

Chapter 14

Implementation

This Chapter is designed to provide basic information concerning implementation, including details of monitoring and evaluation. These topics are not covered in great detail and appropriate references for further reading are given at the end of the Chapter.

14.1 Implementation framework

The seven key components of implementation are:

- Staff
- Resources
- Finances
- Time
- Outputs
- Community
- Information

These provide an appropriate framework for implementation, monitoring and evaluation. Each component is described in more detail below.

14.2 Staff

Staff form an integral part of any programme and the make-up of a team can have a major influence on the overall success of the programme.

14.2.1 Recruitment

Recruitment procedures may need to be instigated rapidly but selection criteria should always be developed clearly. Agencies should seek to achieve a national staff majority at all levels where possible. Skilled and unskilled staff from within the affected community should also be recruited where appropriate. The importance of communication must be considered and language barriers may pose considerable constraints. For this reason a good interpreter should be recruited as soon as possible in most situations. Job descriptions should be provided and employment contracts drawn up in accordance with local legal requirements.

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Some agencies may prefer to recruit ‘volunteer’ staff, especially from within the affected community, and different management, remuneration and support arrangements may be needed for these groups.

14.2.2 Remuneration

It is important that external agencies set up local salary scales in relation to existing national salaries. Where possible all humanitarian actors (NGOs, UN agencies, bilateral agencies, etc.) should agree uniform local salary structures to minimise conflict between and within agencies. The long-term effects should also be considered; for example, once the external agency has left, some staff may work for the government or local organisations, and consistent salaries are likely to minimise problems in this transfer.

In some circumstances it may be appropriate to pay workers in food (staple foods or luxury items) rather than money. This is normally a short-term measure and is likely to be most appropriate where there are limitations concerning the use of local currency.

14.2.3 Training and capacity building

Once staff are recruited they are likely to require training specific to the current situation. Some staff may have limited emergency experience and this should be recognised through the provision of appropriate briefing and training activities.

Wherever possible, agencies should seek to build capacities within local and displaced communities. Training activities may therefore be used to contribute to longer term goals, in addition to the success of the current programme.

Security is likely to be a major consideration in conflict zones and it is essential that all staff receive appropriate security training on issues such as anti-personnel mines, unexploded ordnance and armed hold-ups.

14.2.4 Supervision and appraisal

It is important that staff are supervised at all levels and that there is a degree of monitoring of their performance. Appraisal procedures should also be set up, especially in long-term programmes, and criteria used for appraisal should be clearly defined.

14.2.5 Conflict resolution

Conflicts between individuals or teams can cause huge problems in implementation. For this reason, conflicts should be identified and remedied at the earliest possible stage. Responsibility for this will ultimately lie with the programme manager.

14.3 Materials and equipment

14.3.1 Sources

The golden rule for resource procurement is ‘use locally available materials and tools wherever possible’. The reasons for this are twofold - to stimulate and contribute to the local

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economy, and to avoid extensive delays caused by ordering, purchase and transportation of resources from international sources.

14.3.2 Quality

The quality of goods must be balanced against speed of procurement and cost. The intended design-life must be considered along with the degree of urgency for implementation. In most scenarios local low-cost resources of poor quality are preferable to high-cost, high-quality goods that need to be shipped or flown into the affected area. The consequences of using poor quality resources must be weighed against time and cost constraints.

14.3.3 Logistical procedures

Logistics is perhaps the most important component of any emergency relief programme. Programme activities can only be conducted if necessary resources are available or can be made available. It is important that procedures for requesting, purchasing and transporting resources are simple and clear to all staff.

In designing and managing an effective programme good communication and co-operation between logistics and technical/hygiene teams is essential. Planners must be aware of logistical constraints, procedures and options, whilst resource requirements and specifications must be clearly conveyed to logisticians.

14.4 Finances

Sound financial management is a key component of any programme and some responsibility for this is likely to lie with field practitioners as well as accountancy staff.

14.4.1 Budgeting

In preparing budgets generous margins should always be made to allow for contingency plans. Such plans may be necessary as a result of an increase in the number of beneficiaries, economic or political change, or security problems.

In all budget plans it is important that estimated operation and maintenance costs are considered as well as procurement and construction costs. In most situations it is best to budget for the long term, as it is likely to be easier to secure funds in the earlier stages of an emergency.

14.4.2 Financial control

During implementation it is important to monitor cash flow and compare expenditure with amounts budgeted. It is also important to compare expenditure with activities and outputs achieved. Careful management of invoices and receipts is essential to this process and where a receipt is unavailable expenditure must always be recorded.

On-going financial monitoring will enable field staff to warn the agency headquarters if advanced funds are likely to be required. In addition, regular checks on the programme budget lines will be useful in making early changes to the programme if required.

14.5 Time

All other implementation components are governed by time and yet can also influence the rate of implementation. In most emergency programmes there is a large degree of urgency, and consequently time is of the utmost importance in all programme activities. For this reason it is essential that time is managed effectively and that activities are prioritised.

14.5.1 Logistics

The biggest single time constraint in many situations is logistics. This is largely unavoidable and yet can cause much frustration, resentment and even aggression among agency staff. Sometimes small items are required which may have a large influence on the beneficiaries; the delay in obtaining such an item can be very frustrating yet responses to logistical 'delays' should remain reasonable and measured.

Technical staff sometimes consider logistics as a simple question of walking into a shop and buying something, when often procedures are much more complicated than this. The time taken to communicate with suppliers, obtain funds, procure goods, arrange consignment, transport goods, clear customs and distribute to the field, can easily add up. This is especially the case where reliance is placed on expensive items from international sources.

Important ways in which field staff can ensure that time is not wasted are to:

- take time to specify required items clearly and unambiguously - include diagrams and give more information rather than less;
- order all components of a particular system at the same time - consider operation and maintenance (spare parts, tools, etc.);
- look at different options including local alternatives and short-term improvisations;
- plan activities in stages and allow realistic time-frames for logistical procedures; and
- keep on good terms and communicate regularly with the logistics team - they are likely to be your lifeline!

14.5.2 Breakdown of activities

A key element of managing time is the breakdown of activities into short, distinct time-bound targets. This helps to detect areas behind schedule early and to keep implementation plans simple and achievable.

Time-bound targets should be set for staffing, resources, finances, outputs, community participation and information exchange (reports, meetings, etc.).

14.5.3 Supervision and monitoring

By supervising and monitoring activities it can be assessed whether activities are being implemented to plan and on schedule, and if not, why not. The use of monitoring across all programme sectors can have a major positive effect on the overall progress.

14.6 Outputs

The primary focus of implementation is inevitably the actual outputs achieved. These can include completed facilities or services, effective operation and maintenance systems and improvements in hygiene practice. These should lead to the ultimate outcome, which is the raised and sustained health and well-being of the affected population.

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14.6.1 Facilities

Completed sanitation facilities are the main focus of a significant part of most sanitation programmes. All too often, however, scant attention is paid to on-going operation, use and maintenance of completed facilities. The quality of facilities can only be assessed by determining whether and how they are being used. This requires regular inspection and monitoring.

14.6.2 Operation and maintenance

Operation and maintenance (O&M) activities and systems are as important as design and construction actions. For this reason O&M should be considered at all stages of programme design and implementation. Successful O&M systems should be as much desired outputs as physical facilities themselves.

14.6.3 Health and hygiene

Improvements in health and hygiene are difficult to quantify and a reliance on morbidity and mortality figures alone may be misleading. However, these can act as useful indicators and can be combined with monitoring hygiene behaviour through interview, discussion and observation.

14.7 Community

Although community participation methods and principles are dealt with in Chapter 11 it is worth re-iterating that emphasis should be given to community issues.

14.7.1 Decision-making

Ways in which community members may be involved in programme development and decision-making should always be considered. Community involvement should be much more than digging pits or cleaning latrines.

14.7.2 Participation

Most community participation occurs in construction, operation and maintenance activities. Whilst this in itself is not a problem it is important that participation is not limited to these components which focus on cheap unskilled labour provision, rather than empowerment and capacity building.

14.7.3 Capacity building

Ways in which to promote and sustain the capacity and self-sufficiency of the affected community must continually be sought. Only through inviting the community to be involved in different aspects of the programme will it be possible to establish how this may be done. For this reason, plans may need to be adapted with time, as training and resource needs are identified.

14.8 Information

It is important to develop an information flow system that runs through the technical team, hygiene promotion team, logistics and finance. This ensures that each component of the programme is kept up to date on the activities of others and that the overall programme is monitored on all fronts.

14.8.1 Reports

A simple method of ensuring good information flow is to develop reporting formats and schedules. Reporting formats should be designed so that they reflect the real situation in the field and give information on both quantity and quality of hardware and software components (see 14.12).

14.8.2 Meetings

It is good practice to develop a regular meeting plan with the team and other key stakeholders. These meetings should not just consist of 'information exchange' but should be such that reports prepared by different teams feed into the implementation process on the ground.

14.8.3 Plans

Information from reports and meetings will only be useful if fed into future implementation and contingency plans. Planning should be on-going and flexible, to ensure that lessons are learnt and mistakes are not repeated.

14.9 Programme management

The previous sections have outlined the key components of implementation but a common problem affecting emergency relief programmes is ineffective management of these. Programme management can be defined as the planning, organisation, monitoring and control of all implementation components. This must, however, be coupled with motivation of all those involved in a programme to achieve its objectives. The management and co-ordination of activities is necessary to:

- achieve the programme objectives and targets;
- take immediate corrective actions for problems encountered;
- promote better communication among technical and hygiene staff in order to harmonise resources and activities for the achievement of project objectives; and
- establish communication between the affected population and other stakeholders.

The programme co-ordinator or manager is responsible for ensuring that these aims are met. The key roles of any manager are to:

- plan;
- lead;
- organise;
- control; and
- motivate.

Management can involve any or all of the following:

- Self-management
- Recruitment and training
- Motivation and supervision
- Contract negotiation

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- Conflict resolution
- Information and record keeping
- Communication and report writing
- Financial management

This is not an exhaustive list and further information regarding management can be found in Davis and Lambert, 1996. A good manager should, however, be adept at each of these and adopt a management style suitable for the current situation. For example, in the immediate stage of an emergency it may be appropriate to adopt a directive management style, whereby decisions are made rapidly with minimum input from subordinates. It is unlikely that such an approach would be appropriate in later stages of the programme, however, where a more consultative style may be more effective. Therefore, a flexible management style is likely to be necessary.

14.9.1 Managing implementation

A simple way to manage programme implementation is to use implementation milestones. This technique can be used with a multidisciplinary management team and usefully feeds into the monitoring process. A milestones table should be produced for each intended project output in the logical framework. Each table lists time-bound specific targets or ‘milestones’ which are necessary to achieve the project output. The table also includes who is responsible for achieving each milestone and when they should be completed. The final column is to be used by the management team to monitor programme progress, identify any problems or constraints, and make changes to implementation plans and time-frames.

Table 14.1 shows the typical framework for a milestones table with examples of the type of milestones and responsible bodies that may be included. A completed example is presented in the Case Study (Table C8).

<i>Selected milestones (general examples)</i>	<i>Who</i>	<i>When (date)</i>	<i>Current status and com- ments</i>
Recruitment	Agency staff		
Training activities	Agency staff		
Resource procurement	Logistics team		
Hygiene promotion activities	Hygiene promotion team; Community		
Construction activities	Construction team Community		
Monitoring activities	Agency staff; Community Other agencies		

14.9.2 Contingency planning

A key aspect of managing an emergency programme is the ability to undertake contingency planning for unforeseen events. In any emergency situation, it is difficult to plan for everything and impossible to predict exactly what will happen during the implementation phase. It is worth considering what assumptions have been made during programme design, and what is likely to happen if these assumptions prove to be wrong.

Whilst it is not necessary to make detailed contingency plans, it is good practice to consider possible emergency situations such as an influx of a large number of refugees, an outbreak of cholera or an increased security threat. Contingency plans may include:

- Training: appropriate training of staff in contingency procedures
- Equipment: local storage of small stocks of equipment in case of emergency
- Sites: identification of possible sites for relocation/settlement of refugees
- Logistics: identification of most efficient transport types and access routes

14.9.3 Co-ordination

One common problem in sanitation programmes is the lack of communication and collaboration between technical staff and hygiene promotion staff. This is largely a result of the fact that personnel with different professional backgrounds and interests are usually employed for each. This book takes the approach that hygiene promotion activities are an essential part of any sanitation programme and hence all activities should be integrated from the onset of implementation. Integration of personnel and cross-sectoral activities are key factors in achieving this aim.

It is also essential that there are good communication links between the affected community and other stakeholders, in order to avoid conflict and promote co-operation. These links should be co-ordinated by the programme manager.

The manager may also be responsible for co-ordination with other programmes and agencies working in the programme area. Ideally, different activities within the same agency should be integrated, and co-operation or collaboration with other agencies should be encouraged where possible. Integrated programmes may include sanitation, hygiene promotion, water supply, food distribution and health care activities.

14.10 Monitoring and evaluation

Monitoring and evaluation are tools used to assess whether the agency's actions are going to plan, and what the impacts of these actions are. Monitoring and evaluation can be used to:

- assist in the planning process;
- identify whether any readjustment to a programme is required;
- determine the progress of a programme; and
- provide a measure of overall success or failure.

Monitoring and evaluation are often seen by field staff as simply exercises to please the agency headquarters or the donor. However, if they are used properly they can be useful tools to support and improve programme performance.

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14.10.1 Reasons for monitoring and evaluation

Monitoring and evaluation will:

- save you time in the long-run;
- ensure that you know what you are doing or trying to do; and
- help you keep track of where you are and where you are going.

Monitoring and evaluation can tell you:

- if you can meet demand;
- if you need to change plans, goals or time-frames; and
- if your actions are having the desired effect.

Monitoring and evaluation:

- provide useful information for reports, replacement staff, etc.; and
- allow us to learn from our mistakes.

14.11 Monitoring methods

Monitoring aims to determine whether implementation targets are being met according to plan and if not how the programme needs to be adjusted. Monitoring should be an on-going process which starts in the immediate phase of an emergency and continues indefinitely. It facilitates programme change in changing situations. The following sections describe different monitoring methods and give examples of how these can be applied to the same situation.

14.11.1 Monitoring framework

Table 14.2 represents a monitoring framework tool produced for the Guidelines. This is used by answering the key questions for each implementation component. This exercise can form the basis for monitoring reports (see 14.12).

14.11.2 SWOT analysis

SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis can be conducted through brainstorming by all key stakeholders under the following headings:

- | | |
|----------------|--|
| Strengths: | Those things that have worked |
| Weaknesses: | Those things that have not worked so well or could be improved |
| Opportunities: | Conditions which are favourable and can be taken advantage of by the programme |
| Threats: | Threats which reduce the range of opportunities for improvement |

The purpose of this exercise is to provide a rapid summary of the key positive and negative aspects of the programme to date. This should help participants to focus on programme successes and how to sustain them, and weaknesses and how to overcome them.

The key components of implementation can be used to inspire feedback. A completed example of a SWOT analysis is reproduced in the Case Study (Table C10).

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Table 14.2. Monitoring framework

Implementation component	Monitoring data
Staff	<p>Has the target number of staff been recruited and trained?</p> <p>Does this include skilled staff from within the affected community?</p> <p>How are staff selected and trained?</p> <p>Is training on-going?</p> <p>Are staff supervised and appraised?</p> <p>Are staff working effectively and efficiently?</p> <p>Are there any personnel problems or conflicts?</p>
Resources	<p>Are appropriate resources procured and used as planned?</p> <p>Are logistical procedures clear and efficient?</p> <p>Is there regular feedback on order status from the logistics department?</p> <p>Is there a need for any additional resources?</p> <p>Are local materials used where possible?</p> <p>Are there any detrimental environmental effects?</p>
Finances	<p>Has the budget been kept to so far, and if not why not?</p> <p>How does expenditure compare with each budget line forecast?</p> <p>Is there regular feedback from the finance department?</p> <p>Are there any significant unforeseen costs or savings?</p>
Time	<p>Are activities being implemented according to schedule and if not why not?</p> <p>Is time managed efficiently?</p> <p>Are there any unforeseen time constraints?</p>
Outputs	<p>Are the targets for facilities and hygiene promotion being met, if not why not?</p> <p>Has the overall health of the population improved?</p> <p>Are benefits spread equally among the affected population, is anyone excluded?</p> <p>Are the outputs sustainable?</p> <p>Are there any relevant needs which have not been addressed?</p> <p>Are there any unforeseen effects caused by the programme?</p>
Community	<p>Is the community actively involved in design, construction, operation and maintenance?</p> <p>Are all facilities being used and if not why not?</p> <p>Have hygiene practices improved?</p> <p>Are there any capacity building activities for the community?</p> <p>Are there any conflicts between the community and other stakeholders?</p>
Information	<p>Are regular reports and plans produced and disseminated?</p> <p>Is information from reports fed back into the implementation process?</p> <p>Are meetings held regularly with key stakeholders?</p> <p>Are activities co-ordinated between teams?</p> <p>Are activities co-ordinated between implementing agencies?</p> <p>Is technical support and information available if required?</p>

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14.11.3 Log-frame analysis

Logical framework analysis can be conducted by using the measurable indicators identified in the logical framework produced at the planning stage. Each indicator can be used to test whether the programme has achieved the planned outputs, and this is recorded in the final column 'Recorded information'. Table 14.3 shows an example used for a monthly review of a hygiene promotion programme.

Table 14.3. Log-frame analysis example			
Narrative summary	Measurable indicators	Means of verification	Recorded information
Goal:	Crude mortality rate Crude morbidity rates: malaria; diarrhoea; dysentery; cholera; scabies	Monitoring reports and records from MSF medical team	Crude mortality rate, malaria and diarrhoea decreased; scabies increased
Purpose:	Improved hygiene behaviour and awareness of hygiene and sanitation issues Improved access to and use of appropriate sanitation facilities by affected population Increased community involvement in sanitation activities Improved construction, operation and maintenance of sanitation facilities following promotion campaigns Hygiene promotion campaigns directed at all groups within the camp, especially the vulnerable Hygiene promotion programme active in all areas of the camp	1.1 Feedback from hygiene promoters (notebooks), from MSF sanitation and health teams and from project monitoring and evaluation 1.2 Feedback from affected community through interview and discussion	All measurable indicators for programme purpose have been realised, although improvements are on-going (see outputs and activities below)
Outputs:	1. All households visited by hygiene promoters within one month 2. All section leaders to have shovel, pick and hoe, and five buckets per street within two weeks 3. One hygiene promoter per 800 people and one supervisor recruited from refugee population	1.1 Feedback from hygiene promoters, from MSF sanitation and health teams and from project supervision, monitoring and evaluation 1.2 Feedback from community members and section leaders 1.3 Logistics records for tools and materials	(1) Achieved (2) Currently below targets (3) Achieved (4) Training on-going but ability of team members is highly variable (5) Currently underway (6) Increase has been achieved and is continuing

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Table 14.3. continued.....

<i>Narrative summary</i>	<i>Measurable indicators</i>	<i>Means of verification</i>	<i>Recorded information</i>
	4. All hygiene promoters trained and able to demonstrate good understanding of key issues involved 5. Hand-washing facilities at schools 6. Increased coverage of appropriate family waste pits and latrines 7. Increased cleanliness of domestic environment		(7) Achieved (in general)
Activities:	1. Recruitment of hygiene promoters and supervisor 2. Training of hygiene promoters in appropriate promotional messages and methods 3. School visits for basic hygiene education and to address problems of lack of handwashing facilities at schools 4. Home visits to promote good hygiene practice and family garbage pits, and to explain family latrine option and give technical advice 5. Provision of tools and cleaning materials to section leaders 6. Checking and promoting cleanliness of communal and family latrines 7. Monitoring use of communal and family waste pits	1.1 Feedback from hygiene promoters, from MSF sanitation and health teams and from project supervision, monitoring and evaluation 1.2 Feedback from affected community through interview and discussion 1.3 Logistics records for tools and materials	Most activities conducted as planned on an on-going basis; (2) training of hygiene promoters requires greater input from sanitation staff; (5) more tools and cleaning materials need to be provided to section leaders; (6-7) monitoring of communal & family latrines and waste pits needs to be more systematic
Inputs:	1. Tools 2. Notebooks and pens 3. Buckets 4. Staff salaries	1.1 Logistics records for tools and materials 1.2 Financial records	Adequate supply of notebooks and pens, and salary provision; orders for tools and buckets outstanding

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Table 14.4. Checklist analysis table

Sector	Score (date)	Score (date)	Comments
Excreta disposal			
Solid waste management			
Waste management at medical centres			
Disposal of dead bodies			
Wastewater management			
Hygiene promotion			
AVERAGE site score			

14.11.4 Checklist analysis

A useful monitoring tool is to re-assess the overall sanitation situation using the rapid assessment checklists and tables (Chapter 16) at regular intervals. Table 14.4 shows a sample table in which comparable scores for each sector can be entered for different dates. A completed example is shown in the Case Study (Table C9).

This method provides a quantifiable measure of any change in service provision for each sanitation sector and the overall health of the affected population.

14.12 Evaluation

Programme evaluation is an assessment of an ongoing or completed programme, in terms of its design, implementation and outputs. This should be built on the monitoring process and aims to assess the appropriateness, effectiveness and efficiency of a programme.

14.12.1 Misunderstandings

Many aid workers become defensive if ‘their’ project is to be evaluated, since they worry that the results will be used to test them and show how poor their outputs were. This is not the purpose of evaluation. It is important that any evaluation is:

- participative; and
- constructive.

Often evaluations can be seen as simply a number-counting exercise, for example the number of latrines or tapstands provided, or the number of beneficiaries. Such evaluations provide little meaningful information.

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14.12.2 Evaluation methods

All the methods used for monitoring can be incorporated into the evaluation process. Evaluation can be conducted in a similar way to monitoring using the evaluation framework in Table 14.5 (adapted from Hallam, 1998).

Table 14.5. Evaluation framework

Evaluation component	Key factors to consider
Appropriateness	Has the programme been appropriate with respect to the: <ul style="list-style-type: none"> ■ perceptions and needs of the affected population; ■ policies and mandate of the agency; ■ national and international policies; and ■ urgency and prioritisation of needs.
Connectedness	Have local resources and capacities been identified and built upon? Has the programme enhanced community decision-making? Has the agency an appropriate phasing-out strategy? Are the programme outputs sustainable over their design life?
Effectiveness	Has the programme purpose been realised? Have there been any unforeseen side effects? Has the programme evolved in line with monitoring results? Have the recommended minimum objectives been satisfied?
Impact	Have the programme objectives been achieved? What has been the effect of the programme on morbidity and mortality rates? How can this be determined? Has the programme contributed to the stabilisation and empowerment of the community? Have there been any unforeseen impacts?
Coherence	How has the agency collaborated with implementing partners? Have there been any overlaps with other humanitarian actors? Have community priorities and plans been incorporated into intervention strategies? Has there been an effective information flow between stakeholders?
Coverage	What has been the extent of the programme impact on the affected population? Has access to appropriate facilities been adequate? Have any groups or individuals been excluded?
Efficiency	Has the ratio between outputs and inputs been acceptable for: <ul style="list-style-type: none"> ■ staff; ■ resources (including logistical procedures); ■ finances (cost-effectiveness); ■ time; ■ community participation; and ■ information?

14.13 Report writing

An important element of monitoring and evaluation is the production of clear concise reports. These can be designed for internal use in the field and within the agency, as well as for use by external stakeholders.

14.13.1 Monitoring reports

Field reports from sanitation staff can contribute greatly to the monitoring process and ensure that information is available to other agency staff and any replacement personnel.

Weekly or monthly situation reports (sitreps) from the field can go a long way to assist programme planning, contribute to contingency planning and keep key personnel informed. Table 14.6 shows an example situation report which incorporates the key components of implementation.

There are many other formats that can be used including some of the monitoring methods mentioned.

14.13.2 Evaluation reports

Evaluations are normally conducted by individuals who have not been directly involved in programme implementation. These may include staff from agency headquarters or external consultants. Table 14.7 shows a simplified outline for an evaluation report.

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Table 14.6. Situation report example

Location	Kala camp, Zambia
Agency	Médecins Sans Frontières, Holland
Reporting period	April 2001
Name of reporter(s)	Joseph Ng'ambi; Peter Harvey
Position of reporter(s)	Watsan engineer; Researcher
Overall situation summary (security, population, climate, etc.)	Some protests concerning food rations but now generally stable situation, very few new arrivals, dry season just begun
Staff issues (new staff, contracts, salaries, etc.)	Watsan engineer due to leave within next two months, heavy workload on water supply issues; labour force stable at present
Goods received in reporting period	Bins and containers for segregation of medical waste; large aggregate for soakpits
Logistics orders outstanding (order dates)	Cleaning materials (28/4); tools (28/4)
Expenditure for reporting period	US\$1,000 (excluding salary commitments)
Financial requirements for next reporting period	Continued salary commitments only
Time constraints (reasons for delays, etc.)	Some family latrines not completed due to lack of dry grass for roofs; lack of solid waste pits due to limited supply of tools
Activities undertaken during reporting period	Sharps pit and burner constructed; new medical waste system implemented; soakpits and drainage channels completed at all waterpoints; hygiene promoters recruited; initial training of hygiene promoters undertaken
Changes made to existing plans (including reasons)	Hygiene promotion programme to run in conjunction with health home-visit programme; World Vision to maintain responsibility for solid waste at the market
Tasks outstanding / forthcoming activities	Train hygiene promoters concerning sanitation facilities, focus on solid waste and excreta disposal; placenta pit to be constructed; wastewater drainage channels to be completed
Community issues	Community representatives expressed frustration over lack of tools and cleaning materials; Market Committee currently unable to take on responsibility of paying waste workers
Information details (meetings held, data received)	Weekly meetings with community leaders; weekly meetings with Market Committee, technical manual received from WEDC
Information requested	None
Other agencies / stakeholders (news and activities)	UNHCR Watsan visit and new co-ordinator

Table 14.7. Evaluation report outline**Summary**

Brief description of emergency and programme (purpose, target group, budget, period, etc.)
Purpose and approach of evaluation and summary of conclusions and recommendations

Programme justification

Justification as to why the agency decided to intervene

Activities

Brief description of programme activities, constraints and opportunities

Outputs

Summary of overall outputs achieved and lessons learnt

Resources

Description of human, financial and logistical resources used including their constraints, opportunities and lessons learnt

Evaluation framework

Completed framework to assess programme

- Appropriateness
- Connectedness
- Effectiveness
- Impact
- Coherence
- Coverage
- Efficiency

Conclusions

Conclusions in terms of overall status of programme, main findings and lessons learnt

Recommendations

Overall recommendations for continuing or similar programmes

Note: Monitoring and evaluation reports are only useful if they are READ and USED!

References and further reading

- Adams, John (1999) *Managing Water Supply and Sanitation in Emergencies*. Oxfam: Oxford.
- Davis, Jan and Lambert, Robert (1996) *Engineering in Emergencies: A practical guide for relief workers*. RedR / IT Publications: London.
- Hallam, Alistair (1998) Good Practice Review No.7: *Evaluating Humanitarian Assistance Programmes in Complex Emergencies*. Relief and Rehabilitation Network (Overseas Development Institute): London.
- Médecins Sans Frontières (1999) *Evaluation Manual: Learning from Experience*. Monitoring and Evaluation Unit, Médecins Sans Frontières: Amsterdam.
- Smout, Ian; Samson, Kevin; Coates, Sue & Snel, Marielle (2000) *Community and Management: A postgraduate distance learning module*. WEDC, Loughborough University: UK.

