





CARE BANGLADESH SHOUHARDO III PROGRAM

Monitoring and Evaluation Plan

September 6th 2016 Awardee Name: CARE Country: Bangladesh

Award No.: AID-FFP-A-15-00009

Contents

I	SH	HOUF	HARDO III Program Overview	l
	1.1	Pro	gram Overview	I
	1.2	Coi	ntext	2
2	SH	HOUF	HARDO III Monitoring and Evaluation System	2
	2.1	Obj	jectives and Strategy of the M&E System	3
3	SH	HOUF	HARDO III's Theory of Change PROGRAM DESIGN	4
	3.1	The	eory of Change	4
	3.	1.1	Review of SHOUHARDO III ToC	5
	3.2	SHO	OUHARDO III Logical Framework	5
	3.2	2.1	Monitoring & Management of Log Frame indicators	9
	3.3	SHO	OUHARDO III Performance Indicators Tracking Table (IPTT)	10
	3.3	3. I	IPTT Submission and Revision	П
	3.3	3.2	Baseline Values, Base Values, and Targets	П
	3.3	3.3	Performance Indicator Reference Sheet (PIRS) for each indicator in the IPTT	12
4	SH	HOUF	HARDO III Monitoring Strategy	13
	4 . I	Da	ta collection approaches for annual monitoring	13
	4.2	Geo	ographic Area Targeting and vulnerable population identification:	18
	4.3	Pan	el Data Collection	20
	4.3	3. I	Union Parishad, Management Score Sheet (MSS)	21
	4.3	3.2	Assessment of SHOUHARDO III working villages applying Village Grading tool .	21
	4.4	Pro	cess monitoring data collection	22
	4.4	4 . I	Commodity Management Process Monitoring	22
	4.4	4.2	Environmental Management	23
	4.5	Anr	nual Participants based Sample Surveys (outcome monitoring)	24
	4.5	5. l	SHOUHARDO III Beneficiary Based Sample Survey (BBSS): Sampling Strategy	25
	4.5	5.2	Data Management and analysis	32
	4.5	5.3	Survey Tools and Survey Questionnaire	33
	4.5	5.4	Survey Team Training and Field Testing	33
	4.6	Dat	a Collection Tools	34
	4.7	SHO	OUHARDO III Information Flow and Management Chart	34
	4.8	SHO	OUHARDO III Monitoring Database and application of GIS	36

	4.9 Da	a Reporting, Disseminating Results Use	37
	4.9.1	Rationale for Disseminating M&E Results:	38
	4.10	Pata Quality Assurance	39
	4.11	Pata Management and Safeguarding	42
	4.11.1	MIS database access credentials:	42
	4.11.2	Periodic backup of MIS database into an external hard drive:	43
	4.12 F	romoting Participatory Monitoring and Evaluation (PM&E)	43
	4.13 I	nformation Communication Technology (ICT):	43
5	Adhere	nce to Submission of M&E data/documents into FFPMIS DEC and DDL	45
6	M&E st	affing and capacity building strategy	46
	6.1 M8	E Staffing and Organogram	46
	6.1.1	Chief of Party	47
	6.1.2	Monitoring and Evaluation Coordinator	48
	6.1.3	MIS and GIS Manager	48
	6.1.4	M&E Manager-Program Quality	49
	6.1.5	Regional M&E Manager	49
	6.1.6	M&E Officer	49
	6.2 Lea	rning, Knowledge Sharing	50
	6.3 Ca	pacity Development Strategy	5 I
	6.3.I	Central level staffs orientation on M&E Plan	5 I
	6.3.2	CARE Regional and PNGO level staffs M&E training	5 I
	6.3.3	Annual monitoring training	5 I
	6.3.4	M&E refresher training	52
	6.3.5	Training on ICT based e-M&E/MIS database system	52
	6.3.6	Training on statistical concept, data analysis using statistical software and	F.
_	-	etation	
7	-	with Unexpected and Working in Political Instability:	
8		HARDO III Evaluation Plan	
		eline study	
	8.1.1	Baseline Surveys and Establishment of Targets	
	8.1.2	Reporting Baseline Values and Final Evaluation Targets:	
	8.1.3	Sharing Baseline Report to the program staff and partners	
	8.1.4	Use of Baseline Study Results to Refine Program Strategies:	
	82 Mid	lterm evaluation	56

8	3.3	Final evaluation	7
9	Mai	or M&E Schedule58	}

List of Acronyms and Abbreviations

ADS : Automated Directive System

AOR : Agreement Officer's Representative

ARR : Annual Results Report

BMD : Bangladesh Meteorological Department

CARE : Cooperative for Assistance and Relief Everywhere (operating under the

name CARE Bangladesh)

CHQ : CARE USA Headquarters

C-IMCI : Community Based Integrated Management of Childhood Illness

C-MAM : Community Based Management of Acute Malnutrition

CoP : Chief of Party

DCoP : Deputy Chief of Party

DCRM : Disaster and Climate Risk Management

DDL : Development Data Library

DEC : Development Experience Clearinghouse
DFAP : Development Food Assistance Plan
M&ES : Monitoring & Evaluation System

DQA : Data Quality Assessment

DV : Disaster Volunteer

EKATA : Empowerment Knowledge and Transformative Action

FFP : Food for Peace

FFWC : Flood Forecast and Warning Center FSCF : Food Security Country Framework

FtF : Feed the Future

GBV : Gender Based Violence

GCAT : Group Capacity Assessment Tool
GIS : Geographical Information System

GoB : Government of Bangladesh

ICT : Information and Communications Technology

IPTT : Indicator Performance Tracking Table
IYCF : Infant and Young Child Feeding Practices

LEB : Locally Elected Bodies

LF : Logical Framework (Log Frame)
LGSP : Local Government Service Provider
LPCM : Large Program Coordination Meeting
MCHN : Maternal Child Health and Nutrition

M&E : Monitoring & Evaluation

M&EC : Monitoring & Evaluation Coordinator
MIS : Management Information System
MoH&FW : Ministry of Health and Family Welfare

MSS : Management Score Sheet MTE : Mid-Term Evaluation

NBD : Nation Building Departments

PACC : Program Advisory Coordination Committee

PEP : Poor & Extreme Poor

PIRS : Performance Indicator Reference Sheet

PIIRS : Program Impact Information Reporting System

PLW : Pregnant and Lactating Women
PM&E : Participatory Monitoring & Evaluation
PM&ES : Planning Monitoring & Evaluation System

PMD : Participants Master Database

PNGO : Partner Non-Government Organization PPT : Participatory Performance Tracking

PTS : Participants Tracking System RTM : Regional Technical Manager

RM : Reporting Manager

SAPQ : Standardized Performance Annual Questionnaire SBCC : Social and Behavioral Change Communication

SHOUHARDO III : Strengthening Households Ability to Respond to Development

Opportunities III

SMT : Senior Management Team

SPCM : Small Program Coordination Meeting

STC : Senior Technical Coordinator STM : Senior Technical Manager

TO: Technical Officers
ToC: Theory of Change

UISC : Union Information and Service Centre

USAID : United States Agency for International Development

USG : United States Government

VDC : Village Development Committee

WBA : Well Being Analysis

I.I Program Overview

Program Name: Strengthening Household Ability to Respond to Development Opportunities III (SHOUHARDO III).

Goal: Improved gender equitable food and nutrition security and resilience of the vulnerable people living in the Char and Haor in Bangladesh by 2020.

Geographic Focus: The Program operates in the *Char* and the *Haor* area in Bangladesh reaching eight districts (Kurigram, Gaibandha, Sirajganj, Jamalpur, Kishoreganj, Netrokona, Habiganj and Sunamganj), 23 upazilas (sub-districts), and 115 unions.

Population coverage: The primary focus is on 549,000 individuals from 168,521 vulnerable households.

Roles and Responsibilities:

CARE Bangladesh in collaboration with CARE USA Headquarters (CHQ) will provide technical support to SHOUHARDO III program, building capacity of its implementing Partners: Partner Non-Government Organizations (PNGOs), monitoring and ensuring quality implementation of the program activities and reporting on them. CARE will actively monitor the progress and quality of its activities and systems to ensuring that program resources are used for their intended purposes and are achieving the desired impact. CARE, having concurrence from the United States Agency for International Development Food For Peace (USAID/FFP), will establish a complete set of key indicators taken from the standard indicator lists of USAID/ Food For Peace (FFP), Feed the Future (FtF), USAID/Dhaka Mission Development Objectives, include CARE's own indicators that are applied globally, as well as those defined and customized specifically for SHOUHARDO III and the Government of Bangladesh (GoB). These sets of indicators will help to closely track, monitor and measure the outputs, outcomes and impacts of the program. In addition to assessing progress toward the achievement of targets, the program will identify areas for further inquiry that will require more specific studies to understand positive changes or lack of the same with a view of enhancing program effectiveness and learning from evidence. The system will apply mixed methods including participatory, qualitative and quantitative methods heavily focused on routine monitoring and the use of Information and Communication Technology for Development (ICT4D) platforms. The system will make use of rigorous participatory approaches, promote a learning culture and make use of a refinement platform and community of practice. The Monitoring and Evaluation (M&E) system is designed as an evidence-based system for quality reporting, promoting a learning culture, innovating and ultimately informing programming and decision making. This will ensure meaningful engagement of key stakeholders for refinement and improvement in order to establish an effective and efficient M&E system.

Implementing Partners: There are six local PNGOs, namely: the SKS Foundation, Mahideb Jubo Somaj Kallayan Somity (MJSKS), Eco–Social Development Organization (ESDO), National Development Programme (NDP), People's Oriented Program Implementation (POPI), and Dhaka Ahsania Mission (DAM). PNGOs implement technical interventions; implement CARE-guided monitoring of activities and results; and share program learning internally, across all partners and with CARE itself. Each PNGO brings to SHOUHARDO III specific technical expertise and long and successful experience improving food security and resilience in targeted districts.

I.2 Context

The persistence of food insecurity and vulnerability to shocks among the Poor & Extremely Poor (PEP) in Bangladesh is driven by a myriad of social, economic, ecological, and governance factors. CARE Bangladesh, as award holder, will work with six PNGO sub-awardees and various technical partners to implement the SHOUHARDO III (2015-2020) award in eight vulnerable districts of the country. The SHOUARDO III program builds on the gains and lessons from its predecessors SHOUHARDO and SHOUHARDO II by maintaining a strong emphasis on improving food security and livelihoods, improving nutrition for the PEP, and promoting women's empowerment at the community level. The program also has a component aimed at strengthening local governance and improving adaptation to climate change. The project is operating mainly under two broader geographical contexts which are:

Haors, which are deeply flooded submergible areas, where villages located on mounds (locally called "ati") look like small islands in the water. These mounds are vulnerable to severe wave erosion during monsoon season. The poor are most vulnerable because they live on the least desirable (i.e. most dangerous) tracts of land. Flood prone, crop production is impeded in the haor region, and farmers have to rely on a single crop, a rice called 'boro'. If the boro crop fails, the households become food insecure.

The active flood plains (temporary islands) of the major rivers in the Northwest portion of the country are known as *chars*, where severe floods and erosion are major concerns. Here the villages are almost temporary, as households frequently move to safer locations due to erosion or during floods. In the *chars*, livelihoods are affected by frequent flooding and river erosion, which result in the loss of assets (both crops and livestock), a scarcity of clean water, and shortages of fodder.

2 SHOUHARDO III MONITORING AND EVALUATION SYSTEM

CARE's SHOUHARDO III Monitoring and Evaluation system is primarily built on the program's Log Frame, Theory of Change (ToC) and Indicator Performance Tracking Table (IPTT); further embracing a learning approach on an on-going basis and will identify specific areas of inquiry as program implementation proceeds. The M&E system and process are adaptive in its design and functionality, yet focus on essential requirements ensuring cost effectiveness and effective resource use. The system will be implemented keeping data utilization, evidence, and quality (built-in intelligent control mechanics) at the center, while encouraging creativity and innovation.

The M&E system have been established in a manner that complies with CARE and USAID FFP's relevant policies and guidance1, including from the Automated Directive System (ADS)2, current requirements, and is adaptable to emerging requirements. SHOUHARDO III's M&E system will employ Information Communication Technology (ICT) for smoother and real time data collection, management, and analysis in the field. The outputs from the system are designed to convert data into information that meets stakeholders' needs and tells the program story in addition to facilitating decision-making for program improvements and adaptation3. The M&E system will involve the application of quantitative and qualitative participatory methods to measure the program's results in agriculture and livelihoods, health and nutrition, women's empowerment, resilience, and governance related outcomes. The M&E system will include routine process monitoring, contextual analysis, facilitate Participatory M&E (PM&E) sessions, thematic studies, sample surveys and formative research to make informed management decisions. Data collected will be aggregated by broader programmatic aspects and disaggregated by key attributes; such as sex, age, marital status, well-being, location/context, and in other ways as specified by FFP and relevant USAID guidance, etc. to assess how program interventions impact different target groups.

The M&E system will contribute to CARE's national and global 2020 vision for programing and learning agendas. The key elements of the M&E system make up the acronym **ASSERTIVE**:

- A Automation, Aggregation, and Acceleration;
- S Standardization with scale-ups;
- S Systemization through strengthened capacity;
- E Exploration and Experimentation;
- R –Reflection, Refinement, and Replication;
- T –Transformation of data to information;
- I Innovation and Integration of ICT- for multiplying Impact;
- V Visualization towards Vision (Focused Targeting);
- E Evolution with evidence and efficacy value addition/ growing to new heights.

2.1 Objectives and Strategy of the M&E System

The M&E system will play an essential function for the SHOUHARDO III program's implementation and programmatic improvement, providing valuable information on program targets, periodic progress leading to an effective and efficient use of resources for the benefit of vulnerable populations, and reaching toward the program's ultimate objectives. In order to ensure

¹ This includes but is not limited to CARE Vision 2020 and FNS CCA strategies, DFAP Guidelines and CSI for Bangladesh, FFPIB, ADS Section/ Chapter, USAID M&E Policy and Guidance, FFP Indicators Handbook – Part I and II, FtF Agriculture Handbook, FtF Sampling guidance, Bangladesh M&E Workshop January 2016 and Sampling Guide for Beneficiary-Based Surveys in Support of Data Collection for Selected Feed the Future Agricultural Annual Monitoring Indicators, Diana Maria Stukel and Gregg Friedman

² CARE considers that open data to be a driver of innovation, competition, efficiency, transparency and sharing. The program exists to make the key information more accessible, more discoverable and more usable, and thus provide the ability for institutions to better understand, monitor and plan for programmatic improvement.

³ A detailed discussion on the ICT is found in section 8.2

effective monitoring and mitigation of potential harm to the environment, the program will integrate Environmental Mitigation and Monitoring⁴ into the overall M&E system. The key tool used is the Environmental Management and Mitigation Plan (EMMP) which includes integrated indicator and standalone environmental indicators.

The M&E system will have two main purposes. It will:

- (i) Manage program data and information; and
- (ii) Create a learning platform through which program staff will reflect on successes and failures to achieve targets to improve, adapt, and/or discontinue ineffective approaches and activities.

The result-based learning will be augmented by a PM&E approach that will be driven by participant, community, and stakeholder reflections. The PM&E is a qualitative process that increases context and avoids the pitfalls of academic data collection that may be out of touch with ground realities; including unforeseen impacts and outcomes.

3 SHOUHARDO III'S THEORY OF CHANGE PROGRAM DESIGN

3.1 Theory of Change

The SHOUHARDO III program is setting out to work among PEP rural households in *Char* and *Haor* areas of Bangladesh to achieve long lasting changes in food and nutrition security. The program assumes that there will be: (1) stability in macro and micro economic and political systems, (2) no major natural calamity or shock outside regular flooding, and (3) limited human and animal disease outbreaks to achieve desired goals. Additional assumptions affecting purpose level outcomes can be referenced under each specific purpose.

