Module 4

Monitoring and Evaluation and Management Information Systems (MIS)

Pathfinder International
MIS, Monitoring & Evaluation

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Introduction

A manager's effectiveness is largely dependent on the existence of an equally effective management information system MIS. An MIS provides information on a variety of different organizational functions, allowing a manager to plan, monitor, and evaluate operations and performance. MIS outputs also enable a manager to make strategic decisions and intelligent choices that shape an organization's future vision and mission.

Monitoring and evaluation are ‘twin sisters’. They assist management in knowing whether program objectives are being achieved, to what extent there is need for mid-course correction to address emerging problems, in the environment, or and assess employees' efficiency, and maintenance of standards. Both examine indicators, targets, criteria and standards. The meanings, and definitions of monitoring and evaluation are often contentious because of the two activities' substantial overlap.

Before you begin...

Some of the questions you might ask about your organization's MIS capability and its monitoring and evaluation capacity are:

- Does our organization’s MIS collect all the data we need, and do we use all the data it collects?
- Is our MIS understood by staff at all levels, or is it complicated with many data elements, variables, formats, and procedures?
- Does our MIS enable us to link program and financial information?
- How often do we as a team review data and use it as a basis for planning, resource allocation, problem-solving, program monitoring, and other decision-making?
- Do we use data to provide feedback to all levels of the organization?
- Can we create “user-friendly” presentations of our data to share information with others?
- How often do we monitor, and what do we do with the information and insights we gather?
- Do we use tools or instruments such as checklists systematically during monitoring?
- How do we use results of assessments and evaluations?
Monitoring and Evaluation: What’s the Difference?

Monitoring is a routine checking of the day-to-day program activities of an organization to determine whether or not activities are being performed on schedule, resources are being utilised efficiently, and short-term targets for outputs are being achieved in accordance with project workplans. Evaluation, on the other hand, is the process of gathering and analysing information which assists management in comparing project accomplishments with pre-determined objectives and to know whether or not these objectives were achieved. An evaluation also yields other critical information about impact, cost-effectiveness, and future potential (see Figure 1 below). Both monitoring and evaluation make use of information gathered to assess the status of programs at any given time, and serve as a basis for reviewing and revising program plans, making sound decisions, and meeting donor funding requirements. Some argue that "all evaluation is monitoring ..." However, in operational terms, there are some important distinctions between the two activities.

Figure 1 illustrates how monitoring and evaluation converge are interdependent; in what ways they are separate; and how an MIS fuels both activities.

Figure 1: Relationship between program monitoring and evaluation and the MIS
Exercise... Comparing Monitoring and Evaluation

You can use this exercise with your staff. Draw a line down the middle of a piece of paper. On the left, list all the characteristics of “monitoring” you can think of. On the right, do the same for “evaluation.” After making your list, compare it with Table 1. Do you and your team fully understand some of the differences between monitoring and evaluation? Have you uncovered any creative uses for either, or both, activities? Do any of the components or differences reveal weaknesses in your organization’s approach? Brainstorm about how these two activities could be improved or make a more consistent, substantial contribution to your organization.

Table 1: Some differences between monitoring and evaluation

<table>
<thead>
<tr>
<th>MONITORING</th>
<th>EVALUATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>➔ Done routinely, continuously, as part of day-to-day management</td>
<td>➔ Done periodically, e.g., annually, mid-term, or at the end of a project.</td>
</tr>
<tr>
<td>➔ Provides detailed information on activities.</td>
<td>➔ Provides summarized and analyzed information.</td>
</tr>
<tr>
<td>➔ Used to make management decisions: identify, analyse and resolve problems.</td>
<td>➔ Used to determine how well a completed program is meeting or has met its objectives.</td>
</tr>
<tr>
<td>➔ Reinforces team work, interaction.</td>
<td>➔ Used to assess program’s future prospects.</td>
</tr>
</tbody>
</table>

**MONITORING** helps determine:

a. **HOW** things are getting done (work performance re: workplan).

b. **WHO** is doing the work (staff performance re individual workplan, job descriptions, volunteer or community inputs, etc.)

c. **WHAT** materials and funds are being used (availability and use of resources, initial list of activities, technical inputs).

d. **WHEN** activities are carried out and completed (actual time re: schedules in project plan).

**EVALUATION** helps determine:

a. Whether **ACCOMPLISHMENTS** have fulfilled original objectives.

b. Which **ACTIVITIES** helped to meet the objectives.

c. The **IMPACT** of the project.

d. What **RESOURCES** were used wisely and efficiently (cost effectiveness).

e. How the **COMMUNITY** perceives the project and whether they want to sustain it.

f. Whether scheduled activities were completed **IN SEQUENCE and ON TIME**.
Process points...

**Types and Levels of Monitoring and Evaluation Activities**

- **Needs Assessment/Situational Analysis/Baseline Survey** - Conducted before project start-up as part of planning to collect and analyze data on the organization, problem identification, and for project proposals.
- **Continuous Assessment** - A process by which an organization and its staff select issues that will be regularly reviewed and methodologies for doing so (e.g., checklists, meetings, reports, data analyses).
- **Formative or Process Evaluation** - Conducted during project implementation to assess improvements in current project activities (e.g., assessment of quarterly service delivery statistics).
- **Quantitative Evaluation** - Focuses on providing numeric indicators expressed as percentages, ratios, or ranges used for comparative analyses.
- **Qualitative Evaluation** - Generally focuses on non-numeric indicators to show enhanced quality, skills or efficiency.
- **Mid-term Evaluation** - Focuses on program management and planning issues (progress assessment, efficiency, and redesign possibilities).
- **Summative or Terminal Evaluation** - Conducted at the end of a project to determine to what extent program objectives were achieved, cost-effectiveness, potential for sustainability.
- **Impact Evaluation** - Conducted a year or more after project completion to assess benefits to project beneficiaries resulting from the project implemented.
- **Internal versus External Evaluation** - Internal is performed by someone inside the organization while external is performed by someone from outside the organization, including consultants and donors. In practice, an evaluation team may consist of both internal and external members.
**Food for thought...Some monitoring and evaluation definitions**

