**About the manual:**

This manual is submitted by USAID-Assessment & Strengthening Program and has been prepared by M/S Rafaqat Mansha, Mohsin Dossani, Masoom & Co Chartered Accountants

# Chapter-1

# Introduction

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**A.        SCOPE OF THE MANUAL**

The Monitoring & Evaluation Manual(M&E) (this manual) sets out the M&Eprinciples, policies and procedures adopted by Health Services Academy (HSA) with objective to enhances accountability and consistency, while at the same time producing long-term impacts from reduced duplication, rework, training, and increased focus, consistency, and productivity. .

This manual has been approved by the Board of Governors in their meeting on XX (Day) <u>XXX (Month) 2012</u>.

The Executive Director shall be responsible for the:

- Distribution of the manual to various process owners;

- Maintenance of the record of the holders of the manual; and

- Approvalof the recommended modifications to existing accounting policies and procedures.

The Heads of Departments / Process Ownersshall be responsible for the:

- Implementation of the manual; and

- Monitoring of compliance with the policies and procedures in the manual

- Receiving queriesand modifications to the existing M&E policies and forwarding onwards to HOD –M&E for clarification and approval.

The manual comprises of the following chapters which cover all the processes related to M&E:

- Introduction

- Organisational Chart

- M&E System

- M&E Planning

- M&E Indicators

- Reporting

- Capacities and Conditions for M&E

- Critical Reflections for Improved Actions


All queries, matters, exceptions and modifications to the existing M&E policies and procedures in this manual should be addressed to the HOD –M&E.

This manual provides a source of instruction and guidance to all employees of the HSA for the application of M&E policies and procedures. The M&E policies and procedures contained in this manual shall be complied with by all the employees of the HSA.

Where the employees of the HSA consider that they are unable, for any reason, to comply with the policies and procedures defined in this manual, they should refer the matter to the Executive Director for resolution through their respective HOD. However, general queries and clarification matters regarding this manual should be addressed to the HOD –M&E.

**B.      OBJECTIVE**

The objective of this manual is to promote uniformity and consistency in the HSA M&E function by clearly defining responsibilities, authorities, and functions. The objective of this manual shall be met by ensuring the following:

- that all departments adopt and implement leading M&E practices, policies and procedures uniformly;

- that internal controls are in place to safeguard the projects of the HSA against any negative activities for project impact;

- that the HSA maintain sits program records and prepare its M&E reporting in accordance with generally accepted M&E principles as applicable in Pakistan and in compliance with related regulatory and reporting requirements;

- that M&E is conducted throughout the HSA in a controlled and orderly manner; and

- that guidance and instructions are provided to the employees of the HSA on the application of the M&E policies, procedures.

- That the manual is to be used as a standard for all courses/projects of HSA for compliance, and also to identify any missing controls, that can be introduced through amendments in this manual for better impact.

## C.    HISTORY OF HSA

Health Services Academy was established in 1988 as a training institution under the Federal Ministry of Health and now under the Cabinet Division, Government of Pakistan, provided short courses and training for public health professionals. Since its beginnings as a training institute, the Academy has grown steadily and has established itself as the premier institute of public health in Pakistan, looking to provide more academic programmes in the near future, as well as providing an environment that focuses on excellence in academics, research, and policy-making.

Since all leading academic and research organizations require autonomous status in order to create an environment of academic excellence, the Ministry of Health promulgated an ordinance entitle Health Services Academy Ordinance, 2002 , put into place in November, 2002. Following the implementation of this ordinance from July 1, 2003, the Board of Governors has been supervising the overall affairs of the Academy.

## D.     VISION, MISSION STATEMENTS AND CORE VALUES

D.1     VISION STATEMENT

To be a nationally and internationally recognised centre of excellence in Public Health, contributing to the health and well-being of the People of Pakistan and around the world.

D.2     MISSION STATEMENT

To strengthen the capacity of public health professionals by offering excellence in teaching, research, service and policy advice.

D.3     CORE VALUES

- Diversity
- Innovation
- Equity
- Ethics
- Academic Freedom

## E.        M&E DEPARTMENTS FUNCTIONS

The M&E Department shall be responsible for the monitoring and evaluation of project activities of the HSA. The department shall also provide technical assistance in M&E to various departments.

M&E activities shall include the processing of project data, preparation of project reports, supervision and monitoring of project activities, maintenance and development of the M&E system and implementing controls to safeguard HAS run courses/projects. The M&E function shall include collecting, preparing and consolidation of data in the development of new courses/projects.

The following are some of the major functions of the M&E Department:

- Compilation, provision and revision of various projectactivitiesto identify success and failure impacts;

- Collectingproject data, preparing, consolidating, re-appropriating project activities for improved project impact;

- Evaluation of various services provided by the HSA;

- Maintainingmonitoring activities for self assessment;

- Maintaining standards for project information required and maintaining the data;

- Identifying the indicators for activities of projects for periodic evaluation of expected impact;

**F.        DISTRIBUTION OF THE MANUAL AND PHYSICAL SECURITY**

The M&E Manual of the HSAshall be available to the users in the following two forms:

- a hard copyavailable with the M&EDepartment; and

- anelectroniccopy (read only) available on the company's website,  access to which will be given by the IT Department),through secure password.

Distribution of the manual whether in the form of a hard copy oran electronic copy is the responsibility of the Executive Director.

Distribution of this manual, in whole or part, shall be to only those personnel who will have to act on the basis of this manual or who would require guidance to carry out their day to day work.

Where a hard copy is required, it shallbe provided against an approvedrequest. The M&E manual requestshall contain the following information:

- Date;

- Manual version number;

- Manual description;

- Custodian;

- Custodian designation;

- Signature of the requesting HOD; and

- Signature of custodian for accepting the manual.

A register shall be maintained by the HOD –M&E, in which the details of the department / personal to whom the manual is issued, shall be entered. Each hard copy of this manual shall be numbered and entered into the register prior to issuance.

The Executive Director shall also ensure that all the relevant people in the M&E Department and other end user departments are aware that there is an electronic copy available on the company's website and shall provide a secured access through password to the relevant personnel.

Where access to this manual is being given through the website password (electronic copy) it shall be authorised by the KMU on the basis of a request approved by the HOD – M&E and Executive Director.

The KMU shall have a record of the personnel to whom electronic access of the manual has been provided.

The contents of this manual are confidential and should not be copied (physically or electronically) or distributed outside the company either in whole or in part without the prior written approval of the Executive Director. Any employee who is given access to this manual shall be required to sign an undertaking in this regard.

Where there is a change of responsibility of an employee, the copy / access that the employee has of / to this manual should be handed over to the new employee and this action shall be documented in the previous employee's handing over notes.

Where an employee leaves the employment of the HSA without another employee taking over his duties, then the copy of this manual should be returned to the HOD prior to his / her departure.

## G.      PROCEDURES FOR UPDATING THE MANUAL

G.1.    GENERAL

It shall be the responsibility of the HOD –M&E to ensure that the manual is regularlyupdated and periodic reviews of the manual shall be carried out for this purpose.

The manual may require changes on account of any of the following reasons:

- additional policies and procedures consequent to introduction of new services , project reporting requirements, the level of automation or changing needs of the HSA;

- additional requirements by funding agency of a project;

- improvements to existing policies and procedures; and

- deletions or amendments due to superseded, redundant or amended policies and procedures.

Changes to this manual shall be reviewed and recommended by the respective HOD. The respective HOD shall send the recommended changes to the HOD –M&E who shall review it with the Executive Director (for his approval) and include the same in agenda for the forthcoming meetings of the executive committee and Board of Directors for approval.

G.2.    AMENDMENT TO THE MANUAL

All requests for amendments to the final version of the M&E shall be documented on are quest using the Amendment Form specified for this purpose. The Request for Amendment Form shall be raised by the respective Head of Department. *Please refer Annexure A for a copy of "Request for Amendment Form"*.

Where a new service is planned to be introduced, such a request shall be accompanied with a detailed description of the service and approved operation procedures.

The Request for Amendment Form shall be forwarded to HOD –M&E, who shall review it with the Executive Director (for his approval) and include the same in agenda for the forthcoming meetings of the executive committee and Board of Directors for approval.

G.3.    AMENDMENT CONTROL LOG

A central repository of all amendments made shall be maintained in an Amendment Control Log by the HOD –M&E and shall form part of each chapter in this manual for the reference of those who shall not receive Request for Amendment Form. *Please refer to "Annexure B" for a copy of "The Amendment Control Log"*.

G.4.    AMENDMENT TO THE HARD COPY

Any amendment to this manual shall warrant a reprinting of the affected chapter and issuance to those users who are holding hard copies. This shall be so due to the amendment of the version number of the chapter which shall be changed by the M&E Department.

On receiving the approved Request for Amendment Form, the M&E Department shall incorporate the changes in the electronic copy of the manual and then make the necessary printouts.

In the interest of economising one may choose to reprint only the modified pages. This is possible when a modification does not change the page number on which any subsequent sub headings can be found. In this case the affected pages may physically be removed from the existing copy of this manual and new pages inserted to replace them.

