

Program Monitoring

SUMMARY RECOMMENDATIONS FROM ROUND II

08/16/2011

National AIDS Control Organisation

Introduction

The guiding principle of NACP-3 was the unifying belief of *Three Ones*, i.e., one Agreed Action Framework, one National HIV/AIDS Coordinating Authority, and one Agreed National M&E System. This framework ensures effective use of information generated by government agencies, non-governmental organizations (NGO), civil society and development partners. Strengthening the nationwide Strategic Information Management System was one of the four key strategies of the third phase of the National AIDS Control Program of India.

In keeping with the objectives of NACP III, tremendous gains have been made in the areas identified in the strategy. The current phase of the NACP aims to build further upon these gains. However with all the progress that has been made, we need to be aware of the areas that still need attention, so as to help us reap the benefits of our investments. Some of the challenges relating to program monitoring are identified below. The subsequent section makes concrete recommendations relating to each one of these challenges.

Current Challenges

1. Multiplicity of data systems and communication loops

Currently, different software for different program components are in use i.e. CLHA/PLHA for ART, individual reporting for ICTC apart from the main CMIS software. The usage of different software hinders timely sharing and usage of the information for tracking referrals and linkages between different components of NACP.

Moreover, there is inadequate communication between the units monitoring the different software and the data emerging from them. There is a practice of frequent parallel data requests from NACO program divisions to the SACS program officers. Also, there is limited coordination between SACS M&E officers and SACS program officers in the reporting of data to NACO. This is also observed between the M&E officers in the program divisions in NACO and the SIMU in NACO. This creates several versions of the same data set thereby hindering informed program planning.

2. Multiplicity of Indicators and changing data capture formats

There are currently more than 100 indicators being tracked across the different NACP program components. The multiplicity of indicators leads to tremendous burden of data recording and reporting on program functionaries at all levels. Not all indicators which are captured are being

utilized on a regular basis for analysis. Additionally, frequent changes to reporting formats cause a lot of confusion in the field and cause delays and deficiencies in reporting.

3. Data Utilization and Dissemination

The capacity for proper presentation and analysis of data is not uniformly present amongst M&E officers and program managers. With the existing system of CMIS, the M&E team is mostly utilized in data entry in the CMIS software. Analytical capacities at the state level are weak and, with few exceptions, have not utilized the existing data for planning purposes.

Even at the national level, planning, coordination, implementation, monitoring and troubleshooting of different SI activities across the country consumes majority of the time of the staff in SIMU at NACO. Efforts of the program staff are directed towards administrative & financial processes and managerial requirements for undertaking planned activities.

Due to frequent changes in M&E and program personnel, there is often a gap observed in the utilization of data for evidence-based planning. It is observed at service delivery levels that often data is used for reporting to upper levels, and not so much for assessing performance.

Sub components of programs are assessed from time to time, however, a concerted effort to conduct concurrent evaluations and plan for end-of-program evaluations needs to be undertaken. There is great scope to build in evaluations at the outset of the program strategy so as to determine the extent to which program objectives have been achieved.

4. Data Quality

Ensuring data quality within operations and implementation of any public health program is a discipline that is as important as the implementation itself. The basic elements of good quality data such as validity, integrity, precision, timeliness, and reliability need to be ensured at all stages of the data life cycle- collection, collation, reporting and utilization. Currently there is limited availability of standard operating procedures and tools for ensuring data quality at unit level. Also, trainings relating to ensuring data quality have not been provided in many components. This impacts generation of quality data for program monitoring.

5. Capacity Building

There is no structured capacity building plan across all components. Personnel are trained in an ad-hoc manner, as needs are identified from time to time. Limited concerted efforts have been taken to lay out the training and capacity building needs of the various components, with an aim to develop a strong and technically competent workforce.

There is no dedicated resource pool of subject matter experts who can provide high quality strategic information support and supportive supervision at the state and district level. There is a huge scope for providing mentoring and supervision to SACS and DAPCUs to assume a leadership role in improving data systems and data use. Standardized component-wise modules for training program or M&E personnel do not uniformly exist.

6. Program Monitoring and Management

There are several monitoring checkpoints at the NACO, SACS and DAPCU level. In addition, TSU personnel and program officers also go out to the field to monitor the progress of the program. However, these visits are happening in isolation and not coordinated with SACS and DAPCUs. Monitoring visits to facilities are not recorded in a standard format/ checklist. Hence, concrete follow up is not possible in ensuing visits.