The program believes that integrating its own actions and those of government, private sector, and other development partners is essential to achieving its goal and purposes. Therefore, the program will engage at the national, district, upazila, and union level with actors and implementing institutions to achieve its goals. Some of the actors will work without SHOUHARDO III program direct involvement interventions; for example: (i) in the construction of community level hazard/disaster management structures and dissemination of weather and early warning information, which will be done by government; and (ii) the private sectors will set up franchises to support the supply of agricultural inputs and pro-poor financial inclusion products, to which the program will provide technical inputs and recommendations. Even though the program will not be involved, it will track⁵ the actions at each level including anticipating delays and identifying the need to intervene to ensure impact on achieving the program goal.

The program's Theory of Change (ToC), is hinged on achieving increased productivity, utilization of nutritious foods, and enhanced household resilience in addition to increased women's

⁴ This is discussed in more detail in section 8.1.

⁵ This tracking will be through routine qualitative data and reflections of sample survey data where communities and participant will be engaged to identify the reasons for non-achievement of the program targets. These reflections will also test the soundness of the ToC logic.

empowerment and service delivery to the PEP populations. For each of these result areas, specific actions and intermediate outcomes are defined (Refer to **Annex-A** and **Annex-B** – SHOUHARDO III Theory of Change Diagram and Narrative).

3.1.1 Review of SHOUHARDO III ToC

The M&E system is designed to review the assumptions, continued logic, effectiveness, and appropriateness of the outputs of activities at each level of the ToC towards achieving the next higher level of outcomes. CARE will promote a systematic process of reviewing the ToC annually, and revise and submit any changes for approval along with the Pipeline and Resources Estimate Proposal (PREP). In addition, a comprehensive review will be completed following the mid-term evaluation. Even without a follow-on phase guarantee, CARE hopes the final evaluation will provide adequate conclusions on the relevance and appropriateness of the ToC.

All reviews will consider the following key questions:

- i) What contextual factors have changed?; and
- ii) What new evidence has come to light, including programmatic findings, since the previous development of hypotheses and periodic review?

The specific objective of these reviews include, but are not limited to:

- An intervention or lower level outcome failed to influence the next level outcome, even though all other pre-conditions in the ToC were met. (e.g. farmers' production improved even though adoption related to improve technology and management practices did not improve as intended).
- An intervention output was applied in an unanticipated way or led to an unanticipated outcome. For example, Village Savings and Loan Association (VSLA) were implemented as designed but did not result in investments for diversified incomes.
- Program monitoring reveals that quality or efficiency in reaching outcomes is dependent on additional factors not portrayed in the ToC. For example, findings may uncover unanticipated reasons why some beneficiaries are quick to adopt promoted practices, but others are not.
- Significant changes occur in the political or environmental factors in the local context.

3.2 SHOUHARDO III Logical Framework

The SHOUHARDO III LogFrame (Annexed to this plan as **Annex- J**-SHOUHARDO III LogFrame) is based upon the program's ToC and was designed in accordance with the Country Specific Information for Bangladesh, the USAID Food Security Country Framework (FSCF) for FY 2015-2019, and the 2011-2016 USAID Country Development Cooperation Strategy for Bangladesh. The program design is also consistent with CARE's Unifying Program Framework for Poverty Eradication and Social Justice, CARE's Global Food and Nutrition Security/Climate Resilience Strategy, and Bangladesh's long-term development strategy (2010-2021). The LogFrame

summarizes the goal, purposes, and outcomes that the program commits to achieve from the ToC.

This section discusses key components of SHOUHARDO III's LogFrame, including an overview of key approaches to provide a context for this framework. **Table I** provides a top-level summary of the SHOUHARDO III program Log Frame at purpose level. The full Log Frame is annexed (**Annex-J**).

In order to achieve its anticipated goal and outcomes, SHOUHARDO III will systematically demonstrate its impact through five purposes:

- (i) Increased equitable access to income for both women and men, and nutritious food for women, men, boys, and girls.
- (ii) Improved nutritional status of children under five years of age, pregnant and lactating women, and adolescent girls.
- (iii) Strengthened gender equity of people, households, communities, and systems to mitigate, adapt to, and recover from man-made and natural shocks.
- (iv) Increased women's empowerment and gender equity at the family and community levels.
- (v) Increased provision and utilization of public services (LEBs & NBDs) for communities especially for PEP.

The first purpose will be achieved through increased agricultural production, increased access to agriculture markets, off-farm income opportunities of women, men, and youth, and the utilization of financial services. To achieve the second purpose, the project will increase access to and utilization of (i) nutritious food for pregnant and lactating women, children under five and adolescent girls; (ii) health and nutrition services; and (iii) environmentally friendly and sustainable WASH infrastructure. The third purpose will be achieved through increased gender equitable Disaster and Climate Risk Management practices of vulnerable households and communities (Absorptive/Adaptive) and strengthened Disaster and Climate Risk Management systems of local government (Union Parishad) institutions (Transformative). The fourth purpose will be achieved through strengthened agency, leadership, and decision-making power of women, reduced Gender-Based Violence at the family and community levels, and enhanced institutional environments for women's participation on women's needs and priorities. The fifth purpose will be achieved through negotiating demands, increased public services for communities (especially PEP) and increased services of LEBs & NBDs that address the needs of communities particularly PEP women.

Table I: Logical Framework of SHOUHARDO III Program

	SHOUHARDO III LOGICAL FRAMEWORK							
Goal and Purpose	Indicators	Data Sources	Assumptions					
Goal: Improved gender equitable food and nutrition security and resilience of the vulnerable people living in the Char and Haor in Bangladesh by 2020	FFP 2: Prevalence of Poverty: Percent of people living on less than \$1.90/day FFP 3: Depth of Poverty: The mean percent shortfall relative to the \$1.90 poverty line FFP 6: Prevalence of stunted children under five years of age FFP 28: Prevalence of households with moderate or severe hunger (Household Hunger Scale HHS) FFP 51: Number of rural households benefiting directly from USG interventions FFP 34: Number of vulnerable households benefiting directly from USG assistance FFP 12: Number of food security private enterprises (for profit), producers organizations, water users associations, women's groups, trade and business associations, and community-based organizations (CBOs) receiving USG	BL/FE; 3rd-Party Survey Firm BL/FE; 3rd-Party Survey Firm BL/FE; 3rd-Party Survey Firm BL/FE; 3rd-Party Survey Firm Annual Census Annual Census	Economic and political systems at macro and micro level will remain stable over the lifespan of the program					
Purpose I: Increased equitable access to income for both women and men, and nutritious food for men, women, boys and girls	assistance FFP 5: Daily per capita expenditures (as a proxy for income) in USG-assisted areas Custom: Percent of households consuming poor and borderline diets based on the food consumption score (FCS)	BL/FE; 3rd-Party Survey Firm BL/FE; 3rd-Party Survey Firm	Sustained advocacy and pressure to implement the Khas Land Management and resettlement policy GoB investment in transport and communication infrastructure continues Private sector establish business service in remote areas					

			GoB and private financial institutes expand financial services in remote
Purpose 2: Improved nutritional status of children under five years of age, pregnant and lactating	FFP 1: Prevalence of underweight children under five years of age FFP 7: Prevalence of underweight women (8 percentage point reduction over baseline)	BL/FE; 3rd-Party Survey Firm BL/FE; 3rd-Party Survey Firm	Public health system is funded and staffed to support improved services to PEPs Community Health Services adequately
women and adolescent girls			funded and reaches the PEP from public, private and civil society actors
Purpose 3: Strengthened	Mission 31: Number of people trained in	Annual	No catastrophic disaster occurs
gender equitable ability of people, households,	disaster preparedness as a result of USG assistance	Monitoring	beyond the normal intensity
communities and systems to mitigate, adapt to and	FFP Custom: Resilience Capacity Index	BL/FE; 3rd-Party Survey Firm	BMD and FFWC continues to develop forecast and warning products
recover from man-made and natural shocks	FFP Custom: Degree of shock exposure	BL/FE; 3rd-Party Survey Firm	GoB continues to prioritize Disaster and Climate Change Risk Management
	Custom: Average Coping Strategy Index of	Annual	activities
	the targeted households (male and female headed) affected by natural disaster	Monitoring	
Purpose 4: Increased	Custom: Mean decision making score	Annual	Government, religious, community
women's empowerment	(Index) for woman in household level	Monitoring	leaders actively embrace Women's
and gender equity at family	FFP 63: Percentage of men/women in union	BL/FE; 3rd-Party	Empowerment
and community level	and earning cash who make decisions jointly with spouse/partner about the use of self-earned cash	Survey Firm	Legal and policy barriers to gender equity continue to be addressed
Purpose 5: Provision and	Custom: Percentage of women of	BL/FE; 3rd-Party	The political situation remains stable
utilization of public services	reproductive age that have access to primary	Survey Firm	with sustained investments on PEP
(i.e. Local Elected Bodies &	healthcare services from health department of GoB		development
Nation Building		DI /EE, 2 and Da	The newly elected Union Parished
Departments) for communities especially for	Custom: Percentage of farmers-that have access to Agriculture and livestock extension	BL/FE; 3rd-Party Survey Firm	The newly elected Union Parishad settles into office expeditiously with a
Poor and Extreme Poor (PEP) increased	services from agriculture and livestock extension departments of GoB.	Survey Firm	positive engagement in governance conversations

Intermediate Outcomes, Outcomes and Outputs including cross-cutting areas:

Program Outputs: The program will demonstrate that most of the major improvements in household, individual, woman, youth, and child level outcomes can be attributed to program interventions. The changes will be brought about by a host of interventions, ranging from human and institutional capacity building, asset transfers, support for savings groups, promotion of value chain activities, creating access to markets for poor farmers⁶, promotion of breastfeeding and key Health Hygiene and Nutrition (HHN) behaviors, direct food assistance,⁷ empowering women through the formation of EKATA groups, and infrastructural development for building resilience at the community level. All of the complementarities of program interventions⁸ systematically help build the resilience of vulnerable people to achieve gender equitable food and nutrition security.

3.2.1 Monitoring & Management of Log Frame indicators

The M&E plan includes activities that allow it to review quantitative results (obtained through sample based participant survey), reference field based observations (resulting from routine monitoring) and use other qualitative methods such as PM&E to capture resilience, innovations, learnings, and suggest potential areas and scopes for continuous improvement. To demonstrate evidence-based short and long-term programmatic improvement, a variety of indicators (discussed under IPTT section below) included in the performance monitoring system will be measured annually. M&E instruments and processes will be applied over the life of the program. A systematic and periodic performance review against the LogFrame will be conducted by the Mid Term Review team and will track progress at the level of purpose, sub purpose and immediate outcome that are designed to measure changes relative to the respective baseline and end of program targets as summarized in the IPTT and SAPQ. The review will be done on an annual basis immediately following the results of the Beneficiary Based Sample Survey (BBSS), and will consist of a qualitative review of the outcome results as available. The senior technical team and management team will use such a qualitative results to jointly review assumptions and progress to date. This will eventually help measure evidence-based changes in the demography and livelihoods of vulnerable people, child malnutrition, women's empowerment, resilience, and governance and institutional capacity that are presented in a summarized form in the LogFrame.

⁶SHO II QPE reveals that access to markets and services improved— 98% farmers reported access to inputs or financial services.

⁷SHO II QPE Evaluation confirms that, children < 5 experienced significant reductions in all measures of malnutrition—stunting, wasting and underweight. The 18% decrease in stunting prevalence, 3.6% per year, is impressive especially given that BDHS data suggest that the national trend has a reduction of only 0.5 percent per year between 2007 and 2011

year between 2007 and 2011

The SHOUHARDO Evaluation shows that, in general, the more involved a household has been in multiple SHOUHARDO II interventions, the better off it is in terms of food security, equality of power between female and male household members, and the nutritional status of young children.

3.3 SHOUHARDO III Performance Indicators Tracking Table (IPTT)

In SHOUHARDO III, performance indicators specify the data that the program's M&E system will be collecting in order to measure progress and compare actual results over time against what was intended to be achieved. The Indicator Performance Tracking Table (IPTT) is a primary tool to track, document, and display performance indicator data. The IPTT allows program implementers to see how much progress has been achieved against a set indicators, and this information indicates how the program will contribute to reducing food and nutrition insecurity, improving health and nutrition outcomes, enhancing resilience, and increasing productivity and marketing among producer groups in the targeted vulnerable areas. CARE will use the IPTT to internally track and monitor indicator target achievement, often leading to the refinement of program approaches as appropriate. At the end of each fiscal year, CARE will submit an IPTT as part of the Annual Results Reports (ARR) submission into the Food for Peace Management Information System (FFPMIS). The IPTT must, to the best degree possible, include all FFP, USAID Dhaka Mission, and FtF impact, outcome, and output-level indicators, while at the same time balancing the need for program specific indicators. These programspecific, or customized indicators that are not covered by the FtF or Mission Development Objectives or FFP/W. Yet, they are necessary to highlight the uniqueness of the program. As per guidance from FFP, CARE will not include custom output indicators in the IPTT unless such indicators are required by FFP. The IPTT is organized to mirror the program LogFrame structure and include at least one indicator to measure each LogFrame component. Regular tracking and evaluating of valid, reliable and timely data will contribute to keeping the program focused on achieving results and will permit any necessary adjustments in program activities and responses to shocks. Sound information will enable evidence-based decision making.

The CARE IPTT includes 116 indicators that will be used to monitor progress and manage performance through the life of the program at the output, outcome, and impact levels. The performance indicators are attached in **Annex D**. Out of 116 indicators, 38 are Baseline / Final and 78 are Annual Monitoring Indicators. They include 56 USAID/FFP Required and Required if Applicable (R and RiA) indicators to facilitate systematic input in FFPMIS both for the ARR and PREP submission times. In addition to the FFP indicators, CARE will also include 60 (53 Annual and 7 Baseline/ Final) custom indicators. The custom indicators were selected based on standard criteria often summarized by the SMART rule (i.e. specific, measurable, appropriate, relevant, and time bound). Measurement of these indicators at appropriate intervals will reveal the degree to which targets/purposes have been achieved and will contribute to more sophisticated analyses of cause and effect. Together, these indicators provide a comprehensive measurement of the project's effectiveness in meeting targeted results.

As a whole, CARE has proposed 78 Annual Monitoring Indicators in the IPTT. Data for 29 indicators will be collected through Beneficiary Based Sample Survey (BBSS) and data for the

remaining 49 indicators will be collected through Annual or routine monitoring mechanism and service delivery records i.e. participants training attendance and inputs/ service delivery records, community record, VDC record, infrastructure record, and institutional assessment. A comprehensive list of IPTT indicators with source, data collection method, desired direction of change (+/-), cumulative (C) or non-cumulative (NC) is presented in **Annex K**– SHOUHARDO III Program Indicator Performance Tracking Table. Gender and environment related indicators are included, and mostly integrated, in the above lists and will be similarly measured through routine monitoring/annual surveys at the project's baseline, mid-term, and final evaluations.

3.3.1 IPTT Submission and Revision

During ARR submission, CARE will also submit an IPTT updated with actual values for the reporting (i.e. just-completed) fiscal year. With each ARR, considering actual results, CARE will request, as appropriate, changes to targets for the current year (i.e. the year following the reporting year), future years, LOA, and final evaluation. CARE will also request, as appropriate, approval for other modifications to the IPTT (e.g. indicators; future year targets; and method of collection) with the annual PREP, or at any other time during the year. If any indicator is dropped for any valid reason (having received approval from AOR) this will be preserved in an archived list. As part of requirement, CARE will enter plan and achievement data in the FFPMIS under specific Tabs and provide deviation narratives if any achievement value is less or greater than the targets by 10%. Any requests for revisions to the IPTT will include narratives that describe and justify the proposed changes. Since the addition, removal, or re-definition of any indicator in the IPTT requires changes to other components of the M&E Plan, e.g. the LogFrame, PIRS and Data Flow descriptions, CARE will request approvals to any material changes to the M&E Plan by the Agreement Officer Representative (AOR) at FFP/W.

3.3.2 Baseline Values, Base Values, and Targets

Following the standard templates, for every annual monitoring indicator, the IPTT includes a base value and targets for every fiscal year, including LOA. The IPTT is submitted annually with the ARR and includes actual values for the reporting fiscal year, and the target values for the LOA. For all baseline/final evaluation indicators, the IPTT will have the baseline value and a final evaluation target in the form of anticipated percentage point change from the baseline estimates. The actual final evaluation value will be entered in the IPTT submitted with the final ARR immediately following the completion of the end line survey.