<table>
<thead>
<tr>
<th>Inputs:</th>
<th>Resources used to carry out project activities (e.g., funds, staff hired)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Process:</td>
<td>Activities and operations (e.g., training courses, services introduced).</td>
</tr>
<tr>
<td>Outputs:</td>
<td>Are the measurable items produced by a project (e.g., number of people trained by job category, IEC campaigns held).</td>
</tr>
<tr>
<td>Results:</td>
<td>Immediate or short-term consequences of a program or project (e.g., increases in % of adolescent using condoms, level of awareness).</td>
</tr>
<tr>
<td>Impact:</td>
<td>Long-term consequences of a program or project (e.g., reduction in infant mortality rate, increase in number of research affiliates, behaviour modification).</td>
</tr>
</tbody>
</table>

**What are Indicators?**

Indicators are descriptions or statements of what is monitored or evaluated to give evidence of project tasks and objectives achievement. Program teams must make some decisions about indicators at program inception. Indicators should not be overwhelming: choose a manageable number that can be easily monitored and used to compare expected results with actual results. **There are no "required", systematic, or "uniform" indicators.** Managers and planning teams should make rational choices about information that is needed and most useful. Good reasons for selection are usually clear from program design. That is, an adolescent program **needs** to know how many in- and out-of-school youth are using program facilities so that program approaches or strategies can be more focused. A reproductive health program **needs** to know how many new users by method are coming for services, or how many STD clients are seen, so that it can document method mix, order commodities, train staff, and identify on-going needs. Indicators must be widely understood and incorporated into program monitoring and evaluation methodologies and activities (e.g. checklists, log frames, MIS program proposals, report formats).
Good indicators should be:

- specific (magnitude and time)
- independent (measuring only one factor)
- factual (not subject to opinion or impression)
- valid (reflecting project or program factors and not external factors)
- based on obtainable data

Exercise...

Organizing your Indicators

Given the definitions under "Food for Thought," prepare a grid to organize your indicators [by program or project]. If your organization only manages one activity, prepare indicators for the whole organization. Here is a sample grid:

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Process</th>
<th>Outputs</th>
<th>Result</th>
<th>Impact</th>
</tr>
</thead>
</table>

Remember...

- Indicators can be quantitative or qualitative.
- Indicators should be SMART (*Specific, Measurable, Appropriate, Realistic, Time-bound*).
- Indicators should be clearly related to program design (i.e., not too esoteric, generic, or ill-defined).
- Indicators should provide useful, timely information.
Methods and Tools for Monitoring and Evaluation:

Another "tool" is systematic, scheduled monitoring of activities, issue areas, community involvement, and resource mobilization or allocation. Monitoring supports supervision and gives vital clues about issues requiring attention or action. Most staff are required to prepare individual, or team, work plans. These plans should indicate the frequency and focus of monitoring. A next step might be development of specific schedules for monitoring. These schedules are handy: they help managers know when resources are needed to support on-site monitoring (e.g. vehicles, transportation, per diem), frequency of monitoring, coverage (i.e., are there gaps in coverage because some facilities, locations or activities are not regularly visited?), opportunities for "team" monitoring or supervision, and deadlines for reports or feedback. Managers should regularly review schedules with staff to see if they are being followed and are providing useful oversight, are unrealistic and should be revised.

There are many different methods and tools (instruments) that managers can use to monitor and evaluate programs and projects.

<table>
<thead>
<tr>
<th>Methods</th>
<th>Tools (Instruments)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interviews, surveys</td>
<td>Questionnaires</td>
</tr>
<tr>
<td>Focus group discussion</td>
<td>Discussion guide</td>
</tr>
<tr>
<td>Observation</td>
<td>Checklists</td>
</tr>
<tr>
<td>Content analysis</td>
<td>Review of records, reports,</td>
</tr>
<tr>
<td>Physical check</td>
<td>workplans, schedules,</td>
</tr>
<tr>
<td></td>
<td>written materials, etc.</td>
</tr>
</tbody>
</table>

**Bright Idea...**

- Prepare quarterly monitor schedules (see Figure 2).
- Consolidate staff schedules into a master schedule for your use as a manager.
Steps in Planning and Conducting Monitoring and Evaluation:

As previously discussed, monitoring and evaluation are “twin”, interrelated activities; they both focus on indicators and involve data collection and analysis. Similarly, the steps followed when designing the two activities are similar. Here are the common steps a manager should take when planning and executing them.

1. Review and revise project objectives by examining reports and project documents.
2. Define purpose or scope of the monitoring and evaluation.
3. Select indicators and criteria.
4. Decide on data collecting and analysis methods, and design or adapt existing tools and instruments for use.
5. Select locations, schedule logistics, and determine budget.
6. Collect data. In case of evaluation, pre-test instruments before embarking on data collection, if project resources allow.
7. Analyze data and prepare reports.
8. Make decisions based on monitoring or evaluation findings and take appropriate actions.
9. Disseminate reports to all operational levels and funding agencies.
10. Prepare a workplan for follow-up actions.
Lengthy reports have no place in evaluation reporting. Busy managers and decision makers want quick access to needed information for making decisions. Reports should:

- Be limited to what the decision maker needs to know.
- Allow for easy comparison of achievements with targets.
- Combine related indicators.
- Include graphics (graphs, tables, charts, etc) whenever possible.

Reports should include:

- Table of contents with the major headings contained in the body of the report.
- Executive Summary (1-2 pages).
- Evaluation instruments.