Where a modification shall change the page number on which a subsequent sub heading can be found then the affected chapter shall physically be removed from the existing hardcopy of this manual and the updated chapter shall be reprinted and inserted in this manual.

G.5.      AMENDMENT TO THE ELECTRONIC COPY

The original electronic file containing the respective chapter that needs amendment shall be copied and saved with a new version number equivalent to the old version number plus one by the KMU, thus ensuring that the original file remains unchanged.

The amended electronic copy shall be forwarded to the KMU for replacing the existing electronic copy on the website with the amended electronic copy.

## H.        DOCUMENT CONTROL

H.1.        FORMS

M&E shall adhere to and use the standard forms prepared and distributed. The standard templates(wherever manual documentation takes place) shall be provided to each department.

The Deputy Director shall be responsible for the printing and production of forms and providing the same to department to ensure consistency throughout the HSA.

Any changes to forms shall be well justified to the HOD –M&E before they can be approved by Executive Director.

Any form or document pertaining to any activity of courses/projects shall be filed properly and easily accessible by the stakeholders. The chain of approval shall be maintained by documentary proof starting with the initiation of a request.

H.2.        ERASURES AND ALTERATIONS

Modification of forms/ activities / courses must be conducted very carefully. The chain of approval for alteration shall be with documentary proof. The purpose of erasure or alteration must be clearly available with its initiating document.

- If any approvals are taken via electronic methods (e-mail etc), hard copies of it has to be maintained for record.

- If any change is applied to a project (HR, Financial, Policy, Procedure etc) it must be documented with clear reasons for the alteration.

Alterations should be initialled by the person authorising the documents, all blank lines or spaces should be crossed out.

H.3.        RETENTION AND DISPOSAL

### H.3.1     Policy for Retention Periods

All documents shall be retained for a period of three years after the completion of a project/course, the responsibility of which shall be of the respective Heads of Departments. Upon expiry of the retention period the documents shall be destroyed.

Retention periods shall begin at the end of the project/course for which the document was created and settled. Where a document is being disputed then the retention period shall begin at the end of the financial year in which the dispute and the document are settled.

Retention periods shall end at the end of the financial year in which the document completes the retention period, after which the document shall be destroyed.

Where a document is to be maintained forever then the retention period shall be 'Indefinite' (e.g. legal documents, etc). Documents that shall be maintained for an indefinite period of time must be kept to a minimum which shall be ensured by the respective HOD.

### H.3.2     Storage of Documents

Documents shall be stored in fire resistant filing cabinets for one year, within the access of the employees using the documents with access to the M&E staff. The contents of each cabinet shall be labelled clearly to allow quick retrieval of documents when required.

After completion of the external and donor audit for a particular year, the documents shall be moved to fire resistant filing cabinets in the Archives section (Stores).

*H.3.3*      ***Destruction of Documents***

All documents shall be destroyed upon expiry of their retention period. If any documents labelled 'Indefinite' are seen, for a valid reason, to warrant disposal, approval shall be sought from the respective HOD and HOD-M&E, after which the document may be destroyed.

*H.3.4*      ***Method of Destruction***

The method of destruction of documents shall be left to the discretion of the concerned HOD, but the following principles must be observed.

- All confidential documents must be either burned or shredded;

- Other documents shall be disposed off in the fastest, most economical and environment friendly manner;

- Destruction of documents must be supervised by a committee appointed by the Executive Committee.

**ANNEXURE A – REQUEST FOR AMENDMENT FORM**

HEALTH SERVICES ACADEMY

REQUEST FOR AMENDMENT FORM

Amendment No _____                          Date of Amendment ___/___/___

| Chapter | Section / sub section | Page reference | Type of amendment (addition / deletion / modification to an existing policy or procedure) | Description of amendment and reasons for amendment |
|---|---|---|---|---|
|  |  |  |  |  |

Name of Proposer          Signature of Proposer          Reviewed by          Approved by

_____          _____          _____          _____

## ANNEXURE B – AMENDMENT CONTROL LOG

HEALTH SERVICES ACADEMY

AMENDMENT CONTROL LOG

| Amendment No | Date of amendment | Description | | | Amended by |
|---|---|---|---|---|---|
| | | Chapter | Section / sub section | Page No. inserted / deleted / amended | |
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Prepared by:                                            Reviewed by:

_____  _____  _____  _____

## ANNEXURE C – RESPONSIBILITY MATRIX

| ACTIVITY | ALL HOD | HOD – M&E | EXECUTIVE DIRECTOR | BOARD OF DIRECTORS |
|---|---|---|---|---|
| **Manual Distribution** | | | Overall Responsibility | |
| **Approval of recommended modifications** | | | Approve | Approve |
| **Implementation of Manual** | Responsible | | | |
| **Receiving queries & onwards liaison** | Receive Queries | Liaison with ED for approval | | |
| **Non-compliance issues resolution** | | | Clarify and approve | |
| **Maintain hard-copy manual for distribution** | | Responsible | | |
| **Maintain soft-copy manual for distribution** | Responsible (IT) | | | |
| **Manual access approval** | | Approve | Approve | |
| **Manual periodical updation** | | Responsible | | |
| **Maintaining amendment control log** | | Responsible | | |
| **Updating hard-copy manual for amendment approval** | | Responsible | | |

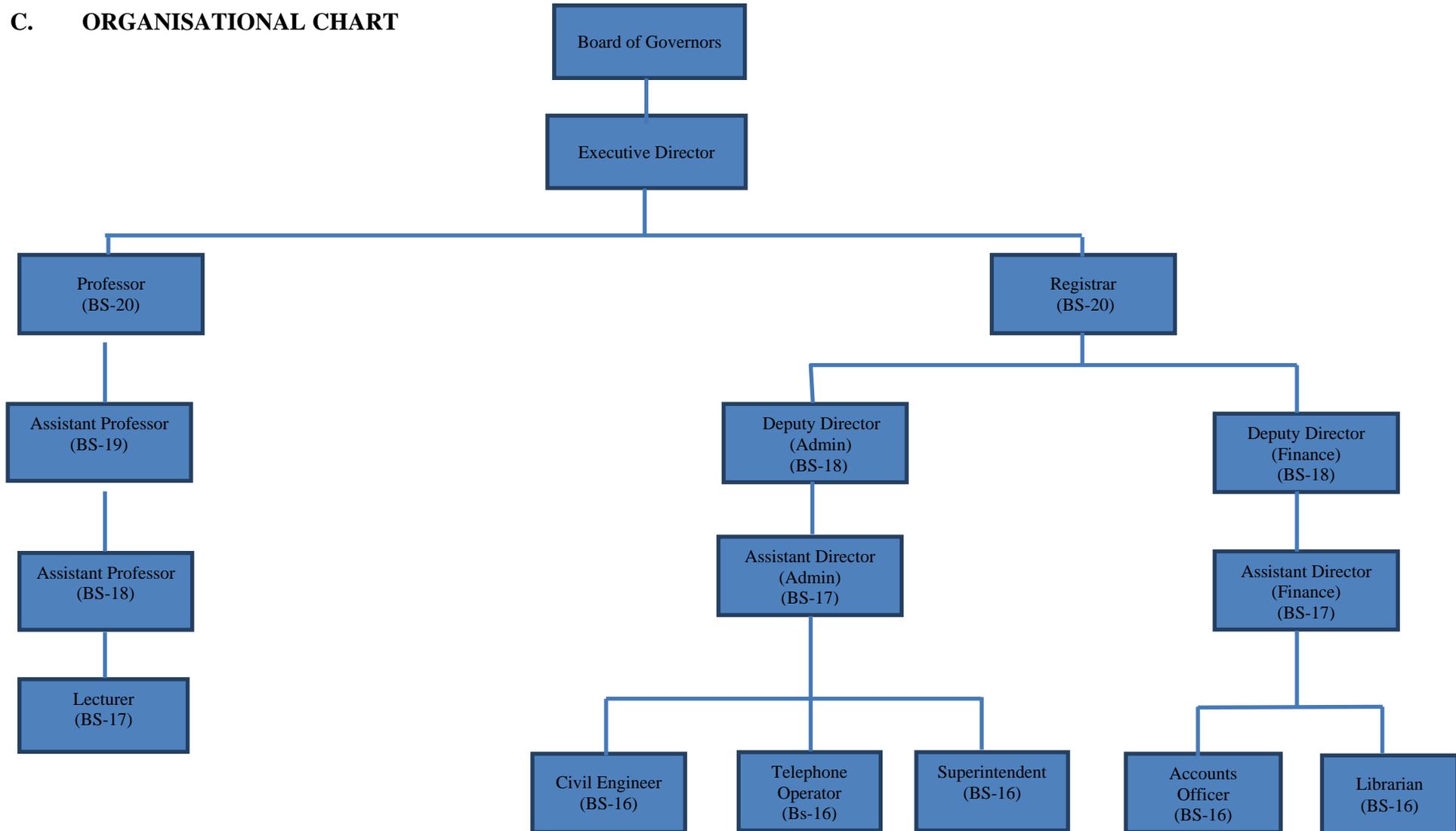| | | | | |
|---|---|---|---|---|
| **Updating soft-copy manual after amendment approval** | Responsible (IT) | | | |
| **Changes to forms** | | Responsible | | |
| **Record retention** | Responsible | Responsible | | |
| **Record storage (delegate to officer level)** | Overall Responsibility | Overall Responsibility | | |
| **Destruction method approval** | Approve | Approve | | |
| **Destruction of documents (Indefinite labelled)** | Approve | Approve | | |
| **Appointment of supervising committee (destruction of records)** | | | Approve | |

# Chapter-2

# Organisational Chart (Procurement Function)

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**B.        SCOPE OF CHAPTER**

This chapter outlines the structure of procurement function within the overall organisational structure of Health Services Academy (HSA).