In the initial submission of IPTT, the base value of Annual Monitoring Indicators will be generated through Focus Group Discussions, secondary data, and previous program experience as appropriate. CARE will conduct an Annual Monitoring survey through a third party survey firm in FY16. The intention of the survey is not to measure progress, but define and better set

values for its baseline annual monitoring indicators. With the realistic revision of base values, the targets will also be revised as deemed necessary, which is largely associated with the status of the actual base values. On the other hand, the estimated targets for baseline / final evaluation indicators will be included once the baseline results are available enabling realistic revision of targets.

3.3.3 Performance Indicator Reference Sheet (PIRS) for each indicator in the IPTT

Performance Indicator Reference Sheets (PIRS) are intended to provide a complete picture on performance indicators, description of terms, clear definitions of the indicators, justifications of their utility, and means of verification in an integrated manner. PIRSs also outlines other key elements and attributes of the indicators, such as data sources and collection methodologies to establish sound data management procedures for tracking and reporting; as well as specify units of measure and disaggregation requirements, baseline values (as applicable), targets, achievement, and many others.

CARE includes PIRS to define each indicator and its disaggregation in detail in the M&E plan. It describes the methods for collecting data for the indicator and the calculations used to derive final values. CARE developed PIRS for all CARE custom indicators following the FFP template provided for the FFP annual monitoring indicators. CARE has contextualized some of indicators as suggested by FFP, for example: "FFP 9: Number of farmers and others who have applied improved technologies or management practices as a result of USG assistance". In the relevant indicators PIRS, at the appropriate section, the contextualization information is appended. This means that when specific FFP indicators require contextualization considering that takes into consideration project-specific interventions, such information must be included in the PIRS; e.g. this would include: Improved Technology and Management Practices, Gross Margin and other Environment-specific indicators, which will need to be considered by the project in light of EMMP. PIRS for all custom indicators in the program IPTT were submitted to the AOR for approval with the initial IPTT. In addition, with every request for a revision to the IPTT that involves adding or modifying a custom indicator, a PIRS reflecting the changes will be submitted to the AOR along with a narrative highlighting and justifying the changes.

A full compilation of PIRS including: (a) all Annual Monitoring Indicators with definitions, rationale, methods for calculation, (b) measurement notes for CARE Custom Indicators, and (c) FFP indicators contextualization as relevant and data analysis; is annexed to this document as Annex- C – SHOUHARDO III Performance Indicator Reference Sheets.

4 SHOUHARDO III MONITORING STRATEGY

SHOUHARDO III program monitoring will be conducted in two main ways:

- 1. Routine monitoring, to document periodic achievements for activities and outputs;
- 2. **Outcome monitoring/annual monitoring**, to detect short-term success/failure of interventions in achieving expected behavioral and systemic changes.

Out of the 73 annual monitoring indicators, the data for 33 indicators (R, RiA and CARE Custom) will be captured through routine monitoring using program records, i.e. Participant records, Training records, CHV records, Workshop minutes, Community records/ Infrastructure records, VDC/EKATA Records. On the other hand, data for 30 indicators will be captured through Participant-based Annual sample surveys. In addition, data for 10 indicators will be collected through applying a Management Score Sheet (MSS) at Union Parishad level.

This section will elaborate how the program will undertake this monitoring and detail the specific data collection approaches.

4.1 Data collection approaches for annual monitoring

SHOUHARDO III will be collecting various types of data having systematic frequency in order to track progress and facilitate outcome monitoring processes. However, specific and focused data will be generated across the system to ensure quality of data to help inform management decisions as well as improve program quality. All data collection tools will be standardized, to the extent possible, to ensure consistency of data. Draft data collection instruments are attached as an example in **Annex -I**. However, in line with FFP guidelines, final tools will be submitted to the program AOR before they are used by program staff. Below is a broader summary of the data collection chart and details shown in **Annex F** (Data Flow).

What type of data	Who Collect	When	How	Tools/Instrument
Beneficiary Households Census (Demography, Participant Enrolment)	Field Facilitators	Year I and if needed later	Households Interview using Standard Tool	Program Participant Household Profile - Census Survey Instrument
Training	Field Facilitators	During training session	Fill up attendance sheet/Muster roll. Use electronic device	Event Database -Sign in Sheet

Asset Transfer	Field Facilitators	During input distribution	Fill up Muster roll. Use electronic device	Muster roll and Event Database -Sign in Sheet
Ration Distribution	Food Distributor	Monthly	Fill up Muster roll. Use electronic device	Muster Roll
Adoption/ Practices (Agriculture Module, HHN Module, WASH Module, DRR Module, Women Empowerment and Social Service Module	Field Facilitators and Third Party Survey Firm	Quarterly and Annually	Households Interview using Standard Tool Use electronic device	Program Intervention Tracking Sheet (PITS) and Beneficiary Households Annual Sample Survey Instrument
Growth Monitoring and Promotion (GMP)	Field Facilitator, Community Health Volunteer	Monthly	Filling Growth Chart Use electronic device	Health Card
Village, Committee, Institutional (UP and UDMC) Performance	Volunteer, Field Facilitators Program Officer	Monthly, Quarterly and Annually	Focus Group Discussion Use electronic device	VDC and EKATA Register, Village Grading Tool, Management Score Sheet
End-use and Onsite Monitoring Data	Food Monitor	Monthly	Beneficiary Interview at Service Delivery Point and Households Level	
Geo Spatial Data	Field Facilitators Program Officer	Monthly, Quarterly and Annually	Use electronic device	GPS/Smart Phone

PNGO Field Facilitators⁹ will extract routine monitoring data from the field and input them into electronic devices. Data collection and information management require a systematic process. The program will apply automated systems using hand held smartphones and tablets. Field Facilitators will register beneficiaries using these electronic devices, and service and distribution data will be continuously updated through the handheld devices. PNGOs and warehouse staff will submit data online to be stored on a CARE server and in secure Cloud-based storage for back up. Program staffs will have sufficient access to view the data, but they cannot modify or correct the data. Only an administrator will have authorization to modify data. Regional and PNGO staff will carry out data validation through field data verification visits and, from time to time, will inform management if corrections are needed. ICT will make the data collection process easier, less time consuming, and more accurate.

The program will collect and share data in such a manner that it directly contributes to meeting CARE's and USAID's country, regional and global requirements and standards and demonstrates changes based on CARE's 2020 vision and Global FNS/CR Strategy.

The following are the monitoring indicators that will be collected through progress monitoring:

Table 2: Indicators for Routine Monitoring / Data Collection

SL Indicator

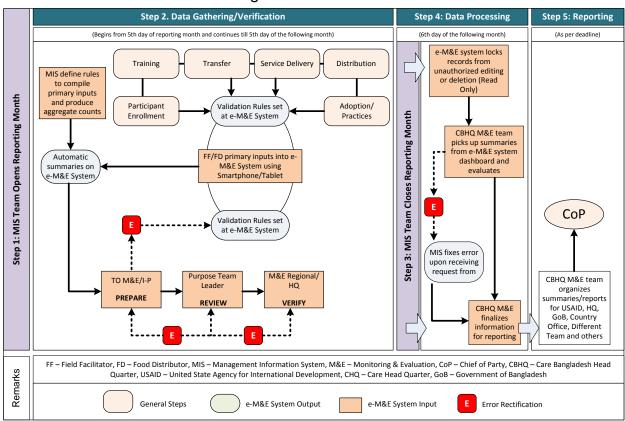
- I FFP 51: Number of rural households benefiting directly from USG interventions (R)
- 2 FFP 34: Number of vulnerable households benefiting directly from USG assistance (R)
- 3 FFP 12: Number of food security private enterprises (for profit), producers organizations, water users associations, women's groups, trade and business associations, and community-based organizations (CBOs) receiving USG assistance
- 4 FFP II: Number of individuals who have received USG supported short-term agricultural sector productivity or food security training (RiA)
- 5 FFP 27: Number of farmers who practiced the value chain activities promoted by the project (RiA)
- 6 FFP 25: Number of MSMEs, including farmers, receiving business development services from USG-assisted sources (RiA)
- 7 Custom: # of PEP IGAs established/improved through USG-supported programs
- 8 Custom: S2S Test: Number of youth with improved test scores on employability skills test
- 9 Custom: Standard F indicator 4.6.3-2: Number of persons receiving new employment or better employment (including better self-employment) as a result of participation in USG-funded workforce development programs
- 10 Custom: Number of project participants households with a savings account as a result of USG assistance

⁹ The FFs/ Enumerators and DQA teams will be provided training/ orientation

- II FFP 24: Number of MSMEs, including farmers, receiving USG assistance to access loans (RiA)
- 12 Custom: Number of PEP trained on Financial Literacy and Management
- 13 FFP 57: Number of children under five reached by USG-supported nutrition programs (RiA)
- 14 Custom: Number of PLW reached by USG-supported nutrition programs
- 15 FFP 56: Number of people trained in child health and nutrition through USG-supported programs (RiA)
- 16 FFP 54: Number of children under 2 (0-23 months old) participating in growth monitoring and promotion (RiA)
- 17 Custom: Number of MoH&FW frontline health service providers received training on CIMCI and IYCF
- 18 Custom: Number of sessions on HHN issues conducted through USG-supported programs
- 19 Custom: Number of linkage building workshop organized with state and non-state actors
- 20 Custom: Number of Multi-sectoral nutrition coordination meeting attended
- 21 Mission 50: Number of communities certified as "open defecation free" (ODF) as a result of USG assistance (RiA)
- 22 Mission 48: Number of people gaining access to an improved sanitation facility (RiA)
- 23 Mission 49: Number of improved toilets provided in institutional settings (RiA)
- 24 Mission 31: Number of people trained in disaster preparedness as a result of USG assistance (RiA)
- 25 Custom: Number of communities exercise Climate Vulnerability and capacity analysis (CVCA)
- 26 Custom: Number of community level contingency plan developed
- 27 Custom: Number of people oriented on disaster preparedness and Contingency Plan
- 28 FFP 30: Number of communities with disaster early warning and response (EWR) systems working effectively* (RiA)
- 29 Custom: Number of Disaster Risk Reduction/Climate Change Adaptation infrastructures constructed by the project
- 30 Custom: Number of disaster preparedness and awareness raising events organized by Local Government Institutions
- 31 Custom: Number of Institutes/committees whose members are trained on disaster preparedness
- 32 Mission 60: Proportion of female participants in USG assisted programs designed to increase access to productive economic resources (assets, credit, income or employment) (R)
- 33 Custom: Percentage of Community Action Plans reflecting action for ending Gender Based Violence
- 34 Custom: % of communities that have included women's issues in their Community Action Plan (CAP)
- 35 Mission (USAID/DO-2: 2.4.1-9): Number of Civil Society Organizations (CSOs) receiving USG assistance engaged in advocacy interventions

- 36 Custom: Percentage of Village Development Committees reported at least one of their activities included in Union Parishad budget
- 37 Custom: % of PEP members in Union Parishads committees report meaningful participation
- 38 Custom: Number of Union Parishad members trained on good governance and joint development planning
- 39 Custom: Number of service campaign organized at the remote locations
- 40 Custom: Number of field visit by government officials to program sites
- 41 FFP 10: Number of private enterprises, producers organizations, water users associations, women's groups, trade and business associations, and trade and business associations, and Community-Based Organizations(CBOs) that applied improved technologies or management practices as a result of USG assistance
- 42 Custom: % of adolescent girls who supplemented with IFA (Iron Folic Acid) in last 4 months

Chart: SHOUHARDO III Dataflow diagram



Dataflow Diagram

As part of its setup the program will select participants following a Well Being Analysis approach followed by a census. The data collection approaches and reprocess for participant selection is narrated in Section 4.2.

A number of tools have been defined for data collection, and include: Well Being Analysis (WBA); Household Survey Questionnaires; the Beneficiary Based Sample Survey Instrument (BBSSI), Key Information Tracking Sheets (KITS); Growth Monitoring and Promotion (GMP) Cards; Participatory Performance Tracking / Participants Tracking System, and Partner NGO Performance Assessment Tool and Management Score Sheet. M&E data collection and reporting in the field will flow through hub offices and implementing Partners NGOs, regional offices, and finally to the head office. Section 4.6 outlines the Information Flow system.

4.2 Geographic Area Targeting and vulnerable population identification:

SHOUHARDO III has determined that it is necessary to develop a contextual understanding of each community the program will work in. To achieve this, the program will undertake a Geographic Area Targeting exercise to select unions, then assess villages, and then households. A WBA will be used to select individual households. The results of these exercises will enrich the program with a stronger understanding of the program context, underlying causes of poverty, food insecurity, malnutrition, gender discrimination, etc. at micro levels as well as help to strengthen its interventions, while also tracking changes. SHOUHARDO III will invest a significant amount of time, resources, and effort in identifying vulnerable populations (eligible participants, primarily the PEP, identified through a WBA). This one-time process will be conducted in March and April 2016. Each of the program villages will be visited and an in-depth 'Well-Being' Analysis¹⁰ and Social Mapping will be conducted. The main purpose of the WBA is to categorize all the households living in the selected villages and eventually to identify the PEP households. Households will be grouped by analyzing their well-being status, which includes land ownership, condition of home, and nutritional status, income level, income sources, occupation, and education, access to services, seasonal migration, day laborers / advance labor sale, and most importantly, food insecurity. A program staff-implemented census survey will be conducted in between May and July 2016 in order to confirm the eligibility of participating households and to capture basic data as a part of a demographic profile from all the eligible program participants' households, who were identified through a comprehensive selection process.

The program will prepare a comprehensive Master Program Participants List Database (MPPL) containing lists and key particulars of all eligible participant households to be included in the program over the period. For each selected participant the following data will be collected by Program Field Facilitators through Households interviewing, updated and maintained: household head name, wellbeing category, primary occupation, religion, ethnicity, age, and sex. Once the

¹⁰ Well-being Analysis is one of the most users friendly participatory process follows PRA principles and methods for conducting different participatory studies relating to analysis of socio-economic conditions of community people. It is used for identifying the key indicators/criteria of well-being of an individual or a community and has proved to be an effective process. It is done by sorting individuals or communities into different categories according to their own criteria/indicators of well-being (perception and subjective judgment). These criteria consider not only the economic or wealth status of the individual or community people, but rather also encompasses non-economic i.e., other social factors that have a direct or indirect influence on the socio-economic condition of a household. This allows the program staff to learn about the different categories of people living in the village based on how they define their own status in social, physical, financial or other terms. When the staff has a better understanding of these categories of people, they will be in a good position to select the right group of people with greater needs, willingness and ability to benefit from the program.

MPPL is completed in the FY16, each of the household members will be assigned combined unique IDs, by which they'll be registered. The MPPL will be protected and locked, restricting any unauthorized inclusion and modification. This is important to minimize the potential risk of taking on erroneous participants or someone's "wish list" at a later stage, as similar rigor of selection cannot be undertaken throughout the program. However, this will not prevent filtering-out or exclusion of households who do not truly meet the criteria of the PEP - i.e. most vulnerable segment of the population. As the program unfolds, should it be found that there is "attrition" - where a significant number of participants are no longer available due to a number of reasons including migration or self-graduation -- a process will be followed to add further participants to the MPPL, ensuring appropriate targeting. In SHOUHARDO II, the program experienced a 7% drop out of households over the five years for various reasons - key among which were households or individuals that permanently migrated out. To compensate for this, the program added some new villages that were considered as scale up/extended villages. SHOUHARDO III will not be taking on new villages, but rather will add people to the MPPL that have lower levels of vulnerability. This will help sustain all other village level gains by the program.