*Note: The Table of Contents and Executive Summary must reflect, and be integrated with, other parts of the report.*

Reports should follow a logical sequence:

1) Project description
2) Purpose of the evaluation
3) Evaluation methodologies
4) Findings or results
5) Recommendations
6) Appendices
Tips for Improving Monitoring and Evaluation of Your Project

- Include monitoring and evaluation plans in your initial project proposals, and make sure these activities are properly budgeted for.
- Include all essential categories/aspects of programme that will assure achievement of project goals and objectives in your evaluation plan.
- Select appropriate indicators and set criteria (standards) for all operational objectives.
- Ensure you have an effective management information system in place as a basis for performing effective planning, monitoring and evaluation of your organization’s operations and performance.
- Ensure timely implementation of all monitoring and evaluation activities in your implementation plans.
- Take decisions and appropriate actions resulting from recommendations of monitoring and evaluation reports.
- Follow up on actions taken and provide appropriate feedback both upwards and downwards.
- Ensure you comply completely with the funding agency’s requirements for project monitoring and evaluation.
Management Information Systems (MIS)

Managers are hired to make effective decisions leading to efficient performance of activities and optimal achievement of an organization’s output, goals, and mission. Managers rely heavily on both formal channels of communication and informal channels in their organizations as sources of data used to arrive at these decisions. Functionally, an effective management information system supports monitoring, supervision, evaluation, operations research, resource allocation, and performance appraisals. A manager must, for sound decision-making, always depend on two basic core activities: data collection and data analysis. Moreover, the effective manager works with his or her staff to ensure that each staff person understands why certain data are being collected; how these data should be analyzed to support operations; when analyses should trigger other actions; and who should regularly receive and review data and analyses.

After reviewing this section of the module, the manager will be able to:

- Design a basic integrated management information system.
- Use data to monitor performance, assess impact, manage operations and present results to others.
- Undertake monitoring and simple evaluations of activities.

**Remember ...**

**ALWAYS:** Collect data you need and will use.

**NEVER:** Collect data just for the sake of collecting it.

**What Is an MIS?**

An MIS is a set of processes or a system designed by organizations to collect, tabulate, and interpret data and information in an organized manner to provide a broad picture of the services a program renders and to guide management decisions. Generally, an MIS has prescribed forms used for recording or collecting information. These forms should be sent in a timely fashion to the appropriate level or body within the organization for further processing, analysis, and feedback.

The manager should know the kinds of data generated as a result of the different services rendered by the organization. For instance an NGO offering reproductive or other health services will collect different data from an organization specializing in democratization and governance or the environment. In any case, managers and their staff should meet together to outline what information they absolutely need to know to function efficiently; these are the data that should be collected. Lists of data elements or variables collected should be periodically reviewed and updated.
Tools to Use...

Sources for Decision-Making, Monitoring, and Evaluation

- Situation analysis and needs assessments
- Baseline surveys
- Training needs assessments
- Service statistics and training records
- Monthly, quarterly, and annual reports
- Regular program document reviews (e.g., proposals, budgets, reports, studies)
- Interviews with staff and community members
- Focus group discussions
- Exit interviews
- Surveillance site reports
- Inventories
- Evaluation reports
- Annual work plans
- Strategic, sustainability, business, or marketing plans
- Observations
- Supervisory visit reports
- Self-assessments
- Special studies
- Census, Demographic and Health Surveys, Household Surveys
- Audience surveys and feedback
- Tracking studies

Process point...

Targets

Data are used to set organizational targets. These targets may fall into three categories:

- Monitoring targets - used to monitor the program
- Achievement targets - used to determine if a certain goal was reached
- Planning targets - milestones in designing programs or approaches (often expressed functionally, e.g., training targets or systems to be institutionalized)
Why is an MIS important?

**Remember...**

An MIS is an important framework for:
- Planning systematically and coordinating activities.
- Establishing databases on budgets, personnel, facilities and equipment.
- Providing guidance in choosing entry points for program interventions and establishing active partnerships with other organizations.
- Providing information on the status of the population served, such as its health status (i.e., defines surveillance levels).
- Guiding prioritizing by identifying major problems.
- Providing indicators for monitoring and evaluation of performance.
- Assessing the impact or effectiveness of services.
- Guiding the forecasting of
  - Commodity or service needs.
  - Constraints in service delivery.
  - Methods for improvement.

Designing an MIS

A manager is responsible for designing, or overseeing the design of, an NGO’s MIS. As stated above, a well-designed MIS provides vital and up-to-date information on operations and performance.

**Operational Information**

This information assesses how the project is functioning vis-a-vis objectives, schedules, and use of resources. Examples are:
- Workplan implementation (kind of activities, services, timing of activities, use of other resources).
- Costs and expenditures (expenses against budget).
- Staffing and supervision (knowledge, attitudes, skills, salaries, and performance).
- Logistics (inventories, ordering, condition of vehicles and other equipment).
An MIS can help a manager make decisions and monitor progress

Managing complex programs and multiple resources requires many carefully thought out steps. At each point, decisions must be made on the basis of available data. Moreover, once the program is under way, data for checking and analysis are required for effective monitoring and evaluation. Some programs will already have some of these data available. Where collection systems are lacking, they can and should be designed and implemented at all levels and locations.

The process can be illustrated like this:

Figure 3: Linkages among MIS, monitoring, and evaluation processes

An appropriate MIS is imperative for program managers to be able to monitor activities continuously, allowing them to direct resources where they will have the greatest impact.

Record-keeping and reporting formats should be simple, user-friendly, and set up to collect only essential information. They should be designed in collaboration with key players. Existing formats should be reviewed and redesigned to ensure their appropriateness to integrated service delivery, as well as their uniformity and comparability among project sub-elements, project objectives, components, sites, and cadres of service providers.

Service providers, supervisors, and managers should be trained to monitor more effectively, to collect and collate data, to interpret data, and to use findings in planning, implementation reviews, and management decision making. The service statistics system should be used not only to assess outputs and effects, but also to appraise staff and facility performance, set performance targets and assess performance against those targets, facilitate decision-making for optimal corrective action, and improve systematic planning. Such a system is at the heart of a sound monitoring and evaluation approach.

The objectives of the monitoring and evaluation system should focus on:

❑ Providing continuous information on the implementation of activities.
❑ Assessing how appropriately and adequately each programmatic component is being implemented, administered, and managed.
❑ Measuring the impact of integration (in both qualitative and quantitative terms).

