

Monitoring and Evaluation Systems Assessment Guide

VERSION 1.0

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1.0 Introduction

A program or project-level monitoring and evaluation (M&E) system organizes the collection, analysis, dissemination, and use of strategic information (SI) to measure achievements against objectives, benchmarks, and targets to inform course corrections as well as assess the impact of the interventions. FHI 360 recognizes the importance of robust M&E systems in both accountability for funds spent and facilitating program/project success and learning through the development of evidence-based projects. Our extensive experience guiding the development of these systems in health and development programs had led to the development of this Monitoring and Evaluation Systems Assessment Guide and Monitoring and Systems Assessment Tool (M&ESAT). The tool is to be used to assess compliance with the minimum standards set for project M&E systems. It includes standards for assessing the quality of a program/project M&E system using a participatory process and developing interventions for system strengthening. This tool seeks to guide teams to conduct a comprehensive assessment of their M&E systems to identify gaps and develop plans for strengthening their M&E system to ensure availability of human capacity, financial resources, infrastructure, equipment, and supplies to support the timely production of high-quality strategic information. The process of implementing this tool also provides a valuable mentoring and capacity-building opportunity between experienced technical assistance (TA) providers and program/project-level M&E teams, while generating metrics that provide a picture of strengths and weaknesses. This tool can also be used to assess and support M&E system strengthening for local community-based organizations (CBOs) and implementing partners that are supported by FHI 360. While the tool is designed to be highly participatory, with scores representing consensus from the program/project counterparts, each standard has a means of verification intended to enhance objectivity and validity of the findings.

2.0 Objectives of the M&E System Assessment Guide and Tool

The goal is to provide a systematic approach to strengthen the quality of M&E systems at FHI 360 offices and at local implementing partners.

Specifically, the tool has been designed to:

- Provide a comprehensive overview of the functionality, effectiveness, strengths, and weaknesses of a program/project/partner M&E system
- Guide the development of specific quality improvement plans to address gaps and strengthen M&E systems
- Ensure that M&E systems at program/project/partners are aligned with national, regional, and global levels
- Build capacity in M&E systems analysis and improvement and implementation at FHI 360 and its partners
- Identify human resource and capacity-related needs for a well-functioning M&E system

3.0 How to Use the Tool

The M&ESAT was developed for programs/projects to critically examine their existing M&E systems, identify areas performing well and critical gaps, and develop a quality improvement plan to maintain strengths and overcome weaknesses. Furthermore, repeated measurements

using this tool can help document improvements in the M&E system over time. This tool can also be used at start-up to document compliance with the minimum standards required for a functional M&E system. It can be used in M&E training, as technical guidance, or to identify needs for technical assistance and capacity-building activities. Programs/projects can choose to use either all or some of the modules in the tool based on the structure and stage of development of their system. As such, we recommend that this tool be used at the start-up of a newly awarded program/project to establish a baseline and repeated annually or biannually throughout the life of the program/project thereafter—when the system should be fully established—to continually assess and inform functionality and effectiveness.

While the tool was designed with programs/projects/partners delivering services in mind, it can be adapted for use in government settings and for smaller projects/sites. It is very flexible; only the standards that are applicable to the program/project being assessed need to be scored.

4.0 Organization of the Tool

This tool is designed around the M&E systems standards defined by FHI 360. It is divided into 12 domains of a functional M&E system as defined by FHI 360. A series of key questions are used to assess whether the benchmarks/standards are in conformity with the minimum standards for that domain. While most, if not all, domains are applicable to all program/projects, some standards will be project/program specific. The tool is designed for use by FHI 360 HIV projects/programs as well as implementing partners. Below is a brief explanation of what each domain attempts to answer as defined by the standards:

Table 1. M&E System Standards

Domain	Domain Name	Key Questions
1	Human Resources Capacity and Management	Is M&E adequately resourced? Is capacity building for staff and partners standardized? Have staff, including partners, received training and mentoring?
2	M&E Plans and Standard Operating Procedures	Is there adequate documentation for all aspects of the M&E system? Are documentation roles clearly outlined?
3	Data Collection and Management	Is there a well-functioning data collection and management system for routine data that employs standardized forms and aggregation procedures for both paper-based and electronic data including individual-level data systems?
4	Data Safety Security	Are processes and systems in place to ensure security of program data from collection to storage and retrieval?
5	Data Systems	Are there processes and systems to ensure appropriate data systems are in place, functional, and maintained?
6	Data Quality Assurance	Are processes and systems in place to generate quality data from various sources? Are results reported accurately and can they be substantiated?
7	Data Analysis Use and Feedback	Is there a system to ensure data is well analyzed and used for program management and improvement?
8	Learning	Are systems in place to document lessons learned and facilitate learning at different levels?
9	Evaluation	Is there adequate planning, implementation, and use of evaluations?
10	M&E Leadership	Is there adequate planning and capacity to demonstrate leadership through forums, conferences, and publications?
11	M&E System Assessment	Is there a system to periodically assess functionality of the M&E system as needed?
12	Budgeting	Is there a standard budget to support the M&E work plan?

4.1 Scoring

The overall score is determined by the number of questions within each of the 12 domains. Each domain has a subtotal score based on the number of questions, with M&E plans and standard operating procedures, data safety and security, data quality assurance, and data analysis use and feedback domains comprising 68% of the overall score. This reflects the high importance attached to these elements and, specifically, to data quality and use, and the need for having strong M&E systems to support all program functions. Scores for each of the 12 domains are entered/generated at the end of each section to complete a domain and rate if the domain needs urgent remediation or not. The comment section is used to provide additional information that may provide clarification or help inform remediation plans. This also provides insights as to the cause of the problem since the scores simply highlight whether a problem exists but not why it does. It is also an opportunity to clarify the high scores.

Final Score: The final score is a total of the subtotal scores for all 12 domains. The overall percentage for each site/organization is used for categorizing and prioritizing programs/projects in need of remediation actions and technical assistance. The scores are categorized as follows:

Color (% Range)	Description	Follow-up Action
Green (95%–100%)	Meets standards	Repeat assessment after 12 months. Monitor progress every 6 months.
Yellow (80%–94%)	Needs improvement	Repeat assessment after 12 months. Monitor progress quarterly.
Red (Less than 80%)	Needs urgent remediation	Repeat assessment after 6 months. Monitor progress monthly.

Following the assessment, recommendations are generated to address the gaps and the needed frequency of assessments to monitor progress. A participatory prioritization exercise is done to agree on priority recommendations that will form the basis for a quality improvement plan.

4.2 Methodology

This tool is a participatory self-assessment, using a standards-based tool. For each standard, a means of verification is suggested, which provides a method for objectively verifying the extent to which each standard is met. This verification is important for grounding the results in evidence and reducing desirability bias from the self-assessment process. Detailed steps for implementing the tool are described below.

This tool is also designed to complement FHI 360's Data Verification and Improvement Tool (DVIT) August 2021 to guide the data verification component.

4.3 Assessment Team

An assessment team comprising program/project/implementing partner M&E staff and strategic information (SI) backstop or other implementing partner (IP) staff as applicable should be formed. The number of participating project staff will depend on the size and organization of the M&E team but critical to this process is the SI/M&E Advisor, Data

Manager, or Health Management Information System (HMIS) Manager or any other designated technical staff who is familiar with the M&E system of the program/project. The scope of work for the assessment team includes:

1. Inform the program/projects to be assessed at least two weeks prior to the exercise to ensure the availability of documents and personnel required for the exercise.
2. Conduct an introductory meeting with program/staff to highlight the objectives of the assessment and expectations.
3. Review previous assessment reports and improvement action plans.
4. Interview staff involved in the M&E system implementation including data collection, compilation, analysis, and reporting to understand how the system functions.
5. Record scores and complete the M&ESAT including comment sections where appropriate. In the process, the team will review availability of all verifiable documents and observe any processes as expected. Explanations for any observations will be sought for and recorded in the comments section.
6. Calculate and record the program/project overall score and categorization.
7. Develop a draft action plan with the project/program team.

5.0 How to Complete the Tool

To complete the tool, most standards rely on some form of documentation and/or interview with key staff members at programs/projects and implementing partners, as well as observations. Scores are allocated for performance of the system against each identified standard on a scale from 0–2, where:

0 = standard is not met

1 = standard is partially met

2 = standard is fully met

N/A = standard is not applicable, or not available for review purposes

The M&ESAT is included in *Appendix I* for reference. After completion of this assessment, the information in this tool will have to be updated in the online version or it could be completed online.

6.0 Frequency of Implementation

For new programs/projects, this tool should first be implemented at start-up to establish a baseline and then annually to assess progress with implementation of the action plan. In instances where severe deficiencies are identified, the assessment can be conducted more frequently depending on the size of the gap identified. Existing programs with no baseline assessment and at least two years until the end of the program/project should implement the tool at the earliest opportunity and follow up as needed. Assessment results should be tracked over time to demonstrate progress in improving the M&E system over the life of the project.

7.0 Improvement of Action Plans

The assessment team should work with the program/project/partner to develop an improvement action plan (see Appendix I for template) to ensure identified gaps are clearly articulated and a work plan is developed to address them. The improvement planning process should determine areas that have priority, based on performance for each domain. The work plan should include provisions to monitor implementation of the corrective actions.

8.0 After the Assessment

Feedback on findings of the M&E system assessment will be provided to the M&E team and program/project management with recommendations, and an action plan on how to address challenges identified, and timelines. The SI headquarters (HQ) backstop will provide regular follow-up to ensure plans are followed through to logical conclusion.

9.0 Report Writing

Following completion of the M&E system assessment, the assessment team will provide a detailed written report of the exercise to program/project management within two weeks. The report will detail assessment methodologies, findings, recommendations, action plans, and limitations/challenges of the exercise. Relevant data summarization/visualization including infographics, charts, maps, and tables will be used to summarize the findings as appropriate.

Appendix I: FHI 360 M&E Systems Assessment Tool

Name of country/Program/ Project Name		
Date of assessment		
Program Lead: <i>[Name and position of staff]</i>		Other staff members: <i>[Name and position of staff interviewed]</i>
External Lead: <i>[Name and position of staff]</i>		Other external team members
Level of data collection <i>[Program/IP/Service delivery point, etc.]</i>		

Methodology and Scoring: This tool is a facilitated self-assessment, using a standards-based tool. For each standard, a means of verification is suggested that provides a method for objectively verifying the extent to which it is met. **0=does not meet, 1=partially meets, 2=fully meets, N/A=standard is not applicable, or not available for review purposes.** Ask to verify all documentation.