There are no standardized and regular reviews scheduled for DAPCUs and SACS to enable them to benefit from regular feedback and modifications to their monitoring strategies.

7. HR Issues

There is continuous staff turnover at facility, SACS, and NACO levels. In keeping with the higher market rates in emoluments for M&E staff, several staff have moved over to higher paying jobs, which creates a gap in the generation of data and monitoring of the program. The other challenge is to recruit high quality staff at the given remuneration levels. Additionally, there is unbalanced workload amongst various SACS with some catering to hundreds of facilities in a given state with no additional support. There is a need to bolster human resources for state level teams, where required.

Recommendations

Based on discussions among sub-group members, the following recommendations have been made. There are some recommendations which can be put into effect immediately and one need not wait for the implementation of NACP IV. However, all recommendations are considered essential for the effective implementation of the next phase of the NACP.

1. One Monitoring System

The Strategic Information Management System (SIMS) is a web-based application with sophisticated tools meant for data analysis and integration from different data sources and platforms. This is the most important tool for addressing the challenges relating to the multiple data systems and data set versions. At National level, this one M&E system will prevent parallel data gathering by different individuals and divisions. However, the need for continuous coordination amongst the divisions and SIMU cannot be overstated. The other recommendation is to have One M&E division that looks at the programs as a whole and does the monitoring of the program centrally. The role of an M&E unit is to oversee the entire program, rather than follow a piecemeal approach for specific components. Regardless of where the M&E officers are physically placed, there should be a strong M&E unit that has the capacity to oversee the NACP in its entirety and make contributions towards improving the system and programs. Again, there needs to be close coordination among the program divisions and the M&E unit, in order for smooth data flow and reviews.

2. Indicator Rationalization

As noted under the “challenges” section, there are several indicators that are being tracked across all the NACP III components out of which only a few are being used in data analysis. As planning for NACP IV progresses, an indicator rationalization exercise should be undertaken, wherein the duplicative and redundant indicators are removed from the core list, new indicators, pertaining to the core strategy are introduced, and a plan is put into place to outline the explicit uses for the data that will be generated through the tracking of these indicators.

Also, frequent changes to the data capture formats should not be permitted. There should be a pre-determined lock-in period, wherein no changes to the formats can be made. This will be crucial as the SIMS rolls out and field level functionaries are familiarizing themselves with the new systems and the new formats. Of course, since this will be an evolving and dynamic system, there will be some changes in keeping with the needs of the program. These changes should be reflected in consonance with the lock-in period.

3. Data Utilization and Dissemination

Under NACP III, it was envisioned that the SIMU would be set up at national and state levels to address strategic planning, monitoring and evaluation, surveillance and research. The SIMU was to assist NACP-III in tracking the epidemic and the effectiveness of the response and help assess how well NACO, SACS and all partner organizations were fulfilling their commitment to meet the agreed objectives. This plan was not entirely implemented at the state level. There is a scope to develop and strengthen the SIMU at state level and develop knowledge management mechanisms for data sharing and use at SACS and DAPCU.

A 'Data Analysis & Dissemination Unit' is proposed to be created under the SIMU at NACO, which can focus exclusively on the technical work of data analysis and data use at national, state and district levels. This unit should be given the creative and technical space to conduct continuous data analysis as needed by the program divisions. The Data Analysis & Dissemination Unit should also periodically disseminate key findings and report to all stakeholders. The unit should package and present analyzed information in a tailored manner to different target populations- from implementers in the field to the decisions makers at higher levels in the hierarchy.

The three major factors that in general affect the use of data for program monitoring are the capacity for analyzing and using data, the tools available to facilitate data dissemination and analysis, and the processes and systems that encourage and support data use.

The technical skills and capacity of staff at all levels should be strengthened in data analysis, presentation and interpretation to ensure a strong base for data use. NACO could train program managers and provide easy tools for accessing data for analysis, both at national and sub-national levels. The SIMS software provides both the opportunity for accessing data in a format of compiled reports, and for accessing easy tools for data analysis. Lastly, data use for monitoring needs to be systematized so that it is done on regular basis. Processes need also to be put in place to ensure this is continuous.

It is proposed that a fixed calendar for data analysis and dissemination with quarterly and annual publication of reports be developed so that a data analysis becomes compulsory and frequent enough to be routinized.

Finally, every effort should be made to identify the evaluation questions for NACP IV at the planning phase, and all outcomes should be tested against set targets. The evaluation

questions and methodology should be considered at this phase so as to ensure that at the time of evaluation, one is not constrained by the non-availability of data that could answer the evaluation questions.

4. Data Quality Assurance

The program should conduct a systems assessment and make recommendations for the creation of a strong system for ensuring quality of data. The system should include M&E structures that are adequately staffed to ensure data quality, functions and capabilities of the staff, indicator definitions and reporting guidelines, data collection, reporting forms and tools, and data management processes and quality controls.

This means that under NACP IV, it will have to be ensured, that the national program has an adequate number of human resources to support data quality of M&E and data management systems. This human resource needs to be adequately capacitated to support all functions from interacting with program personnel to understanding challenges with data gathering, data aggregation and reporting. Under NACP IV, the national M&E indicators will be updated to harmonize the efforts of all stakeholders engaged in the HIV response, and to rationalize the number and types of indicators to increase their relevance to the new strategy. Operational guidelines on national indicators and indicator definitions that meet relevant standards would be updated / made available and be systematically followed by service delivery points. Training on these guidelines should be conducted at all levels for uniform understanding. Standard data collection and reporting forms should be made available for use, and there should be written policies and procedures for maintenance of source documents.

As for ensuring the quality control from the higher levels of governance, a dedicated group (including state and district representatives) should be constituted to develop relevant standard operating procedures for data collection and reporting. The most important function of this group should be to derive the national policy for data quality management. Procedures to ensure documentation, SOPs for data collection, aggregation and manipulation, identification of data quality challenges and providing solutions at various reporting levels (through supportive supervision visits / ad-hoc field visits / review missions by experts) should be laid down. These guidelines, once finalized, should be disseminated widely amongst all national, state and district functionaries and training should be provided to all concerned. These efforts will help institutionalize data quality in the very heart of the implementation of the NACP.

5. Capacity Building

To ensure that capacity building of NACP staff is an ongoing, planned and continuous process, a pre-determined capacity building plan is needed at the national, state and district levels (with continuous coordination between national and state teams for rolling out capacity building trainings.) It is recommended that these capacity building and training plans be included as part of the annual action plan cycle, so that they are concretized and documented. Once firmed up and approved, they should be implemented to the extent possible, as determined under the schedule, so that individuals and organization across the states are aware of upcoming capacity building opportunities and are able to prepare for participation.

The need for the resource pool of M&E experts in the states and districts can be fulfilled by training and mentoring a specified number of master trainers from the entire &E cadre across different programs. These personnel can be identified and groomed as master trainers and mentors. By creating a state and district level pool of experts, NACP IV could substantially reduce the dependence of the states and districts on the national mechanisms for support, and experts. Again the strengthening of the SIMU at the state level will also contribute to this goal.

6. Program Monitoring and Management

As noted in the challenges section, currently the monitoring and management of the program is not systematized, or standardized. Different cadres of individuals conduct field visits to monitor the program without the involvement of all relevant stakeholders. It is recommended that monitoring should be standardized under NACP IV. M&E and program staff should be encouraged to coordinate to identify program and M&E needs through joint visits. It is important for M&E staff to be aware of the technical aspects of the program, as well as the data monitoring and analysis needs of the program managers. This can only be achieved through a continuous commitment to coordinate. Standard checklist for field visits should be developed so that visits can be adequately documented and follow-up action may be identified.

In order to keep the state and district staff motivated and also accountable, it is recommended that regular national level reviews are conducted at least once in six months for all SACS M&E officers. Similarly all DAPCU and district level M&E staff should have reviews at the state level every quarter. At the district level, monthly meetings of district level

staff to monitor the progress of implementation is recommended. All meetings should be documented and follow-up action should be ensured.

Again, it is important to emphasize coordination between all the state and district level players, be it the DAPCU M&E assistants, the SACS M&E officers, the program division heads and the TSUs. Unless these local institutions work in concert, none of the goals under the “one monitoring system” can be effectively achieved.

7. HR Issues

The primary recommendation is to revise remuneration scales for staff in order to retain talent within the system. However, since this is an issue which is pertaining to all staff across the different cadres of the government, and not specific to the M&E area, it is also recommended that alternative systems for incentivization, be explored. The program could consider rewarding good performance through capacity building opportunities for staff, exposure visits and study tours to other countries that are responding to HIV.

To address challenges in recruitment, the program could consider lowering the qualification criteria and taking less experienced and qualified individuals who show potential for high performance.