**Using Data to Inform Your MIS: Conducting a Baseline Survey**

You won’t know how effective your programmatic efforts have been unless you know where you started. Ideally, baseline surveys and a site-based analyses should be conducted before services or programs are introduced. The information gained will be invaluable in the design of the service delivery system. The baseline survey should gather data on knowledge, attitudes, and practices among the target population and specific population groups.

The baseline survey should specifically derive indicators linked to the MIS, for a majority of the following:

❑ Existing knowledge, attitudes, and practices that may have an impact on the design of appropriate interventions
❑ Coverage of areas and specific target populations at specified service delivery points/catchment areas
❑ Health, economic, social, or political status of target group
❑ Proportion of at-risk populations or those in need of an organization’s particular services
❑ Patterns of health or service seeking behavior among target groups (e.g., contraceptive of STD/HIV-AIDS prevalence, FP method mix, number of women seeking antenatal care, number of persons seeking legal assistance, number of persons seeking counseling)
❑ Traditional, cultural, religious, or other factors affecting service delivery
❑ Levels of awareness or communication on key reproductive issues
❑ The extent of demand and unmet need for specific interventions
❑ Availability of appropriate supplies or services within the target area

If possible, a situation analysis should also be conducted to gather data at program sites, such as staff skills, knowledge, attitudes, and practices; service quality; equipment/supplies; and effectiveness of management systems (e.g., service delivery, supervision, referrals, training, MIS, logistics, and financial management). Finally, it is often useful to review the capacity of proposed implementing partners or allies so that you can determine whether, and what, TA, training, or other capacity building plans or activities are needed. Findings based on these checklists should also be used to reinforce program designs and management see Annex G and Series 2, Module 1: Program Design and Management.
Performance Information

This information usually measures broad changes that can be attributed to projects and programs. Hence it helps the manager to judge achievements against objectives, determine results and effects on the beneficiaries or community and explain reasons for the results. Examples are:

- Target group characteristics (effect of socio-economic factors on services and use).
- The unique characteristics of users/clients
- The mix of services (sources of services, ratio of acceptance by gender)
- Quality of services (adherence to protocols, behaviour and competence of staff, services environment)
- Community participation and support (level of involvement, amount of community financing).

The above two broad categories – operational information and performance information – indicate the specific types of data that should be collected. However, managers and staff will benefit from reviewing data needs and collection systematically and specifically. The following exercise, which takes about two hours, could be conducted with the entire staff, with staff working in groups based upon their programmatic responsibilities; or with a team that is actually given the assignment of institutionalizing or updating your organization’s MIS. In any case, act on the results of this exercise in designing or revising your MIS.

**Exercise ... What Data Will You Collect?**

A. For this exercise, you will need newsprint, markers, and your current data collection and report formats and budget. If you are just beginning to design an MIS, you won’t have the formats.
B. Divide the newsprint into broad categories according to types of information you generate or would like to generate. As a guide, you can create boxes for "operation information" and "performance information". Under "workplan implementation" you may want to list major activities and services. Under "costs" you may want to list major budget categories.

C. For each category, brainstorm about the specific data you are collecting or will collect. For example, under activities and services, you may list a) number of persons served/type of service; b) number of participants/activity; c) number of IEC materials distributed, etc.

D. Use different symbols (e.g., ✔❏●▲) to differentiate:
- data to be reported by donors
- data to be reported to specific government agencies
- data to determine costs
- data needed to measure performance or allocate workload
- data to assess quality

You may have more than one symbol against a data element or component. Categories should include sources of information (e.g., for each major component of the work plan such as activities, resources needed and outcomes); information or indicators about operations; and information or indicators about performance.

E. Analyse your results. How many data elements received "unanimous" votes? How many received none? How many will be difficult to collect or quantify? How many are really useful?

F. With your staff, discuss which data are mandatory and which – while perhaps useful – are not necessary or can be derived by analysing other data. Try to streamline your decision concerning selection of data you will routinely collect, analyse and use. Remember that it is better to make full use of the data you collect than to collect what you cannot or will not use. Also, remember that you can add more data categories as you and staff become more comfortable with the MIS.

G. Select the most important data categories of collection and design user friendly report formats, feedback mechanisms, and analysis procedures to reflect these choices.

Having completed your review of the types of information required to manage your organization, you should also recognise that every information system operates at various levels:

- Data Collection
- Data Collation
- Analysis and Interpretation
- Reporting

Key Questions in Designing an MIS

In designing an MIS, try to develop simple rules or procedures to guide staff activity at each level. For example, you will surely have a format for data collection. (See Annexes for examples.) Who fills out the format? Where are completed formats sent? What is examined in completing a format? When must completed formats be sent? How is accuracy of data to be verified? Who signs the format? Is the completed format a compilation of many separate reports? How long are completed formats retained? Do you give feedback on data collection and, if so, when and by what means? NOTE: Similar questions should be asked about each of the 4 operational levels of the MIS.
Clear, simple, user friendly procedural guidelines should be developed for each operational level of the MIS. These guidelines should be incorporated into staff orientation and training and should be written and widely disseminated. Procedural guidelines should be reviewed and revised as the MIS system is updated—or based on experience with systems implementation and compliance. Even if you are not planning to change your MIS, procedural guidelines should be reviewed at least every two years to ensure that they are still clear, relevant and effective.

Management information systems should not be viewed as integral to management processes and the management cycle. Timely, reliable, and adequate information plays an important role in each element of this basic management cycle. (Figure 3 below shows examples of some of the logical links between the management cycle, information needs and the MIS).

*Figure 3: The management cycle and MIS*
Institutionalizing an MIS in an Organization

After informally analyzing your data needs and procedures, if a manager feels uncomfortable about his or her ability to establish an MIS for the organization, he or she should engage the services of an MIS consultant to assist in creating the system. Together, the manager and the consultant will follow a series of steps to get an overview of the existing MIS, the way it currently functions, and what is needed to improve it. The consultant will assist in assessing, and responding to, organizational needs. The consultant may also help a manager decide whether computerization, or a good manual MIS, is preferable. Whether or not a consultant is engaged, managers should review some of the problems that may make an MIS less effective.

