>
<tr>
<td>II</td>
<td>Staff: experience and qualification /20</td>
</tr>
<tr>
<td>A</td>
<td>At least two CVs for permanent and qualified staff, having worked on at least two similar construction sites</td>
</tr>
<tr>
<td>B</td>
<td>Only one CV for permanent and qualified staff, having worked on at least two similar construction sites</td>
</tr>
<tr>
<td>C</td>
<td>No CVs for qualified staff, having worked on a similar construction site</td>
</tr>
<tr>
<td>III</td>
<td>Work material /15</td>
</tr>
<tr>
<td>A</td>
<td>Full list of material, of a good quality and in accordance with the technical requirements of the works</td>
</tr>
<tr>
<td>B</td>
<td>Complete list of material, of quite a good quality and partially in accordance with the technical requirements of the works</td>
</tr>
<tr>
<td>C</td>
<td>Incomplete list of material, partially in accordance with the technical requirements of the works</td>
</tr>
<tr>
<td>IV</td>
<td>Site organisation /10</td>
</tr>
<tr>
<td>A</td>
<td>Planning, organisation of work and supply plan deemed satisfactory</td>
</tr>
<tr>
<td>B</td>
<td>Planning, organisation of work and supply plan of the site deemed quite satisfactory</td>
</tr>
<tr>
<td>C</td>
<td>Planning, organisation of work and supply plan of the site deemed unsatisfactory</td>
</tr>
<tr>
<td>V</td>
<td>Period for execution of works /5</td>
</tr>
<tr>
<td>A</td>
<td>Average period of offers (+or- 5%)</td>
</tr>
<tr>
<td>B</td>
<td>Period slightly over or under the average (+or-20%)</td>
</tr>
<tr>
<td>C</td>
<td>Period excessively short or excessively long (+or-50%)</td>
</tr>
</tbody>
</table>
### VI Presentation of the offer /5

<table>
<thead>
<tr>
<th></th>
<th>Offer very well presented and coherent in terms of depth and form</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Offer quite well presented and coherent in terms of depth and form</td>
<td>3</td>
</tr>
<tr>
<td>C</td>
<td>Offer badly presented and incoherent in terms of depth and form</td>
<td>0</td>
</tr>
</tbody>
</table>

### VII Knowledge of the area /5

<table>
<thead>
<tr>
<th></th>
<th>The provider has already carried out work in the area</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>The provider knows the area, but has never carried out work there</td>
<td>3</td>
</tr>
<tr>
<td>C</td>
<td>The provider does not know the area and has never carried out work there</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total evaluation technique: out of 70**

Any offer for which the technical score is lower than 25 is automatically eliminated (in other words, it will not be processed during the steps to follow).

**Step 5: Verification of quotes (financial offers).**

The committee will proceed as follows:

- Verify if the unit prices (UP) in figures and letters are identical on the price schedule. If they are different, the unit price in letters is maintained;

- Verify if the wording and quantities of the UP in the quote framework of the Tender Dossier (TD) are identical to the information in the offer quote. If they are different and there is no explanatory note, the information in the offer is automatically replaced by that of the TD:
  
  The committee must rule in all cases where the tenderer offers explanations, and if necessary refer to a specialist. If these explanations prove to be accurate, corrections will be made to all of the quotes.

- Verify if the unit prices of the cost estimate (in figures) and the UP in letters on the price schedule are identical. If they are different, the unit price in letters is maintained in the quote;

- Correct the amounts by verifying all of the information in the amounts column.

  All further operations will be based on these corrected amounts.

**Step 6: Scoring of amounts (out of 60).**
The committee will proceed as follows:

- Communicate the confidential amount (CA) to the entire committee and calculate the extreme permissible amounts (Minimum (Min) = CA - 10% x CA; and Maximum (Max) = CA + 10% x CA).

  Any tender for which the corrected amount is lower than the Min or higher than the Max will be eliminated, and will not be taken into account in the steps to follow.

- Give 30 points to the tender with the smallest amount and then calculate the score for the other tenders.

  \[
  \text{Tender score} = \frac{(30 \times \text{Smallest amount})}{\text{Tender amount}}.
  \]

**Step 7:** Scoring of offers and ranking: (this only concerns tenders which have passed all the steps).

The score of an offer is = Technical score of the offer + Financial score of the offer.