## C.      ORGANISATIONAL CHART

```
                                    ┌─────────────────┐
                                    │ Board of        │
                                    │ Governors       │
                                    └─────────────────┘
                                    ┌─────────────────┐
                                    │ Executive       │
                                    │ Director        │
                                    └─────────────────┘
```

- Board of Governors
- Executive Director
  - Professor (BS-20)
    - Assistant Professor (BS-19)
      - Assistant Professor (BS-18)
        - Lecturer (BS-17)
  - Registrar (BS-20)
    - Deputy Director (Admin) (BS-18)
      - Assistant Director (Admin) (BS-17)
        - Civil Engineer (BS-16)
        - Telephone Operator (Bs-16)
        - Superintendent (BS-16)
    - Deputy Director (Finance) (BS-18)
      - Assistant Director (Finance) (BS-17)
        - Accounts Officer (BS-16)
        - Librarian (BS-16)

# Chapter 3

# M&E System

## LIST OF ACRONYMS

| | |
|---|---|
| **BoG** | Board of Governors |
| EC | Executive Committee |
| **ED** | Executive Director |
| DAB | Director Advisory Board |
| **HOD** | Head of Department |
| **HSA** | Health Services Academy |
| **KMU** | Knowledge Management Unit |
| **M&E** | Monitoring and Evaluation |
| **PAR** | Project Activity Report |
| **PMP** | Project Management Plan |
| **QAR** | Quarterly Activity Report |
| **QRR** | Quality Review Report |

## TABLE OF CONTENTS        PAGE

**A**        **SCOPE OF THE CHAPTER**

This chapter outlines the development of the Monitoring & Evaluation (M&E) System for Health Service Academy (HSA). The M&E system includes planning, data gathering and analysis, reporting and critical reflections. This supports the management in assessing the output of a course/project on periodical basis to steer towards achieving the required benefits and impact.

The chapter includes M&E for HSA and project based M&E.

# B        DEFINITIONS

For the purpose of this chapter following terms shall have given descriptions:

## B.1.  MONITORING

It actually means 'to be aware, of the state of a system'. In management it is specifically used about the state of the activities of a project.

## B.2. EVALUATION

Evaluation is a systematic determination of a subject's merit, worth and significance, using criteria governed by a set of standards. It can assist an organization to assess any aim, realisable concept or proposal, or any alternative, to help in decision-making; or to ascertain the degree of achievement or value in regard to the aim and objectives and results of any such action that has been undertaken.

## B.3. M&E SYSTEM

The set of planning, information gathering, synthesis, reflection, reporting processes, along with the necessary supporting conditions and capacities required for the M&E outputs to make a valuable contribution to project decision-making and learning.

## B.4.     M&E PLAN

An overall framework of performance and learning questions, information gathering requirements (including indicators), reflection and review events with stakeholders, and Resources and activities required to implement a functional M&E system.

## B.5. END USER DEPARTMENT

The end user departments in the context of M&E within this manual shall refer to the departments that implement projects and courses.

## B.6. UTILITY

The representation of preferences over some set of goods or services. In M&E it is the set of practical information.

## B.7. FEASIBILITY

The proposed methods, timings, sequences and processing procedures that are realistic and cost effective.

## B.8. PROPRIETY

proper or appropriate conduct.in M&E it is the ethics and legalities followed.

## B.9. ACCURACY

The degree of closeness to technically adequate information in actual (true).

## B.10. QUALITY OF M&E

Standards set for provision of project based management feedback.

## C.    POLICIES

This section entails an overview of the general policies adopted by the HSA in making the M&E System.

- M&E for HSA
- M&E Quality

C.1.      M&E FOR HSA

End user departments[department that implements projects and courses (faculty departments, administration, finance, R&D and others having direct or indirect roles in implementation of a project or public service] of HSA shall prepare a Project Activity Report (PAR) for the planned activities of their respective departments based on their approved budgets.After approval of the PAR from their respective head of departments (HODs),shall forward it to HOD-M&E. These PARs have to be forwarded to HOD-M&E within 30 days of approval of the annual plan of each end user department.

Based on the input received from various departments, M&E Unit shall prepare draft Project Management Plan (PMP) within15 working days and finalize it within 30 working days from receipt of PARsfromsfromthe end user departments. The PMP after review from the HOD-M&E shall be forwarded to all the respective HODs for review. The ED-HSA shall approve the PMP for placing the M&E System for HSA.

C.2.        M&E QUALITY

End User Departments shall prepare a Quarterly Activity Report (QAR) for their respective departments and forward it to the M&E Unit five working days prior to the end of each quarter.

Based on the QAR's received from the end user departments, the M&E unit shall review quality of the M&E system. This review shall be made bi-annually and shall be based upon the last 2 recentlysubmittedQARs, annual reports and objective. The M&E Quality Review Report (QRR) shall evaluate the M&E system for utility, feasibility, propriety and accuracy. The M&E QRRshall be submitted to HOD-M&E for approval before the 10$^{th}$ of the first month of each quarter.Any additions, deletions or amendments required within the M&E System for the purpose of quality shall be forwarded by the M&E-HOD to the ED within fiveworkingdays (of QRR) for approval. The amended M&E system shall be in place after the approval of the ED.

## D.        PROCEDURES

This section contains policies for following aspects of M&E System.

- M&E for HSA
- M&E Quality

D.1.       M&E FOR HSA

- HOD of end user departments shall designate a person from their department/unit who shall prepare a PAR of the short term and long term projects of their respective department. Please refer to annexure A, for a copy of format PAR.

- The PAR shall then be reviewed by the HOD of the respective departmentand forwarded to the HOD- M&E within 30 days from approval of the annual plan of projects/courses, for preparation of the M&E System.

- The HOD-M&E shall designate an officer from the M&E team as a coordinator  to prepare a draft PMP for HSA based on the PARs submitted by end user departments. *Please refer to section D of the Reporting to M&E Manual for details on Preparing the PMP*The PMP shall address the six key design steps;

  o   Establishing the purpose and scope.

  o   Identifying performance questions, information needs and indicators.

  o   Planning information gathering and organization.

  o   Planning critical reflection processes and events.

  o   Planning for quality communication and reporting.

  o   Planning for the necessary conditions and capacities.

- The draft PMP shall be based upon the main objective of HSA and its activities during its short term and long term initiatives. The PMP shall be the key document in identifying the indicators, information gathering, analysis, and reporting (report structure, protocol and period) and impact judgement.

- The draft PMP shall be shared with all the HOD's for feedback and inputs. The feedback from all HODs shall reach M&E within 10 working days from the receipt of the first draft of PMP.

- If any changes/amendments are requiredwithin the PMP, the designated coordinator-M&E shall incorporate them within one working week and the second draft may be presented to all the HODs in a single session for review and input.

- After the draft of PMP is reviewed for submission by all the HODs, the HOD-M&E will share the final version with the ED within 30 days for approval. The ED shall share it with the Board of Governors (BoG) in the next meeting of the board.

- The approved PMP shall be forwarded to IT Departmentfor updating on the web portal as a read only file for only authorised users. The file should be password barred. Please refer to section F of the Introduction to M&E Manual for details on allowing access to information on website of HSA.

D.2.      M&E QUALITY

- The HOD of end user department shall designate a person from their department/unit who shall prepare the QuarterlyActivityReports (QAR) of their respective department prior to the end of each quarter or project closure (whichever comes first). The QARs, after review and approval from the respective HOD shall be forwarded to the HOD-M&E atleast 5 working days before the end of the quarter. *Please refer to Annexure B for copy of QAR.*

- The HOD-M&E shall designate a person from the M&E team as coordinator who shall be responsible to develop the M&E QRR for the project/course of the department based on the QARs and PMP.*Please refer to section D of the Reporting to M&E Manual for details on Preparing the PMP and M&E QRR.*

- The M&E coordinator shall assess the quality of M&E system bi-annually, after 2 M&E QARs have been submitted to the M&E Unit. The assessment shall be conducted with the help of the 2 most recent QARs. The QRRpreparedshall clearly outline the criteria through utility, feasibility, propriety and accuracy of the M&E system.TheQRR shall be forwarded to the HOD-M&E within the first 10 working days of the bi-annual cycle (January and July)

- If the assessment report suggests any amendments (addition or deletion) the HOD-M&E shall forward the report to the ED within 5 working days otherwise the assessment report shall be filed for future reference. The amendments shall be incorporated in the M&E system within 15 working days from the approval by the ED.