*Food for thought...Why is Your MIS Less than Adequate?*

Do you **really** know your organization’s MIS-related problems?
- Shortage of staff?
- Competence of staff?
- Complexity of instruments and cumbersome procedures?
- Incomplete and inaccurate records with omissions of relevant data?
- Duplication of data?
- Poor data storage?
- Financial constraints?
- Shortage of material?
- Bulk of unprocessed data?
- Coordination of data and data-related processes?
- Poor distribution of information and material?
- Timely forwarding of data?
- Lack of feedback?

How will you solve them?
The following table provides a systematic way of reviewing how a well-designed MIS functions at every level. The table can serve as a checklist for managers and consultants in creating, institutionalizing, or revising an MIS.

### MIS Step by Step...

<table>
<thead>
<tr>
<th>Stages</th>
<th>What to Do</th>
<th>Output</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>This stage helps you to: identify all the staff who will use information; assess objectives of organization; select required information: determine formats for information collection; establish the manual or guide to support the system; and train staff.</td>
<td>☛ Systematically meet with staff colleagues, community leaders, clients to solicit their inputs, systematically. ☛ Analyse the results of your needs assessment.</td>
<td>☛ Information needs, e.g. number of new users, number of items for sale produced daily, etc. ☛ New forms or improved formats designed. ☛ Formats used at different levels confirmed.</td>
</tr>
<tr>
<td>2. Data Collection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At this stage, the manager determines the frequency of information collection. Frequency may vary, e.g., new users/clients, financial information collected regularly and daily, while IEC material distributed may be monthly or quarterly.</td>
<td>☛ Develop formats for information required frequently. ☛ Monitor data collection. ☛ Support the use of other methods to collect supplementary information periodically.</td>
<td>☛ Regular information on users/clients volumes of sales income and expenditure, activities available. ☛ Supplementary information to support regular information, e.g., market survey, quality of service, channels of distribution. ☛ Data available in records, registers, forms. ☛ Daily, weekly, monthly, quarterly and annual summary sheets or tables.</td>
</tr>
<tr>
<td>Supplementary information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g., rapid assessment (small scale survey), focus group discussion (FGD) small operations research should also be identified.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Data Collation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At this stage the manager determines how data can be summarized to facilitate comprehensive review and decision-making.</td>
<td>☛ Compile data from registers, records and forms into summary of collation sheets. ☛ Establish a way of summarizing the data regularly (e.g., daily, weekly, monthly, quarterly, annually). ☛ Cross-check data; transfer from client, sales records to the summary sheet and ensure accuracy. ☛ Establish a way to store the client, sales, finance records in the organization.</td>
<td>☛ Records, registers, and forms from clinics, service centers, sales outlets, finance department.</td>
</tr>
</tbody>
</table>
### Analysis and interpretation

At this stage, the manager considers how the information can be used by different groups working in the program and to work (e.g., the manager may need information on potential clients and consumers, while supervisors may need information on popular services or products, etc.)

Existing or customized computer software packages or programs to meet organization needs may be used at this stage.

- **What to Do**
  - Tabulate the data
  - Obtain totals, percentages, averages on the data.
  - If necessary, obtain information on:
    - Cross-Tabulation (e.g., comparing different data categories such as age, users, and type of service).
    - **Aggregating** (e.g., comparing total situation with the program targets).
    - **Disaggregation** (e.g., examining the differences between subgroups based on age, location, etc).
    - **Projecting** (e.g., predicting outcomes depending on changes in the external/internal environments).

- **Output**
  - Tabulated data
  - Tables of totals, averages and percentages.
  - Tables of cross-tabulation, aggregates, disaggregates and projections.
  - Graphic presentations
  - Computer printout of the above indices.

### Reporting

The manager considers whether the organization possesses appropriate information in a usable form at the time when it is needed.

- **What to Do**
  - Determine the content and format of reports.
  - State the dates and purpose of reports.
  - Determine the audience of reports.
  - Present the analysis and interpretation of data.
  - Discuss the presentation of data to explain the information.

- **Output**
  - Reports (e.g., program, financial, staff disposition, service outlet performance, quality of services, actual or potential clients, etc).

## Using MIS Outputs for Management Decision-Making

Managers rely on both informal information (rumors, unofficial discussions with colleagues) and formal information (routine statistical and management reports) to make decisions. Lack of complete, accurate, and timely information adversely affects the organization and its programs because the manager will not be equipped to make appropriate decisions. Figure 4 below illustrates ways in which an MIS is helpful to a manager.
Figure 5: How can an MIS help the Manager?

NOTE Please refer to Series 1, Module 1 on decision-making to reinforce your understanding of this section.

How is information used in the organization?

- For health-related programs, clinical, community-based and financial data are used to assess the cost effectiveness of services provided at different clinics or service delivery points.
- Program information or statistics are used for performance monitoring and evaluation output measurements (e.g., number of clients seen daily, the number of homes visited, and procedures carried out).
- Information and feedback from clients and workers is used for daily monitoring of operational activities and planning (e.g., at the service level, information on quantity and quality of service rendered are used to assess quality and to determine improvement needed).
- Information may be presented differently, based on the organizational level collecting or using the information. For example, at clinics, information is generally collected in mandated ways, including recording in printed ledgers or files, and reported to ministries based on specific guidelines, or carried forward to the next level for analysis and aggregation based on the organization’s MIS.
- Different kinds of detailed information are needed at different levels (e.g., information needs of a community-based health worker versus a zonal supervisor).

How does information flow in your organization?

Movement of information within and out of the organization is called information flow. Information flow can either facilitate data use and MIS efficiency or compromise both. A good manager knows how information flows—or should flow—within an organization, and designs a system to facilitate flow.
Bright ideas...