In FY16, a complete 'census' of all potential participant households - i.e. 168,521 - will be undertaken using a standard tool and process, which is known as the "Program Participant Household Profile - Census Survey Instrument". This will be used to capture demographic data of all eligible and direct participant households: their registration, program planning, and internal management and monitoring. PNGO front line staff, at the outset of entry into the community and introductory physical visits at the household level, will collect this data from their respective assigned villages. This is important as it provides an opportunity for one of the first detailed interactions between the field staff and participants – thereby helping to build a relationship directly between them and the community. The census will capture basic demographic information and key information for custom, FFP, and FtF indicators and further help to develop profiles for participant households. This will include names of all household members, relations with household heads, ages with dates of birth, national ID numbers, levels of literacy, occupations, health status, size of operating land, technology adoption, production, identify pregnant women and lactating mothers, identify children and youth, enable access to safety-nets, obtain contact cell phone numbers, access to information, and level of engagement with other programs - both public and private. The process will also assist the frontline staff in understanding the profile of each household aiding in determining eventually which Occupational Group best suits a household. Conducting a census will provide the program with accurate household data for targeting and desegregations in reporting. The data/information will be generated through household interviews and preferably household heads and spouses from all PEP Households will respond for all working villages of SHOUHARDO III. As such, data should be collected from all PEP households, listed through WBA and subsequent validation

processes. The detailed census survey tools and guidelines are provided in **Annex I.** Key Monitoring Evaluation and Learning Tools.

4.3 Panel Data Collection

To track specific areas of interest that have more complex pathways of change, the program will augment its regular monitoring by setting up panel participants to track:

- (i) Resilience;
- (ii) Adoption of value chain technologies and practices;
- (iii) Women's empowerment and changes in attitudes; and
- (iv) Adoption of specific behaviors related to nutritional outcomes.

These will be refined during the studies to be carried out at the start of the program, namely the Value Chain Analysis, the Formative Research study in support of Social Behavior Change Communication, and the Gender Analysis. The program believes that these regular checks with the same participants will allow the program to strengthen its understanding of rate of change or lack thereof towards desirable outcomes. While these three areas are easier to track and connect to program activities, resilience is a much more complex outcome. Among the complexities are that some information can only be available when a shock happens, and that in many cases a shock has sustained impact on a households', communities' or a system's ability to recover from one shock to the next. To capture this uniqueness, regular panel data collection alongside the other areas will be undertaken. In addition, the program will mount specific data collection exercises in the event of a shock at a frequency to be determined by the intensity, impact of the shock, and vulnerability of the specific households/community in question.

CARE will rapidly collect data on the impacts of shocks to enable focused interventions and more precise measurements on the effects of and response to shocks. This strategy should represent a significant improvement over the typical approach to shock interventions. (This approach will also include something on systems/ institutional monitoring pertaining to Resilience/ CCA). In total, 400 program participants' households' data will be collected at three different times over the life of award: November 2016, November 2018, and November 2019. In the schedule, if any natural disaster or major adverse occurrence takes place in any year, that year will also be taken into consideration for data collection. The 400 households will be proportionately distributed in Extremely High Vulnerable (EHV) and Highly Vulnerable (HV) villages. Participation in different interventions will also be considered during initial sample selection. An adapted version of the Baseline resilience module will be applied for data collection having approval from FFP. In addition, Census and Well Being and Census Data Collection Annual Monitoring through Institutional capacity assessment using Management Score Sheet (MSS) will be measured at the Union Parishad level.

4.3.1 Union Parishad, Management Score Sheet (MSS)

In order to assess the capacity of Union Parishad, a Management Score Sheet (MSS) will be applied in selected Union Parishads (via systematic selection) under each program area. The MSS is a participatory tool for assessing institutional capacity: in management, accountability, transparency, governance, and women's empowerment. SHOUHARDO III will administer the MSS on an annual basis in selected UPs; and the Senior Technical Manager-Governance and Regional Technical Manager will lead the process of facilitating MSS across all working unions targeted by SHOUHARDO III. Through using the MSS tools, the following indicator values will be generated:

Table 3: List of indicators which data will be collected through applying Management Score Sheet (MSS)

SL Indicator

- I Custom: Number of Local Government Institution (Union Parishad) adopting Union Disaster Management Plan (UDMP)
- 2 Custom: Number of Union Parishads incorporated Disaster Risk Reduction/Climate Change Adaptation activities in Union Parishad Development plan from CAP
- 3 Custom: Percentage of Union Parishad included women empowerment issue from VDC CAP
- 4 Custom: Mean capacity assessment score of Village Development Committees
- 5 Custom: % of PEP decisions made by Union Parishad Committees that are implemented
- 6 Custom: Mean Management Score of Union Parishads
- 7 Custom: Number of Union Parishad Committee meetings that discuss PEP issues
- 8 Custom: # of poor & extreme poor (PEP) obtained membership in Union Parishad committees

4.3.2 Assessment of SHOUHARDO III working villages applying Village Grading tool

To assess the performance of communities as well as VDCs, the program will apply village grading tools¹¹. These tools are used to assess the progress of individual communities in the program. Areas lagging behind will be analyzed with data to pinpoint the indicators in need of greater attention and resources will be adjusted to different needs ensuring optimum efficiency. The results will be shared with each village with specific areas for improvement so that

21 | P a g e

Like earlier phases, SHOUHARDO III Program will also apply a participatory approach for facilitating the customized village grading/ scoring exercise. This exercise will be facilitated in all working villages, using a common scale/ range categorizing them into 3-4 groups based on their composite scores derived from the exercises. During the exercise, the villages which scored highest would be graded as 'Strong', while moderate scoring and unsatisfactorily scoring villages will be labeled as 'Moderate' and 'Behind' respectively. The village grading/ scoring tools are comprised of a number of key parameters/indicators, which are broadly framed within six groups/ clusters - one for cross cutting and remaining five for the five program purposes.

communities have a fair understanding on their strengths, weakness, and potentials. The regional Senior Technical team and M&E team will facilitate and administer this process.

4.4 Process monitoring data collection

Besides the IPTT reporting indicators, a number of other process activities will be tracked to guarantee quality and compliance. These include commodity management and stand-alone environmental indicators.

4.4.1 Commodity Management Process Monitoring

With regard to the Commodity Monitoring System, several actions will be adopted. Namely, Regular Food Distribution Point (FDP) monitoring will be conducted by the Food Monitors to ensure that distribution is being conducted as planned. This will be followed up later through the End-use Monitoring (EUM) where ration recipient households will be visited to determine the commodity use, ensure they received the commodities they should have, and that they still have them. The commodity ration Participants Tracking Module (PTM) will maintain a detailed log of rations being distributed, including to whom and when they were distributed.

The Participant Tracking and Monitoring system (PTM) is a customized electronic database that will be used for food rations for individual participant tracking and routine monitoring, informed decision making, program planning, and reporting purposes. The PTM will capture individual ration recipients' status via participant ID cards provided by SHOUHARDO III¹². The PTM will help to produce system-generated aggregated and disaggregated commodity distribution status (MT) and the number of commodity recipient participants for each of the working villages and by FDP, and other operational units. This data will be used to monitor whether PEP have received the appropriate amounts of food at the appropriate times. It will also help ensure quality routine monitoring and reduce waste by reducing irregularities and drop-out rates and fostering informed decision making.

SHOUHARDO III will be using a combined unique code for each participant for multiple purposes including tracking, planning, managing, monitoring, quality assessment, and to report the actual number of individuals (direct participants) who will receive program goods and services. This is useful in resource and intervention planning, tracking the unique participants, and for reporting against the participants' tabs, program elements, and some specific indicators, such as FFP 11: Number of individuals who have received USG supported short-term agricultural sector productivity or food security training (RiA). A similar process will be applied to collecting data on indicator FFP 51: Number of rural households benefiting directly from USG interventions, FFP 34: Number of vulnerable households benefiting directly from USG assistance,

22 | P a g e

¹² SHOUHARDO III will provide photo ID cards to each of the eligible participant households. The cards will have photos, QR codes and combined unique ID codes (Code of Region, District, Upazilla, Union, Village, HH and members)

Custom Indicator: Number of PLW reached by USG-supported nutrition programs and FFP 57: Number of children under five reached by USG-supported nutrition programs. This will contain the key particulars for participants, and data will be computed/ entered via customized applications and entry features. The system will have intelligent control, pre-formatted query modules/ reporting wizards, print-preview, graphical and tabular presentation, as well as customization options.

4.4.2 Environmental Management

In SHOUHARDO III, environmental management will mainly be conducted as follows:

Initial Environmental Examination (IEE): The program will develop an IEE of the program and obtain approval from Bureau for Democracy, Conflict and Humanitarian Assistance (DCHA)/FPP, USAID. In the IEE, all program activities will be evaluated based on their impacts on the environment. All activities will be categorized under the Threshold Decision of Categorical Exclusion (CE), Negative Determination with Condition (NDC) and Positive Determination (PD) as applicable following USAID's 22 Code of Federal Regulation (CFR) 216.

Environmental Mitigation and Monitoring Plan (EMMP): The program will develop a detailed EMMP considering all those activities which identified in the IEE as having negative impact on the environment and will obtain approval on the IEE from USAID. Potential adverse impacts on environment, possible mitigation measures, monitoring frequency, monitoring indicators and reporting for individual activities will be clearly elaborated in the EMMP. Progress on implementation of mitigation measures and monitoring indicators will be reported in the Environmental Status Report (ESR) and Annual Result Report (ARR).

Environmental Monitoring: The activities which are identified as having environmental impact and provided in the management plan of the EMMP, will be monitored by the program staff through routine monitoring during implementation using an appropriate monitoring checklist to assess the progress and effectiveness of the mitigation measures as suggested in the EMMP. Program staffs assigned to environmental management will ensure that appropriate environmental monitoring and mitigation actions are conducted for the program. Senior Technical Coordinator- Infrastructure and Environment and relevant team members from CARE and partner NGOs (Infrastructure and Environment Officer-IEO for CARE and PNGOs, respective Technical Managers-TMs/STMs from CARE and Technical Officers-TOs from PNGOs and commodity staff for warehouse and commodity fumigation) will be core monitors for implementation of mitigation measures as planned in the EMMP. A set of program activities, which require such monitoring, have been identified in the EMMP as follows:

- Agricultural activities including pest control, fertilizer use, improved variety and technology adaption;
- Support to PEP households in small scale poultry and goat rearing;

- Cash for Work (CFW) activities, mainly those involving earth raising-related infrastructures;
- Improvement of WASH Infrastructure;
- Commodity warehouse management and fumigation activities;
- Fuelwood consumption awareness program; and
- Construction of disaster risk reduction infrastructures.

Field staff will conduct monitoring using appropriate monitoring formats/checklists. In addition to routine monitoring, ad-hoc surveys and data collection will be conducted as and when required. The STC-Infrastructure and Environment will guide field team members and support routine monitoring, necessary data collection, and resolving of environmental problems if any are raised in the field. The program M&E team will also provide support for data collection of EMMP indicators through the M&E system where applicable as well as necessary guidance for developing monitoring tools/checklists. The STC-Infrastructure and Environment will draft the Environmental Status Report (ESR) and environmental progress in the Annual Result Report (ARR) and send to the COP for review and submission during PREP and ARR.

4.5 Annual Participant-based Sample Surveys (outcome monitoring)

CARE intends to collect annual survey data through a third party. This will be based on a representative statistical sample of program participants. In order to determine the sample, a sampling guide for Beneficiary-Based Surveys for Selected Feed the Future Agricultural Annual Monitoring Indicators will be consulted. The third party survey firm will come up with the representative sample size and selection methodology (for different strata) with careful review by both CARE and USAID. With regard to CARE's proposed 73 Annual Monitoring Indicators in the IPTT, data for 30 indicators will be collected through the Annual Monitoring Survey. Some of the indicators to be tracked by the annual surveys which include: FFP 8: Gross margin per hectare, animal or cage of selected product, FFP 9: Number of farmers and others who have applied improved technologies or management practices as a result of USG assistance, FFP 15: Number of hectares under improved technologies or management practices as a result of USG assistance, FFP 16: Value of incremental sales (collected at farm level) attributed to USG implementation etc. The data resulting from the annual survey will provide a real-time snapshot of intermediate changes in participant knowledge, attitudes and practices resulting from the program.

To facilitate collection, aggregation and analysis of both routine monitoring data and annual surveys, CARE will hire a contractor (see below) to customize the existing FFP USAID McAID system, and test and refine mobile-or tablet-friendly versions of the routine data collection forms and annual survey instrument, which enables both an online and offline data collection system. The contractor will also develop a database to which program staff will be able to directly upload routine monitoring and annual survey data from mobile phones/tablets, thus reducing the need for a separate data entry and processing function. The system will use unique

IDs for each participant and track participation in all key program activities. Additional data aggregation and analysis will be conducted by CARE M&E and MIS staff, as will be required from time to time. CARE will use data from routine data collection and annual surveys for three major purposes:

- Program monitoring purposes to track and report on the progress of on-going activities and adjust implementation in order to make improvements.
- Report to the office of Food for Peace (FFP) with Annual Results Report (ARR) using the Indicator Performance Tracking Table (IPTT) and Standard Annual Performance Questionnaire (SAPQ). Report to the Dhaka USAID Mission, and Country Office PIIRS.¹³
- Reporting to Government of Bangladesh and the PACC.

4.5.1 SHOUHARDO III Beneficiary Based Sample Survey (BBSS): Sampling Strategy

Certain program outcomes will be monitored each year to generate data for annual reporting and to provide timely information to project managers. Thirty IPTT indicators are identified for estimating values on an annual basis. The annual monitoring indicators that are listed in

Table 2 are from the all three program components. The SHOUHARDO III program will reach more than 168,000 beneficiary households who will be tracked annually. It will be very difficult to track the outcome level indicators for such a large number of beneficiary households every year with a limited number of staff. To this end, a beneficiary-based sample survey (BBSS) will be conducted each year preferably by an independent third party survey firm or through internal program staff (this is depending on the availability of the resources). The BBSS is scheduled to be conducted in the month¹⁴ of August/September each year, led by SHOUHARDO III M&E staff and supported by SHOUHARDO field staff from the implementing partners.