- The HOD-M&E shall be responsible to circulate the amended M&E System to all concerned within 2 working days. This shall also include notifying the IT department to update the web portal.

- The ED shall present the amendments to the M&E System in the next BoG meeting.

**ANNEXURE -A**

**HEALTH SERVICES ACADEMY**

Project Activity Report

Project Name          Department: xxx

For the Period:          Reporting Officer: (Designated Officer end user department)

Approved by: (HOD)

| S. No. | Planned Activity | Activity Tasks | Delivery Date | Beneficiaries | Purpose | Reporting Requirements | Funded By |
|--------|------------------|----------------|---------------|---------------|---------|------------------------|-----------|
| 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|   |   | 2 | 2 | 2 | 2 | 2 |   |
| 2 | 2 | 1 | 1 | 1 | 1 | 1 | 2 |
|   |   | 2 | 2 | 2 | 2 | 2 |   |
| 3 | 3 | 1 | 1 | 1 | 1 | 1 | 3 |
|   |   | 2 | 2 | 2 | 2 | 2 |   |

**ANNEXURE-B**

**HEALTH SERVICES ACADEMY**

**Quarterly Activity Report (QAR)**

**Department/Unit:**                              **For the Period:**

**Prepared By: (Designated Officer)**            **Approved by: (HOD)**

| S. No. | Planned Activity | Tasks for the Activity |
|--------|------------------|------------------------|
| 1      | 1                | 1                      |
|        |                  | 2                      |
| 2      | 2                | 1                      |
|        |                  | 2                      |
| 3      | 3                | 1                      |
|        |                  | 2                      |

**ANNEXURE-C**

**HEALTH SERVICES ACADEMY**

**M&E System Sequence Table**

| Activity | Prepared By | Approved By |
|---|---|---|
| PAR | Designated Officer End User Department | HOD End User Department |
| PMP | Designated Officer M&E Unit | HOD-M&E |
| QAR | Designated Officer End User Department | HOD End User Department |
| QRR | Designated Officer M&E Unit | HOD-M&E |

# Chapter 4

# Indicators

## List of Acronyms

| | |
|---|---|
| **ED** | Executive Director |
| **HOD** | Head of Department |
| **HSA** | Health Services Academy |
| **M&E** | Monitoring and Evaluation |
| **PAR** | Project Activity Report |
| **PMP** | Project Management Plan |

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## A.    SCOPE OF THE CHAPTER

This chapter outlines the planning required for M&E once the M&E system for HSA is in place. This chapter explains the M&E Matrix, required information grid and the performance indicators required for project monitoring and evaluation. This chapter outlines the policy and the procedure for the M&E matrix, requisite information grid, performance questions, and performance indicators..

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## B.        DEFINITIONS

For the purpose of this chapter following terms shall have the given descriptions:

### B.1.        OBJECTIVES

An objective is desired result a person or an organization envisions/plans and commits to achieve. It is the desired end point.

### B.2.        PERFORMANCE QUESTION

The information required of the behaviour of a project or the activities within the project.

### B.3.        PERFORMANCE INDICATOR

It is a management terminology for performance measurement of a project or its activities. It is the progress towards achieving the objectives.

### B.4.        M&E INDICATORS

The term is used within M&E whereas it is the same as Performance Indicators but is generally used to define indicators developed through the M&E Matrix and Grid.

### B.5.        M&E MATRIX

It is the array of various elements/components required for information for Monitoring and Evaluation.

## C.        POLICIES

This section entails an overview of the general policies adopted by the HSA in making the M&E Indicators.

- M&E Matrix
- Information Grid for Project Indicators
- M&E Indicators

C.1.     M&E MATRIX

The M&E Unit shall outline the need of information required for developing the M&E System relating to each project/course of HSA. The information needs or commonly known as the M&E Matrix shall be developed by the M&E unit at the start of a project and before the Project Activity Reports (PAR) are received from the end user departments (within 30 days of annual activity plan). The basis for M&E Matrix shall remain common for all projects but specific information needs may vary. *Please refer to chapter 3: 'M&E System' of the M&E Manual for the preparation of PAR.*

## C.2.        INFORMATION GRID FOR PROJECT INDICATORS

The M&E Unit shall develop a grid for the required information, its methods and frequency for identifying the performance indicators of a project/course. The requirements shall be based on the project plan and its objectives for clarity. The information grid shall be developed by the M&E Unit within 2 working days from the development of project annual plans.

C.3.      M&E INDICATORS

The M&E unit shall develop performance questions for the projects based on the PARs. The list of performance questions has to be reviewed and approved by the HOD-M&E and afterwards forwarded to the respective end user HOD for approval. The list must be forwarded by the M&E Unit within 5 working days after receiving the PARs. The list shall be approved within 2 working days by the end user department HOD.

The M&E unit shall develop sets of activity based indicators of project performance based on the approved performance questions. The list of indicators shall be reviewed and approved by the HOD-M&E and forwarded to the relevant end user department HOD for approval. The list of indicators shall be developed and forwarded within 5 working days and the end user department HOD shall approve the list within 2 working days.

## D.      PROCEDURES

- M&E Matrix
- Information Grid for Project Indicators
- M&E Indicators

D.1.      M&E MATRIX

- The HOD-M&E shall assign the task of developing the M&E Matrix to a designated officer of the M&E unit. The M&E Matrix has to be developed after the Activity Plans of projects/courses are finalized and before the PARs are developed.*Please refer to annexure A, for a copy of sample M&E Matrix.*

- The M&E Matrix shallbe based upon the following design steps;

o      Performance Questions

o      Performance Indicators

o      Required Baseline Information

o      Data Gathering Methods

o      Practical Support for Information Gathering

o      Analysis, Feedback and Change

- The M&E Matrix shall be forwarded to the HOD-M&E for review and approval and shall be in place after the approval from the HOD-M&E.

D.2.     INFORMATION GRID FOR PROJECT INDICATORS

- The HOD-M&E shall assign the task of identifying the information needs for project indicators to a designated officer of the M&E Unit. The M&E designated officer shall develop an information grid for the project/course within 2 working days of project approved annual plan. *Please refer to annexure B, for a copy of sample Information Grid.*

- The information grid shall clearly outline the information required, methods and frequency for the purpose of both Monitoring and Evaluation.

- The required information shall include baseline data and the objectives of the project/courseas well information regarding the number of male and female beneficiaries. This shall outline the path between 'before and after' project/course. The methods for information gathering shall also be identified and the timelines for various information gathering methods shall be developed.

- The information grid shall be submitted by the designated M&E officer to the HOD-M&E for review and approval. The information grid shall be in place after approval from the HOD-M&E.

D.3.        M&E INDICATORS

- The HOD-M&E shall designate officers of the M&E Unit to develop performance questions based on the PARs from end user departments. These performance questions have to be developed separately for each project/course therefore separate officers may be designated for various projects/courses. The list of performance question shall be developed within 5 working days from the receipt of the PARs and shall be forwarded to the HOD-M&E the same day for approval.

- The HOD-M&E shall review and approve the list of performance questions for each project/course within 2 working days of the receipt of the list.

- If there is need for any clarity or amendments (addition/deletion) the HOD-M&E may discuss it with the designated officer and/or the relevant end user department's HOD. The timeframe shall remain the same and the final approval of the list has to be made within 2 working days from the submission of the list to the HOD-M&E.

- The relevant designated officer from M&E shall develop sets of performance based indicators for each project/course per the performance questions approved. The indicator sets have to be developed within 5 working days from the approval of the list of performance questions. The indicator sets shall be forwarded to the HOD-M&E on the same $5^{th}$ working day.

- The HOD-M&E shall review the sets and if any clarity or amendments are required, may discuss it with the designated officer and/or the relevant end user department's HOD. The set of indicators shall be approved within 2 working days from the receipt of the sets by the HOD-M&E.