Factors to consider in assessing or improving information flow:
- Who needs information?
- How is the information used?
- What details are needed at each level?
- What format should be used to present the information (tables, charts, reports).

As information moves from one user to another, the amount of detail provided and the format in which information is presented will change. These changes should correspond to the users’ needs. Figure 5 illustrates ways in which information is disseminated upwards and downwards decisions are communicated to appropriate units, staff and organizations.

**Figure 5. Data Flow from NGOs to the Public Sector and Vice Versa**

<table>
<thead>
<tr>
<th>National Ministries</th>
<th>State/RegionalDepartments (if relevant)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Data sent to relevant Department/State Ministries Agencies</td>
</tr>
<tr>
<td></td>
<td>District Level/ LGA area branches of organization</td>
</tr>
<tr>
<td></td>
<td>Monthly facility report forms</td>
</tr>
<tr>
<td></td>
<td>Facility or community-based worker daily services (register, tally sheet)</td>
</tr>
</tbody>
</table>

Decisions made at the top of organizations are also communicated downwards to the service facility level. This example is based on Nigeria’s form of government.

Exercise...

**Use of Operational Information in Decision-making**

Different data are required for different functions or categories of activities. As a way or reinforcing your organization’s understanding of what data to gather and how it should be used, complete the table above.
STEP 1. For each “information category”, list what data should be gathered. Try to be as specific as possible (Refer to the definitions of “operational” information and “performance” information).

STEP 2. Describe how each data set will be used, and by whom, and whether a time period is involved (e.g., a supervisor will review reports in developing supervisory schedules on a monthly basis).

STEP 3. List the ways these data and information can be used for decision-making. Again, try to be as specific as possible, e.g., numbers of persons participating are lower than expected activity, location should be shifted for convenience.

STEP 4. Assess whether the way in which data are collected and information flow within your organization help to maximise its use, especially for decision-making.

STEP 5. Review the implications of this exercise for the organization’s MIS. Revise formats or procedures that do not contribute to efficient, effective use of data and decision-making.

Below is a sample of a completed chart from this exercise. Use it to ”test” or compare answers.

Sample Decision-Making Using Operational Information

<table>
<thead>
<tr>
<th>INFORMATION CATEGORY PROGRAM AREA</th>
<th>DATA TO GATHER</th>
<th>USING THE INFORMATION</th>
<th>MAKING DECISION</th>
</tr>
</thead>
</table>
| WORKPLAN IMPLEMENTATION           | Timing of activities; availability of personnel and materials | Managers can ensure that staff and other resources are available for planning activities | • Re-scheduling activities  
• Re-deployment of staff. Resources as needed. |
| COST AND EXPENDITURES             | Budgeted amounts, obligations accrual and balances for personnel, equipment, infrastructure, maintenance. | Managers can ensure that funds are available to execute planned program activities and can determine what the services cost and how to price them. | • Authorizing expenditures  
• Budget and program revisions.  
• Community participation in subsidizing program costs. |
**A Word About Reporting**

It has been said that every time you compile or analyse data or information you are preparing a report. Reports should contain clearly presented data, related to specific program services, activities, and objectives. They should specifically recommend decisions, actions and next steps.

Most organizations benefit from designing simple report formats or guidelines for routine or periodic reports. This gives provides consistency and guides the writer in selecting content. Graphics, charts and tables are also useful additions to reports.

The following "checklist" might be useful to managers and staff who are preparing reports. If guidelines on report preparation are established, this or a similar checklist could be incorporated.

**Tips and Tools... Report Preparation Checklist**

- Report recipients are clearly indicated.
- The purpose and uses of the report are clear.
- The report is clearly dated.
- The report addresses a specific program component or objective. If the report covers more than one issue, discussion on each is separated and identified.
- The report specifies the region, facility, service, or program covered.
- The report indicates the time period covered.
- Information within the report is related to specific program indicators.
A Final Word About Evaluation

Every organization needs to evaluate its performance and the impact of its efforts. In many instances, organizations have multiple programs and will need to evaluate each one from two perspectives: how and whether it has achieved its specific objectives, and how and whether it has contributed to the organization’s overall mission. Organizations should develop and implement a comprehensive evaluation plan that outlines the time-frames and resources needed for mid-term and final evaluations of each major program or initiative. Sometimes, it is useful to involve an outside consultant to ensure objectivity and thoroughness. However, key staff should also participate in evaluation activities because they can see —first-hand— the problems and the potential in the programs they manage, supervise, or implement, and take “ownership” of recommendations for future action. Let’s review some major kinds of evaluating.

Process Evaluation

Continuous monitoring and supervision are part of process evaluation, which examines how well program activities are being implemented. Specifically, process evaluations focus on the development and strengthening of existing systems, protocols, and guidelines necessary to support, standardize, and institutionalize service activities. These activities support planning, implementation, and supervision to assess progress in integration against project goals and objectives.

Process evaluation information should establish:

- What the intervention has done since implementation
- Whom the intervention has reached and how it has reached them
- The response of the target population to the intervention

Process evaluation should also review what is working and what is not in order to enable staff and managers to develop corrective actions; determine whether resources, equipment, supplies, and staff skills are adequate and used efficiently and effectively; identify barriers to program implementation; establish coverage; and identify strategies, training needs, and technical assistance requirements to improve programs overall. Agencies collaborating on specific activities should ensure that all key players—service providers, NGOs, provider institutions, and district and national-level policy makers—are involved in, are committed to, and understand program objectives and processes. Sample client or customer studies, exit interviews, and focus group discussions may be used to gather feedback from clients about their satisfaction with the services. When program deficiencies are detected, program staff

should take corrective actions. Process evaluation should also support the development of protocols and checklists for quality assurance and quality improvement. Indicators—the qualities you look at to measure your progress—should be developed and monitored to answer questions related to quality of program operations.

**Output evaluation**

The output evaluation assesses achievements on-site by viewing defined, quantifiable indicators of program performance such as access, quality and acceptability, number of persons trained, and use of services by the target populations. Output indicators are usually quantitative.