Table 4: Indicators for beneficiary based sample survey (BBSS)

SL	Indicator	Sample Frame	Population
I	FFP 16: Value of incremental sales (collected at farm level) attributed to USG implementation (RiA)	COG farmers	168521
2	FFP 8: Gross margin per hectare, animal or cage of selected product (RiA)	COG farmers	168521
3	FFP 15: Number of hectares under improved technologies or management practices as a result of USG assistance (RiA)	COG farmers	168521

¹³ Program Impact and Information Reporting System, which is a global CARE reporting requirement

¹⁴ Ideally this should be the month when the baseline was conducted, April-May, the baseline is going to conduct in April 2016

4	FFP 9: Number of farmers and others who have applied improved technologies or management practices as a result of USG assistance (RiA)	COG farmers	168521
5	Custom: Percentage (%) of beneficiary households with increased food production	COG farmers	168521
6	Custom: % of poor & extreme poor (PEP) households accessing markets	COG farmers	168521
7	Custom: % of pregnant and lactating women taking iron supplements in last 7 days	Mothers' Group members	76460
8	Custom: % of children 6- 59 months old supplemented with vitamin A	Mothers' Group members	50556
9	Custom: % prevalence of diarrhea for children between 6-23 months of age (Percentage of children under age two who had diarrhea in the prior two weeks)	Mothers' Group members	50556
10	Custom: Prevalence of children 6–23 months receiving a minimum dietary diversity	Mothers' Group members	50556
П	Custom: Prevalence of children 6–23 months receiving a minimum meal frequency	Mothers' Group members	50556
12	FFP 53: Number of live births receiving at least four antenatal care (ANC) visits during pregnancy (RiA)	Mothers' Group members	76460
13	FFP 46: Percent of physically improved sanitation facilities with feces visibly present on the floor, wall, or area immediately surrounding the facility (RiA)	HH receiving improved sanitation facilities	2220
14	Custom: Percent of mothers who feel it is important to wash hands at five critical times	Mothers' Group members	76460
15	Custom: % of children immunized against 8 diseases under GoB protocol by 12 months of age	Mothers' Group members	50556
16	Custom % of PEPs HHs received health and nutrition services from community level health facilities	COG members & Mothers' Group members	168521
17	Custom: Average Coping Strategy Index of the targeted households (male and female headed) affected by natural disaster	COG members & Mothers' Group members	168521
18	FFP 13: Number of people implementing risk reducing practices/actions to improve resilience to climate change as a result of US assistance (RiA)	COG members & Mothers' Group members	168521
19	Custom: Percentage of household reporting receiving risk and early warning information	COG members & Mothers' Group members	168521

20	Custom: % of households that report that health, gender, and disaster preparedness by actors build on each other are well coordinated and focus on most critical needs	COG members & Mothers' Group members	168521
21	Custom: Mean Decision making score (Index) for woman in household level	COG members & Mothers' Group members	168521
22	Custom: Percentage of poor & extreme poor women accessing community level platforms for women empowerment	COG members & Mothers' Group members	168521
23	Custom: Percent of respondents who know a neighbor or friend who has experienced domestic violence (includes: child marriage, physical abuse, sexual harassment, emotional oppression.) in the last month	COG members & Mothers' Group members	168521
24	Custom: Percentage of program participants aware of cost and consequences of Gender Based Violence	COG members & Mothers' Group members	168521
25	Custom: Percentage of program participants reporting the EKATA platform can resolve Gender Based Violence issues	COG members & Mothers' Group members	168521
26	Custom: Percentage of poor & extreme poor (PEP) women actively participating in community level organization	COG members & Mothers' Group members	168521
27	Custom: Percentage of respondents who are satisfied with overall services provided by local govt. (Union Parishad)	COG members & Mothers' Group members	168521
28	Custom: % of households reported understanding of elements of disaster preparedness in project defined criteria	COG members & Mothers' Group members	168521

The first four of the 28 listed annual monitoring indicators are the critical annual monitoring indicators for Feed the Future reporting and two others are custom Feed the Future indicators. Therefore, the Feed the Future BBSS sampling guideline¹⁵ has been used to develop the BBSS sampling strategy for SHOUHARDO III program annual monitoring survey. A Detailed description of the sampling strategy is given below:

Sampling frame of the BBSS

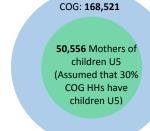
SHOHARDO III will work with the 168,521 households that participate in the Core Operational Group (COG) mainly on livelihood activities. Other groups, such as, VSLA, EKATA, Mother

¹⁵Sampling Guide for Beneficiary-Based Surveys in Support of Data Collection for Selected Feed the Future Agricultural Annual Monitoring Indicators by Diana Maria Stukel and Gregg Friedman, February 2016.

Groups, DRR and Youth are also subsets of the COG. In this situation, the sample frame of COG households is the appropriate sampling frame to capture all 4-livelihood indicators.

The SHOUHARDO III program will directly reach 76,460 pregnant and lactating mothers. These mothers are also a part of Mothers' groups. It is assumed that 30% of the COG households will

have children under five (U5) i.e. 50,556 households will have mothers with children U5. Mothers of children U5 are the respondents of the health and hygiene related indicator. Therefore, another sampling frame of the mothers of children U5 is necessary for the BBSS of SHOUHARDO III program. The sampling frame for Mothers is the list of mothers with children U5.



The indicator "Percentage of program participants can relate to cost and consequences of GBV" is applicable for both COG and mothers of children U5 sampling frame.

Since the program will increase the number of beneficiaries according to the annual targets, it is necessary to update the sampling frame prior to the BBSS each year. The repeated random sample will be drawn from the updated sampling frame.

Estimation of Sample size

The samples for the annual BBSS will be independent random samples of households drawn annually from the list of COG and mothers of children U5 in beneficiary households. A two-stage cluster sampling procedure will be applied to select the sample households, where the clusters are the SHOUHARDO III program village. The clusters will be selected using the Probability Proportional to the Size (PPS) method.

Following are the six indicators that are used to estimate the sample size for the BBSS:

Table 5: Indicators for BBSS sample size estimation

Ind	dicator	Direction of
		change
Ι.	Value of incremental sales (collected at farm level) attributed to USG implementation	Increase
2.	Number of hectares under improved technologies or management practices as a result of USG assistance	Increase
3.	Number of farmers and others who have applied improved technologies or management practices as a result of USG assistance	Increase
	Percentage of mothers who feel it is important to wash hands at five critical times	Increase
5.	Percentage of program participants can relate to cost and consequences of GBV	Increase

¹⁶ SHOUHARDO II and PROSHAR Endline survey 2015

The SHOUHARDO III program plans to estimate the point estimates of the indicators for a particular year. Following are the two formulas that have been used to calculate sample sizes for the above six indicators:

1. Formula for the indicators with mean value 7:
$$n = \frac{z_{\alpha}^2 \times CV^2}{\varepsilon^2}$$

Where,

 Z_{α} = is the critical value for normal probability distribution at 95% confidence level = 1.96

CV = Coefficient of variation = 0.5^{18} (consider standard normal distribution and assuming that the standard deviation is 50% of the mean)

 ϵ = Maximum desired sampling error at 95% confidence level = 5% = 0.05

2. Formula for the indicator values that can be estimated as proportion

Where.

 $n = \frac{z_{\alpha}^2 \times p(1-p)}{\varepsilon^2}$

 Z_{α} = is the critical value for normal probability distribution at 95% confidence level = 1.96

P = Proportion of population with desired attribute = $50\% = 0.50^{19}$

 ϵ = Maximum desired sampling error at 95% confidence level = 5% = 0.05

Finite population correction factor FPC = $I/(I+n_1/N)$, where n_1 is the initial sample size and N is population

Finite population correction factor, design effect and non-response factors will be considered to obtain the adjusted sample size. **Table** shows details on the final sample size calculation by indicators.

Table 6: Estimation of sample size by indicators

	Directio n of change	Populat ion (N)	Co- efficient of variatio n/ proport ion	Formula	(n ₁)	Finite pop correct ed (n ₂ = n ₁ *FPC	n effect (d=2) adjust ed (n ₃	se (n _r =10
Value of incremental sales	+	168,521	0.5	$n = \frac{z_{\alpha}^2 \times CV^2}{\varepsilon^2}$	384	383	767	843

¹⁷ Department of Statistics, Western Michigan University: http://www.stat.wmich.edu/s216/book/node80.html

-

¹⁸ It is better to use actual mean value and standard deviation from previous studies or any other sources. Unfortunately, this information is not available in Bangladesh for the indicators value of incremental sales, gross-margin, and hectares of land under improved technology. Therefore we have used CV for standard normal distribution. Estimation of sample size will be revised subject to the availability of information in the SHOUHARDO III baseline survey for these indicators.

¹⁹ P attains maximum value of n when it is 0.5

Table 6: Estimation of sample size by indicators

Indicator	Direction	Populat P		Formula	Initial	Finite	Desig	Final n:
marcacor	n of change	ion (N)	efficient of variatio n/ proport ion		sampl e size (n ₁)		n effect (d=2) adjust	Non- respon se
(collected at farm level) attributed to USG implementation				$n = \frac{z_{\alpha}^2 \times CV^2}{\varepsilon^2}$				
Number of hectares under improved technologies or management practices as a result of USG assistance	+	168,521	0.5	$n = \frac{z_{\alpha}^2 \times p(1-p)}{\varepsilon^2}$	384	383	767	843
Number of farmers and others who have applied improved technologies or management practices as a result of USG assistance	+	168,521	0.5	$n = \frac{z_{\alpha}^2 \times CV^2}{\varepsilon^2}$	384	383	767	843
Percentage of mothers who feel it is important to wash hands at five critical times	+	50,556	0.15 ²⁰	$n = \frac{z_{\alpha}^2 \times p(1-p)}{\varepsilon^2}$	196	195	390	429
Percentage of program participants can	+	168,521	0.5	$n = \frac{z_{\alpha}^2 \times p(1-p)}{\varepsilon^2}$	384	383	767	843

²⁰ Assumed from SHOUHARDO II program baseline (9.8) and endline (29.8)

Table 6: Estimation of sample size by indicators

	Directio n of change	Populat ion (N)	efficient of variatio n/ proport ion		(n ₁)	correct ed	n effect (d=2) adjust ed (n ₃	se (n _r =10
relate to cost and consequences of GBV				$n = \frac{z_{\alpha}^2 \times CV^2}{\varepsilon^2}$				

Table 6 shows the highest required sample size is $843 \approx 900$ for the first four FtF indicators and $429 \approx 450$ for the health and hygiene related indicators. Therefore, a sample of 900 COG households and 450 mothers of children

Sample frame	Households	VDC	HH/VDC
COG HHs	900	36	25
U5 Mother HHs	450	18	25
Total	1,350		

U5 are the estimated sample size for SHOUHARDO III BBSS to estimate the point prevalence of the listed annual monitoring indicators (

Table). Total sample size for the BBSS would be 1,350.

Sampling procedure

The steps of the sample household selection and data collection process are:

- i) Select 36 clusters from the list of SHOUHARDO III program villages where livelihood component is implementing, using Probability Proportional to the Size (PPS) procedure.
- ii) In each selected cluster, 25 COG beneficiary households will be randomly drawn from the sampling frame of all COG beneficiary households that belongs to the cluster.
- iii) The updated sampling frame will be generated from the MIS database system. The M&E Coordinator will prepare the sampling plan and sampling frame. The contractor will plan and deploy staff for data collection according to the survey schedule that is agreed in the contract. If data is collected internally, three data collection teams, each comprised with 5 enumerators will be engaged for 25 days to collect data for 900 COG households using Tablets. Each of the data collectors is expected to complete at least 3 interviews in a day. Thus, a total 20 working days will be required to collect data for all 900 households. Five additional days are proposed for movement from one district to another and for weekends. The M&E team will monitor the data collection process.

Similar to the COG household sample, 450 households with mothers of U5 children will be selected from the sampling frame of mother of children U5 from 18 VDC.

Data quality assurance

The M&E field staff will download data daily from the Tablets/Cell phones and will review it on a daily basis to ensure data quality. They will also make regular field visits during data collection to monitor the data collection process.

The M&E field staff will be responsible for re-interviewing two households per day using tablets for some critical questions. This person will also verify that non-response households are unavailable, or that they truly opted out of participation. The database software allows for the cross-referencing of re-interview records with the original records collected by the enumerators. The SHOUHARDO III central M&E team will monitor data consistency throughout the ongoing data collection process remotely by downloading daily data from the cloud server. At the end of the day, the data collection team supervisors will collect all mobile devices from the interviewers in his/her team and will go through all HH interview records question by question that have been collected that day. The team supervisors will edit the daily data records if necessary. Finally, the supervisor will send the edited data by uploading to the cloud server through the internet connectivity.

Data can be collected through use of an electronic device or through paper. For electronic devices, at the end of the day, the data collection team supervisors will collect all mobile devices from the interviewers in his/her team and will go through all HH interview records question by question that were collected that day. The team supervisors will edit the daily data records if necessary. Finally, the supervisor will send the edited data by uploading to the cloud server via the internet.

If the data collection method is via paper, each interviewer will collect information using a paper based questionnaire and team supervisors will collect completed questionnaires from the team member for his/her review and uploading to the cloud server. In this process, the Contractor will involve a data entry operator to enter data into the cloud server from the paper based questionnaire.

4.5.2 Data Management and analysis

The ODK dataset (in XML format) will be converted into an SPSS database for data management and analysis. The analysis will follow the FtF /FANTA beneficiary-based sample survey guide for analysis of the indicators. Validated data will be accumulated in the main SPSS database daily. SHOUHARDO III will prepare a comprehensive data analysis and tabulation plan prior to start the actual data analysis and will share this with FFP. The M&E Coordinator will coordinate data analysis and report preparation at the central level.

The preferred mode of data collection is through Smartphones and/or Tablets. Data will be updated to the central server through online and/or offline synchronization functionalities. This

will be done using the updated McAID. The dataset will be converted into an SPSS database for any further data management and analysis. Validated data will be analyzed using the pre-coded SPSS database daily. However, considering the practical context and rationale, CARE may accept a paper-based BBSS survey if proposed by the Contractor. The Contractor should prepare a comprehensive data analysis and tabulation plan prior to start the actual data analysis and will share with CARE's Point of Contact (PoC) who will coordinate data analysis and report preparation processes undertaken by the survey firm.

4.5.3 Survey Tools and Survey Questionnaire

A structured questionnaire will be designed based on the BBSS indicators and information required. SHOUHARDO III team is working on developing the questionnaire following the Feed the Future²¹ and FFP guidelines. The draft questionnaire will be shared with FFP for feedback. The final questionnaire will be field tested by the M&E team prior to the survey starts. The ODK questionnaire form will be designed based on the finalized English questionnaire ensuring skipping rules and others interview logic. The ODK questionnaire form will be translated into Bangla and re- translated to English to prevent distortion as well as ensure consistencies with the original English version. The ODK program will allow the enumerators to use either language at any time on the mobile data collection device.

4.5.4 Survey Team Training and Field Testing

Seven days of training will be organized at Dhaka/district level with enumerators and M&E Field staff for the household interview. The training sessions are divided into two parts. In the first two days, the participants will receive theoretical lessons on the general rules of conducting surveys, sampling and will obtain a hard copy of the questionnaire. In the next three days, the participant will practice using the actual ODK questionnaire forms on the tablets with role-play and mock tests. After five days of classroom training, the participants will do field practice on day six. The tools will be finally adjusted after the field practice and the final day of the training. The training is scheduled in the first week of August, 2016. The following are the specific topics that will be covered in the survey training:

- A. Brief program overview and the objectives of the surveys;
- B. General rules, norms and guidance on survey implementation;
- c. Survey methodology team composition, sampling, household selection process;
- D. Detailed discussions about the questionnaire form (question-by-question);
- E. Use of the questionnaire on the tablets;
- F. Apply mock procedures for more clear understanding of questionnaire;
- G. Role play to show the technique of asking some sensitive questions; and
- H. Data quality, management and transfer.

-

²¹ Feed the Future Agricultural Indicators Guide Guidance on the collection and use of data for selected Feed the Future agricultural indicators Suzanne Nelson Anne Swindale September 2013

A detailed survey protocol will be developed prior to the annual BBSS, as well as pre-tested and adjusted tools and techniques will be shared with FFP at least 2 months prior to the scheduled training for the BBSS for FFP's acknowledgement.

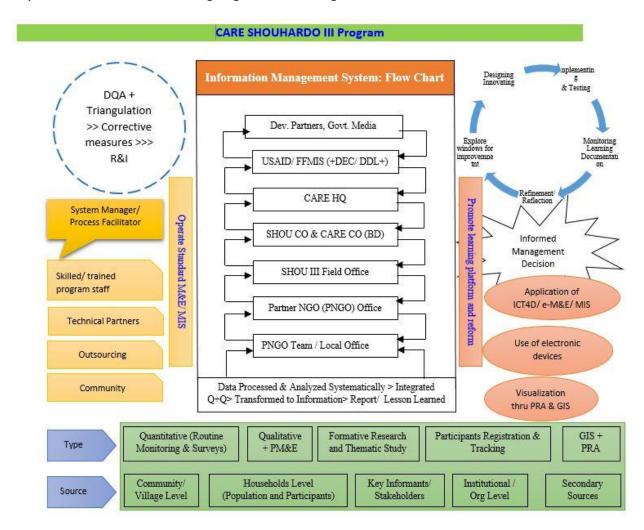
4.6 Data Collection Tools

SHOUHARDO III data collection tools will be tested in the field and standardized to the extent possible, to ensure consistency of data. A set of data collection instruments/protocols is attached as examples of all available data collection tools used as part of the M&E Plan. CARE will provide the AOR and the Activity Manager with additional or updated tools as soon as they are available. As suggested by FFP, draft tools (identified as such) included with the initial submission, and revised, final tools will be submitted to replace earlier versions generally before they are used by program staff. Some draft Key Monitoring, Evaluation and Learning tools are attached in **Annex I.**

4.7 SHOUHARDO III Information Flow and Management

The Information Flow and Management of SHOUHARDO III's data and information includes key stakeholders by type engaged in the process, and outlines how the feedback mechanisms operate. The process is designed to increase data utilization, quality, and improved data driven management decision-making. At the core is primary data gathered at the village level that flows either in electronic format to Dhaka central management or from the villages to PNGO offices to CARE-Field Offices and the Dhaka office. This data is then converted into appropriate formats such as IPTT, ARR, and Commodity Status Reports for reporting to USAID, GoB and other stakeholders. The flow process also allows recipients and the sending node to interact for clarity, contextualization and coherence of data.