- The Performance Indicators shall be developed with strict linkage to the main objective of the project/course and HSA. *The linking grid is given as ANNEXURE-C.*

**ANNEXURE -A**

SAMPLE M&E MATRIX

**HEALTH SERVICES ACADEMY**

M&E Matrix (Project/Course)                          Department:

For the Period:

| S. No. | Activity | Tasks |
|--------|----------|-------|
| 1 | Performance Questions | 1. Quantitative Questions<br>2. Qualitative Questions |
| 2 | Performance Indicators | 1. Quantitative Indicators<br>2. Qualitative Indicators |
| 3 | Information Grid | 1. Baseline Data<br>2. Project/Course Objectives<br>3. List of Reports Required<br>4. Reporting Periods |
| 4 | Analysis | 1. Feedback<br>2. Required Change |

Prepared By: (M&E Designated Officer)

Approved By: (HOD-M&E)

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**ANNEXURE-B**

SAMPLE INFORMATION GRID

**HEALTH SERVICES ACADEMY**

Information Grid (Project/Course)                    Department: Academia
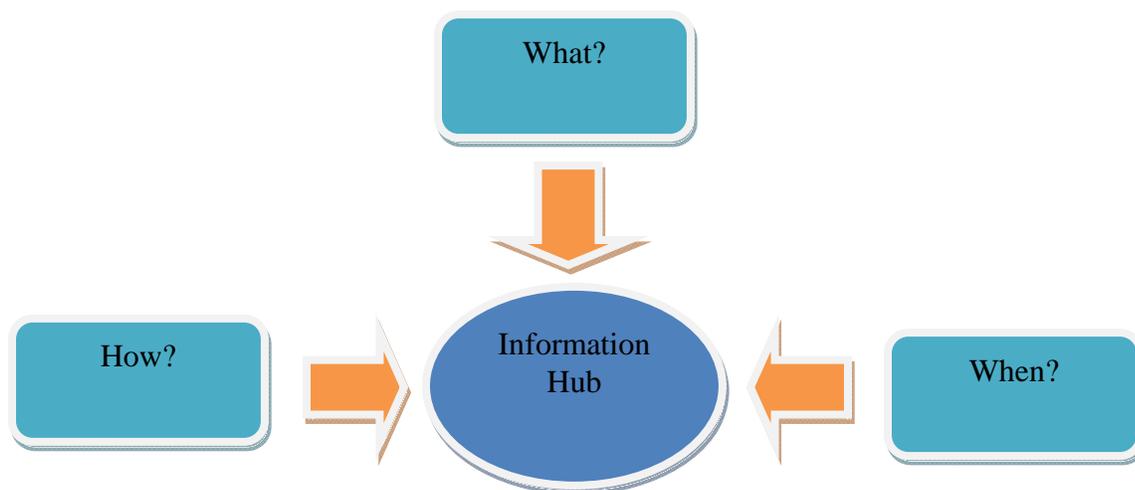


| | Activity | Tasks |
|---|---|---|
| **Information Hub** | 1. What kind of information is required? | 1. Baseline Data<br>2. Project Objectives<br>3. Project Activities<br>4. Activity based Tasks<br>5. Gender sensitive data |
| | 2. How to gather the information? | 1. How and who will gather information<br>2. Required Reports<br>3. Pre and post project reports<br>4. Periodic Reports |
| | 3. When to gather which information | 1. Reporting timelines |

Prepared By: (M&E Designated Officer)          Approved By: (HOD-M&E)

**ANNEXURE-C**

**HEALTH SERVICES ACADEMY**

Grid for Objective Linkage to Performance Questions, Information and Indicators

| Objective | Performance Question | Information Required | Performance Indicators |
|---|---|---|---|
| 1 | 1. <br> 2. | 1. <br> 2. <br> 3.Gender Sensitive Data (No. of Male/Female beneficiaries) | 1. <br> 2. <br> 3. |
| 2 | 1. <br> 2. | 1. <br> 2. <br> 3. Gender Sensitive Data | 1. <br> 2. <br> 3. <br> 4. |

# Chapter-5

# Logical Framework Approach

# LIST OF ACRONYMS

**BoG**                 Board of Governors

**ED**                  Executive Director

**HOD**                 Head of Department

**HSA**                 Health Services Academy

**M&E**                 Monitoring and Evaluation

**PAR**                 Project Activity Report

## TABLE OF CONTENTS                        PAGE

## A        SCOPE OF THE MANUAL

This chapter outlines the development of the Logical Framework Approach (LFA) for the projects/courses of HSA. The LFA is a management tool for planning the course for a project/course to achieve the objectives that it is designed for. If it is developed carefully the management shall be able to assess the output of each activity and the strength of the project towards its goal achievement.

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## B.    DEFINITIONS

For the purpose of this chapter following terms shall have given descriptions:

### B.1.MONITORING

It actually means 'to be aware, of the state of a system'. In management it is specifically used about the state of the activities of a project.

### B.2. EVALUATION

Evaluation is a systematic determination of a subject's merit, worth and significance, using criteria governed by a set of standards. It can assist an organization to assess any aim,realisable concept or proposal, or any alternative, to help in decision-making; or to ascertain the degree of achievement or value in regard to the aim and objectives and results of any such action that has been undertaken.

### B.3. LOGICAL FRAMEWORK

In logic, a logical framework provides a means to define (or present) a logic as a signature in a higher-order type theory in such a way that provability of a formula in the original logic reduces to a type inhabitation problem in the framework type theory.

### B.4.LOGICAL FRAMEWORK APPROACH

The Logical Framework Approach (LFA) is a management tool mainly used in the design, monitoring and evaluation of projects.

### B.5.LOGICAL FRAMEWORK MATRIX

The document prepared for the LFA is the Logical Framework Matrix commonly known as the Log Frame Matrix.

## C.        POLICIES

This section entails an overview of the general policies adopted by the HSA in adoptingthe Logical Framework Approach at the Initial Project Phase.

- Linking Objectives, Annual Plans and M&E
- Logical Framework Matrix

C.1.      LINKING OBJECTIVES, ANNUAL PLAN AND M&E

The M&E Unit of HSA shall link the Objectives, Annual Plans within the M&E system. This shall set a direction for each project/course of the HSA for achieving the main objectives set by the management. The link between the objectives, annual plans and M&E shall allow the management to monitor the objective achievement step by step through each activity within projects/courses. The linkage shall be made at the initial stage of the project/course and shall be finalized within 2 working days after the development of project performance based Indicators.

C.2.     LOGICAL FRAMEWORK APPROACH

The M&E Unit shall adopt the Logical Framework Approach (LFA) for all the projects of HSA. Logical Framework Matrix (Log frame Matrix) shall be developed by the unit for all projects/courses at the initial planning stage. The Log frame Matrix shall be prepared on the basis of the Performance Questions and the Performance Based Indicators. The Log frame Matrix shall be prepared within 5 working days from the development of project performance based Indicators.

## D.        PROCEDURES

This section contains policies for following aspects of M&E System.

- Linking Objectives, Annual Plans and M&E
- Logical Framework Approach

D.1.     LINKING OBJECTIVES, ANNUAL PLANS AND M&E

- The HOD-M&E shall designate the task of linking the main objectives, annual plans and M&E of projects/course to an officer of M&E Unit. The HOD-M&E shall designate separate officers of the unit for various projects/courses.

- The designated coordinator of M&E shall develop the linkages between the set objectives, annual plan and the M&E of the project/course. Developing this linkage actually requires understanding how the activities within the annual plan could complement the achievement of the set objectives for the project/course where the output through each activity can be monitored and evaluated for its intended impact.

- The designated coordinator shall develop these linkages and forward the draft to the HOD-M&E for review and approval.

- The HOD-M&E shall review the developed links and shall discuss with the relevant end user department's HOD for further clarity.

- If there is need for any amendment, the HOD-M&E shall direct the coordinating officer of M&E and after finalization the developed links shall be approved.

- The linking of objectives, annual plans and M&E shall be in place after the approval of the HOD-M&E. The links shall be approved within 2 working days from the development of project performance based indicators.*Please refer to ANNEXURE- A for sample link between objectives, annual plan ad M&E.*

- During the life cycle of the project/course if there are visible and strong changes in the next annual plans, the same procedure shall be adopted for developing the new links between objectives, annual plan and M&E.

D.2.    LOGICAL FRAMEWORK APPROACH

- The HOD-M&E shall designate an officer of the M&E Unit to prepare the Log frame Matrix for the projects/courses of HSA. Since the Log frame Matrix has to be prepared for all projects/courses of HSA, the HOD-M&E shall designate the task of various project/courses to different officers of the M&E Unit.

- The designated officer of M&E Unit shall prepare the Log frame Matrix for the allotted projects/courses based on the Project Design, PARs, Performance Questions and Performance Based Indicators.

- The draft Log frame Matrix for each project/course shall be shared with the HOD-M&E for review and approval by the M&E coordinating Officer.

- The HOD-M&E shall review and discuss the Log frame Matrix with the concerned end user department's HOD before approval

- If there is need for any further additions or amendments, the HOD-M&E shall direct the coordinating officer of M&E and after finalizing shall approve the Log frame Matrix. The Log frame Matrix shall be in place after the approval by the HOD-M&E.

- The Log Frame shall be approved within 5 working days from the development of project performance based indicators. *Please refer to ANNEXURE- B for sample Log Frame Matrix.*

- The Log Frame is developed for the complete life cycle of the project/course. If any amendments are made within/to any activity of the project/course, the amendment procedure shall be the same as for developing it.