**Effects evaluation**

Effects measurement focuses on changes observed within the target population in the catchment area, for example: observed changes in reproductive health attitudes, changes in staff and skills, and changes in provider attitudes toward providing and managing services.

An effective MIS should provide program managers with information to monitor these indicators for each level of the program (e.g., by site, in community-based services (CBS) by agent, by area, by month, by quarter, and annually).

**Short-term impact evaluation**

The findings from the original baseline survey should be used to derive the indicators for the short-term impact evaluation. This evaluation is conducted at a specified, predetermined time following the introduction of a new program initiative. It will help organizations determine how well it is actually doing with implementing or institutionalizing new programs, initiatives, systems, or coalitions.

Comparison of the initial baseline and situational analysis with similar post-implementation surveys will indicate the changes in the indicators that have occurred over time in the target population, at project sites. Relevant data from reports, service statistics, and training information systems contribute to the analysis of short-term impact. For example, with a health program an analysis of service statistics over time will show trends in condom distribution, changes in method use, and increases (or otherwise) in STD/HIV clients served, especially return visits (recurrences).

Evaluation results are often kept “in-house”. That is, they are not widely disseminated or discussed. Yet, evaluation results can help organizations pinpoint what worked (and what didn’t), to clarify lessons learned, to identify best practices, and to develop models of program design or implementation that can be scaled up or replicated elsewhere. Evaluation results may also convince donors to invest more in organizations with demonstrated good ideas and good results. Therefore, each evaluation plan should also include a plan for formal dissemination activities.

**Summary**

An MIS helps a manager to collect and use information to make management decisions in a timely manner. Managers also use MIS data to analyse, plan, make decisions, take actions, and evaluate. An effective MIS provides accurate, complete, and timely information. MIS
formats should include feedback mechanisms so that decisions made at all levels within the organization can be shared with and enriched by stakeholder inputs. Such feedback is often stimulated when data are analyzed and shared, and issues are highlighted. Staff must be trained to use MIS outputs—and data generally—to support their work and make it more efficient. Data must also be reported, shared, and used for problem-solving and sustaining program and organizational momentum.
Annexes
Annex A

Sample of Data Collection Format

*Family Planning RH Clinic Client Record Card*

1. Date of visit: ________________________________
   Name of client: ________________________________
   Name of husband: ________________________________
   Address: ________________________________

2. General Condition: __________ Last menstrual period: __________
   Blood pressure: __________
   Weight: __________

   To be filled out before giving pills, ask and notice the following:
   (a) Blood pressure more than 150/100 __________
   (b) Skin and Eyes appear yellowish __________
   (c) Lump in Breast __________
   (d) Swollen or throbbing varicose __________
   (e) Heavy or Frequent menses __________
   (f) Difficult breathing __________
   (g) Frequent headache __________
   (h) Frequent discharge (describe) __________

   Explanation:
   (i) Put X mark in proper column
   (ii) For questions a to d also conduct examination
   (iii) If all answers are ‘No’ patient can be given pill by service provider
   (iv) If there is ‘Yes’ answer, patient should be examined by a physician, before pills are provided.

4. **Internal examination**
   Position of uterus: Retro/anteflexy
   (a) Sign of Pregnancy __________
   (b) Sign of inflammation __________
   (c) Tumor __________

   Explanation:
   (i) Put X mark in proper column
   (ii) If all answers are ‘NO’, IUD may be inserted.

Adapted from FP managers handbook
5. **Contraceptive Given:**
   (a) _________ IUD  Type of IUD: ____________  Difficulty in insertion
   (b) _________ Pill  Total No of strips ____________  Yes  No
   (c) _________ Condom
   (d) _________ Male sterilization
   (e) _________ Injectable
   (f) _________ Vaginal cream/Tablets
   (g) _________ Female sterilization
   (h) _________ Implant

6. Referral ___________________________  Reason(s) ___________________________

6. Return visit: ___________________________

7. Additional Remarks: ___________________________

__________________________________________

Signature: _______________
Annex B

Sample of Data Aggregation Form

Weekly FP Service Summary Sheet

<table>
<thead>
<tr>
<th>Type of clients</th>
<th>Total</th>
<th>Condoms</th>
<th>V/Ls</th>
<th>Pills</th>
<th>Injectables</th>
<th>IUCD</th>
<th>Diaphragm</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Acceptors</td>
<td>50</td>
<td>20</td>
<td>15F/5M</td>
<td>10</td>
<td>9</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Revisits</td>
<td>120</td>
<td>50</td>
<td></td>
<td>21</td>
<td>25</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>170</td>
<td>70</td>
<td>20</td>
<td>31</td>
<td>34</td>
<td>14</td>
<td>10</td>
</tr>
</tbody>
</table>

NGO X has an active RH program that offers the full range of FP methods. Supervisors prepare weekly service summary sheets. These help supervisors to:

- Monitor performance
- Discern trends in method preferences
- Order supplies
- Determine training, TA needs
Annex C

Sample of Data Analysis and Interpretation

Annual Performance chart

<table>
<thead>
<tr>
<th>Services</th>
<th>Total coverage</th>
<th>Program Target</th>
<th>Variance</th>
<th>% performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent Advocates</td>
<td>8,000</td>
<td>6,840</td>
<td>1,600</td>
<td>85.5</td>
</tr>
<tr>
<td>Participants in adolescent issues forums</td>
<td>12,000</td>
<td>7,950</td>
<td>4,050</td>
<td>66.25</td>
</tr>
<tr>
<td>Total</td>
<td>20,000</td>
<td>14,790</td>
<td>5,210</td>
<td>73.95</td>
</tr>
</tbody>
</table>

NGO Y has an interested program for in- and out-of-school youth. Called A² (Adolescent Advocates), this program provides life skills, leadership development and vocational training for youth. Many of them conduct IGA in cooperatives or clubs. They also conduct sensitization activities and dialogues or encounter sessions for adults and policy makers. The NGO sets targets and measures them annually.
Annex D