The program M&E data sources are centered on the targeted households, working community, key informant, institution (primary source), and secondary sources. The data types are quantitative and qualitative coming from routine monitoring/ service records, census and sample surveys, formative research, Participants Registration & Tracking, and importantly geospatial locational data. Program and activity location data, which will be collected based on the activities implemented, will be used to identify the specific locations where the program should concentrate based on performance indicator results. Program data management, analysis and sharing will be performed by four levels of program structure - Central, field office, partner office and community. The program will introduce a web based innovative data collection and management system. Community level staffs will use Tablets/smart phones for beneficiary registration, service tracking, and process monitoring and each annual monitoring survey. Tablet-based data will be collected offline from the community. Community-level data will be uploaded to the cloud server after the verification at the district level by the partner NGO TO-M&E and CARE Regional M&E Manager while MIS and GIS Managers at central level will play the important role under the overall guidance of the M&E Coordinator. The central level M&E team and program management at all levels will have access to the cloud server and will be able to generate customized reports, such as an output matrix from the database system. The M&E team will also be able to download datasets for further analysis. The process and purpose of these robust information flows will enable implementing and testing, learning, reflection, improvement and further designing and innovating.



Based on learning from earlier SHOUHARDO programs, SHOUHARDO III will also ensure that program staff at all levels are exposed to the indicators and program outcomes to which their actions will contribute. After validating and aggregating the quantitative data at the regional level, the Regional M&E Managers will score the activity level progress against targets under the Purposes/ Sub-Purposes using a scale of I-10. The Regional M&E Managers will circulate these results to the Regional Management teams for discussion. This system will channel data up to the Program level, where the overall progress against each Purpose's targeted indicators and outcomes will be analyzed and shared in the regular Small Program Coordination Meetings and Large Program Coordination Meetings. These will be key management fora where the overall program progress can be determined at regular intervals. This is an important tool allowing management to take necessary steps to provide support

immediately in order to bring lagging elements back up to speed with the rest of the program. Finally, the information is fed back to the beneficiaries in the Participatory Monitoring and Evaluation (PM&E) sessions. In community-based or participatory monitoring, community members will involve in the M&E process as data collectors, reporters, and analysts. VDCs, volunteers, and groups supported by the program get involved in collecting and reporting information related to intervention outputs and outcomes. Communities will engage in discussion to analyze and plan responses to the collected information. The primary aim of the PM&E is to generate interactive discussions and analyses regarding what went well and what did not, what, why, when, where how and what next among participants where they can share best practices and other lessons learned. A short guide regarding SHOUHARDO III PM&E is attached as **Annex- H**.

4.8 SHOUHARDO III Monitoring Database and application of GIS

CARE will create and maintain monitoring databases to capture and track participants (individual, household, community) and intervention level data needed to calculate values for all indicators tracked annually. There will be a master database and all other child/subset database will have a relational establishment with the mother/master one. All routine monitoring data, which will be collected continuously based on the nature of indicator e.g.: weekly, monthly, quarterly and annually, will be collected through electronic devices and this monitoring data will then sync into the master database so that the program can track interventions by participants both uniquely and by direct count, by program element and by age. This data- that is captured in databases - would be available at all times for analysis by program staff in order to answer questions about participants' participation and differences in participants' responses and program outputs and outcomes across geographic locations. Data will entered regularly into monitoring data bases, and this will be useful for identifying trends during the year. By and large, all SHOUHARDO III monitoring data will managed through the CSmart system and data will be stored on the CARE dedicated server. Considering needs and requirements, these datasets will be imported through "csv format" and later on this will be converted into MS Access, MS Excel, and SPSS as required for extended analysis. All of these databases will be basically relational databases with unique community, household, and individual level identifiers that enable accurate connections among the different beneficiary units, (e.g., connecting multiple household members who benefit from different interventions to their common household, and connecting multiple beneficiary households to their common community). These connections ensure the accuracy of reporting, avoid double counting of beneficiaries or households that benefit from multiple interventions, and are important to demonstrate the degree of integration achieved through the program's targeting. The databases are a resource that would also allow SHOUHARDO III to develop sampling frames for annual monitoring.

A QR Code generated ID card will be used for multiple purposes including tracking, planning, managing, monitoring, quality assessment, and to report actual individuals (direct participants) who will receive United States Government (USG) supported short-term agricultural sector

productivity or food security training. In addition to the above, CARE will use CSmart (a Web Based Online Application through customization of existing McAID) to have the information related to individual participants, service deliveries such as trainings and transfers, etc. from the rural areas through Smartphones or Tablets.

CARE will combine Participatory Rural Analyses (PRA) with the integrated GIS of CSmart in targeted villages. SHOUHARDO III field facilitators and volunteer staff will conduct PRA sessions with community members to identify key community infrastructure (i.e., water points, sanitation facilities, etc.), market locations, health clinics and other public service outlets, climate change hot spots, and potential food distribution points. Once identified, SHOUHARDO III staff will generate GIS coordinates for these community assets and enter the coordinates into CSmart. GIS data will assist with monitoring and evaluation activities, distribution point monitoring, and will inform project interventions (especially related to community infrastructure).

4.9 Data Reporting, Disseminating Results and Data Use

M&E will play an essential role in tracking SHOUHARDO III progress and evaluating its effectiveness as well as impact in an integrated manner, allowing for on-going learning, program adjustments and informed discussions with community and implementing partners and USAID. Some of the key principles that guide the M&E Plan around data demand and utilization include:

- Valid and Reliable Program Data: The effectiveness of the M&E Plan as a management tool
 will depend on access to data that is valid, reliable and timely. To increase transparency,
 indicator and data quality assessments will be conducted quarterly.
- Informed Decision-Making: The M&E Plan is designed to ensure that management decisions at all levels are informed by the best available information on program performance at specific times in the life of the program. This will enable the program team to take corrective action when necessary to improve program performance.
- Organizational Learning: The M&E Plan in its design of data collection, analysis and dissemination of results will ensure the program can understand and disseminate key learnings and best practices.
- Learning and sharing about food security and resilience capacity: The M&E plan will enable program staff to learn about food security and resilience capacity and share key lessons across the program and with other stakeholders. This is further discussed in section 6.2. Learning and Knowledge Sharing.
- Communicating Lessons Learned: The M&E Plan will enable the program team and partners to communicate achievements and share lessons learned with stakeholders. The M&E team together with Knowledge Management team will work to foster learning at different levels.

Below is a list of need and use of M&E information, which provides an overview of M&E data requirements and utilization.

Report	Prepared by	Compiled/ Reviewed by	Approved by	Submitted to
Annual Results Report	Respective Unit lead	Reporting Manager	СоР	USAID/FFP PACC
Quarterly Performance Report	Respective Unit lead	Reporting Manager	СоР	USAID/FFP PACC
PREP Narrative	Respective Unit lead	Reporting Manager	СоР	USAID/FFP
SAPQ	MIS Manager	M&EC	CoP	USAID/FFP
CDCS	MIS Manager	M&EC	CoP	USAID/FFP
Participants Table	MIS Manager	M&EC	CoP	USAID/FFP
PIIRS and Initiatives	MIS Manager	M&EC	CoP	CO

4.9.1 Rationale for Disseminating M&E Results:

Program progress and results will be disseminated to stakeholders including, donors, and GoB, as well as the development community and peer organizations. The driving objective of sharing these results will be:

- to increase stakeholders' ownership, ensure better planning and improve the program interventions and operational modalities
- to strengthen programs institutionally and increase sustainability by getting others to adopt good practices and provide inputs to improvements of current program processes;
- to advocate for additional resources and investments as well as adoption of pro-poor, women and youth-friendly norms and policies; and
- to contribute to the global understanding of what works and not work well in addressing the needs of the targeted groups.

Dissemination Formats

SHOUHARDO III will follow the most commonly used and simple dissemination formats, such as written reports, oral presentations, press releases, fact sheets and slide shows or computer presentations. While these formats will differ in length, detail and the amount of technical information, some common elements will be:

- Logical organization,
- Direct and concise language, and
- Use of appropriate illustrations, evidence and examples.

Written Reports

SHOUHARDO III will use written reports combining visual aids for disseminating M&E results. The project considers written reports an effective means of disseminating M&E results. This will be used to provide an update on the program's progress; document evaluation procedures,

findings and recommendations; maintain an internal record of evaluation findings for program staff; and publicize important program information and experiences.

Visual aids such as maps, tables and charts, graphs, and photographs will be used effectively to summarize information and add 'life' to a written report.

Oral presentations

SHOUHARDO III M&E will use oral presentations as another means of disseminating program results. This will provide a direct, concise overview of the findings and allow for discussion, understanding of immediate reactions, in-depth interaction and suggestions. The M&E team will give presentations at various meetings – bi-monthly, quarterly, planning workshops, and national meetings, with the country office management team, GOB partners, the donor, and at formal and informal community fora.

Fact sheets

In collaboration with the project and mission Knowledge Management team, SHOUHARDO III M&E will also use fact sheets as well as to convey the key results/ findings and major highlights in a short, concise format. This will be used especially for advocacy, conveying information to policymakers and others who do not have the time to read longer reports. The fact sheets will also be used as a presentation handout or mailed to program stakeholders. Supply bulleted lists of major findings, keeping the list to under two pages in length.

4.10 Data Quality Assurance

The data quality of the SHOUHARDO III program will be monitored mainly using USAID's DQA guidelines ensuring its five domains of data quality: validity, reliability, timeliness, precision and integrity. SHOUHARDO III acknowledges that data quality assurance is not the responsibility of the M&E team alone, but also of the staff involved in the program or project implementation and management. Hence, program staff will lead the DQA with support from M&E team annually.

All SHOUHARDO III Project programming activities will maintain a standard DQA process to ensure the quality and completeness of program performance data. Annual performance data will be checked using the standard DQA checklist of USAID at the recording level, the compilation level and the reporting level. M&E team members will initiate the data quality assessment for selected indicators after submitting the Annual Results Reports. During validation, the team must go for both desk and physical reviews of the primary sources and examine the supporting documents and evidence, and also focus on the 'Data Validity, Reliability, Timeliness, Precision, Integrity and Eligibility of the program participants'. The review process and major findings should be well-documented, shared and followed up where necessary

The Regional M&E Manager and Regional Technical Manager with support from the CBHQ M&E team will conduct DQA Annually including follow up of implementation of issues, actions

and recommendations. They will verify and clean data before sending it to the next level and provide technical support for appropriate data recording and filing management. They will also ensure use of standard recording tools and that the process is followed by PNGO staff (verified during supportive supervision visits).

Implementing partners will also conduct internal data verification on regular basis. IP's Technical Officer M&E and Project Manager will be overall responsible for this. They will verify and clean data before sending it to the Field Office or the next level. They will also ensure standard recording tools and the process is followed in each of the field activities.

In order to assure data quality, SHOUHARDO III will triangulate the information collected through both DQA and reported data to make sure that the system generates quality data as well as quality services. The SHOUHARDO III team will follow the structured detailed plan for data quality assurance given in Table 7.

Table 7: SHOUHARDO III Data Quality Assurance Plan (IPTT Indicators will Include in Y2)

DQA Topics	Number of DQA	Techniques	Who will do	Frequency of DQA	Findings sharing
1. Training records	TBD	Review attendance sheet and interview participants	TBD (CARE- RTM, RM&EM, PNGO-TO- M&E and PM)	Annually	Field Office/District level/SPCM, LPCM
2. #of beneficiaries received Core Occupational Group (COG) Input	TBD	Review distribution list and interview recipients	TBD (CARE- RTM, RM&EM, PNGO-TO- M&E and PM)	Annually	Field Office/District level/SPCM, LPCM
3. #of beneficiaries received food ration	TBD	Select beneficiaries from the MIS database and interview	TBD (CARE- RTM, RM&EM, PNGO-TO- M&E and PM)	Annually	Field Office/District level/SPCM, LPCM
4. IPTT Indicator					

To ensure the quality of program data, the M&E Coordinator with guidance from the CoP, will plan for and implement data quality control measures through the following:

- Constitute a working group to design the program M&E system, including a detailed data quality assurance plan as well as outlining M&E staff responsibilities and procedures for data verification. These procedures will be followed by the M&E team in order to conduct data quality checks on a periodic basis based on sample data.
- Annually, the CARE M&E team will conduct an internal data quality assessment using USAID's data quality assessment guidance. The findings of the data quality assessment will feed into the annual M&E Plan reviews.

A Data Quality Assessment Guidance attached as **Annex-G** which will be followed by the CARE SHOUHARDO III program as part of Data Quality Assessment and Assurance USAID DQA-ADS Chapter 203 and 597: The purpose of a DQA is to ensure that data collection processes, protocols, and templates address how to:

- Assess the design and implementation of the program data management and reporting systems
- Trace and verify (recount) data collection processes and systems of indicator results
- Address the DQA findings and implement recommendations.

CARE Bangladesh quality assurance team will align with the USAID's Agency standards e.g. ADS Chapter 203, ADS Chapter 597 for DQAs and will use the following data quality standards in the management of data collection and reporting processes:

Validity: Data should clearly and adequately represent the intended result.

- Are the people collecting data qualified and properly supervised?
- Are steps being taken to identify and correct data errors?
- Are steps being taken to minimize errors such as sampling, transcription, measurement errors and sample representativeness?
- Has an acceptable level of error been established?
- Are data quality problems clearly described in DQA final reports?

Reliability: Data should reflect stable and consistent data collection processes and analysis methods over time.

- Is the indicator clearly and objectively defined (see PIRS)
- Is a consistent data collection process used from year to year, location to location, data source to data source?
- Are there consistent sampling methods or comparable data collection instruments and procedures in place
- Are data collection and maintenance procedures periodically reviewed and documented in writing?

Timeliness: Data should be available at a useful frequency, should be current, and should be timely enough to influence management decision making.

- Is a data collection schedule in place that meets program management needs?
- Are data sufficiently up to date to be useful to the program?
- Is data properly stored and readily available?

Precision: Data have a sufficient level of detail to permit management decision making; e.g. the margin of error is less than the anticipated change.

- Is there a method for detecting duplicate data?
- Is there a method for detecting missing data?

Integrity: Data collected should have safeguards to minimize the risk of transcription error or data manipulation.

- Are there proper safeguards in place to prevent unauthorized changes to the data?
- Is there a system in place to provide independent review of data and results reported? In addition to the program internal data quality assessments, USAID/Bangladesh will conduct periodic Data Quality Assessments to ensure that SHOUHARDO III performance indicators meet USAID's data quality standards. DQAs will be completed within one year of M&E Plan approval and at least once every three years. The final schedule will be determined in coordination with the USAID/Bangladesh AOR/COR and the CARE SHOUHARDO III SMT. An adapted version of CARE Data Quality Assessment Guidance is attached in **Annex E.**

4.11 Data Management and Safeguarding

It is widely accepted that good documentation is a key principle of quality data management. PNGO's, Region/Field Offices as well as CBHQ will make backups of all data after finalizing and sending to respective team, PNGOs and field office, and will make the database and data backups secure. The program will ensure participant confidentiality and protect personal identity information, both of hardcopy and digital files when published to others. In that case, pseudonyms will be used for protecting confidentiality. For the paper based surveys, the original hard copies will be preserved at PNGO offices, and they will preserve all hard copy documents for five years after completion of the SHOUHARDO III program. At the same time, CARE will ensure archiving of data that is being collected directly to electronic cloud based platforms and a localized replication server in the CARE Dhaka office. The program will ensure protection of the data entry template and database through the use of passwords. For the purpose of correction or modification, administrative passwords will be given to authorized persons by SHOUHARDO III Management. Any correction/modification should be documented with proper evidence mentioning the period. The program will maintain USAID's open data policy. The program M&E data safeguarding plan mainly consists of two parts, which are:

4.11.1 MIS database access credentials:

The program will develop a customized participant registration and tracking module. Different levels of program staff will have access to that database system. Control over access levels for the database will be accomplished by assigning individual staff credentials (IDs and passwords). Field level staff will be able to enter data into the system and retrieve formats to enter service-related information. They will also be able to create automated reports, but will not be able to manipulate the data file. Only designated staff will be able to introduce changes to the data file with appropriate approvals.