## ANNEXURE -A

## HEALTH SERVICES ACADEMY

SAMPLE LINKING OBJECTIVES, ANNUAL PLANS AND M&E

Project Name                          Department: xxx

For the Period:                       Reporting Officer: (Designated M&E Officer)

Approved by: (HOD-M&E)

| Objective | Annual Plan | Monitoring | Evaluation |
|---|---|---|---|
| **Project Objectives (Set Goals)** | Activities (Assigned Activities that Complements the Objectives Achievement) | Periodic Reporting to Monitor the activities | Impact evaluation against set goals |
| **Project Purpose (Expected positive effects towards the 1objectives)** | Activities (Relating to the Project Purpose) | Periodic Reporting to Monitor the activities | Impact evaluation against set purposes. |

## ANNEXURE-B

## HEALTH SERVICES ACADEMY

Sample Logical Framework Matrix

Project Name                    Department: xxx

For the Period:                 Reporting Officer: (Designated M&E Officer)

Approved by: (HOD-M&E)

| Objective Hierarchy (Narrative Summary) | Performance Questions and Indicators | Monitoring Mechanism (gathering required information) | Assumptions and Risks (outside conditions beyond the control of the project) |
|---|---|---|---|
| Goal (Overall objective) | | | |
| Purpose (Project Objective) | | | |
| Outputs (Results) | | | |
| Activities (Actions of the Project) | | | |

# Chapter-6

# Reporting

# LIST OF ACRONYMS

| | |
|---|---|
| **BoG** | Board of Governors |
| **DQA** | Data Quality Analysis |
| **ED** | Executive Director |
| **HOD** | Head of Department |
| **HSA** | Health Services Academy |
| **M&E** | Monitoring and Evaluation |
| **PAR** | Project Activity Report |
| **PMP** | Project Management Plan |

## TABLE OF CONTENTS                           PAGE

## A          SCOPE OF THE CHAPTER

This chapter outlines the development of the reporting necessary for M&E. These reports are for the purpose to support the management in understanding the running projects/courses step by step and through each activity undertaken. These reports vary periodically and exists though-out the life of the project/course.

The chapter also include the preparation of Project Management Plan (PMP) and Data Quality Analysis (DQA) which are prepared only once in the life cycle of a project. The PMP acts as the basis for M&E within a project while the DQA assesses the quality of data used in information gathering for monitoring and evaluation.

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**B          DEFINITIONS**

For the purpose of this chapter following terms shall have given descriptions:

### B.1.MONITORING

It actually means 'to be aware, of the state of a system'. In management it is specifically used about the state of the activities of a project.

### B.2. EVALUATION

Evaluation is a systematic determination of a subject's merit, worth and significance, using criteria governed by a set of standards. It can assist an organization to assess any aim, realisable concept or proposal, or any alternative, to help in decision-making; or to ascertain the degree of achievement or value in regard to the aim and objectives and results of any such action that has been undertaken.

### B.3. LOGICAL FRAMEWORK

In logic, a logical framework provides a means to define (or present) a logic as a signature in a higher-order type theory in such a way that provability of a formula in the original logic reduces to a type inhabitation problem in the framework type theory.

### B.4. FUNDING/DONOR AGENCY

An agency or institution that provides funds/grants for a project/course.

## C.      POLICIES

This section entails an overview of the general policies adopted by the HSA in reporting for M&E.

- Project Management Plan (PMP)
- Periodical Activity Reports
- Data Quality Analysis (DQA)

C.1.      PROJECT MANAGEMENT PLAN

The M&E Unit of HSA shall develop the Project Management Plan (PMP) for all the projects/courses undertaken by the institution. The PMP has to be developed at the initiation phase of each project/course and shall be the basis for the M&E.

The PMP shall be developed and approved within 60 days of the approval project plan and within 30 working days from receiving the PARs from the end user departmentby the M&E Unit.

C.2.     PERIODICAL ACTIVITY REPORTS

All end user departments shall develop the monthly activity reports for their projects/courses. These reports shall be submitted to the M&E Unit at the end of each month. The M&E Unit shall consolidate the report for all projects/courses department wise. The M&E Unit shall submit a monthly report of activities of all HSA projects/courses to the management on/before the 5$^{th}$ of the next month.

Based on the monthly reports and the Quarterly Activity Reports (QARs) from the end user departments, the M&E Unit shall prepare Quarterly Reports. These quarterly reports shall link up the activities and tasks undertaken by each project/course within the quarter. These quarterly reports shall segment the project/course of each department but will be presented as a consolidated document. The Quarterly reports shall be prepared by the M&E Unit on or before the 5$^{th}$ day of the month starting after the completion of the quarter (5$^{th}$ of January, April, July and October).

Based on the monthly and quarterly reports the M&E Unit shall prepare annual reports at the end of each fiscal year for HSA. These annual reports shall in addition monitor the tasks undertaken for an activity and its progress the indicators set forth for performance. The annual report shall be prepared on or before the 10$^{th}$ day of the start of the new fiscal year.

C.3.      DATA QUALITY ANALYSIS (DQA)

The end user departments shall keep all relevant data of its projects/courses in a manner that it is readily available and easy to analyze.

The M&E Unit of HSA shall analyze the quality of data available with the projects/course undergoing and the ones that have phased out within the past fiscal year. The data shall include all project related documents which may be wetted for its authenticity.

T HSA shall carry out DQA once within the life cycle of a project/course. The M&E Unit shall be responsible for the DQA unless as per the requirement of donor/funding agency, a 3$^{rd}$ party may be hired for the analysis.

## D.    PROCEDURES

This section contains procedures for following aspects of reporting for M&E.

- Project Management Plan (PMP)
- Periodical Activity Reports
- Data Quality Analysis (DQA)

D.1.    PROJECT MANAGEMENT PLAN

- The HOD-M&E shall designate the task of developing the PMP of project/course to an officer of M&E Unit. The HOD-M&E may designate separate officers of the unit for various projects/courses.

- The designated coordinator of M&E shall develop the draft PMP of the project/course. The PMP shall be mainly based on the PARs received from the end user department but shall include Indicators, Log Framework, detail of data quality required and the reporting conditions.. The PMP is a complete document which will set the complete M&E steps for the project/course. *Please refer to ANNEXURE-A and B for setting up the PMP.*

- The designated coordinator shall develop the draft PMP and forward to the HOD-M&E for review and approval.

- The HOD-M&E shall review the draft PMP and may discuss with the relevant end user department's HOD for further clarity.

- If there is need for any amendment, the HOD-M&E may direct the coordinating officer of M&E.

- After the draft of PMP is reviewed for submission by all the HODs, the HOD-M&E will share the final version with the ED within 30 days for approval. The ED shall share it with the Board of Governors (BoG) in the next meeting of the board.

- The approved PMP shall be forwarded to IT Department for updating on the web portal as a read only file for only authorized users.  The file should be password barred. Please refer to section F of the Introduction to M&E Manual for details on allowing access to information on website of HSA

D.2.    PERIODICAL ACTIVITY REPORT

- The HOD of end user department shall designate an officer from each project/course to prepare an activity report on monthly basis for their respective project/course. After the report is reviewed by the HOD of the respective end user department, the report shall be shared with HOD-M&E by the last day of the working month.

- The HOD-M&E shall designate an officer of the M&E Unit to prepare the consolidated Monthly Activity Report of all the projects/courses of HSA.

- The designated officer of M&E Unit shall prepare the draft Monthly Activity Report and shall forward it to the HOD-M&E for review and input. If there is any need for amendments, they shall be incorporated in the report and the final Monthly Activity Report shall be forwarded to the HOD-M&E for approval.

- The HOD-M&E after approval shall circulate the Monthly Activity Report to all HODs of end user departments, IT Department for Web Portal updation and shall present it to the ED-HSA on or before the 5th of the next occurring month.

- Based on the Monthly Activity Reports and QARs, the HOD-M&E shall assign the responsibility of preparing the Quarterly Report of HSA to an officer of the M&E Unit. The Quarterly Report shall be an extension of the Monthly Activity Report which shall express the tasks undertaken for each activity during the quarter by all projects/courses.

- A draft of the Quarterly Report shall be forwarded to the HOD-M&E for review and approval. If there is need for any amendments, they shall be incorporated and the final Quarterly Report shall be forwarded to the HOD-M&E for approval.

- The HOD-M&E after approval shall circulate the Quarterly Report to all HODs of end user departments, IT Department for Web Portal updation and shall present it to the ED-HSA on or before the 5th of the month starting after the completion of the quarter.

- The ED-HSA shall share the quarterly report in the next occurring meeting of the BoG.

- Based on the Quarterly Reports the M&E Unit shall prepare the Annual Reports of all projects/courses of HSA. The Annual Report shall consist of all the tasks against activities of all projects/courses, even reflections of the projects/courses completed or closed within the year.

- The HOD-M&E shall designate an officer of the M&E Unit to prepare the draft of the Annual Report for HSA. The draft Annual Report shall be forwarded to the HOD-M&E for review and approval. The HOD-M&E may discuss it with the HOD's of end user departments for clarification and if there is need for any amendment it shall be directed to the designated officer.

- The final Annual Report with amendments (if required) shall be forwarded to the HOD-M&E for approval.

- The HOD-M&E after approval shall circulate the Annual Report to all HODs of end user departments, IT Department for Web Portal updation and shall present it to the ED-HSA on or before the 10th of the first month of the new fiscal year.

- The ED-HSA shall share the report in the next occurring meeting of the BoG.

D.3.     DATA QUALITY ANALYSIS

- The HOD-M&E shall designate an officer of the M&E Unit to analyze the Data Quality of projects/courses of HSA. The HOD-M&E may designate different officers for various projects/courses.

- The designated M&E officer shall analyze the complete documents/data for its authenticity, ready availability and the quality of information that it can provide. A report shall be prepared on the analysis and forwarded to the HOD-M&E.

- The report shall be shared by the HOD-M&E with the respective HOD of the end user department and the ED-HSA within 5 working days of its preparation.

- If there are any deficiencies identified in the report about the quality of data, the end user department HOD shall be responsible to rectify/amend them in a manner that it does not affect the integrity of the data and approval shall be taken from the ED-HSA.

- The DQA shall be conducted at least once during the life cycle of a project/course by the M&E Unit.

- A 3rd party DQA shall be conducted if required by the funding/donor agency of a project/course
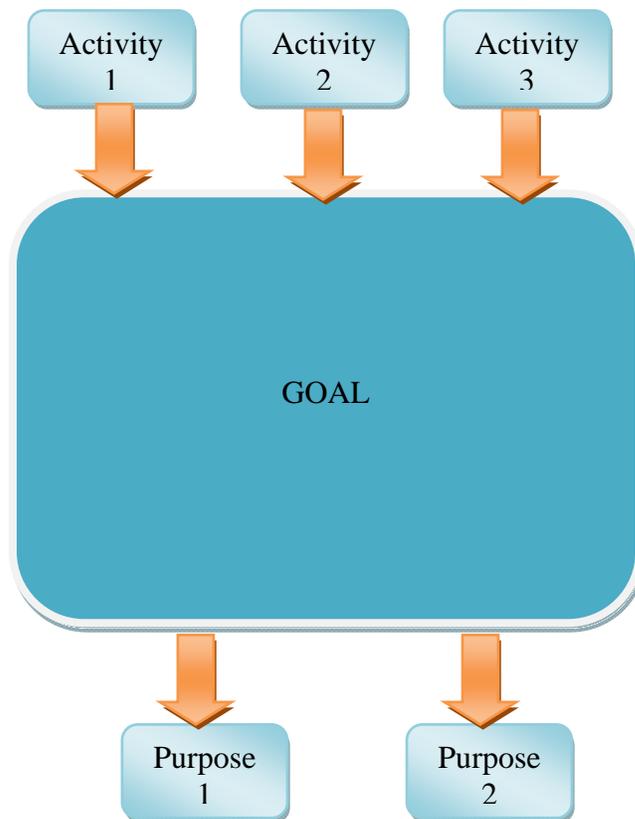
**ANNEXURE -A**

**HEALTH SERVICES ACADEMY**

SAMPLE PMP TABLE OF CONTENT

1. Introduction (Baseline data and scope)
2. Project Budget and Work Plan
3. Set Goal (Main Objectives of the project/course in relation to HSA Objective)
4. Set Purpose (Project/course objectives)
5. Expected Results
6. Performance Questions
7. Indicators
8. Gender Balance (Steps for equal opportunities for Male & Female beneficiaries)
9. Assumptions
10. Logical Framework
11. Activities and tasks
12. Activities, Goal and Purpose Grid
13.    Reporting requirements

**ANNEXURE-B**

**<u>HEALTH SERVICES ACADEMY</u>**

SAMPLE ACTIVITY, GOAL AND PURPOSE GRID

**ANNEXURE-C**

**HEALTH SERVICES ACADEMY**

Sample Monthly Reports

Project Name                          Department: xxx

For the Period:                       Reporting Officer: (Designated M&E Officer)

Approved by: (HOD-M&E)

1. Executive Summary
2. Activity Report

| Department | Project/Course | Activity | No of Beneficiaries | Tasks |
|---|---|---|---|---|
| Department Name | Project/Course Name | Activity 1 | Male: | Task 1 |
| | | | Female: | Task 2 |
| | | Activity 2 | Male: | Task 1 |
| | | | Female: | Task 2 |

**ANNEXURE-D**

**HEALTH SERVICES ACADEMY**

Sample Quarterly/Annual Reports

Project Name                    Department: xxx

For the Period:                 Reporting Officer: (Designated M&E Officer)

Approved by: (HOD-M&E)

1.      Executive Summary
2.      Activity Report

| Department | Project/Course | Activity | No. of Beneficiaries | Tasks | Milestone Achieved |
|---|---|---|---|---|---|
| Department Name | Project/Course Name | 1 | Male: | 1 | Indicator (Name/Identity) Achievement: _ %age |
| | | | Female: | 2 | Indicator (Name/Identity) Achievement: _ %age |
| | | 2 | Male: | 1 | Indicator (Name/Identity) Achievement: _ %age |
| | | | Female: | 2 | Indicator (Name/Identity) Achievement: _ %age |

# Chapter-7

# Critical Reflections

## List of Acronyms

**BoG**            Board of Governors
**ED**             Executive Director
**HOD**            Head of Department
**HSA**            Health Services Academy
**M&E**            Monitoring and Evaluation
**PMP**            Project Management Plan

## TABLE OF CONTENTS                              PAGE

**A**       **SCOPE OF THE CHAPTER**

This chapter outlines the usage of M&E data for critical reflections. These critical reflections are sourced through analysing the project activities against the M&E Indicators set within the PMP of a project/course.

This chapter also outlines the policy and procedures for encouraging the team of HSA in using the critical reflections.

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**B**          **DEFINITIONS**

For the purpose of this chapter following terms shall have given descriptions:


B.1.MONITORING

It actually means 'to be aware, of the state of a system'. In management it is specifically used about the state of the activities of a project.

B.2. EVALUATION

Evaluation is a systematic determination of a subject's merit, worth and significance, using criteria governed by a set of standards. It can assist an organization to assess any aim, realisable concept or proposal, or any alternative, to help in decision-making; or to ascertain the degree of achievement or value in regard to the aim and objectives and results of any such action that has been undertaken.

B.3. CRITICAL REFLECTION

The data obtained from critically analysing an activity with information about success and failure of the activity towards achieving the goal or purpose of a project/course.

## C.    POLICIES

This section entails an overview of the general policies adopted by the HSA in Critical Reflections.

- Critical Reflections
- Using Critical Reflections in Planning

C.1.      CRITICAL REFLECTIONS

- The M&E Unit of HSA shall develop critical reflections of all activities once they are carried out by the end user departments. The data shall come from the end user departments and the M&E Unit shall critical lyanalyze it for success or failure with the help of indicators set within the respective PMP.

- Based on the critical reflections the M&E Unit shall draft suggestions for amendments in activities or project/course planning for the future. The HSA Management shall take into consideration every such suggestion in planning new projects/courses.

- The Critical Reflections shall be developed for projects/courses within 30 working days of their completion.

C.2.      USING CRITICAL REFLECTIONS IN PLANNING

- All end user departments of HSA shall responsible to use the critical reflections available in planning new projects/courses. Planning new activities shall include analysis based on previous experiences and it shall be a part of project/course planning.

- The HOD end user department shall ensure the usage of critical reflections and shall share the project plan for review with the HOD-M&E and ED HSA for approval.

- The management of HSA shall encourage the use of critical reflections at all levels.

**D.        PROCEDURES**

This section contains procedures for following aspects of Critical Reflection for M&E.

- Critical Reflections
- Using Critical Reflections in Planning

D.1.     CRITICAL REFLECTIONS

- The HOD of end user department shall share the details of ever activity undertaken and completed within a project/course with the HOD-M&E after the project/course is completed.

- The HOD-M&E shall designate an officer of the M&E Unit to critically analyze the activity for its success or failure towards achieving the goal of the project/course in light of the indicators set within the respective PMP. The analysis shall be forwarded to the HOD-M&E for review and input who shall share it with the HOD of the end user department.

- The analysis shall also include gender mainstreaming data where the number of beneficiaries is segmented and whether equal opportunity was provided during the life cycle of each activity.

- After review from the HOD-M&E the designated officer of the M&E Unit shall draft a suggestion report for planning of future projects/courses of HSA. This report shall be forwarded to the HOD-M&E for review and approval.

- The approved critical analysis and suggestion report (Critical Reflections) shall be shared by the HOD-M&E with the ED-HSA and with his approval shall be forwarded to the end user department.

- The whole process of developing the Critical Reflections and its circulation shall not take more than 30 working days after the project/course has been completed/ended.

- The end user departments shall take these critical reflections as a guide in planning future projects/courses and activities shall be based on it. *Please refer to ANNEXURE-A for sample table of Critical Reflections*

D.2.      USING CRITICAL REFLECTIONS IN PLANNING

- The HOD end user departments shall designate an officer of the department to develop a project plan which shall include improved activities based on critical reflections.

- The designated officer of the end user department shall forward the set of activities based on the critical reflections to the respective HOD. The HOD end user department shall review the new set of activities and share them with the HOD-M&E for review and after finalizing shall forward the project plan to ED HSA for approval.*Please refer to ANNEXURE-B for using the Critical Reflections.*

- The new set of activities shall be incorporated in the project plan after the approval from the ED HSA.

- The management of HSA shall encourage the use of critical reflections at all levels and changes occurring due to these reflections should be highlighted to encourage the team.