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
A. Human Resources Capacity and Management			
Does your program have adequate and dedicated staff for monitoring and evaluation (M&E advisor, M&E officer, database manager, health informatics officer, and at least one data entry clerk (DEC) or equivalent)? <i>NB: For care and treatment sites, at least one DEC for those with more than 1,000 patients currently on antiretroviral therapy (ART).</i>	Discussion, review of M&E structure and organogram		
Are there documented job descriptions for all staff in the M&E team?	Discussion, review of M&E structure and job descriptions		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
Have all the relevant (M&E, implementing partner) staff received initial M&E training using a standard M&E curriculum?	Discussion, review of curriculum and training records		
Does the M&E lead visit all M&E team members for mentorship/technical support/supervision at least twice a year?	Discussion with partners, review supervision reports		
Subtotal Score:			<i>Maximum Score=8; Score < 6 (80%) is RED</i>
B. M&E Plans and Standard Operating Procedures (SOPs)			
Does the program have an up-to-date (annual updates) Monitoring Evaluation and Learning Plan (MELP)/ Performance Monitoring Plan (PMP) that includes a graphic Results Framework or Theory of Change outlining how project/program goals, intermediate results, and outcomes or outputs are linked?	Discussion, review of MELP/PMP		
Does the program set targets for key performance indicators to achieve every month and quarter for each intervention?	Discussion, review of MELP/PMP		
Does the MELP have a data flow chart that clearly demonstrates how data flows and is reviewed from implementation sites to reach program managers and donors/government?	Discussion, review of MELP/PMP		
Does the MELP have an organogram describing the organization of the M&E unit in relation to the overall project team?	Discussion, review of MELP/PMP		
Does the program have performance indicator reference sheets that include clear operational definitions consistent with U.S. President's Emergency Plan for AIDS Relief (PEPFAR) monitoring, evaluation, and reporting (MER) guidance and relevant national/global indicators (e.g., PEPFAR, Presidential Malaria Initiative (PMI), United Nations General Assembly Special Session (UNGASS, etc.)?)	Discussion, review of MELP/PMP		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
Does the M&E team understand PEPFAR indicators and PEPFAR type of support?	MER discussion		
Does the program have an up-to-date Data Quality Assessment (DQA) plan available (virtual and in-person, annually updated) with SOP and guidelines?	Discussion, review of DQA plan		
Has your program provided implementing partner(s)/sites with standard guidelines describing reporting requirements (what to report on, due dates, data sources, report recipients, etc.)?	Discussion, review of reporting guidelines		
Do you have a standard data collection tools and reporting template(s) across all implementing partner(s)/sites use?	Discussion, review of standard reporting tools		
Do you have written clear instructions/guidance on how to complete all data collection tools for implementing partners or service delivery points?	Discussion, review of tools for clear instructions and/or guidance		
Does your program allocate program targets up to facility- or service-site level?	Target division matrix		
Subtotal Score:			<i>Maximum Score=22; Score < 18 (80%) is RED</i>
C. Data Collection and Management			
Has your program included all required program indicators with required PEPFAR/USAID disaggregation in (manual and electronic) data collection tools?	Review of program data collection tools		
Has your program clearly defined the data sources and collection methods for each indicator including indicators earmarked for the national program (government)?	Review of reporting guidelines, manuals, and protocols		
Does the data collected on the source documents have sufficient precision/detail to measure the indicator(s)?	Review of program data collection tools		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
Do you have data management guidelines that cover both physical file storage/management and electronic data, if applicable, in place?	Review of data management guidelines, manuals		
Subtotal Score:			<i>Maximum Score=8; Score < 6 (80%) is RED</i>
D. Data Safety and Security			
Is there a filing protocol for physical records/registers with client-level personal information that is proper, and information is easily retrievable (where applicable)?	Review of filing SOP, discussions		
Are relevant personal data maintained according to national (preferable) or international confidentiality guidelines, including using unique alpha-numerical IDs (where applicable)?	Observations and records review		
Is there restricted access to personal identifiable information through providing (where applicable) lockable rooms/filing cabinets?	Observation and records review		
Is there restricted access to both the program database and any personal identifiable information through password-protected datasets/databases?	Observation and records review		
Is there a protocol for changing passwords when staff depart?	Observation and review		
Does a back-up system for electronic data exist and is it up to date?	Observation and review		
Are there protocols/guidelines for sharing data with other partners?	Observation and review		
Is there a list of individual(s) with rights to destroy data (e.g., in case of pending police raid)?	Observation and review		
Is there a protocol for safe data destruction of records?	Observation and review		
Have employees been trained in data confidentiality within the past year?	Observation and review		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
Are protocols in place to guide action in case of individuals who may have intentionally violated data confidentiality regulations?	Observation and review		
Subtotal Score:			<i>Maximum Score=22; Score < 18 (80%) is RED</i>
E. Data Systems			
Does your program have longitudinal individual-level data to track, verify, analyze, and present to program/technical teams at all levels, including HIV cascade data support, other program data support, and finances?	Discussion and review of database		
Does your program use an electronic aggregated database to collate individual-level data across the databases and for real-time monitoring?	Discussion and review of database		
Does your program implement a unique identifier code (UIC) to provide individual-level data and track individual beneficiaries along the HIV cascade?	Discussion and review of records		
Are training and support provided to the staff members on UIC generation, implementation, and use?	Discussion and training reports		
Subtotal Score:			<i>Maximum Score=8; Score < 6 (80%) is RED</i>
F. Data Quality Assurance			
Does your program have a system to ensure standard forms/tools are used consistently within and between partners/site levels?	Discussion and review of records		
Are definitions and interpretations for indicators uniformly understood and followed correctly (latest PEPFAR MER guidance)?	Discussion, review of guidance		
Is there a system to adjust for double counting at site level on a quarterly basis?	Discussion and review of records		
Is there a system in place to detect missing data?	Review of system		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
Are 100% of the sites visited at least once a year (where applicable) and more frequently for high-volume sites for data quality audits for key indicators?	Discussion and review of site visit reports		
Are the data quality problems clearly documented including how these problems have been resolved?	Discussion and review of records		
Is there a clear data reporting schedule that corresponds with donor-specified report periods and program needs?	Discussion and review of records		
Does the program have minimal transcription stages (manual transfer of data from one form to another) to limit transcription errors?	Discussion and review of records		
Are reports received within reporting time from the service sites/facility?	Discussion and review of records		
Are donor reports submitted on time as scheduled (DATIM, high frequency report [HFR], and quarterly or annual narrative reports)?	Discussion and review of records for evidence		
Does the program hold periodic sessions with all program staff to create awareness on data quality and integrity?	Review of records/minutes		
Subtotal Score:			<i>Maximum Score=22; Score < 18 (80%) is RED</i>
G. Data Analysis, Use, and Feedback			
Does the program conduct regular analysis including trends in performance indicators over time (e.g., real time, daily, weekly, monthly, or quarterly, or as may be required) and disaggregated by sex and/or age, location?	Discussion and review of records		
Does the program have a senior staff member (e.g., Program Manager) responsible for reviewing aggregated data prior to release of reports from M&E unit?	Discussion and review of records		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
Are there documented procedures to ensure regular (at least monthly) review of M&E data by program/project managers and/or chief of party, M&E staff, other technical staff, and partners?	Discussion and review of SOP, records		
Does your program document reasons for under- or over-performance (e.g., not achieving important targets)?	Discussion and review of SOP, records		
Is there evidence that performance issues (e.g., not meeting targets) are followed up with partners/others and documented?	Review of records		
Does your program hold at least one data review and interpretation meeting in a quarter at the national/program level involving managers and program/technical staff?	Discussion and review of SOP, records		
Does your program hold at least one data review and interpretation meeting in a month with local implementing partners/site level involving partner managers and program/technical staff?	Discussion and review of SOP, records		
Subtotal Score:			<i>Maximum Score=14; Score < 11 (80%) is RED</i>
H. Learning			
Does your program conduct secondary analysis?	Discussion and review of records		
Does your program document, present the lessons learned, and facilitate the exchange of information among partners and stakeholders?	Discussion and review of records		
Subtotal Score:			<i>Maximum Score=4; Score < 2 (80%) is RED</i>
I. Evaluation			
Does your program conduct mapping, collect and review existing size estimates and mapping data for target populations?	Review of records		