Sample Report Format

A. Cover sheet (report title, period or dates, author or organization).

B. Executive Summary (usually a two-page summary of report and written after the full report)

C. Full report:
   - Introduction/Background/Project description
   - Methodology
   - Process
   - Data collection and collation
   - Data analysis and interpretation
   - Discussion (Findings and Recommendations)
   - Lessons learned
   - Follow-up Plan(s)
Annex E

Prototype Quarterly Programmatic Narrative Report

1. Brief Description and Analysis of Major Activities Planned for the Quarter.
   - Services/products offered or activities conducted
     - Targets
     - Achievements
     - Comparison between targets and achievement (Targets ⇒ Achievements expressed as percentage)
   - Services Community-based (Note: If an NGO has facility-based and community-based services, it is best to separate them in the report.)
     - Training (desirable information includes highlights/courses’ contents. Must be specific about # trained/course/by cadre).
   - I.E.C.
     - Targets: Home visits, visits, meeting (# participants/persons informed), materials produced/distributed.
     - Achievements: Home visits, visits, meetings (# participants/persons informed), materials produced/distributed.
   - Community mobilization/Outreach (include special target groups)
   - Others (Meetings attended, new initiatives, innovations (e.g., websites, multi-media presentations, videos and audio cassettes, etc.), collaboration with other NGOs/public agencies, exchange visits or study tours, technical assistance, etc).

2. Brief description of Major Unplanned Activities.
   (Use the same outlines as above where relevant. If an activity (e.g. training) was unplanned earlier and postponed don’t include it in this section. Report on it as a major planned activity).

3. Major Accomplishments
   Be specific. Give #s and document. For example, attach newspaper articles.

4. Major Constraints
   (Again, be specific. Indicate which were outside your control. Where the constraint is within your control, outline specific steps to address the problem).

5. Proposed Solutions and Recommendations
   (List each one and identify the area to which it relates [e.g., “Service Delivery/CBD; training, constraints, etc.”]. List specific actions/steps to be taken, resources required, and person or agency to take action).

6. Resource Issues
   A. Planned major expenditures (by budget category and line item if appropriate).
   B. Unplanned major expenditures (by budget category and line item. Why was this needed?).
C. Major expenditures/additional funds needed next quarter:
- By line item
- Purpose
- Amount
- Can these be re-allocated from budget savings? If so, list specific sources.

D. Commodities.

An example for an FP program

<table>
<thead>
<tr>
<th>Method</th>
<th>Balance Beginning</th>
<th>Received</th>
<th>Distributed</th>
<th>Balance End</th>
<th>Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pills</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Condoms</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FTs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IUDs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foam</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A. Equipment/supplies status:
- Broken?
- Needed (#type) – Provide explanation.

7. Major Activities to be Carried Over to Next Quarter

8. Major Activities Planned for Next Quarter
[Note: indicate if not in original workplan/chronogram].

Monthly or Quarterly

Clinical Integrated Reproductive Health Services Statistics

<table>
<thead>
<tr>
<th>FAMILY PLANNING/CHILD SPACING</th>
<th>STI1</th>
</tr>
</thead>
<tbody>
<tr>
<td>METHODS</td>
<td>NEW</td>
</tr>
<tr>
<td>Pills</td>
<td></td>
</tr>
<tr>
<td>Injectables</td>
<td></td>
</tr>
<tr>
<td>IUDs</td>
<td></td>
</tr>
<tr>
<td>Condoms</td>
<td></td>
</tr>
<tr>
<td>FTs</td>
<td></td>
</tr>
<tr>
<td>VSC</td>
<td></td>
</tr>
<tr>
<td>Other2</td>
<td></td>
</tr>
</tbody>
</table>

1 Project sites will report aggregate numbers of STI clients by type of STI also.
2 Other methods (e.g. NORPLANT, diaphragms, natural family planning, etc.) will be specified in service delivery statistical reports.

While this chart gives an example of commodities for an FP program, it can be adapted for NGOs for other missions. For example, a civic education program may have multiple publications it is distributing and can keep track of them. A feeding program can list its major food commodities and track them using this format, as can agricultural extension program that provides inputs (seeds, fertilizer, seedlings, tools, etc.).
### Monthly or Quarterly

Community-Based Services Report

<table>
<thead>
<tr>
<th>METHODS</th>
<th>NEW</th>
<th>RE-SUPPLY</th>
<th>SUPPLIES DISTRIBUTED</th>
<th>HOME VISITS</th>
<th>REFER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pills</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Condoms</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foaming Tabs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTALS:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visits, Counselling, Referrals for STIs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visits, Counselling, Referrals for HIV-AIDS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Annex F

Project Self Assessment Format

List responses in priority order before writing a project proposal (including a renewal or extension request) or a report may help you to organize your analyses. Be very specific.

1. Major organizational or project strengths
   — Why are these “strengths” for the project?
   — What are the major contributing factors to these strengths?
   — How can staff utilize/build upon these strengths?
   a. 
   b. 
   c. 
   d. 

   Major accomplishments during the previous period
   a. 
   b. 
   c. 

2. Major weaknesses
   — Why are these “weaknesses”?
   — What specific steps can be taken to address each weaknesses?
   — What resources are needed to address these weaknesses?
   — Which factors are within the project’s control? Outside its control?
   a. 
   b. 
   c. 
   d. 

3. Major constraints during the previous period
   a. 
   b. 
   c. 
   d. 

4. Specific issues by cadre of staff/supporters
   Project Managers: 
   Project Supervisors: 
   Project Clinicians:
Project workers:
Project Support Staff:
Volunteers, Board, Advisory Committees, Community Leaders:

5. **Specific issues by project activity cluster**

Management/planning:
Systems (including quality, MIS, financial management, logistics, coordination):
Supervision:
CBD/Field
Clinic or Facility-based:
Resource development, income generation, sustainability:
Human resources or development: