



THE GLOBAL FUND

to Fight AIDS, Tuberculosis and Malaria

Guidelines for a Principal Recipient's Monitoring and Evaluation Plan

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Part 1: Introduction

1. The monitoring of program performance is a critical responsibility of a Principal Recipient (PR) of a Global Fund grant to ensure that program activities achieve their intended results. The monitoring and evaluation of program implementation will highlight successes as well as shortcomings, both of which are critical for successful public health programs.
 - **Monitoring** refers to the *ongoing monitoring of a program's progress* in implementation and in achieving its stated goals and objectives.
 - **Evaluation** refers to a *retrospective examination at some point in time* to review the original assumptions made at the time that a program was developed, the progress made toward achieving its stated goals and objectives and recommendations for building on strengths or adjusting activities and/or strategies.
2. The Principal Recipient's Monitoring and Evaluation (M&E) Plan is a vital **management tool** to be used by program managers and other key stakeholders to ensure that the program is progressing as intended, and/or to highlight areas in need of adjustment to achieve the desired results. PRs and sub-recipients prepare M&E Plans primarily as a guide for themselves to ensure that their program is monitored appropriately. A PR's M&E Plan should also be used by the PR and the Global Fund to agree upon the intended results to be achieved during the grant period, as measured by key indicators with periodic targets. The intended program

results are included in the Grant Agreement between the Global Fund and the PR, and are monitored over time to generate periodic disbursements from the Fund.

Part 2: Key Elements of a Monitoring and Evaluation Plan

3. A Monitoring and Evaluation Plan should include:
 - a) A plan showing main program objectives with a small number of key indicators for each main objective, baseline data where applicable, planned periodic targets, source of data, frequency of data collection and the person responsible for measuring each indicator. This information is generally demonstrated as part of a chart. If reliable baseline data do not exist, baseline surveys should be carried out as part of the initial activities of the program. PRs are encouraged to seek assistance from development partners to establish the baseline at the beginning of the program.
 - b) A description of how the data will be analyzed and used by the PR, the CCM and others for program management and other purposes.
 - c) Identification of the person(s) responsible for overseeing M&E, the budget for M&E activities and a description of what M&E activities and processes are already in place.
 - d) A description of plans to evaluate the program.
4. Annex 1 provides an example of a Monitoring and Evaluation Plan template.

Part 3: Selection of Key Indicators and Establishment of Periodic Targets

5. Principal Recipients should select key indicators and establish periodic targets that are useful to them for their planning, management and communication about progress. The key indicators should be specific, measurable, achievable, relevant and time-bound (SMART). In their Monitoring and Evaluation Plan, PRs should identify a small number of key indicators per main program objective to monitor progress towards the intended results at periodic intervals. The indicators selected *need not* be the same for each period. One or two indicators with specified targets per main program objective per period are usually adequate.
6. The Global Fund reviews Principal Recipients' selection of key indicators and periodic targets for the main program objectives of the approved proposal, and reaches an agreement with the PRs on which indicators and targets to include in the Grant Agreement. Unless the Global Fund and a PR agree otherwise, e.g., based on the PR's existing reporting arrangements and/or common donor standards, the Grant Agreement should contain intended results on a quarterly basis for the first year of the grant period as well as intended results by the end of the two year grant period.
7. The selection of indicators is expected to show progression toward higher levels as the program progresses, i.e., from process, to coverage and impact level indicators. Examples of indicators that may be used to monitor program performance are provided in Annex 2. This menu will be regularly updated by the Global Fund in consultation with partners as a result of harmonization efforts.

8. If the Global Fund grant will finance an expansion of an existing program, or is part of a co-finance arrangement with other donors, e.g., a SWAp arrangement, the indicators to be included in the Grant Agreement should be selected to demonstrate the *additional* results made possible through the *additional* funds.¹ If the grant will finance a pilot initiative, the indicators should be selected to demonstrate a successful progression from establishing the initiative towards achieving the objectives of the approved proposal (i.e., from *process indicators* in the short term, to *coverage indicators* in the medium term, to *impact indicators* over the long term²).

Indicators to Measure Results

- **Process** – the activities, systems, actions and other outputs that need to be completed in the near term to achieve improvements or increases in coverage or delivery of services to target groups;
- **Coverage** – the changes in key variables in the medium term that demonstrate that larger numbers of individuals in identified target groups are being reached by and benefit from improved services or interventions;
- **Impact** – the changes over a longer period in sickness and death, or the burden of disease, in the target population that indicate that the fundamental objectives of the interventions have been achieved.

9. A Principal Recipient may update its M&E Plan based on implementation progress or as part of its regular fiscal year planning activities. The updated key indicators and periodic targets must be agreed with the Global Fund.

Part 4: Uses of the Data Collected and Reported

10. Principal Recipients should carefully monitor the results of their activities (both positive and negative) according to their Monitoring and Evaluation Plan in order to make the appropriate adjustments to ensure the success of the program. The data collected and analyzed during ongoing program monitoring should be used at some point in time as a key feature of a program evaluation to review past performance.
11. As part of their monitoring activities, Principal Recipients provide progress updates to the Global Fund. Unless another reporting arrangement is agreed between the Global Fund and a PR, based on e.g., the PR's existing reporting arrangements or common donor standards, this is done through periodic *Disbursement Requests and Progress Updates*. The reported data is used by the Global Fund for decisions on disbursement, for early identification of "success stories" as well as of grantees that may need assistance, and for communicating to the Fund's constituencies the progress made by grantees. At least for the first year,

¹ E.g., additional districts or groups covered by a national DOTS program.

² E.g., *Process*: Training program for HIV life-skills education established; *Coverage*: Knowledge of HIV/AIDS prevention among age 15-24 (% target against baseline); *Impact*: HIV prevalence among age 15-24 (% target against baseline).

PRs will typically submit their *Disbursement Requests and Progress Updates* to the Global Fund on a quarterly basis. Unless another reporting arrangement is agreed, PRs provide the Global Fund with a *Fiscal Year Progress Report* with aggregated program information according to selected key public health indicators at the end of their fiscal year.

Annex 1: Example of a Monitoring and Evaluation Plan Template

Example of Monitoring & Evaluation Plan Template

MAIN PROGRAM OBJECTIVES, KEY INDICATORS, INTENDED RESULTS/TARGETS AND ARRANGEMENTS FOR MONITORING										
Main program objective 1:										
Key indicators	Baseline (if applicable)	Year 1 (intended results/targets)			Year 2 (intended results/targets)	Data Source	Frequency of data collection	Responsible		
1		Quarter 1	Quarter 2	Quarter 3	Quarter 4					
2										
Etc.										
Main program objective 2:										
Key indicators	Baseline (if applicable)	Year 1 (intended results/targets)			Year 2 (intended results/targets)	Data Source	Frequency of data collection	Responsible		
1		Quarter 1	Quarter 2	Quarter 3	Quarter 4					
2										
Etc.										

Narrative:

1. Description of how the data will be analyzed and used by the PR, the CCM and others for program management and other purposes.
2. Identification of the person(s) responsible for overseeing M&E, the budget for M&E activities and a description of what M&E activities and processes are already in place.
3. Description of plans to evaluate the program.

Annex 2: Menu of Indicators for Monitoring Program Performance

HIV/AIDS	
Prevention	Number of people receiving HIV testing (not including testing for routine surveillance)
Prevention	Number of condoms* distributed or sold
Prevention	Number of young people aged 15-24 educated in HIV prevention
Prevention	Number of sex workers reached with targeted HIV/AIDS interventions
Prevention	Number of men who have sex with men reached with targeted HIV/AIDS interventions
Prevention	Number of injecting drug users receiving harm reduction interventions
Prevention	Number of units of blood screened for HIV
Prevention	Number of cases of STIs treated*
Prevention	Number of people with access to workplace-based HIV/AIDS prevention services
Prevention	Number of HIV+ women receiving of antiretroviral therapy to prevent mother-to-child transmission of HIV
Prevention	Number of healthcare facilities offering safe clinical practices**
Treatment, Care and Support	Number of people receiving HIV/AIDS home-based care*
Treatment, Care and Support	Number of people receiving HIV/AIDS palliative care*
Treatment, Care and Support	Number of people receiving treatment for opportunistic infections*
Treatment, Care and Support	Number of people receiving prophylaxis for opportunistic infections*
Treatment, Care and Support	Number of people receiving antiretroviral therapy*
Treatment, Care and Support	Number of HIV/AIDS orphans receiving support
Tuberculosis	
Treatment, Care and Support	Number of treatment units implementing DOTS
Treatment, Care and Support	Number of estimated new smear-positive TB cases detected under DOTS
Treatment, Care and Support	Number of smear-positive TB cases registered under DOTS successfully treated*
Treatment, Care and Support	Number of persons completing DOTS+ treatment for MDR-TB*
Malaria	
Prevention	Number of insecticide treated nets distributed*
Prevention	Number of net re-treatment kits distributed*
Prevention	Number of children under 5 sleeping under insecticide treated nets
Prevention	Number of homes and buildings properly sprayed with the correct dose of insecticide at the correct time
Treatment, Care and Support	Number of uncomplicated malaria cases treated according to national guidelines within 24 hours of onset of symptoms
Treatment, Care and Support	Number of malaria cases treated with <i>non</i> artemisinin-based derivatives*
Treatment, Care and Support	Number of malaria cases treated with artemisinin-based derivatives*
* Refers to products or treatments financed by resources from the Global Fund	
** Includes universal precautions and sterile needles for medical purposes	