Offers are ranked in ascending order based on their scores.

It is at the end of the evaluation process that the evaluation report is prepared (see model attached in appendices).

<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
<th>PROVINCE/CIRCLE</th>
<th>CURRENCY</th>
<th>COMMUNE</th>
</tr>
</thead>
</table>

**APPENDIX: EVALUATION REPORT**

In the year 20........ (year) on .............. (day/month/time), the analysis committee, meeting in.............. (place/room) to open the envelopes, evaluated the offers and deliberated on the tender relating to .............. (title of the invitation to tender) in the villages of........................., commune(s) of ......................... (authority/authorities concerned) has deliberated and pronounced the results below.

The committee was composed of:

- Chairman: ..................................................
- First Reporter: ..................................................
- Second Reporter: ..................................................
- Members: ..................................................
Observers: ...........................................

After having opened the envelopes submitted within the deadlines for the invitation to tender in question, the committee then evaluated the offers and proceeded to a deliberation.

Before evaluating the offers, the committee established the scoring criteria. The following scoring grid was adopted:

<table>
<thead>
<tr>
<th>Technical criteria to assess</th>
<th>Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>I Similar experiences</td>
<td>10</td>
</tr>
<tr>
<td>II Staff: experience and qualification</td>
<td>20</td>
</tr>
<tr>
<td>III Work material</td>
<td>15</td>
</tr>
<tr>
<td>IV Site organisation</td>
<td>10</td>
</tr>
<tr>
<td>V Period for execution of works</td>
<td>5</td>
</tr>
<tr>
<td>VI Presentation of the offer</td>
<td>5</td>
</tr>
<tr>
<td>VII Knowledge of the area</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>70</strong></td>
</tr>
</tbody>
</table>

Following evaluation of the technical offers, the committee allocated the following scores to the tenderers:

<table>
<thead>
<tr>
<th>Tenderers (specify their names in lines 1,2,3... below)</th>
<th>Marks obtained</th>
<th><strong>Total</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Similar experiences</td>
<td>Staff</td>
<td>Material</td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>...</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Any technical offer score lower than 50/70 is eliminatory.

The committee then proceeded to evaluate the financial offers for the tenderers who had obtained technical scores above 50/70.

Following a recap, the following ranking was established:
<table>
<thead>
<tr>
<th>Tenderers</th>
<th>Technical offer score</th>
<th>Financial offer score</th>
<th>Total score</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td>1st</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td>2nd</td>
</tr>
<tr>
<td>...</td>
<td></td>
<td></td>
<td></td>
<td>....</td>
</tr>
</tbody>
</table>

**Deliberation**

The committee, following the works, initially made the following recommendations: ……………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………

It then decided to award the letter of engagement relating to the ................ (offer title) in ................ (name of the authority concerned) to ................ (tenderer’s name) for the sum of ................ (amount in letters; currency), i.e. ................ (amount in numbers; currency) for a period of........... calendar days.

Having covered all items on the agenda, the Chairman of the Committee thanked the different members for their participation in the process and closed the session at .......... (time).

Signed at ................ (Place), the ............... (Day/month/year).

**Signed by**

The Session Secretary ...................................................

(Signature) .................................................................

The Chairman of the Committee ........................................

(Signature) .................................................................
Appendix 6: Model provisional acceptance report

Tools (models)

<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROVINCE/CIRCLE</td>
<td>CURRENCY</td>
</tr>
<tr>
<td>COMMUNE</td>
<td></td>
</tr>
</tbody>
</table>

MODEL PROVISIONAL ACCEPTANCE REPORT

Contract number: ......................

Purpose: .........................

Contracting authority: .................

Awardee: .................. (name of company awarded the contract)

Monitoring: .................. (name of monitoring company)

Financing: .................. (source of financing)

Locality: .................. (town/city)

Execution period: ..................

Start date of works: .................

On the ............... (day/month) of the year ................, a mission composed of: .................. (main members of the mission) returned to ................ (village/commune) for the purposes of proceeding to the provisional acceptance of the works for the installation of ................ (nature of works as worded in the contract), which were the purpose of the above mentioned contract between the Commune/Village of ................ and
Following a site visit to verify the effective implementation of the works according to the contractual documents, the mission pronounced the provisional acceptance of the works, with the following reserves:

1. ................................................................. (Reserve);
2. ................................................................. (Reserve);
3. ................................................................. (Reserve);

The company has a maximum period of ....... days from the signature of this report to resolve the issues raised in these reserves.

Signed at ............... (Place), on .............. (Date)

For the Commune

...............................................
(Name of representative)
...............................................
(Signature)

For Monitoring

...............................................
(Name of representative)
...............................................
(Signature)

For the Company

...............................................
(Name of representative)
...............................................
(Signature)

For the Contracting Authority

...............................................
(Name of representative)
...............................................
(Signature)
For the Support Structure

...............................................

(Name of the representative)

...............................................

(Signature)
Appendix 7:
Model definitive acceptance report

PROJECT: Construction works for a Cross-Border Health Centre between the Kossi Province in Burkina Faso and the Tominian Cercle in Mali

BENEFICIARIES: Population of the Kossi-Tominian cross-border region

CONTRACTING AUTHORITY: General Directorate for Administration of the Territory of Burkina Faso and the National Border Directorate of Mali

TECHNICAL MONITORING OFFICE: ARDI (Architecture Recherche Design Ingénierie), Burkina Faso

COMPANY: EGD (Enterprise Groupement pour le Développement), Mali

FINANCING: GIZ/AUBP

DEFINITIVE ACCEPTANCE REPORT

On ...............in the year ..........a Committee composed of :

........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................

Visitd the construction site, to proceed to the technical acceptance of the works for the above-mentioned project, following a joint inspection of the works by both parties.

The joint inspection aimed to:

- Acknowledge the works carried out
- Test and examine the electrical installations (switches and lights)
• Test and examine the sanitary plumbing installations (washbasins, toilets, shower column, sink, shower receivers, water drawing taps, stop valves, septic tank, drain wells, manholes, downspouts, etc.)

• Test and examine the joinery installations (aluminium, metallic and wood)

• Examine the finishing (coatings, floor tiling, wall tiling, painting, etc.)

• Examine the roads and external works (compacted backfill, slightly compacted backfill, execution of T3 kerbs, paths suitable for motor vehicles, pavement, parking, tree planting, external lighting, etc.)

• Potentially record the non-performance of the services set out in the contract

• Potentially record faults or defects

• Record the withdrawal of the construction site installations and the reconditioning of the lands

• Potentially record the successful completion of the works.

During the inspection, the Committee recorded that everything had been executed in full and following the best practices in accordance with the contracts and written documents.

As a result, the Committee has pronounced the definitive acceptance of the works without reserves from the day, month and year indicated above. In witness whereof, this report is issued for all intents and purposes.

**SIGNATURE**

Read and accepted

For the Technical monitoring office ..................

For the Construction company ..................
# Appendix 8: Project development monitoring framework

## Tools (models)

<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROVINCE/CIRCLE</td>
<td>CURRENCY</td>
</tr>
<tr>
<td>COMMUNE</td>
<td></td>
</tr>
</tbody>
</table>

**PROJECT DEVELOPMENT MONITORING FRAMEWORK**

**Party responsible for monitoring:** Steering committee

**Monitoring objective:** Put in place an effective information method for determining the state of progress of the development of the project.
<table>
<thead>
<tr>
<th>Field of study</th>
<th>Monitoring objectives</th>
<th>Indicators</th>
<th>Parameters</th>
<th>Parties concerned</th>
<th>Hypotheses &amp; Risks</th>
<th>Sources of verification</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment of issues linked to the populations’ needs</td>
<td>Verify that the assessment linked to the populations’ needs is carried out at a high standard</td>
<td>• Existence of a diagnostic needs assessment report</td>
<td>• Participation of representatives from all sectors of the population in the area</td>
<td>• Steering committee</td>
<td>Hypothesis: The subject of the diagnostic assessment reflects the concerns of the populations on both sides of the border</td>
<td>Where can we find reliable information for monitoring the indicator?</td>
<td>Field visit</td>
</tr>
<tr>
<td>Planning of the installation and operation of the infrastructure</td>
<td>Ensure good organisation of the planning workshop and the existence of an action plan for the installation and operation of the infrastructure</td>
<td>• Organisational conditions of the planning workshop</td>
<td>• That all aspects linked to the installation and operation of the infrastructure are taken into account</td>
<td>• Steering committee</td>
<td>Hypothesis: The planning is performed as part of a participatory process</td>
<td>Field visit</td>
<td></td>
</tr>
</tbody>
</table>

**Hypothesis:** The subject of the diagnostic assessment reflects the concerns of the populations on both sides of the border.

The diagnostic assessment is undertaken by an experienced moderator.
<table>
<thead>
<tr>
<th>Field of study</th>
<th>Monitoring objectives</th>
<th>Indicators</th>
<th>Parameters</th>
<th>Parties concerned</th>
<th>Hypotheses &amp; Risks</th>
<th>Sources of verification</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mobilisation of financial resources</strong></td>
<td>Enable the local authorities to have the necessary funds for the installation and launch of the infrastructure.</td>
<td>• Letter of engagement for technical and financial partners</td>
<td>• Existence of a request for financing • Making contact with the technical and financial partners</td>
<td>• Local authorities • Steering committee • Support team • Technical and financial partners</td>
<td></td>
<td>• From the local authorities • From the technical and financial partners</td>
<td>• Field visit • Interview</td>
</tr>
<tr>
<td><strong>Formalisation of a cross-border basic service agreement</strong></td>
<td>Ensure that the legal bases for the management of the basic service infrastructure are recorded in a cross-border basic service agreement.</td>
<td>• Existence of a cross-border basic service agreement</td>
<td>• Means of financing the infrastructure • Status of the infrastructure • Management procedures for the infrastructure • Informing the populations of the agreement</td>
<td>• Local authorities • Steering committee • Technical services • Support team • Technical and financial partners</td>
<td>Hypothesis: The local agreement highlights all the key aspects of the cooperation needed for the provision of the basic service</td>
<td>• From the local authorities</td>
<td>• Field visit • Discussions with elected officials of the local authorities</td>
</tr>
<tr>
<td><strong>Appointment of staff for the infrastructure</strong></td>
<td>Provide a sufficient number of trained staff for the operation of the infrastructure.</td>
<td>• Qualifications and adequate number of staff necessary for the operation of the infrastructure</td>
<td>• Existence of procedures for the provision of staff by the regulatory authorities • Work contracts</td>
<td>• Regulatory authorities • Local authorities • Steering committee • Technical services • Support team • Technical and financial partners</td>
<td></td>
<td>• From the local authorities • From the regulatory authorities</td>
<td>• Field visit • Discussions with elected officials of the local authorities</td>
</tr>
<tr>
<td>Field of study</td>
<td>Monitoring objectives</td>
<td>Indicators</td>
<td>Parameters</td>
<td>Parties concerned</td>
<td>Hypotheses &amp; Risks</td>
<td>Sources of verification</td>
<td>Methodology</td>
</tr>
<tr>
<td>---------------</td>
<td>----------------------</td>
<td>------------</td>
<td>------------</td>
<td>-------------------</td>
<td>-------------------</td>
<td>------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Establishment of the management bodies</td>
<td>Ensure that the management bodies of the infrastructure are established according to the required standards</td>
<td>• Existence of all the bodies necessary for good management of the infrastructure</td>
<td>• Good organisation of the General Assembly for the establishment of the management bodies • Participation of representatives from all the villages in the area covered by the basic service • Participation of women and young people in the management bodies created</td>
<td>• Populations • Regulatory authorities • Local authorities • Steering committee • Technical services • Support team • Technical and financial partners</td>
<td></td>
<td>• General Assembly for the establishment of the management bodies • From the local authorities</td>
<td>• Field visit • Participation in the General Assembly for the establishment of the management bodies</td>
</tr>
<tr>
<td>Drafting of the articles of association and internal regulations</td>
<td>Ensure that the management bodies of the infrastructure have the necessary reference framework for the fulfilment of their missions</td>
<td>• Existence of the articles of association and internal regulations</td>
<td>• Availability of the articles of association of the management bodies approved by all stakeholders • Availability of the internal regulations approved by all stakeholders</td>
<td>• Populations • Regulatory authorities • Local authorities • Steering committee • Technical services • Support team</td>
<td></td>
<td>• From the regulatory authorities • From the local authorities</td>
<td>• Field visit • Exchanges with the members of the management bodies and elected officials of the local authorities</td>
</tr>
<tr>
<td>Informing the stakeholders on the construction and equipping of the infrastructure</td>
<td>Ensure that all stakeholders have a common understanding of the roles and responsibilities of the different parties involved</td>
<td>• Confirmation of clear understanding regarding the roles and responsibilities of the different stakeholders</td>
<td>• Misunderstandings regarding the roles and responsibilities of the different stakeholders</td>
<td>• Populations • Regulatory authorities • Local authorities • Steering committee • Technical services • Support team • Technical and financial partners</td>
<td>Hypothesis: All the stakeholders are represented at the information meeting on the processes for construction and equipping of the infrastructure</td>
<td>• From all stakeholders</td>
<td>• Field visit • Survey</td>
</tr>
<tr>
<td>Field of study</td>
<td>Monitoring objectives</td>
<td>Indicators</td>
<td>Parameters</td>
<td>Parties concerned</td>
<td>Hypotheses &amp; Risks</td>
<td>Sources of verification</td>
<td>Methodology</td>
</tr>
<tr>
<td>----------------</td>
<td>-----------------------</td>
<td>------------</td>
<td>------------</td>
<td>-------------------</td>
<td>--------------------</td>
<td>------------------------</td>
<td>-------------</td>
</tr>
</tbody>
</table>
| Recruitment of a research and monitoring department | Ensure the recruitment of a high quality research and monitoring department for the implementation of the works | • Existence of a service provision contract with a research and monitoring department | • Reasons that prevailed in the selection of the research and monitoring department | • Regulatory authorities  
• Local authorities  
• Research and monitoring department  
• Steering committee  
• Technical services  
• Support team  
• Populations  
• Technical and financial Partners | Hypothesis: The announcement of the recruitment of a research and monitoring department is widely circulated and takes place on time | • From the local authorities  
• From the research and monitoring department | • Participation in the evaluation of technical and financial offers  
• Exchanges with the local authorities  
• Exchanges with the selected research and monitoring department |
| Performance of feasibility studies | Ensure the performance of the feasibility studies of the infrastructure | • Availability of a feasibility studies report | • Technical feasibility of the infrastructure | • Research and monitoring department  
• Local authorities  
• Steering committee  
• Technical services  
• Populations | | • From the local authorities  
• From the research and monitoring department  
• From the populations near the infrastructure installation site | • Field visit  
• Discussions with the research department  
• Discussions with the local authorities  
• Discussions with the populations near the infrastructure installation site |
<table>
<thead>
<tr>
<th>Field of study</th>
<th>Monitoring objectives</th>
<th>Indicators</th>
<th>Parameters</th>
<th>Parties concerned</th>
<th>Hypotheses &amp; Risks</th>
<th>Sources of verification</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruitment of a construction company</td>
<td>Ensure the recruitment of a company for the execution of the construction</td>
<td>• Existence of a service provision contract with a construction company</td>
<td>• Reasons which prevailed in the selection of the company</td>
<td>• Regulatory authorities • Local authorities • Steering committee • Technical services • Support team • Populations • Construction company • Technical and financial Partners</td>
<td><strong>Hypothesis:</strong> The announcement of the recruitment of a construction company is widely circulated and meets the deadline</td>
<td>• From the local authorities • From the research and monitoring department</td>
<td>• Participation in the evaluation of technical and financial offers • Discussions with the local authorities • Discussions with the construction company selected</td>
</tr>
<tr>
<td>Execution of works</td>
<td>Oversee the good execution of the construction</td>
<td>• Good quality of the construction • Compliance with the contractual deadline</td>
<td>• Regulatory authorities • Local authorities • Steering committee • Technical services • Support team • Populations • Research and monitoring department • Construction company • Technical and financial partners</td>
<td></td>
<td></td>
<td>• Construction site</td>
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</tr>
<tr>
<td>Equipping of the infrastructure</td>
<td>Oversee the installation of quality equipment into the infrastructure</td>
<td>• Quality of equipment • Quantity of equipment • Respect of the terms of the scope statement for the provision of materials and equipment</td>
<td>• Regulatory authorities • Local authorities • Steering committee • Technical services • Suppliers • Support team • Construction company • Technical and financial partners</td>
<td><strong>Hypothesis:</strong> The tender dossiers and the contract for the supply of materials and equipment are clear</td>
<td>• Basic service infrastructure</td>
<td>• Infrastructure visit</td>
<td>• Discussions with elected officials of the local authorities • Discussions with the supplier</td>
</tr>
<tr>
<td>Field of study</td>
<td>Operation of the infrastructure's management bodies</td>
<td>Monitoring objectives</td>
<td>Source of verification</td>
<td>Methodology</td>
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<td><strong>Hypotheses &amp; Risks</strong></td>
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<td><strong>Hypothesis</strong>: The management bodies of the infrastructure are equipped to fulfill their roles and responsibilities</td>
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<td><strong>Hypothesis</strong>: The staff have the necessary materials and equipment to appropriately fulfil their mission</td>
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### Appendix 9:
Model construction site monitoring report

#### Tools (models)

<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
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<tr>
<td>PROVINCE/CIRCLE</td>
<td>CURRENCY</td>
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<tr>
<td>COMMUNE</td>
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</tbody>
</table>

**MODEL CONSTRUCTION SITE MONITORING REPORT**

Contract N°: .........................

Purpose: .........................

Contracting authority: .................

Awardee: .........................

Monitoring: ......................... (Name of monitoring company)

Financing: ......................... (Source of financing)

Town/City: .........................

Execution period ....................

Start date of the works: .................

Date of last inspection ....................

N° of current inspection ....................

On the .................. (Day/month) of the year .................., a mission consisting of: .......................... (Main members of the mission) returned to .................. (Village/commune) for the purposes of monitoring the execution of the works
Installation of a Cross-Border Basic Service Infrastructure. The User’s Guide

for ............... (Nature of the works), which is the purpose of the above-mentioned contract.

The mission began with a guided tour of the construction site which took place from ......... (time) to ........ (time).

The guided tour involved a visit of the entire construction site to record the state of progress of the works, which gave rise to the following observations:

1. ................................................................. (Observation);
2. ................................................................. (Observation);
3. ................................................................. (Observation);

Following this visit, a session gathered the different parties to review the observations and recommendations made during the last site inspection and those recorded during the current visit.

Based on the exchanges, the mission adopted the following recommendations:

1. ................................................................. (Recommendation);
2. ................................................................. (Recommendation);
3. ................................................................. (Recommendation);

When all items on the agenda had been covered, the inspection mission ended
at .......... (Hour/mn).

Signed at ................. (Place), on ............... (Date).

Signed by:

For the commune

...(Name of the representative)

...(Signature)

For the Company

...(Name of the representative)

...(Signature)

For the Control

...(Name of the representative)

...(Signature)

Contracting Authority

...(Name of the representative)

...(Signature)

For the Support Structure

...(Name of the representative)

...(Signature)
Appendix 10: Framework for monitoring the operation of the infrastructure

Tools (models)

<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
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</thead>
<tbody>
<tr>
<td>PROVINCE/CIRCLE</td>
<td>CURRENCY</td>
</tr>
<tr>
<td>COMMUNE</td>
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</tbody>
</table>

FRAMEWORK FOR MONITORING THE OPERATION OF THE INFRASTRUCTURE

Entity responsible for level 1 monitoring: Board of Directors

Monitoring objective: Obtain reliable information to ensure the use of the infrastructure by beneficiary populations and the quality of the services provided by the management committee, monitoring committee and infrastructure staff.
<table>
<thead>
<tr>
<th>Field of study</th>
<th>Monitoring objectives</th>
<th>Indicators</th>
<th>Parameters</th>
<th>Parties concerned</th>
<th>Hypotheses &amp; Risks</th>
<th>Sources of verification</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>What aspect of the process do we want to verify: objectives of the module, activities, use of resources, teaching, ownership, etc.?</td>
<td>What would we like to see or achieve in this field?</td>
<td>What indicator enables us to judge fulfilment of the objectives?</td>
<td>What concrete information linked to the indicator do you want to verify?</td>
<td>Who is responsible for achieving the indicator and which parties concerned by the desired change should provide the required information?</td>
<td>What are the essential conditions for achieving the objectives?</td>
<td>Where can we find reliable information for monitoring the objectives?</td>
<td>How can we find the information?</td>
</tr>
<tr>
<td>Operation of the management committee and monitoring committee</td>
<td>Ensure the operation of the management committee and monitoring committee</td>
<td>• Regularity of minutes on statutory and extraordinary meetings</td>
<td>• Purposes of meetings held</td>
<td>• Board of Directors</td>
<td>Hypothesis: The management committee and the monitoring committee of the infrastructure are equipped to fulfil their roles and responsibilities</td>
<td>• From the management committee</td>
<td>• Field visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Existence of an action plan</td>
<td>• Rate of attendance at meetings</td>
<td>• Management committee</td>
<td></td>
<td>• From the monitoring committee</td>
<td>• Discussion with the management committee and the monitoring committee</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Existence of recent activity reports</td>
<td>• Realistic nature of the action plan</td>
<td>• Monitoring committee</td>
<td></td>
<td></td>
<td>• Survey of the staff of the infrastructure and the populations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Existence of recent financial reports</td>
<td>• Nature of activities carried out</td>
<td></td>
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</tr>
<tr>
<td>Use of the infrastructure by the beneficiary populations</td>
<td>Ensure the use of the infrastructure by the beneficiary populations</td>
<td>• Rate (monthly/quarterly) of attendance by the populations of the area covered by the basic service</td>
<td>• Total number of visits</td>
<td>• Board of Directors</td>
<td>Hypothesis: The basic service infrastructure is relatively close to the populations</td>
<td>• From the staff for the infrastructure</td>
<td>• Field visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Number of visits by males</td>
<td>• Management committee</td>
<td>The staff of the infrastructure warmly welcome its users</td>
<td>• From the management committee and monitoring committee</td>
<td>• Discussions with the staff</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Number of visits by females</td>
<td>• Monitoring committee</td>
<td></td>
<td></td>
<td>• Survey of the infrastructure</td>
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<td></td>
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<td>• Number of visits by children</td>
<td>• Infrastructure staff</td>
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<td></td>
<td></td>
<td></td>
<td>• Populations</td>
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<tr>
<td>Field of study</td>
<td>Monitoring objectives</td>
<td>Indicators</td>
<td>Parameters</td>
<td>Parties concerned</td>
<td>Hypotheses &amp; Risks</td>
<td>Sources of verification</td>
<td>Methodology</td>
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</tr>
</tbody>
</table>
| Provision of the basic service by the infrastructure staff | Verify that the staff of the infrastructure provide quality services to the populations | • The populations’ perception of the services offered by the staff of the infrastructure | • Diligence of the infrastructure staff  
• Number of satisfied users of the services offered by the infrastructure staff  
• Number of dissatisfied users of the services offered by the infrastructure staff | • Infrastructure staff  
• Populations  
• Management committee  
• Monitoring committee | Hypothesis: The staff have the necessary materials and equipment for the appropriate fulfilment of its mission | • From the populations  
• From the Management committee and Monitoring committee  
• From the staff of the infrastructure | • Field visit  
• Discussions with the staff of the infrastructure  
• Discussions with the Management committee and the Monitoring committee  
• Survey of the populations |
**Entity responsible for level 2 monitoring:** Management committee

**Monitoring objective:** Obtain reliable information to ensure the appreciation of the populations and the quality of the services provided by the infrastructure staff.