4.11.2 Periodic backup of MIS database into an external hard drive:

Although, SHOUHARDO III is planning to store the database in the cloud server, a manual data backup system will also be established to protect against data loss. The M&E team will setup a high storage capacity portable external hard drive at the central level at CBHQ. The M&E team will download weekly data at the end of each week and store this into the hard drive by creating chronological folders. The MIS database system will have the option to revive data files from the backup hard drive in case of any problem in retrieving data or if data is missing from the cloud server. The M&E team will setup a data backup schedule in the database system that will pop-up at the end of the week automatically.

4.12 Promoting Participatory Monitoring and Evaluation (PM&E)

The SHOUHARDO III project is indeed a community-led project where the Village Development Committees (VDCs) act on behalf of the whole community implementing the project interventions with support from program staff, local government and different service providers. From participant selection to implementation of the community action plans, all activities are led by the VDCs. PM&E will be promoted to ensure the active involvement of the SHOUHARDO III participants and key stakeholders/ local institutions at various stages of the program. The adoption/ adaptation of PM&E will foster a systematized "LEARNING" environment for the participants and key stakeholders involved in the implementation of the SHOUHARDO Program. A detailed concept note describing the SHOUHARDO III PM&E is attached as **Annex- H**.

4.13 Information Communication Technology (ICT):

The need for a more customized and tailored automated system of information management is

critical in a program of this size. There are three main protocols for data communication -open data policy, standard/compliance and DQA-which ensure that data is open to all users and maintains compliance with USAID policy and data quality standards.

Data collection and information management require a systematic process. Considering the diversified nature of SHOUHARDO III



interventions, the program plans to establish an automated ICT-based e-M&E system for routine data collection, surveys and analysis of outcome and impact level data. CARE proposes to customize the existing FFP funded McAID system by engaging a potential IT vendor who has proven capacity, strength and experience. There will be a long term contract with that vendor, which will include customization of the existing system, integration of new features in the system

according to need, training of relevant staff, and maintenance of the system. CARE will also provide intensive training to key PNGO and CARE program staff on data collection processes, handling handheld devices/Smartphones and online data management.

At initial stages staff will register beneficiaries using handheld electronic devices, and then service and distribution data will be continuously updated through these same electronic handheld devices. In the system, Census data, Census links with the Master Participant List, the Enrollment process from Census data, Event database links with Census data, Offline modules, Participant Smart Cards, Different group formations and service delivery e.g. Schools, Hospitals, Markets, Groups/Committees (e.g. UDMC, VDC etc.), e-Vouchers, and Beneficiary Based Sample Survey Data Management features will be available. Also, a Performance Dashboard, and a GIS & GPS Module will provide improved program management facilities. PNGOs and warehouse staff will submit data online to be stored in a CARE server and in secure cloud storage as a backup. Program staff will be able to connect to the system from anywhere, using any computer, tablet, or Smartphone, and data can be backed up in the cloud regularly, minimizing data losses in disaster situations.

Program staff will have easy access to the server while only an administrator has authorization to modify data with the prior approval from the CoP. This ICT based system will make the data collection process easier, less time consuming, and more accurate.

CARE will have partnership for ICT4D solutions with Grameen Intel, mPower and Bangladesh Institute of ICT in Development (BIID), Bank Asia and bKash for mobile financial services, CARE will also work with the Department of Agriculture Extension (DAE) to expand agriculture ICT4D applications proven successful in the Feed the Future (FtF) Agriculture Extension Support Activity, including mPower's Agriculture Digital Library and Remote Diagnostic Services. Private sector partner BIID, will expand its ICT4D initiatives with the DAE under SHOUHARDO III, including ICT training for extension agents, tablet-based information and advisory services, and market linkages through its e-Krishok platform developed with Feed the Future funding. SHOUHARDO III staff will promote cost-effective service delivery mechanisms including potential ICT4D applications for vaccinations and ANC.

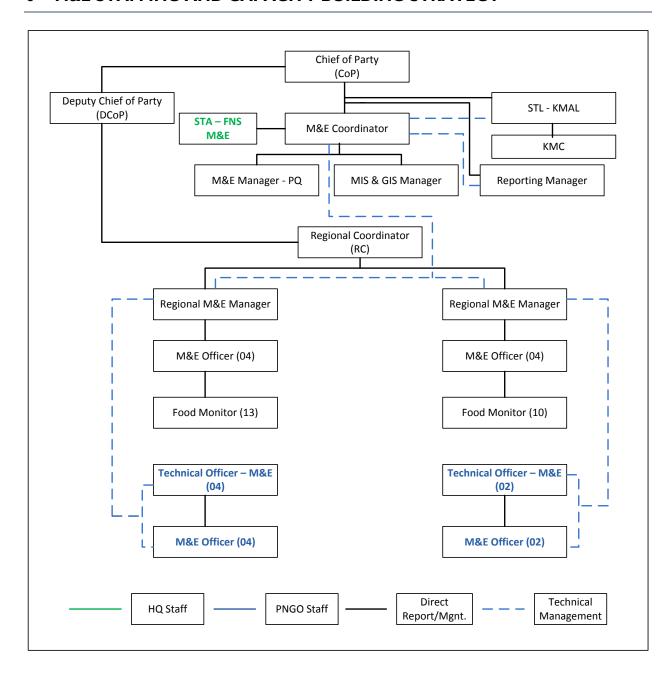
CARE will pilot ICT4D information and referral services in 10% of targeted communities, which will be scaled-up if technical feasibility and cost-effectiveness is confirmed. CARE will also utilize its proven Community Support System (CmSS) approach that was first launched in Bangladesh in 2006, now adopted by the Government of Bangladesh and supported by the USAID NGO Health Service Delivery Project and UNICEF's Maternal and Neonatal Health Initiatives project.

5 ADHERENCE TO SUBMISSION OF M&E DATA/DOCUMENTS INTO FFPMIS DEC AND DDL

USAID Food for Peace's Management Information System (FFPMIS),
Development Data Library (DDL) and
Development Experience Clearinghouse (DEC) are the primary platforms for submitting the ARR and Pipeline and Resources Estimate Proposal, all data and reports. SHOUHARDO III will



comply with the requirements and adhere as described in FFP M&E Policies and Guidance. The MTE, managed by CARE, SHOUHARDO III will submit the final report to the DEC within 30 days of FFP approval. For a FFP-managed baseline study or final evaluation, FFP will ensure that the third-party firm submits the report to the DEC. After submission of CARE, FFP will review and submit the files to the Development Data Library in accordance with USAID ADS 579: USAID Development Data and the award standard provisions. CARE will ensure all these submissions should meet the criterion which has been specified in the Section 4.3: Submission Requirements for Reports and Datasets of USAID's Office of Food for Peace Policy and Guidance for Monitoring, Evaluation, and Reporting for Development Food Assistance Programs.



6.1 M&E Staffing and Organogram

The M&E system, resource planning and staffing structure are designed to operate an effective and comprehensive M&E System and comply with the M&E and reporting requirements of CARE SHOUHARDO III, the Donor, partners and other key stakeholders, while the program will surely emphasize accountability and transparency to the participants, the donor and other stakeholders combining rigorous participatory performance management, promoting continuous learning culture and a refinement platform and community of practice. Under the technical guidance of the CoP and Senior Technical Advisor (STA) M&E for Food and Nutrition

Security, based at CARE-USA (level of effort 20%), the M&E Coordinator (M&EC) will employ a multi-pronged strategy, including: i) CARE-led overall performance management to measure the impact of the program and make adjustments, and ii) M&E capacity enhancement of the partner staff to meet the CARE SHOUHARDO III and USAID's M&E and reporting requirements and quality assurance and compliance. In other words, to rollout essential M&E activities as well as effective implementation of the M&E system, an M&E Coordinator will be based at the CARE-Bangladesh headquarters level to coordinate all M&E and MIS activities under SHOUHARDO III, and this individual will have close contact with the CARE USA HQ M&E STA as well as the program management staff. The M&EC will directly report to CoP and will be supported by 2 key positions, i.e.: the M&E Manager-PQ and MIS and GIS Manager based at CARE-Bangladesh headquarters. Subsequently, in two regions, there will be Regional M&E Managers who will supervise M&E Officers. M&E officers will directly provide technical support to the PNGOs and oversee CARE Food Monitors. In each implementing PNGO, there will be two M&E staff (one TO-M&E senior position and another M&E officer mid-level position) who will coordinate and manage all M&E activities in his/her respective organization. SHOUHARDO III has a total of six implementing Partners (4 in Char and 2 in Haor). Therefore, in total the 6 partners have 12 TO-M&E and M&E officers. The GIS/MIS and M&E Manager will be the main focal persons to lead the M&E, MIS, GIS and other ICT4D applications for monitoring, evaluation and data management across SHOUHARDO III. S/he will be primarily responsible to develop and customize (on an "as needed basis") the MIS, ensure effective operations following ICT4D strategies/principles, and manage the implementation process of MIS throughout SHOUHARDO III. Also s/he will be responsible to customize the GIS based software features into existing the mobile-web application. The line management of the Regional M&E Manager will be Regional Coordinator (Regional Chief of Operations and Technical Teams), but all technical management of them will be done by the M&E Coordinator. The M&EC will be the direct focal/coordinating person between the Dhaka office and the Regions, and will coordinate day to day M&E activities on behalf of CoP, who is ultimately responsible for the overall results management for the program. The M&E Coordinator (M&EC) is a member of the SHOUHARDO III Senior Management Team and as the leader of M&E. The M&EC is the focal person for managing all aspects of the complex M&E framework for the USG and GoB funded FFP program. He /she is responsible for coordinating the M&E strategies with all partners and has the overall responsibility of producing high quality, reliable, and verifiable M&E information. Detail responsibilities of the individual M&E staff are provided below:

6.1.1 Chief of Party

As the ultimate program lead, the CoP will spend time ensuring coherence, consistency and relevance of M&E processes for the program activities they will address. He/she will further work with program implementation teams and PNGOs to ensure adherence to M&E procedures and incorporation of the output and outcome data to program decision. It is expected that the CoP will spend up to 25% of his/her time supporting smooth implementation

of M&E processes and utilization of M&E data. The CoP directly supervises the M&E Coordinator.

6.1.2 Monitoring and Evaluation Coordinator

The M&E Coordinator (M&EC) (Level of effort:100%), is a key member of the SHOUHARDO III management team and is located in the Dhaka CARE Country Office. The M&EC is the focal person for managing all aspects of the complex M&E framework for the USD 88 million USG and GoB funded project. He/she is responsible for coordinating the M&E strategies with all partners and has the overall responsibility to produce high quality, reliable, and verifiable M&E information. He/she is responsible for tailoring M&E information to the needs of different levels of management and operational staff, as well as to the donor (compliance with both FFP and FtF M&E requirements) and the GoB. He/she is responsible for capturing both qualitative and quantitative information from project operations and commodity data, from the PNGOs, extending to approximately 170,000 households – one of the largest and highly complex, but comprehensive M&E databases in Bangladesh, and in the world for a non-emergency food security Project funded by USAID. In addition, the M&EC will work across all technical sectors and programmatic areas to coordinate and ensure data are being utilized for program improvement, and that learning and reflection are being documented and described through required USAID reporting formats.

6.1.3 MIS and GIS Manager

With a Level of effort of 100%, the incumbent will be working under the direction of the SHOUHARDO III M&E Coordinator (M&EC), based at CBHQ and will be the main focal person to lead the MIS, GIS and other ICT applications for monitoring, evaluation and data management across SHOHARDO III.

S/he will be primarily responsible to develop and customize (based on current needs) the MIS, and ensure its effective operation following ICT strategies/principles, and manage the implementation process of MIS throughout the life of SHOUHARDO III. Also s/he will be responsible to customize GIS-based software features into existing mobile-web applications, update and manage attribute data, assist spatial analysis, collect GPS coordinates, produce GIS outputs etc. S/he will act as a focal person to represent MIS requirements to all program components. S/he will be held accountable to provide support for the smooth implementation and functioning of the ICT-based e-M&E system of SHOUHARDO III. S/he should closely monitor the appropriate use of tools, processes, methodologies and frequencies applied across the Program, contribute to the reconstitution of the system and keep the management updated. S/he will directly be accountable for updating, management of the MIS system and tools ensuring that they remain relevant and responsive to program needs.

6.1.4 M&E Manager-Program Quality

The incumbent will be working under the direction of the SHOUHARDO III M&E Coordinator (M&EC), based at CBHQ, but must spent a significant amount of time in the field to work with the regional team members and CBHQ, extend support for capacity building and improve the M&E/MIS system. This is a non-supervisory position. S/he will ensure data quality and data utilization of data, and extend support for internal and external DQAs. In order to closely monitor program activities and outputs, s/he will ensure appropriate use of tools, processes, methodologies and frequencies applied across the program and contribute to reconstituting the system and keeping the management updated. S/he will be responsible for managing/adhering to compliance with the USAID Open Data Policy. S/he is directly accountable for implementation of the M&E process, tools and results/ performance in relation to the targets. S/he is responsible to ensure data quality assessment and assurance and maintain a coherent information management flow. S/he will also be responsible for documentation and archiving the Program M&E data (from back-bone data to final products), reports for present and future use and for keeping them readily available to provide to others as and when needed. S/he will work with other team members and units to accomplish these objectives. The incumbent shall coordinate with project staff members and technical teams in designing and operationalizing the Routine Monitoring plan. They will also prepare monitoring reports and submit data to FFPMIS, including the SAPQ, annually. The position's level of effort is 100%

6.1.5 Regional M&E Manager

The Regional M&E Manager (Level of effort:100%), being one of the senior managers at regional level, is directly responsible to proactively coordinate all M&E activities of the SHOUHARDO III program for respective regions, ensuring data consistency, reliability, timeliness and quality to satisfy the program's M&E requirements and produce quality reports. S/he should extend effective support to the PNGOs in facilitating important M&E activities like quarterly workshop, PM&E Sessions, use of the Community Score card, the participatory performance tracking tool (PPT), resilience measurement and field surveys. S/he will be held accountable to provide support to smooth the implementation and function of the ICT based e-M&E system of SHOUHARDO III. S/he is also responsible for operating M&E systems to demonstrate periodic changes and program impacts, upgrading M&E tools and processes in line with the program implementation modalities, indicators and the regional context, generating both quantitative and qualitative outputs for quarterly, half yearly, yearly progress status and meet-up ad-hoc requirements as well. She /He coordinates commodity monitoring activities (End-use, Onsite, Re-monitoring) in the region.

6.1.6 M&E Officer

The M&E Officer (Level of effort:100%), as the member of SHOUHARDO III Program's Monitoring & Evaluation team, this person is responsible for ensuring implementation of an effective and comprehensive M&E system; integrating quantitative and qualitative approaches in monitoring of program interventions and commodity distribution (End use, Onsite and Re-

monitoring) within the areas assigned to PNGOs. The M&E Officer will be based at the Huboffice under the Regional Office with overall responsibility to coordinate all M&E activities among the assigned PNGOs, and to produce quality M&E reports with active support from the Regional M&E Manager. S/he should extend effective support to the PNGOs in facilitating PM&E Sessions, the Community Score card, use of the Participatory Performance Tracking tool (PPT), resilience measurement and conduct of field surveys. S/he will be held accountable to provide support for smooth implementation of ICT based e-M&E system of SHOUHARDO III. S/he will also be responsible for ensuring quality monitoring data and information through regular meetings with the PNGO M&E Officers and Food Monitors, and by making purposive visits to the field and local institutions. The incumbent is accountable for hard and soft data management and preservation ensuring accuracy and timely presentation.

