

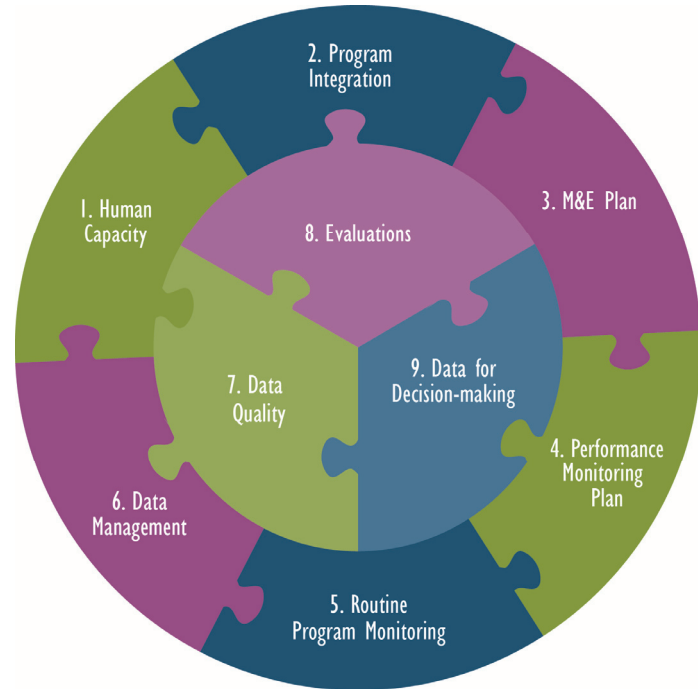
Jhpiego's M&E Standards

Purpose

- Jhpiego has experienced tremendous growth in the number and type of programs implemented globally. A standard approach to M&E will help ensure the quality of M&E practices and, in turn, Jhpiego programs.
- Jhpiego's M&E Standards provide guidance on the **minimum** requirements for a sound program in terms of M&E systems and processes.

Use

- An M&E Standards Tool presents the 9 standards and 34 verification criteria in a user-friendly format.
- The Tool and a related process guide will assist country teams to identify gaps in M&E and develop action plans to strengthen program and country M&E.



Human Capacity	1. The office has adequate M&E human capacity: Adequate, skilled human capacity exists at all levels of the M&E system to complete all tasks defined in the country M&E work plan and is supported by HR management practices.
Program Integration	2. M&E is integrated into programs: Routine M&E becomes part of each country program and implementation approach, starting with a sufficient budget allocated for M&E. M&E, program and technical staff work closely to ensure quality monitoring and continuous data use through program and technical refinement.
M&E Plan	3. The office has an M&E plan outlining standard operating procedures: A country M&E plan is developed and regularly updated to reflect the country office's M&E needs across all country programs. This includes human and material resources, data collection procedures, timeline, and roles and responsibilities for implementation of M&E systems to support all programs within a country.
Performance Monitoring Plan (PMP)	4. Each program has a logic model, PMP and M&E work plan: For each country program, a logic model, PMP and M&E work plan is developed, implemented and updated annually.
Routine Program Monitoring	5. Routine program monitoring systems are in place and maintained: Routine data formats, collection, flow, quality control and entry that avoids double-counting are in place and followed by each sub-grantee.
Data Management	6. The office uses databases to facilitate routine M&E data capture and analysis: Programs make use of available database solutions.
Data Quality	7. The program assesses and maintains high data quality: Programs routinely assess and maintain data quality.
Evaluations	8. The office plans and implements rigorous evaluations: Activity related to evaluation research is included in annual work plans and conducted accordingly.
Data for Decision-Making	9. The office uses and shares program data for decision-making: The program has a data analysis and dissemination plan in place and routinely shares and uses data for decision-making.

M&E Standards Tool

The M&E Standards were originally inspired by UNAIDS and the Monitoring and Evaluation Reference Group (MERG) 2008 document, *Organizing Framework for a Functional National HIV Monitoring and Evaluation System*. The M&E Standards were discussed among M&E staff at Jhpiego headquarters and the field, and winnowed down to 9 standards. Similar to the Standards-Based Management and Recognition (SBM-R®) process, the M&E Standards are measured by verification criteria. For each criterion, the country assessment team will review the three levels of observation and choose the response that best fits, giving a score of “1, 2 or 3.”

Excerpt from M&E Standards Tool

STANDARDS	VERIFICATION CRITERIA	N/A	OBSERVATION			SCORE	EXPLANATION FOR SCORE
			1	2	3		
5. Routine program monitoring systems are in place and maintained	5.1 Data collection forms are developed, revised and in place to collect the necessary data for all programs		Data collection forms to adequately collect most of the program data are not developed or are not up-to-date	Some, but not all, data collection forms to adequately collect program data are developed and up-to-date, or some are in the process of being revised	Up-to-date collection forms are in place to adequately collect the data for each program		
	5.2 For each program, a system is articulated and implemented for routine data collection, flow, quality control and entry that avoids double-counting		No system for routine data collection, flow, quality control and entry has been clearly articulated or implemented	Parts of a system for routine data collection, flow, quality control and entry exist, but the system is not complete, or is not fully implemented or is prone to problems such as double-counting	A system is articulated and implemented for routine data collection, flow, quality control and entry that avoids double-counting		
	5.3 For each sub-grantee, a system is articulated and implemented for routine data collection, flow, quality control and entry that avoids double-counting		No system for routine data collection, flow, quality control and entry has been clearly articulated or implemented for sub-grantees	Parts of a system for routine data collection, flow, quality control and entry exist for sub-grantees, but the system is not complete, or is not fully implemented or is prone to problems such as double-counting	For sub-grantees, a system is articulated and implemented for routine data collection, flow, quality control and entry that avoids double-counting		
	5.4 Each person responsible for activities in the system implements his/her role as specified		It is not clear who is responsible for activities in the monitoring system and monitoring activities are haphazardly carried out if at all	Those responsible for monitoring activities do not implement them as specified	Those responsible for monitoring activities implement their roles as specified		
	5.5 Program implementation process (e.g., dose, implementation integrity) is documented, both for routine monitoring and program evaluations		The program implementation process is not documented for routine monitoring or for program evaluations	The program implementation process for routine monitoring and for program evaluations is incompletely documented, or is done for one but not the other	The program implementation process is documented, both for routine monitoring and for program evaluations		
	5.6 E-health and m-health methods and innovations are considered and integrated where appropriate		E-health and m-health methods and innovations are not considered and opportunities to use them are missed	E-health and m-health methods and innovations are occasionally considered, but have yet to be used, or opportunities to integrate them are identified but are missed	E-health and m-health methods and innovations are considered and integrated where appropriate		
	5.7 Reports to donors are reviewed for quality prior to timely submission according to an agreed-upon timeline		Reports are not submitted on time and are not reviewed for quality	Reports are submitted on time, but are not reviewed for quality	Sufficient time is allocated and used to review reports before submission to donor		