## ANNEXURE -A

## HEALTH SERVICES ACADEMY

SAMPLE TABLE FOR CRITICAL REFLECTIONS

| Department /Unit | Project/Course | Activity | Task | Quantitative Result (with the help of Indicators) | Qualitative Result (with the help of Indicators) |
|---|---|---|---|---|---|
| Name | Name | Activity 1 | Task 1 | 1.    Success<br>2.    Failure | 1.    Success<br>2.    Failure |
| | | | Task 2 | 1.    Success<br>2.    Failure | 1.    Success<br>2.    Failure |
| | | Activity 2 | Task 1 | 1.    Success<br>2.    Failure | 1.    Success<br>2.    Failure |
| | | | Task 2 | 1.    Success<br>2.    Failure | 1.    Success<br>2.    Failure |

* Failures should be highlighted for ready reference. The success/failure shall also include gender mainstreaming as an indicator.

**ANNEXURE-B**

**<u>HEALTH SERVICES ACADEMY</u>**

SAMPLE USING CRITICAL REFLECTIONS

| Weakness/Failure Identified | Suggestion | Suggestion Approved by | Follow-up of suggested Activity | | | | |
|---|---|---|---|---|---|---|---|
| | | | Excellent | V. Good | Good | Fair | Needs Revision |
| | | | | | | | |
| | | | | | | | |

# Chapter 8

# CONDITIONS & CAPACITIES FOR M&E

## LIST OF ACRONYMS

| | |
|---|---|
| **BoG** | Board of Governors |
| **ED** | Executive Director |
| **HOD** | Head of Department |
| **HSA** | Health Services Academy |
| **M&E** | Monitoring and Evaluation |
| **PMP** | Project Management Plan |

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## A      Scope of the Chapter

This chapter outlines the conditions and capacities required for running the M&E Unit. The chapter gives in detail the structure required for the Unit and the capacities of the staff that would be required to run it smoothly.

This chapter also contains the Job Descriptions for the staff of the HSA M&E Unit.

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**B      DEFINITIONS**

For the purpose of this chapter following terms shall have given descriptions:

B.1.    MONITORING

It actually means 'to be aware, of the state of a system'. In management it is specifically used about the state of the activities of a project.

B.2.    EVALUATION

Evaluation is a systematic determination of a subject's merit, worth and significance, using criteria governed by a set of standards. It can assist an organization to assess any aim, realisable concept or proposal, or any alternative, to help in decision-making; or to ascertain the degree of achievement or value in regard to the aim and objectives and results of any such action that has been undertaken.

B.3.    OPTIMAL M&E STRUCTURE

The best structure in relation to various parameters, in the case of this manual and the M&E structure it is based on budget and capacity required. This is the kind of a structure which if increased shall incur extra budget implications and if decreased shall affect the working capacity of the team.

**C.     POLICIES**

This section entails an overview of the general policies adopted as Conditions & Capacities for M&E by HSA.

- Optimal M&E Structure

- Capacity of M&E Staff

C.1.    OPTIMAL M&E STRUCTURE

- The management of HSA shall keep an optimal structure for M&E. The various levels of this structure shall be clearly defined and placed within the hierarchy of HSA.

- The management of HSA shall either hire trained staff from the market or train members of its existing staff on or off the job for M&E and place them permanently in the M&E Unit. The HSA Management shall provide equal opportunity to all genders in developing the M&E Staff Structure.

- The optimal structure shall include a position of Senior Management Level and two Middle Management Level but if need be additional positions of Mid-level may be included on permanent, project or contract basis depending on the requirement.

C.2.    CAPACITY OF M&E STAFF

- The management of HSA shall ensure that the members of the M&E Unit either has the capacity required or shall take measures to develop the capacity required for the positions.

- The management of HSA shall also ensure an environment of learning and further strengthening the capacity of the staff of the M&E unit.

## D.      PROCEDURES

This section contains procedures for following aspects of Conditions and Capacities for M&E.

- Optimal M&E Structure

- Capacity of M&E Staff

D.1.    OPTIMAL M&E STRUCTURE

- The HSA Management shall outline an optimal staff structure for M&E Unit as given in the organizational chart. *Please refer to Chapter 2 of the M&E Manual for the Organizational Chart.*

- The M&E Structure shall define the roles, management level, communication protocols, authorities and responsibilities clearly. The overlapping role of project/course management and M&E shall also be clearly mentioned.

- Each position of the M&E Unit shall be clearly outlined through Job Descriptions (JD). *Please refer to ANNEXURE-A and B for Sample JDs*

- The HSA Management shall either hire trained personnel for the positions or build the capacity of members of its existing staff through on or off the job trainings. Equal opportunity shall be ensured by the management of HSA for these positions to all segments of gender.

- The optimal staff within the M&E Unit is based on regular projects/courses that are being run by HSA which includes

  ➢ One Senior Management Position as Head of Department M&E

  ➢ Two Middle Management Positions as Officers of the M&E Unit

- If there is need for additional staff support to the M&E Unit in case of additional projects/courses or donor/funding agency requirements (or any other such instance) the management shall hire additional mid-level officer(s) on permanent, consultancy, contract or project based employment.

D.2.    CAPACITY OF M&E STAFF

- The management of HSA if required shall hire trained personnel for the positions of the M&E Unit who are equipped with the capacity required for the positions. Or may build the capacity of its existing staff and transfer them to the positions of the unit.*Please refer to ANNEXURE-A and B for capacity required for the positions of the M&E Unit.*

- The management shall completely and independently allow the responsibilities and authorities to such staff members of the Unit.

- The management shall also ensure the interaction and overlapping of the project staff and M&E staff.

- The management of HSA shall encourage further learning through trainings, seminars, workshops or other informal methods to strengthen the capacity of the staff of the Unit.

**ANNEXURE -A**

**HEALTH SERVICES ACADEMY**

SAMPLE JOB DESCRIPTION (HOD-M&E)

Job Title:                        Director/HOD-M&E
Reports to:                       Executive Director (ED) HSA

Job Responsibilities

- Good understanding of Government of Pakistan (GoP) policies and procedures
- Good understanding of USAID and other International donor/funding agencies rules and requirements
- Has complete knowledge of developing and implementing M&E System within an educational institution
- Has the ability to create a participatory learning environment within a working team
- Can develop and implement M&E system which may be described in Project Planning or per the requirement of donor/funding agencies
- Can analyze raw data and develop reports for the support of the management of HSA
- Can develop PMP and DQA for projects/courses of HSA
- Can enhance the capacity of the M&E Unit by providing technical support to the team.
- Seeks guidance from and support the ED-HSA in course correction, promotion of learning, and creation of accountability
- Contribute to the achievement of Program objectives by ensuring timely delivery of high quality M&E outputs
- Manage relations with all stakeholders and the general beneficiaries of projects/courses for better understanding
- Able to hire personnel on vacant posts within due time and manage the required budget
- Able to procure consultants or contract staff if and when required which qualifies the set standards
- Able to promote the concept of M&E within project staff for more productive outputs

- Understands Gender Mainstreaming and can develop methods to promote it within projects/courses of HSA
- Can easily liaise with donor/grant/funding agencies

Required Qualifications and Skills

- Post Graduate Degree in Social Sciences preferably MBA or MPA
- Atleast 10 years experience in social or educational sector on senior level at project planning level, atleast 5 years at senior level in M&E.
- Fluent in English and Urdu
- Fluent report writing skills
- Proficient in concepts of evaluation design. Has managed and worked on complex and important survey assignments with organizations of repute
- Preference shall be given to candidates who have worked in M&E or monitoring based projects
- Working knowledge of MS Word, Excel, Power Point, e-mails, statistical and data base software.

**ANNEXURE-B**

**HEALTH SERVICES ACADEMY**

SAMPLE JOB DESCRIPTION M&E OFFICER/MANAGER

Job Title:                    Officer/Manager M&E
Reports to:                   HOD-M&E

Job Responsibilities

- Good understanding of Government of Pakistan (GoP) policies and procedures
- Good understanding of USAID and other International donor/funding agencies rules and requirements
- Has good knowledge of developing and implementing M&E System within an educational institution
- Has the ability to create a participatory learning environment within a working team
- Is able to develop and implement M&E system which may be described in Project Planning or per the requirement of donor/funding agencies
- Can analyze raw data and develop reports for the support of the management of HSA
- Can develop PMP and DQA for projects/courses of HSA
- Can enhance the capacity of the M&E Unit by providing technical support to the team.
- Seeks guidance from and support the HOD-M&E in course correction, promotion of learning, and creation of accountability
- Contribute to the achievement of Program objectives by ensuring timely delivery of high quality M&E outputs
- Can manage relations with all stakeholders and the general beneficiaries of projects/courses for better understanding o behalf of HOD-M&E
- Able to promote the concept of M&E within project staff for more productive outputs
- Understands Gender Mainstreaming and can develop methods to promote it within projects/courses of HSA
- Can easily liaise with donor/grant/funding agencies on behalf of HOD-M&E

Required Qualifications and Skills

- Post Graduate Degree in Social Sciences preferably MBA or MPA
- At least 5 years experience in social or educational sector on middle level at project planning level, atleast2 years in project M&E.

- Fluent in English and Urdu
- Fluent report writing skills
- Can develop concepts of evaluation design.
- Preference shall be given to candidates who have worked in M&E or monitoring based projects
- Working knowledge of MS Word, Excel, Power Point, e-mails, statistical and data base Software.