



Costed Implementation Plan Resource Kit



Four Key Elements for Execution of Family Planning Costed Implementation Plans

Approaches and tools for translating the plan into sustained action and results

Produced by:



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Table of Contents

Overview of the Guide.....	4
About this Tool.....	4
How to Use the Guide	4
Introduction.....	5
What is CIP Execution?.....	5
The Gap Between Planning and Execution.....	5
Framework for CIP Execution	6
Transition Stage: Bridging the Development and Execution Phases	7
The CIP Execution Checklist.....	7
Four Key Elements For CIP Execution.....	8
Key 1: Foster Country Ownership.....	8
Key 2: Set Up and Implement a Governance and Coordination Framework.....	9
Key 3: Mobilize and Manage Resources	12
Key 4: Monitor Performance for Results	14
References	17
Appendix 1: Relationship Between Key Elements and CIP Phases.....	18
Appendix 2: The CIP Execution Checklist.....	19
Appendix 3: Sample Dissemination Matrix.....	22
Appendix 4: Sample Joint Annual Work Plan	23
List of Figures and Boxes	
Figure 1: Conceptual Framework for CIP Execution	6
Figure 2: Stakeholder Map	10
Box 1: Why Plans Fail to Produce Results.....	5
Box 2: Engaging Champions to Advance in Senegal and Tanzania.....	8
Box 3: Tanzania Government Leads by Example.....	10
Box 4: Getting the CIP to Districts in Senegal	11
Box 5: Zambia Boosts FP Unit to Support CIP Execution	12
Box 6: Budget Advocacy Influences FP Resource Allocation in Tanzania	13
Box 7: Performance Monitoring in Tanzania.....	15

Overview of the Guide

About this Tool

The Four Key Elements for CIP Execution is part of a series of tools in the Family Planning Costed Implementation Plan (CIP) Resource Kit. It is intended to provide recommendations for essential elements to be considered during execution of the CIP. These elements are based on theoretical and practical understanding of factors that drive or hinder execution of strategies, plans, and policies. They are informed by experiences executing CIPs in Tanzania, Senegal, Kenya, and Zambia. This guide has been developed specifically for individuals and teams involved in leading, managing, and coordinating CIP execution efforts.

How to Use the Guide

This tool can be used during the execution phase of the CIP—to guide the preparation process for execution, and periodically during execution to gauge and improve the process and achieve optimal results. This tool is composed of two components:

1. a conceptual framework and description of four key elements for CIP execution, including recommendations on approaches to implement each of these elements; and
2. a checklist intended to facilitate self-assessment and reflection by CIP task teams on the extent to which these elements are in place to facilitate CIP execution.

Introduction

What is CIP Execution?

“Execution” refers to the processes and systems that operationalize the costed implementation plan (CIP) into sustained action, and ultimately into results. After the government approves and formally launches the CIP, the execution phase begins. It is important to note that a clearly defined plan—such as the CIP—is simply a foundation for effective execution; a disciplined process or logical set of connected activities is required to translate a “plan on paper” into actual results.

The Gap Between Planning and Execution

Although, by definition, execution may sound simple and straightforward, it can be quite complex. Execution is a process, and is not the result of a single decision or action (for example, a launch event). Without a planned and deliberate approach to execution, results can be difficult to attain. Implementing a logical approach, however, represents a formidable challenge and can result in plans that are inactive and/or do not yield desired results: This is known as the “planning-execution” gap. Extensive literature¹ exists on the factors that can drive or obstruct the execution of a plan (**Box 1**), and a solid understanding of these factors is key to overcoming barriers to execution. The next section will provide a framework for understanding these factors, so that individuals responsible for executing the CIP are better prepared to design effective approaches.

BOX 1 Why Plans Fail to Produce Results

- a) Lack of stakeholder buy-in and ownership of the plan
- b) Inadequate political and leadership will
- c) Unclear lines of accountability and responsibility
- d) Poor communication and coordination among stakeholders
- e) Inadequate leadership and management skills for effective execution
- f) Inability to recognize and facilitate change processes
- g) Inadequate financial resources
- h) Lack of performance management processes
- i) No accountability or follow through

¹ See reference section for cited articles 1, 2, 3, 5, 6, 8, 10, and 14.

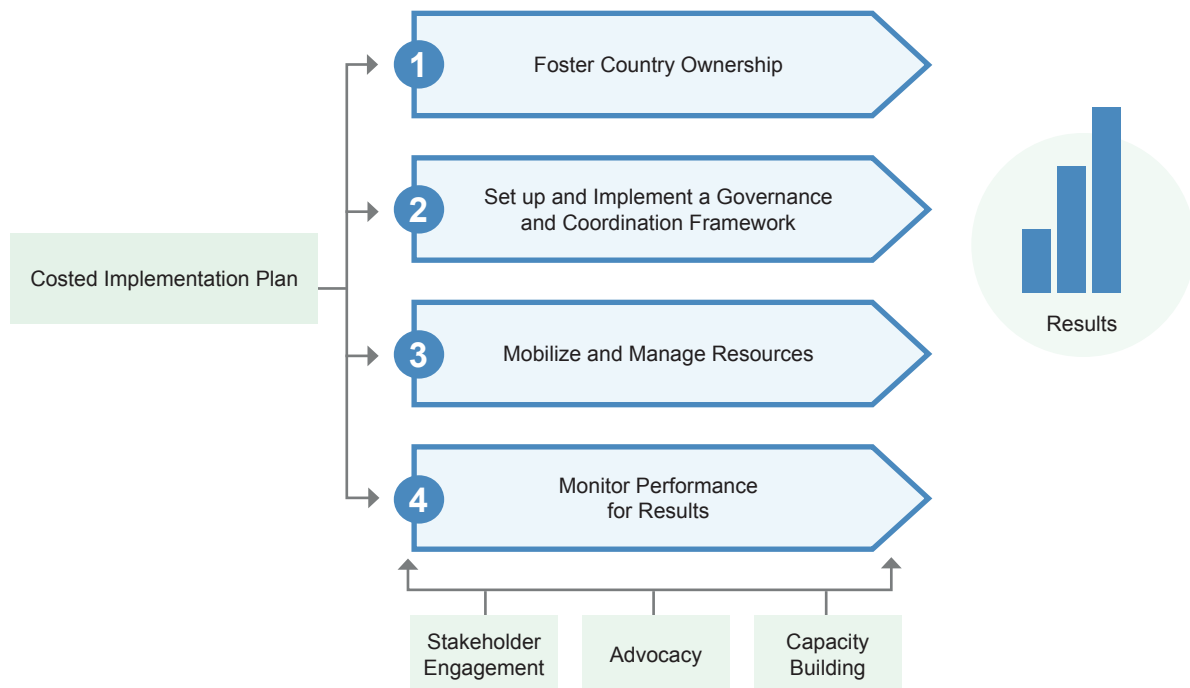
Framework for CIP Execution

Various conceptual frameworks and theories exist to guide the execution of plans. The conceptual framework below (**Figure 1**) introduces the following four elements, which help close the gap between development and execution and address the key issues why plans fail to produce results from Box 1:

- **KEY 1:** Foster country ownership
- **KEY 2:** Set up and implement a governance and coordination framework
- **KEY 3:** Mobilize and manage resources
- **KEY 4:** Monitor performance for results

This conceptual framework is based on a review of a growing body of literature on factors that drive or hinder execution of strategies, plans, and policies. It has been further enriched by experiences executing CIPs in Tanzania, Senegal, Kenya, and Zambia. This framework is not a “one-size fits all” approach for executing CIPs, and should be adapted to fit different contexts. However, as governments plan, develop, and revise their plans, they should take into consideration how their plans will be executed effectively.

Figure 1: Conceptual Framework for CIP Execution



This framework underscores two important concepts: (1) Execution has to be considered from the beginning, that is, during the development phase. As illustrated in the elaborated framework (**Appendix 1**), all four keys have components that start in the development phase and continue into the execution phase. (2) A brief transition stage (see the description below) is helpful to bridge the two phases, and in particular, to align operational functions, processes, and people with the CIP. As with the other phases of the CIP, factors such as stakeholder engagement, capacity building, and advocacy cross-cut the four keys.

Transition Stage: Bridging the Development and Execution Phases

The three phases of the CIP process—planning, development, and execution—occur in a continuum. They have overlapping elements and when developing a CIP, governments should not look at the phases in isolation of each other. A kick-off meeting with key stakeholders marks the completion of the planning phase and the onset of the development phase. The formal launch of the CIP document marks the end of the development phase and onset of the execution phase. The transition stage is a brief period, lasting from three to six months, at the onset of the execution phase, immediately after the formal launch of the CIP. **Transition involves set-up and operational alignment—the latter refers to deliberately creating linkages between financial resources, projects, stakeholders, and performance measurement of the plan. It allows for smooth “switching” between the development and the execution phases. However, this “switch” does not occur automatically. It is a facilitated process on a continuum, requiring stakeholders to work as a team and embrace change.** For example, the many ongoing activities, which existed prior to the development of the CIP, need to contribute to CIP results (to the extent possible), once the plan is launched. The transition stage also helps to maintain the momentum from the development phase into the execution phase. It is highly encouraged that the CIP taskforce, as the governance and decision-making body of the CIP development process, remains engaged during the transition stage to smoothly steer the plan into execution.

The CIP Execution Checklist

Based on the conceptual framework, each of the four keys has been translated into a set of criteria to form a checklist (**Appendix 2**). This checklist is intended to facilitate self-assessment and reflection by CIP task teams to assess the extent to which factors are in place to successfully execute the CIP. It can be used at various times during the execution of the plan, starting in the transition stage as a quick guide to determining what to set in place to drive execution, and on an on-going basis, as part of continuous improvement of the execution process.

Four Key Elements For CIP Execution

KEY 1: FOSTER COUNTRY OWNERSHIP

Execution of the CIP requires the involvement of a broad range of stakeholders,² who make various contributions to the plan, including providing services, making policy decisions, championing agendas, and providing technical assistance and financial resources. Consequently, stakeholders should share responsibility and accountability for the plan's success; that is, they should exhibit country ownership to the execution process. Stakeholder engagement addresses important factors that obstruct plan execution, including lack of buy-in and ownership of the plan, and inadequate political and leadership will (**Box 1**). Realizing country ownership of the CIP is key to execution success, because efforts are more likely to be effective and sustainable when they reflect countries' own priorities. Furthermore, ownership supports increased resource efficiency and greater accountability. Nurturing a sense of ownership occurs in a continuum and starts early in the development of the CIP. Below are approaches that can be implemented to facilitate country ownership:

- a. *Meaningfully engage stakeholders* throughout the CIP process, from the plan and development phases, to establish buy-in and create ownership, ultimately resulting in accountability during the execution phase. The "Stakeholder Engagement for Family Planning Costed Implementation Plans" tool provides guidance on how to engage stakeholders throughout the three CIP phases (plan, develop, execute).
- b. *Communicate and disseminate the plan.* Communication is a key factor in aligning the plan for execution, considering that accomplishment of CIP results falls upon the shoulders of a broad range of stakeholders. Implement a communication process that is iterative, interactive, and multi-directional, resulting in key stakeholders understanding the "who," "what," "when," "where," "why," and "how" of the plan. Stakeholders should also know exactly what individual role they are expected to perform in order to execute the plan, and should provide feedback on their capacity to contribute to the plan. This can be achieved through active dissemination of the plan after the initial launch, and through periodic reviews. See **Appendix 3** for a sample dissemination matrix.
- c. *Create a common vision and purpose* to help stakeholders commit to a partnership approach to execution, and to help stakeholders stay focused, productive, and inspired. While the CIP itself reflects a common vision, this sense needs to be translated in practice and shared among stakeholders throughout the duration of the plan's execution. Here are some known practices to help create a common vision to build partnerships:
 - (i) Institute principles and values to guide how stakeholders operate on a day-to-day basis as they pursue their common vision.
 - (ii) Engage champions to act as persuasive advocates for the CIP, and who can influence and facilitate change in others. In practice, many champions are likely to have been involved throughout the development phase and may be a key member of a Family Planning Technical Working Group (FPTWG). While champions should be influential and credible FP advocates, they do not necessarily need to be government leaders. Furthermore, different champions can serve different roles. For example, a champion may be focused on rallying development partners to increase resource contributions to the CIP, and another (preferably a government leader) may work within the government to rally enhanced commitment of the CIP among top leaders.

2 In the context of a CIP, a stakeholder is a person, group, or institution with involvement in, interest in, or in-depth knowledge of the CIP. This may include those who directly influence the success of the plan and those who are affected by the plan, either positively or negatively. Stakeholders can be governments, parliamentarians, donors, implementing partners in the public and private sectors, research and training institutions, regulatory agencies, users of family planning, and community members at-large.

- (iii) Establish platforms to promote open and regular communication and information sharing among stakeholders—for example, through regularly scheduled technical working group meetings dedicated to CIP discussions.

BOX 2 Engaging Champions to Advance CIP in Senegal and Tanzania

Champions are useful to drive the CIP forward, especially during the initial period of execution, when rallying stakeholders for a common purpose is important. In Tanzania, the late Timothy Manchester, USAID/Tanzania’s Senior Family Planning and Reproductive Health Adviser, was a valuable asset who engaged and influenced donors to redirect and increase financial resources to the plan. This brought stability to the contraceptive pipeline, which was greatly deprived of resources prior to the CIP. In Senegal, Dr. Bocar Mamadou Daff, Director of the Reproductive Health and Child Survival Unit for the Senegalese Ministry of Health and Social Action, championed the development of the National Action Plan for Family Planning, and its rapid transition into execution. Senegal was the first of the nine Francophone West African countries in the Ouagadougou Partnership to develop a plan, which was launched just prior to the London Summit.

KEY 2: SET UP AND IMPLEMENT A GOVERNANCE AND COORDINATION FRAMEWORK

The governance and coordination framework describes the institutional arrangements for implementation. The framework aims to clearly define the ownership, oversight, and accountability roles to be performed by different institutions for CIP execution. Furthermore, the framework describes how stakeholders will coordinate efforts to facilitate joint planning, pooling of resources, decision-making, and sharing of information and responsibilities. Institutional arrangements should be discussed and agreed upon during the development phase, and defined in the CIP document. During the execution phase, the proposed framework should be reviewed—to ensure clarity, comprehensiveness, and feasibility—and updated regularly, as partners and stakeholders change over time. The updated framework should be clearly documented (for example, in the CIP, terms of reference, or memorandum of understanding) and communicated to all stakeholders. Key 2 addresses factors that obstruct plan execution, including unclear lines of accountability and responsibility, inability to manage change processes, poor communication and coordination among stakeholders, and inadequate leadership and management skills to effect execution (Box 1). Below are several recommended approaches that can establish a robust governance and coordination framework.

- a. *Assign stewardship for the CIP to one government institution* to prevent ambiguity of authority and accountability. In most countries, the Ministry of Health is the steward of the CIP. However, a country may decide the steward to be a non-health ministry, such as a ministerial agency that deals with planning and population issues. This may be a strategic choice to foster visibility of family planning (FP) as a development intervention. If this is the case, there should be careful consideration and articulation of the division of roles and responsibilities between the different government institutions involved in execution of the plan.
- b. *Clearly define oversight and accountability roles* of the assigned institution’s division/departments and personnel. The Ministry should assign an individual to be the designated focal point person for the CIP. Given the breadth of the CIP, it is also good practice to assign focal point persons for each of the priority technical areas: demand creation, service delivery, contraceptive security, policy and enabling environment, financing, and leadership and management. One designated

BOX 3 Tanzania Government Leads by Example

Soon after the launch of their CIP in 2010, the Government of Tanzania more than doubled the annual funding for contraceptive commodities (to ~US\$9.3M), compared with the previous five years. This funding was channelled through a newly established line item for family planning in the national budget, created as a result of the CIP. The government's bold act stimulated other development partners, who previously had not funded contraceptive commodities directly (that is, had only funded them through the basket fund mechanism), to designate resources for family planning. By 2012, the Australian Department of Foreign Affairs and Trade (DFAT) and the UK Department for International Development (DFID) joined the pool of dominant funders of contraceptive commodities (USAID and UNFPA). By 2013, the contraceptive pipeline became stable, with no stock-out alerts at the national level.

point of contact per technical area will make it easier to share information, monitor status, and coordinate work across all components of the plan.

- c. *Define the roles and responsibilities of, and relationships between, different actors.* This goes for actors both within and outside the government, beyond the assigned institution. These different actors include: different departments within the MOH, other ministries, parastatal institutions, development partners, civil society, community-based organizations, non-governmental organizations, professional associations, faith-based organizations, and the private sector.
- d. *Demonstrate government stewardship of the plan.* When the government vividly declares its commitment to FP (and specifically acknowledges the CIP), other stakeholders are likely to follow suit in support of the plan, maximizing collective action towards results. This is also an important indicator of country ownership.
- e. *Secure sustained senior leadership commitment for execution.* Commitment to develop the plan is not necessarily the same as commitment to execute the plan. There is a need to keep the CIP continuously visible to senior leadership within the government, so they are actively engaged, provide support, and are held accountable for results as the CIP matures. Here are some recommended approaches that can be used for this process:
 - (i) Communicate and consult frequently and consistently with all levels of leadership (senior management, mid-level, and frontline managers). Examples include: holding periodic ministerial briefings, and presenting on progress on CIP execution at ministerial management meetings.
 - (ii) Identify opportunities for leaders to serve as CIP champions to catalyze support for the plan within ministries, and in the government as a whole.
 - (iii) Use the type of reports (for example, scorecards/dashboards, described further under Key 4) that can keep leadership informed, provide meaningful contributions, and make decisions about the CIP.
 - (iv) Invite leaders to participate in periodic reviews of the plan's progress (see Keyfour for a description of periodic reviews).
- f. *Cascade responsibilities to subnational governing structures.* In countries where administrative and managerial authority have shifted to the subnational levels (for example, states, counties, regions, provisions, and districts), the governance and coordination framework should define the role of the district officials and how they will function with the central level ministry. In addition to defining roles, mechanisms should also be put in place to ensure that functions, processes, and FP resource allocations are in line with the CIP. Here are recommended approaches that can be used to cascade responsibilities and engage leaders at subnational levels:

- (i) Establish FP goals and operational targets for implementation at subnational levels.
- (ii) Clearly describe how implementation at the subnational level will contribute to national level goals (for example, through subnational plans).
- (iii) Issue policy directives and guidelines that support formal engagement of subnational structures in plan execution.
- (iv) Conduct advocacy with, and strengthen capacity of, leadership at subnational levels to effectively implement the plan.

g. *Create or leverage existing coordination mechanisms.* Many countries already have established FPTWGs or committees to promote coordination and information sharing on FP issues. In most cases, the FPTWGs operate with a terms of reference that outlines the group's objectives, guiding principles, expectations, and processes for engagement. Depending on the country

context, these groups may suffice. However, certain characteristics of these working groups need to be taken into consideration. For example, some groups tend to operate only at the central/national level, with lack of equivalent structures at the subnational levels. Also, sometimes the membership represents a narrow spectrum of stakeholders, leaving out private sector and civil society. Sometimes the group is too large to enable meaningful engagement and sufficient focus on the CIP objectives. The group typically needs to be broken into different taskforces or sub-committees that can make more significant progress and more closely monitor ongoing activities. Furthermore, the group's objectives may need to be aligned to the CIP. For example, a FPTWG convened solely for information sharing about partners' projects will not fulfill the need to facilitate joint planning and resource pooling to carry out specific activities in the CIP.

h. *Create and review joint annual work plans.* To promote coordination, reduce duplication, increase resource efficiencies, and determine implementation and resource gaps, it is important to link different partner projects to the CIP. This can be done through joint annual work plans, which reflect the actual activities to be implemented by different institutions (government and partners) in a particular year (and therefore also highlight implementation gaps), results to be achieved, and planned/committed resources to achieve results. A sample joint work plan is shown in **Appendix 4**. Joint work plans help with partner coordination, efficiencies, and accountability. Since the work plans show areas where there are implementation and/or resource gaps, they can also be used as advocacy tools for resource mobilization. The work plans also can become a reference document for periodic reviews of plan execution. The joint work plans should be reviewed in concert with the implementation roadmap to ensure that activities are aligned and scheduled in a logical way. For instance, developing training materials would need to come first; a training of trainers needs to precede a roll out of trainings to reach the number of participants necessary. If the CIP

BOX 4 Getting the CIP to Districts in Senegal

After the national launch of Senegal's CIP in November 2012, the Ministry of Health's Directorate for Reproductive Health and Child Survival (DSRSE) and the Family Planning Division held regional meetings with regional- and district-level health personnel to orient managers and supervisors as well as implementing partners, representatives from other sectors of government, the private sector, and civil society representatives to the CIP and develop district-level targets and strategies, based on regional goals included in the plan. Each district team developed specific, tailored FP acceleration plans, using the overarching CIP framework, to select interventions that would be most impactful given their particular contexts. By mid-2013, all 76 districts in all 14 regions had developed specific FP plans and were beginning implementation. Since then, the DSRSE and the FP Division have been conducting regular, standardized monitoring to identify progress implementing the action plans, including issues with funding, and to collect FP service statistics. This close coordination and monitoring has permitted the DSRSE and partners to adjust project work plans and to redirect funding to meet specific regional needs.

was developed without a detailed roadmap, one should be created to flesh out the sequenced steps necessary to meet quarterly/yearly targets.

- i. *Harmonize advocacy efforts.* Advocacy is crucial for effective CIP execution. It can help with a number of activities, including: mobilizing resources from multiple sources (government, private sector, and development partners); promoting visibility of the plan in national and subnational agendas, and among key stakeholders who may not be directly involved in FP issues but are deemed instrumental; rallying FP implementing partners towards a shared vision; promoting a sound policy environment for effective implementation; and fostering accountability for results. In most countries, organizations are already engaged in FP advocacy efforts. After the CIP is launched, advocacy efforts, implemented by different organizations with their respective agendas, should be coordinated and linked to CIP results. Those working on the CIP may consider forming a national coalition of civil society organizations with common agendas in view of the CIP and, where possible, developing joint action plans and pooling resources towards a common purpose. Also, where appropriate, the government can institute intra-ministerial advocacy to garner broader internal buy-in for the plan and engage partners to address policy issues.
- j. *Assess and enhance the capacity and resources* of the institutions assigned key roles in CIP execution to achieve optimal performance. Gaps in resources and capacity should be assessed, through consultations with the government, and efforts to strengthen capacity should be implemented. Some of the key functional capacities include mobilizing external and internal resources, planning, monitoring and evaluating plan implementation, and organizing multi-stakeholder dialogue and coordination mechanisms.

BOX 5 Zambia Boosts FP Unit to Support CIP Execution

One of the critical challenges identified during the development of the Zambia CIP was limited resources and capacity within the FP division of the Ministry of Community Development, Mother and Child Health (MCDMCH) to effectively support successful implementation of their CIP (launched in 2013). Strengthening the governance structure and program coordination at all levels was included as a strategic priority for the plan. By early 2014, the government deployed two additional staff to the FP unit to focus on implementing the plan. A partner seconded an additional staff member to support FP efforts. Consequently, the plan has been disseminated to several provinces, traditional leaders have been engaged to scale up FP, and a performance monitoring tool (dashboard) has been developed.

KEY 3: MOBILIZE AND MANAGE RESOURCES

The CIP is designed to inform the government and stakeholders of the financial resources needed to meet FP goals. In many cases, the level of resource requirements surpasses previous budgeted or allocated amounts for FP. For example, the amount of financial resources required for commodities for Tanzania and Kenya increased by 59% and 46%, respectively, from the government funding allocation in the year before the CIP was launched. The higher level of resource requirements, coupled with competing priorities for funding, calls for both expanded resource mobilization efforts and efficient use of resources. This key element addresses the lack of resources, which can be a fundamental barrier to plan execution. Below are several recommended approaches that can support resource mobilization efforts for CIPs.

- a. *Implement a dedicated and continuous resource mobilization effort.* While the CIP provides information on the level of financial resources required to meet a goal, it neither describes how those resources will be mobilized nor guarantees that the resources will be secured. Deliberate

resource mobilization efforts, therefore, need to occur in tandem with execution of CIP activities, on an on-going basis. These efforts should: (1) continuously assess all existing and potential donors (including traditional FP donors, non-FP donors, and the private sector) and their varied areas of interest so as to stabilize and/or broaden the funder base; (2) clearly articulate resource needs, based on a solid understanding of the financial gaps against the CIP (the “Family Planning CIP Gap Analysis Tool” and data from joint annual work plans can be used to provide essential data on financing gaps for the CIP); and (3) understand how best to approach different donors who have varied FP funding interests.

- b. *Coordinate allocation and use of resources.* To ensure more efficient and effective use of resources, and to leverage co-financing opportunities, the government should adopt a coordinated and collaborative approach to financing the CIP. Using an annual joint work plan (as described in Key 2), and gathering information using the gap analysis tool, can provide useful information to help with funding coordination. Development partners should also coordinate regularly with their government counterparts to establish financing priorities. If necessary, a formal body tasked to ensure the coordination of financing efforts can be established. A good coordination mechanism should identify areas of overlap, under- and over-funding, and reprioritize activity implementation according to established priorities.
- c. *Track and account for resources.* To ensure accountability, sustain interest, and strengthen donor confidence, it is important to track the use of funds and monitor performance. This is described further in Key 4.
- d. *Implement budget advocacy.* Efforts dealing with resource mobilization, performance monitoring, and advocacy should be closely intertwined. Budget advocacy refers to using budget information to advocate for government resources and policy changes. It involves two key components: (1) budget analysis – the capacity to secure budget information, analyze it, and explain its implications in clear and compelling ways; and (2) strategic advocacy – the ability to use the information from budget analyses to influence budget allocation. Resource advocacy efforts should be informed by knowledge of financing gaps for the CIP and resulting performance (or lack thereof). “Health Sector Budget Advocacy: Guide for Civil Society Organizations” provides further information and guidance on how to conduct budget advocacy. Also, the “Eleven-Step Guide to Ensuring Public-Sector Contraceptive Financing and Expenditure” tool provides specific step-by-step guidance for conducting budget advocacy for contraceptive financing, as informed by country experiences. Further guidance on advocacy for family planning can be found on the Advance Family Planning Advocacy Portfolio.

BOX 6 Budget Advocacy Influences FP Resource Allocation in Tanzania

Local government authorities (LGAs) in Tanzania are important sources of funding for the CIP. Whereas central resources for FP are largely allocated to commodities, actual service delivery and demand creation are largely the responsibility of the LGA, with the exception of donor contributions. However, for years prior to implementing the CIP, most LGAs did not allocate FP resources in their budgets. Civil society and non-governmental organizations implemented budget advocacy efforts in 90 of the 169 districts of Tanzania, using the National Package of Essential Family Planning Interventions, developed specifically to help Council Health Management Teams (CHMTs) better plan and budget for FP interventions in their council health plans. Annual budget tracking has shown remarkable success in budget allocations for FP: The number of districts including FP in their budgets increased from 26 in 2008 to 64 in 2013.

KEY 4: MONITOR PERFORMANCE FOR RESULTS

Implementing a performance monitoring system is a critical component of the execution phase. It supports informed decision-making to improve implementation performance and resource mobilization efforts, and facilitates plan adaptation and learning. Performance monitoring for the CIP is a cyclical and continuous process involving three components: (1) *Assess* – track and review results and resource flows (allocations and expenditures) against the plan; (2) *Decide* – use information to make informed decisions and generate lessons learned; and (3) *Act* – implement preventive/corrective actions, such as ensuring availability of resources and upholding the fundamental right principles of FP. The “Monitoring Performance of CIPs for Results” tool describes performance monitoring for the CIP. This key element addresses factors that block effective plan execution, including lack of performance management processes and lack of accountability for follow through (**Box 1**). Below are recommendations that can be implemented to effectively monitor performance for results.

- a. *Define targets and indicators.* During the development phase of the CIP, indicators (which measure the desired change) and targets (indicative estimates of the results to be achieved through the intervention) should be defined for each intended result. [The Family Planning/ Reproductive Health \(FP/RH\) Indicators Database](#) and [Track20](#) provide a comprehensive listing of the most widely used and validated indicators for evaluating FP/RH programs. The [“Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans”](#) tool provides further information on defining targets and indicators.
- b. *Determine key performance indicators.* While monitoring aims to bring together different types of indicator data in a logical manner to allow for a comprehensive review, the process can entail excessive reporting and become burdensome. Instead of tracking all indicators, prioritize key performance indicators (KPIs) that prove meaningful for reporting and decision-making. Identifying and agreeing on what kind of information is needed, how it will be used, and by whom, is an essential first step in determining KPIs. Typically, information from performance monitoring is useful for multiple purposes, including: informing planning, coordination, and decision-making on plan execution; fulfilling reporting requirements (to government, donors, and global commitments); forming the basis of advocacy efforts (budget and policy advocacy); and providing an understanding of implementation and resource gaps, thereby guiding resource mobilization. KPIs should be determined during the development of the CIP while assigning indicators to results; however, this exercise can also take place during the execution phase. Refer to the [“Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans”](#) on considerations to pay attention to while developing indicators, including feasibility of data collection, and indicator quality.

To be useful for decision-making, KPIs should include four categories—goal, outcomes, outputs, and inputs—in conformity with the CIP result framework. FP2020 has selected a suite of [core indicators](#) for use by countries for reporting and monitoring progress of the initiative. Countries can use these indicators to monitor progress against their goals. For measuring outcomes and outputs, consider prioritizing the many results included in the CIP by selecting indicators that measure strategic priorities—that is, key priority areas for implementation, financial resource allocation, and performance monitoring in the CIP. The [“Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans”](#) tool provides more information on strategic priorities. For input indicators, consider KPIs that measure resources, both human and financial, devoted to FP. Examples include: proportion of expenditures versus annual plan targets; annual expenditures on FP from government domestic budget; annual expenditures by funding source; geographical breakdown of investments/expenditures; proportion of FP providers in

service delivery points; and number of service delivery points. For more information on KPIs see: [“Developing and Using Key Performance Indicators: A Toolkit for Health Sector Managers.”](#)

Track annual progress toward FP goals. Monitoring execution of a CIP should be coupled with information on progress to achieve the FP goal(s)—that is, the ultimate result the CIP is intended to achieve. Examples of metrics include contraceptive prevalence rate, demand satisfied, and unmet need. FP2020 has selected [core indicators](#) to monitor progress of the goal, and for reporting purposes. Data for these indicators can be generated from various sources, including demographic health surveys conducted every five years, [PMA2020](#) surveys, service statistics, and other sources. An important resource, the Family Planning Estimation Tool, uses a new methodology that produces annual estimates through modelling, making use of multiple data sources. You can find this tool on the [Track20 website](#).

- c. *Develop a system for data collection, analysis, and reporting.* After identifying and agreeing on indicators to track results, develop a system to collect, analyze, and report performance data. The system should describe how data will be collected, from where, and at what frequency. Analyzed performance data can be presented in a simple and concise manner using dashboards, scorecards, and infographics. These tools display information on indicators in a series of charts, graphs and tables that are easy to interpret, and provide room to record recommendations and decisions about actions to improve performance. The tools can also provide information of trends over time. A sample CIP dashboard template can be downloaded here (*coming soon*).

Track 20 has developed a systematic process for data analysis and reporting. Refer to the guide [“Monitoring Performance of CIPs for Results”](#) (*coming soon*) for more information on this process.