Key Questions (Standards)	Means of Verification	Score (0, 1, 2, NA)	Observations, rationale for rating and recommendations
When applicable, does your program conduct process evaluation or mid-term review, outcome, or impact evaluation in line with implementation phase and donor requirements?	Review of records		
Does your program facilitate the use of evaluation/mapping data for programming?	Discussion and review of records		
Subtotal Score:			<i>Maximum Score=6; Score < 5 (80%) is RED</i>
J. M&E Leadership			
Does your program participate in national/state/province M&E Technical Working Groups (TWGs) or other fora accordingly?	Discussion		
Has your program presented any components of M&E system as abstracts, posters, or publications at national conferences or other meetings at least once in the past two years?	Records review		
Subtotal Score:			<i>Maximum Score=4; Score < 2 (80%) is RED</i>
K. M&E System Assessment			
Does your program conduct an internal M&E system assessment for program and implementing partners (where applicable) in initial year of program and annually, or as needed, thereafter?	Discussion and records review		
Subtotal Score:			<i>Maximum Score=2; Score < 2 (80%) is RED</i>
L. Budgeting			
Is the monitoring and evaluation (M&E) budget between 5%–10% of the overall program budget?	Discussion and review of budget		
Subtotal Score:			<i>Maximum Score=2; Score < 2 (80%) is RED</i>
Total Score		_____/122	_____%

Appendix II: Template for Improvement Action Plan

	Identified gaps	Description of action point	Responsible(s)	Timeline	Technical assistance needs
1					
2					
3					
4					
5					
6					
7					
8					
Overall score for systems assessment					