<table>
<thead>
<tr>
<th>Field of study</th>
<th>Monitoring objectives</th>
<th>Indicators</th>
<th>Parameters</th>
<th>Parties concerned</th>
<th>Hypotheses &amp; Risks</th>
<th>Sources of verification</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Use of the infrastructure by the beneficiary populations</strong></td>
<td>Ensure the use of the infrastructure by the beneficiary populations</td>
<td>• Rate of attendance (monthly/quarterly) by the populations of the area covered by the basic service</td>
<td>• Total number of visits</td>
<td>• Board of Directors</td>
<td><strong>Hypothesis:</strong> The basic service infrastructure is relatively close to the populations</td>
<td>• From the staff of the infrastructure</td>
<td>• Field visit</td>
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<td></td>
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<td>• Number of visits by females</td>
<td>• Management committee</td>
<td></td>
<td>• From the management committee and monitoring committee</td>
<td>• Discussions with the staff</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Number of visits by males</td>
<td>• Monitoring committee</td>
<td></td>
<td></td>
<td>• Discussions with the management committee and the monitoring committee</td>
</tr>
<tr>
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<td></td>
<td>• Number of visits by children</td>
<td>• Infrastructure staff</td>
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<td></td>
<td></td>
<td>• Populations</td>
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</table>

| **Provision of the basic service by the infrastructure staff** | Verify that the staff of the infrastructure provide quality services to the populations | • The populations’ perception of the services offered by the staff of the infrastructure | • Diligence of the infrastructure staff | • Infrastructure staff | **Hypothesis:** The staff have the necessary materials and equipment for the appropriate fulfilment of its mission | • From the populations | • Field visit |
| | | | • Number of satisfied users of the services offered by the infrastructure staff | • Populations | | • From the management committee and monitoring committee | • Discussions with the staff of the infrastructure |
| | | | • Number of dissatisfied users of the services offered by the infrastructure staff | • Management committee | | • With the staff of the infrastructure | • Discussions with the management committee and the monitoring committee |
| | | | | • Monitoring committee | | | • Survey of the populations | |
**Entity responsible for level 3 monitoring:** Monitoring committee

**Monitoring objective:** Ensure the appropriate use of resources in the implementation of the activities of the management committee

<table>
<thead>
<tr>
<th>Field of study</th>
<th>Monitoring objectives</th>
<th>Indicators</th>
<th>Parameters</th>
<th>Parties concerned</th>
<th>Hypotheses &amp; Risks</th>
<th>Sources of verification</th>
<th>Methodology</th>
</tr>
</thead>
</table>
| Use of resources (human, material and financial) by the management committee | Verify that the management committee uses the resources in a logical way in the implementation of its activities | • Quality of use of resources | • Number of days worked by the staff per week  
• Number of hours worked by the staff per day  
• Existence and quality of the inventory accounting  
• Existence and quality of the activity reports  
• Existence and quality of the financial reports | • Monitoring committee  
• Management committee  
• Infrastructure staff  
• Board of Directors  
• Populations | Hypothesis: The management committee has indispensable resources for the fulfilment of its mission | • From the management committee  
• From the staff of the infrastructure | • Field visit  
• Discussions with the management committee  
• Discussions with the staff of the infrastructure  
• Survey of the populations |
This guide describes the installation of a cross-border basic service infrastructure between Burkina Faso and Mali in West Africa. The Cross-Border Health Centre, jointly set up and used by the border villages Ouarokuy (Burkina Faso) and Wanian (Mali), emerged as an initiative of the political and administrative authorities from the two countries involved, and was facilitated by the African Union Border Programme (AUBP) with technical and financial support from the Government of the Federal Republic of Germany/Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH.

In part one, the guide outlines the core steps of the project: the initiation and preparation of cross-border cooperation, the institutional set-up of the planned infrastructure, the construction and equipping of the infrastructure, and finally, the sustainability of its management through the empowerment of actors on the ground. Lessons learnt from the successful Ouarokuy-Wanian Cross-Border Health Centre complement the suggested methodology of the installation process with concrete experiences made.

Monitoring and evaluation guidelines as well as templates for local conventions and regulations, offered in the second part of this book, constitute useful reference material for the replication of such cross-border cooperation projects. As such, this publication is an invaluable tool to assist relevant actors, particularly border authorities in neighbouring countries, in the establishment of a cross-border service infrastructure for the benefit of the peaceful coexistence of local populations, development and integration in African border regions.