- d. *Establish regular progress review processes.* Key stakeholders should review performance data and reports generated from the monitoring process at regular intervals to ensure that annual performance targets are being tracked, both in terms of program performance and resource

BOX 7 Performance Monitoring in Tanzania

During the first year of the CIP, a performance monitoring mechanism was established to follow a cyclical “plan-act-assess” process that involved: (1) collection and analysis of quarterly data on resource commitments, and expenditures and results achieved in the previous quarter from all implementing stakeholders; and (2) review of data, and development of recommendations for future planning. The simple paper-based Resource, Activity and Results Tracking Tool was first used, and was later replaced by a Web-based CIP [Performance Monitoring Database](#). This system now tracks and reports on the amount of resources expended, activity implementation, and results against the indicators and targets set forth in the NFPCIP. Service delivery data are also captured from the health management information system (HMIS). Resource and results data collected on a quarterly basis are shared and discussed in one-day semi-annual FP implementers’ meetings. Decisions and recommendations from these meetings flow into the NFPWTG agendas for follow-up. To-date, six semi-annual meetings have been convened, dedicated entirely to CIP progress review. Key decisions have been made during these meetings, resulting in considerable shifts to the plan. For example, in 2013, the NFPCIP was updated to re-prioritize strategies and adjust targets based on experience from the first two years of implementation, and there has also been a shift in distribution of resources from regions with a high contraceptive prevalence rate (CPR) to regions with low CPR.

3 Note that scorecards and dashboards are used interchangeably but have important differences. Scorecards include metrics or KPIs, and stoplight indicators (red, yellow, or green symbols that provide an at-a-glance view of a measure’s performance). Dashboards, on the other hand, provide a series of charts, graphs and tables of the KPIs.

mobilization. In addition, progress reviews should also provide the opportunity to review the CIP implementation roadmap that details the how, by whom, and when required to complete discrete interventions and activities. Review platforms can take the shape of quarterly or semi-annual joint stakeholder meetings, where analyzed data are reviewed and discussed, and decisions are made about any necessary adjustments to activity implementation. For example, performance data could reveal a high level of demand creation activities implemented, but few activities to strengthen or expand access to services (such as extending service delivery points). This can lead to an imbalance of too much demand generation without adequate supply measures to fulfill demand, hence necessitating adjustments. In an effective coordination system, however, such imbalances would be captured early during the annual work plan process. It is also good practice to conduct a mid-term review of the plan, and assess if there is a need to update/revise the overall plan.

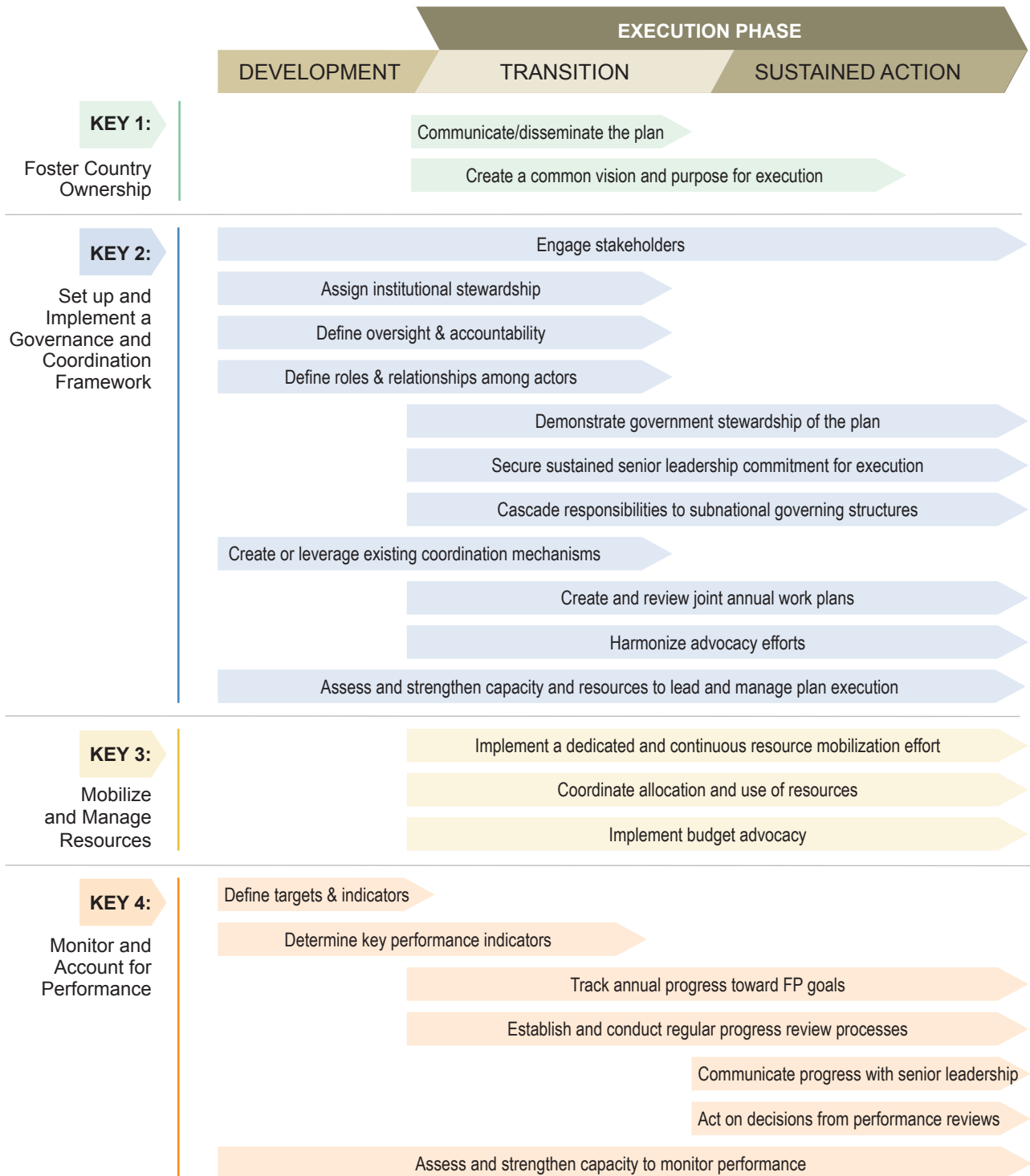
- e. *Communicate progress with senior leadership.* To continuously engage senior governmental leadership (for example, top management levels of the Ministry of Health) and keep the CIP visible, communicate progress reports in regular intervals (for example on a semi-annual basis). Hold meetings, review key milestones and challenges, and request feedback. Visual tools—such as the dashboard, scorecard, and infographics described above— provide a fast, comprehensive view of the performance status, and can be useful in communicating with senior leadership.
- f. *Act on decisions from performance reviews.* While regular reviews are important for performance monitoring, they can be less useful if there is no follow through on the decisions made. Hence, to complete the cycle, outcomes of decisions from review meetings should be tracked. Often, a decision is made without a discussion on how it will be implemented to achieve the desired change. Therefore, it is important to also assign responsibility and devise an action plan to implement decisions. This can be a follow-through action done in other platforms besides semi-annual meetings. For example, FPTWGs and sub-groups formed for each CIP technical area, as described under Key 2, can be appropriate platforms for decisions to flow through. Action plans can thus be formulated and tracked on a regular basis.
- g. *Assess and strengthen the capacity to monitor performance.* Timely, reliable, and accessible data are critical for measuring and monitoring results. Furthermore, a well-functioning HMIS is essential, along with the capacity to track and report on resources and plan execution. Gaps in capacity and resources should be assessed and efforts to build this capacity should be made part of the CIP execution process. The “[Track20 Rapid Assessment Tool](#)” can be used to assess capacity for recording and reporting data analysis and use of FP indicator performance information, and can provide a basis for capacity building efforts in this area.

REFERENCES

- Beer M, Eisenstat RA. The silent killers of strategy implementation and learning. *Sloan Management Review*. 2000; 41 (4): 29-40.
- Becher JD. Operational alignment: Bridging the gap between strategy and execution. *Business Performance Management*. 2005; 3 (1): 11-16.
- Bhuyan A, Jorgensen A, Sharma S. Taking the pulse of policy: The policy implementation assessment tool. Washington, DC: Futures Group, Health Policy Initiative, Task Order 1; 2010. Available from: http://futuresgroup.com/files/publications/Taking_the_Pulse_of_Policy.pdf
- Brinkerhoff D. Accountability and health systems: Overview, framework, and strategies. Bethesda, MD: The Partners for Health Reformplus Project, Abt Associates Inc.; 2003.
- Canoutas E, Hart L, Zan T. Eight strategies for research to practice. Research Triangle Park, NC: FHI 360; 2012. Available from: <http://www.fhi360.org/sites/default/files/media/documents/eight-strategies-for-research-to-practice.pdf>
- Chetty T. The drivers and inhibitors of strategy execution. Pretoria, South Africa: University of Pretoria; 2011. Available from: <http://upetd.up.ac.za/thesis/available/etd-04042011-144401/unrestricted/dissertation.pdf>
- Engaging innovative advocates as public health champions. Research Triangle Park, NC: FHI; 2010. Available from: <http://www.fhi360.org/sites/default/files/media/documents/engaging-innovative-advocates-as-public-health-champions.pdf>
- Kaplan RS, Norton DP. The execution premium: Linking strategy to operations for competitive advantage. Boston: HBS Press; 2008.
- Lasway C, Madsen EL, Maiga M. Translating FP CIPs into action: The case of Senegal and Tanzania. Presentation at the CIP Experts Meeting, FP2020; 2014.
- Hrebiniak LG. Making strategy work: Leading effective execution and change. 2nd ed. Upper Saddle River, NJ: FT Press; 2013.
- Li Y, Guohui S, Eppler MJ. Making strategy work: A literature review on the factors influencing strategy implementation. In: Mazzola P, Kellermanns FW, editors. Handbook of research on strategy process. Cheltenham, UK: Edward Elgar Publishing Limited; 2010.
- Matta NE, Ashkenas RN. Why good projects fail anyway. *Harvard Business Review*. 2003; 81 (9): 109-114.
- Rozner S. Developing and using key performance indicators: A toolkit for health sector managers. Bethesda, MD: Health Finance & Governance Project, Abt Associates Inc.; 2013. Available from: <https://www.hfgproject.org/wp-content/uploads/2014/10/03-Developing-Key-Performance-Indicators.pdf>
- U.S. Government Interagency Paper on Country Ownership. U.S. Government: Global Health Initiative; 2012. Available from: <http://www.ghi.gov/principles/docs/ownershipInteragencyPaper.pdf>
- Zulu Eliya, Murunga V, Oronje RN, Zulu EM. Africa on the move! The role of political will and community in improving access to family planning in Africa. Washington, DC: Wilson Center; 2012. Available from: <http://www.wilsoncenter.org/sites/default/files/AFIDEP.pdf>

Appendix 1

Relationship Between Key Elements and CIP Phases



Appendix 2

The CIP Execution Checklist

Purpose: This checklist is intended to facilitate self-assessment and reflection regarding the factors that facilitate execution of the CIP. It also provides a quick reference guide of issues to consider during the execution phase. It is based on the four key elements for CIP execution framework.

Intended users: This checklist can be used by the CIP task team involved in the development phase of the CIP, to prepare and plan for execution. It can be also be used by the institution assigned to steward the CIP and/or the FPTWG to assess whether key elements are put in place to facilitate implementation.

How to use: Ideally, this checklist should be used in a group setting where members can provide individual input, then the group can tally and debate results and discuss actions needed. Any criteria receiving a majority of “needs improvement” ratings may merit closer examination and/or a discussion among all members. A facilitator can assist in moderating the discussion and helping to arrive at decisions about necessary action.

Criteria	Works Well	Needs Improvement	Absent	Action Needed
Key 1: Foster Country Ownership				
<ul style="list-style-type: none"> There is active involvement of a broad range of stakeholders contributing to specific roles in CIP execution. 				
<ul style="list-style-type: none"> After the official launch, the CIP has been communicated and disseminated to a broad range of stakeholders at various levels (including subnational levels), using different communication channels. 				
<ul style="list-style-type: none"> Stakeholders share a common vision in support of the CIP as the primary vehicle to guide action towards achieving the FP goal. 				
<ul style="list-style-type: none"> Stakeholders identify with a set of common principles and/or values (implicit or explicit) that guide decision-making, resource allocation, and implementation of activities. 				
<ul style="list-style-type: none"> Champions are engaged to drive the CIP forward into execution. 				
<ul style="list-style-type: none"> Stakeholders share responsibility for actively advocating on behalf of the country and/or partners to gain political visibility, support, and resources to execute the CIP. 				

APPENDIX 2 — The CIP Execution Checklist (continued)

Criteria	Works Well	Needs Improvement	Absent	Action Needed
KEY 2: Set up and implement a governance and coordination framework				
<ul style="list-style-type: none"> • Clear accountability roles are assigned to a specific government institution. 				
<ul style="list-style-type: none"> • A specific division/department within the assigned government institution is accountable for the CIP, and a focal point person is designated a leadership/oversight role for the CIP. 				
<ul style="list-style-type: none"> • Other government personnel are also assigned to CIP execution (for example, leading different technical areas or functional areas such as monitoring, resource mobilization, etc.). 				
<ul style="list-style-type: none"> • The roles of different levels divisions/departments within and outside the assigned institution, deemed essential for plan execution are described in the CIP or other mechanisms, such as terms of reference or memoranda of understanding. 				
<ul style="list-style-type: none"> • The role of subnational leadership, and how they will be engaged in CIP execution, is clearly stipulated. 				
<ul style="list-style-type: none"> • The government makes public statements, policy decisions, and/or demonstrates action that openly declares its commitment to the CIP. 				
<ul style="list-style-type: none"> • There is a robust coordination mechanism recognizing national and subnational aspects of the system, where stakeholders participate regularly and effectively. 				
<ul style="list-style-type: none"> • Partners' roles and responsibilities are aligned to accomplish collective goals. 				
<ul style="list-style-type: none"> • The objectives of existing partner coordinating frameworks/platforms are aligned to further the goals of the CIP. 				
<ul style="list-style-type: none"> • There is a clear link between partner efforts/projects with the results the CIP intends to achieve. 				
<ul style="list-style-type: none"> • Concrete working relationships between government institutions are established. That is, the relationship has evolved from "knowledge" of respective roles in the CIP, to a "working" relationship with terms of reference defined. 				
<ul style="list-style-type: none"> • Advocacy agendas and efforts are coordinated, and work to further the goals of the CIP. 				
<ul style="list-style-type: none"> • Partners collaborate to improve efficiency for implementing activities. 				
<ul style="list-style-type: none"> • The assigned institution has the capacity and resources (financial, human, and technology) to effectively lead and manage the execution of the plan. 				

APPENDIX 2 — The CIP Execution Checklist (continued)

Criteria	Works Well	Needs Improvement	Absent	Action Needed
KEY 3: Mobilize and Manage Financial Resources				
<ul style="list-style-type: none"> An active and dedicated resource mobilization effort is in place, taking into account a broad funding base. 				
<ul style="list-style-type: none"> Mechanisms are in place to ascertain resource gaps on an annual basis, and prioritize activities based on the identified gaps. 				
<ul style="list-style-type: none"> Development partners actively coordinate with the government—and with one another—to align and harmonize resource allocation for CIP activities. 				
<ul style="list-style-type: none"> Development partners and government review and coordinate financing priorities. 				
<ul style="list-style-type: none"> Actual resource expenditures are tracked against resource requirements in the CIP. 				
<ul style="list-style-type: none"> Budget advocacy is conducted, and informed by resource and performance tracking efforts of the CIP. 				
KEY 4: Monitor Performance for Results				
<ul style="list-style-type: none"> An active, well-functioning, CIP performance monitoring system is in place. 				
<ul style="list-style-type: none"> Is there a time-bound, sequential activity roadmap? 				
<ul style="list-style-type: none"> Progress against the population-level FP goal is monitored on an annual basis. 				
<ul style="list-style-type: none"> Regular joint stakeholder progress review meetings are conducted, and decisions made for adjustments to activity implementation. 				
<ul style="list-style-type: none"> Senior leadership is regularly briefed on the progress of CIP execution. 				
<ul style="list-style-type: none"> Decisions to improve implementation performance are recorded, tracked and, if action is needed, are implemented; outcomes of the decisions are also communicated to stakeholders. 				
<ul style="list-style-type: none"> There is local capacity and resources (financial, human, technology) to effectively monitor the execution of the plan. In circumstances where these are lacking, efforts are in place to strengthen capacity. 				

Appendix 3

Sample Dissemination Matrix

Audience	Dissemination Objective	Activity	Communication Materials	Timeline			
				Jan	Feb	Mar	Apr
Development partners	To understand the CIP and resource implications	Attend donor partner group meeting and present on the CIP	Presentation	X			
District health management	To understand the CIP, resource implications, and roles	Convene regional meetings and present the CIP Support district teams to develop action plans for their respective districts	Presentation Brochures	X	X		
Ministry of Education	To understand the CIP, roles, and collaboration	Visit the Ministry of Education and present the CIP	Presentation		X		
Ministry of Planning/ Ministry of Finance	To understand the CIP, roles, and collaboration	Visit the Ministries, and present the CIP	Presentation Brochures	X			
Private sector	To understand the CIP, resource implications, roles, and collaboration	Convene meetings and present the CIP	Presentation Brochures		X		

Appendix 4

Sample Joint Annual Work Plan

(Adapted from Tanzania Annual Work Plan Template)

CIP RESULTS, YEAR 1, 2013-2014				ANNUAL WORK PLAN, YEAR 1, 2013-2014				IMPLEMENTATION GAPS	
Outcome/Outputs	Intervention Activities	Annual Performance Target, YR 1	Annual Budget Estimate	Responsible Organization	Activity Description	Geographical Coverage (region)	Planned Resources	Performance Gap ⁴	Resource Gap (over/under) ⁵
Outcome 1: Coverage of youth-friendly services at facility and community levels is increased									
1a: 750 providers sensitized and trained on youth-friendly services	1ai) Update and disseminate the adolescent guidelines and policies	ASRH Guidelines developed and disseminated	\$45,000	PAX	Review/revise & disseminate ASRH guidelines	National	\$35,000	None	10,000
	1aii) Update 75 FP trainers on the key strategies for youth-friendly services (YFS) and peer education	40 trainers trained	\$125,000	PAX, EGT	Train 15 FP trainers on YFS	National	\$75,000	25	(45,000)
	1aiii) Train 750 facility-based providers in the provision of YFS, including addressing barriers to provision of services to youth	150 providers trained on YFS	\$240,078	JKB	Train 30 providers on YFS	Iringa	\$74,000	74	(\$76,078)
FAM				Train 46 providers trained	Mara	\$90,000			
1b: 2,000 peer educators recruited, trained, and supported to provide FP information among their peers	Recruit and orient 2,000 peer educators in promoting use of FP by youths in communities	400 peer educators recruited and trained	\$300,675	PAX	Recruit and train 200 peer educators	Kigoma, Tabora	\$175,000	200	(\$125,675)
2a: A communications strategy targeting young people is developed and implemented	Meeting to determine TOR for the consultant who will develop the communications strategy	Communication strategy developed, printed, and disseminated		JKB	Communication strategy developed and printed	National	\$0	Dissemination	0

4 Performance Gap = Target to be achieved in planned activity – annual performance target

5 Resource Gap = Planned resources for activity – annual budget estimate for activity