6.1.7 Food Monitor (FM)

Food Monitor (FM) will carry out random verification and will cross check enrolment of new participants to verify set registration procedure are followed as well as will cross check exclusion cases manually or electronically. S/he is also responsible to check the Food Distribution Site selection process to check whether selection is done in community led approach in a suitable place or not. S/he will randomly check and verify that all register participants are received ration cards and cards are not duplicated or misused. Under supervision of M&E Officer, s/he will conduct end-use monitoring to verify the consumption/ utilization of distributed food by targeted participants. Attend in the food distribution and monitor that FDP are properly organized for food distribution as per the guideline.

6.1.8 Technical Officer (TO) M&E (PNGO)

TO-M&E will mainly ensure the functioning of the M&E systems for the Partner NGOs and ensure that technical teams are well versed in the program design, reporting requirements and clarity of roles - especially in activity level data collection. He/she consolidates partner level M&E reporting for submission to CARE regional M&E managers.

6.1.9 M&E Officer (PNGO)

The M&E officers are responsible for routine M&E data collection and compilation. Their work is based at the field level and involves working with field facilitators to ensure clarity and capacity in their roles, which include submission of reports as part of routine data collection, regular data entry, and preservation of hard and soft documents as required. They provide their reports to the TO-M&E for inclusion in partner level M&E reporting.

6.2 Learning, Knowledge Sharing

CARE is committed to establishing a learning culture, where all its projects share experiences and strengthen CARE Bangladesh's overall capacity. The M&E unit will work in an integral manner with the knowledge management, advocacy and learning unit to promote and ensure reflective practices throughout the program implementation period. Knowledge management

and learning approaches and techniques will ensure both upward and downward accountability and uptake of lessons learned. This will maximize uptake and leverage lessons learned both internally and externally. There will be a dedicated learning documentation team lead by the Senior Technical Leader for Knowledge Management and Learning, and this team will take charge of organizing sharing forums to improve knowledge and decision-making and build the institutional memory for community development as a whole, especially in relation to food security and resilience capacity.

6.3 Capacity Development Strategy

SHOUHARDO III views the 'M&E Capacity Strengthening effort' and associated strategies and initiatives as critical and integral elements of the program. SHOUHARDO III's M&E Plan contributes to the achievement of the overall objectives of the program, but also promotes a improved learning environment, fosters innovation and creativity, and further strengthens the M&E systems and their functionality. It also improves overall quality, including among staff with M&E responsibilities from CARE and implementing partner organizations. To ensure the presence and operation of a learning-based M&E system, the M&E staffs, including program staff, have adequate knowledge on data management, analysis and sharing. The M&E team also needs to know their specific roles and responsibilities to ensure a functional system. The program will organize the following six major types of trainings/workshops to ensure that the staff has adequate capacity to ensure the functioning of the system.

6.3.1 Central level staff orientation on the M&E Plan

The M&E and program staffs will be oriented on the detailed M&E plan at the central level after its approval by the CoP and M&E Coordinator. This orientation will be organized so that all senior technical and management staff have a common understanding of the IPTT, information that the system will generate, reports and reporting timing, data sharing and use for program management decision-making and roles and responsibilities at different levels.

6.3.2 CARE Regional and PNGO level staff M&E training

A two-day comprehensive training will be organized for district level staff that will include CARE regional staff and PNGO key staff. These staff will be trained on all of the components of the M&E plan, including the data collection process, data analysis, the automated system, and interpretation and data sharing at district or community level. They will also get a clear understanding of data flow and roles and responsibilities at different levels.

6.3.3 Annual monitoring training

The third party survey firm of hired data collectors will collect the annual monitoring data annually. The M&E team will supervise the entire data collection process. Tablets will be used to collect annual monitoring data. Both the enumerators and the M&E staff will receive 5 days of extensive training including a one-day field practice. The annual monitoring training will be organized every year prior to start the actual data collection. The first annual monitoring training

is planned in August/September 2016. The following are the main topics that will be discussed in the training session:

- Sampling techniques and data collection methods
- Detailed discussions regarding the questionnaire
- Interview processes
- Data quality assurance
- Tablet operation
- Data synchronization to the cloud server

6.3.4 M&E refresher training

The M&E team will organize a refresher training every year. This is also a good venue in which to provide M&E training to new staff members. This training will be mainly organized as a learning opportunity to share new things, gain experience with and address challenges in the system. Six M&E refresher trainings will be organized for the six PNGOs in each year of program implementation.

6.3.5 Training on the ICT based e-M&E/MIS database system

The SHOUHARDO III program will introduce an innovative web-based database system that will include data inputs and outputs at different levels of program management. All program staff including PNGOs will be oriented on how to use the database system. This will be a hands-on training with handheld devices. Two trainings will be organized from central level to regional level. The M&E staff will also receive on the job training continuously.

6.3.6 Training on statistical concepts and data analysis using statistical software and interpretation

The SHOUHARDO III M&E system will be a system based on continuous learning, disseminating and use of M&E information for program management decision-making. To make precise programmatic management decisions, program staff will need data analyzed in different dimensions that provides a realistic picture of the program. It is necessary that the M&E staff are capable of producing meaningful information by analyzing and interpreting program MIS data. CARE will organize a five-day training in 2017 with technical assistance from TOPS or TANGO International on statistical concepts, data analysis of BBSS using statistical software (SPSS) and interpretation of the results.

In order to make the M&E functions most effective, the M&E leadership will maintain readiness and quality, as well as USAID M&E requirements and compliance. The SHOUHARDO III program will keep its keen eyes on retaining existing experienced M&E staff and will complement their experience with onward M&E capacity enhancement efforts. The program will also create a learning platform and foster innovations as well as M&E capacity strengthening and programmatic improvements over the program period.

The program will ensure that M&E staff are given adequate opportunities to participate in various learning events, workshops, trainings, intra/ inter cross visits organized either by FFP/USAID, FtF, FHI/ FANTA III, TOPS, ACME programs and non-USAID programs in-country and overseas. M&E capacity strengthening will be initiated throughout the life of the program and by various means including the following:

- Identification of specific capacity limitations that need to be addressed such as needs to learn new skills, needs to refresh existing skills, and identify which skills in particular are needed. This will be done through a systematic needs assessment and regular manager-subordinate personnel performance management meetings.
- Identify what types of trainings and supports are needed, for how many people.
- Provide a plan for how the trainings and skills will be provided.
- The program M&E and management team will participate in the post-award M&E workshop organized by FFP/ FANTA III.
- M&E staff will participate regularly in various learning events in country and abroad, such as those provided by the TOPS FSN network.
- M&E staff will participate in the capacity strengthening and learning events initiated by USAID/ FFP funded programs like USAID ACME, FSN/ TOPS, FHI360/ FANTA III, mStar, GIS/ AGOL, and other non-USAID funded organizations working in Bangladesh on relevant programs.
- The program M&E focal points (M&EC) will serve as TOPS M&E task force members and participate in other learning/sharing events; participate in cross learning and share their knowledge with the program's M&E staff.
- Organize capacity strengthening trainings, orientations, refreshers, exposure learning visits and workshops locally and regionally for program staff and partners, including USAID-funded FFP and FtF programs.
- Organize formal and informal on-the-job training and mentoring, and promote a "learn by doing" culture.
- Develop one-to-two pager briefs on the program and its successes/challenges and present them at knowledge management initiatives.
- Provide hands-on training and orientation on ICT4D/ e-M&E equipment and applications and stay up to date on new applications and technology
- The team will be equipped with electronic devices, ICT4D based eM&E, API (application program interface), standard statistical software and popular interfaces for strengthening program M&E/ MIS, and to ensure coherent information flow and data quality across the program.

7 DEALING WITH THE UNEXPECTED AND WORKING IN POLITICAL INSTABILITY:

During SHOUHARDO II, Bangladesh experienced increasing political instability, general strikes, and scattered random violence that took many lives. If this continues, it will be difficult for the program to undertake M&E interventions from time to time. While it is hoped that the use of technology will help, it is easy to envision scenarios of a disruptive nature. CARE developed a complete M&E plan addressing all MIS and GIS issues in this environment post-award. The plan included a set of tools for routine monitoring, contextual analysis, process, surveys (quantitative and qualitative), and population based evaluations, the data acquisition and analysis plan, DQA, and operational guidelines. Since CARE is planning to implement the customized McAID in the name of CSmart, which is a completely web-based management information system, CARE and partner NGO staff and community volunteers can now enter and receive information through the more than 950 Smartphones/hand held devices distributed throughout program intervention areas. Staff can not only record information about beneficiaries, but they can also track the movement of inputs from warehousing to distribution through GIS enhanced capabilities. This allows development professionals have real-time access to monitoring and evaluation data, enabling implementing partners to make tailored and customized interventions for the program's estimated 549,000 participants.

With real-time data and open access now in the hands of community staff, these workers save hours on their administrative responsibilities, while also making inputs and service tracking more cost-efficient and portable. Any device with an internet connection can access the system. In Bangladesh, a country where cell phones are the primary means for internet access in rural areas, portability and ease-of-use makes e-M&E based monitoring and reporting a critical component of its development food assistance portfolio. This CSmart system will allow SHOUHARDO III M&E ensure a smooth flow of information with less physical movement in which both offline and online feature will be available.

Where communications and hardware failure are the result of the instability, the CoP will reserve the authority to approve manual data collection and transmission within the confines of guaranteed integrity.

8 SHOUHARDO III EVALUATION PLAN

The program evaluation plan will be driven largely by baseline, mid-term and end line studies. However annual monitoring - especially at the outcome level - will be reviewed for learning and used to assess the emerging outcomes and trends. These will be mostly applied to improve, modify or scale up activities. The program will also convene frequent internal and external reflection sessions to assess progress. CARE will continuously engage with academic and technical institutions, available and able to improve thematic learning and evaluation so as to

document relevant outcomes. This would include International Food Research Policy Institute (IFPRI). The section below discusses the baseline, midterm and end line studies.

8.1 Baseline study

In order to meet expectations of FFPM&E requirements, compliance and learning, CARE will support USAID's population based representative sample survey in baseline (third party survey), to collect baseline values for specific outcome and impact indicators that will be compared to values collected during the final evaluation. The survey was conducted during April-June 2016. The baseline study included a quantitative baseline survey of households in the program area, using a probability sample at the population-level, and designed to produce values that will be compared to results from similar end-line surveys in order to measure change. To supplement and compliment findings more specifically in order to generate contextual insight, a qualitative study was also carried out alongside the quantitative study. The qualitative study was conducted in some purposefully selected villages so that different program attributes could be adequately captured. FFP contracted and managed a qualified third-party firm to implement the baseline study. To support baseline sampling process, CARE provided working village lists. Also, CARE participated in the Planning Workshop for Bangladesh Baseline Study, Food for Peace Projects which was scheduled in January, 2016. CARE provided technical inputs to review the methodology for the quantitative and qualitative study, sampling issues, finalized selection of project-specific indicators, adapted the questionnaire to the country specific context and finally clarified the roles and responsibilities of each of the stakeholders. In January CARE submitted baseline values and final evaluation targets based on the baseline values for each baseline/final evaluation indicator to the Food for Peace Management Information System (FFPMIS) as part of the Annual Results Report (ARR) at the end of the fiscal year 2016.

8.1.1 Baseline Surveys and Establishment of Targets

Within the first year of implementation, FFP will lead and mange a third party firm to conduct a common FFP baseline within Bangladesh, which is called a population-based baseline survey. This will provide the starting point against which the program will measure progress of outcome and impact indicators for the remainder of the program. Based on these results, CARE will make realistic revisions to the FFP Baseline indicator targets, inform FFP accordingly and include these target values in the FFPMIS as required by FFP.

8.1.2 Reporting Baseline Values and Final Evaluation Targets:

After the baseline survey is completed and estimates for baseline values are available, CARE will:

- Submit a revised IPTT that includes for each baseline/final evaluation indicator the actual baseline values and final evaluation targets adjusted based on the baseline values; and
- Enter the baseline values into the FFPMIS as part of the ARR submitted after the end of the fiscal year in which the values become available.

8.1.3 Sharing the Baseline Report with the program staff and partners

CARE will share the baseline study report with relevant staff and implementing partners. In order to widely communicate the key findings from the baseline study, CARE will hold workshops to share the results and will also ask the staff and partners to identify potential implications to the program strategies, and targeting.

8.1.4 Use of Baseline Study Results to Refine Program Strategies:

CARE will use the baseline study results to refine the program strategies as applicable. The baseline study results may provide an opportunity to review the program design against the food and nutrition security conceptual framework and the program's Theory of Change. In addition to the quantitative survey results, qualitative information can be used to refine the program strategies. Leveraging findings from those studies may help in the conduct further formative research to understand the barriers to change or support development of strategies to influence behavior change.

8.2 Midterm evaluation

CARE will manage an externally-led MTE to maximize learning opportunities. The MTE will be a process evaluation that will focus on implementation processes, including program management, monitoring, the application of results of program studies, and intervention protocols and processes, outputs and inputs. An external team will lead a midterm evaluation in Year 3 to assess program progress, identify and assess any faulty design assumptions or implementation shortfalls, and subsequently, propose appropriate solutions.

The midterm evaluation will be process-oriented but will also draw upon qualitative research to illuminate beneficiaries' satisfaction with program activities as well as any barriers to participation related to gender, the specific needs of youth, or other vulnerability criteria. To maximize the experience as an actionable learning exercise, the evaluation will involve program implementers as interview subjects, data collectors as deemed appropriate, and disseminate targets. The implementation plan will be revised accordingly. The midterm review will provide recommendations for changes needed in the programmatic approach and interventions to meet outcome and impact-level targets. In addition to the SHOUHARDO III SMT and M&E team, CARE USA Food Security Team and FNS Senior Technical Advisor for M&E will provide technical support in the preparation for and implementation of the midterm review process.

The methods employed will sample the participant population. The MTE will take place approximately during March-May 2018. CARE will finalize the timing of the MTE data collection after consultation with and approval of the AoR and the USAID Mission. The midterm evaluation will be managed by CARE through an externally contracted third party firm. After completion of the MTE, CARE will develop a plan of action to apply the MTE recommendations with the approval of the AoR and the USAID Mission. CARE actions will include:

- Obtain approval for timing within 15 months of award
- Draft SOW for approval within 18 months of award

- Final report submitted within 36 months of the award
- Final report uploaded to FFPMIS and DEC/data sets submitted to AOR within 30 days of final report approval
- Follow-up action plan submitted for AOR/USAID Mission approval within 45 days of FFP approval of final report.

8.3 Final evaluation

In order to meet FFP M&E requirements, CARE will support USAID's population based quantitative sample surveys in the Final Evaluation to compare values over the life of activity. The final evaluation of SHOUHARDO III will be conducted during the fourth/final year of the program (2019/2020) and during the same season in order to be consistent with the baseline study. As with the baseline study, an external consultant team will be engaged by FFP/USAID to conduct the final evaluation. The evaluation will be a population based survey using the same methodology and tools that were used during the baseline study. The purpose of the final evaluation will be to assess the achievements against the program objectives and activity targets. The evaluation will be a learning process and an ideal opportunity for SHOUHARDO III to take stock of its achievements, to reflect on the program's strengths and sustainability, as well as to understand weaknesses, lessons learned and best practices for implementing future food security interventions. The Final Evaluation will include a quantitative and qualitative study in the program areas. After completion of the final evaluation, CARE will record final evaluation indicator values in the FFPMIS. If FFP suggests that CARE lead and manage the Final Evaluation, then actions would be:

- Submit a draft SOW for approval at least one year before the planned start of the Final Evaluation;
- Conduct a Final Evaluation study as close as possible to the end of the award. The Final
 Evaluation survey will be conducted in the same month as baseline survey, ideally during the
 lean season, using the same questionnaires and indicators as used at baseline
- Submit the final report and related documents to DEC within 30 days of the final report approval.
- Upload a complete clean dataset, metadata and other related documents to USAID Development Data Library.

9 MAJOR M&E SCHEDULE

Major Events	Time Frame	Remarks
Participate in USAID – FFP M&E and baseline workshop	January 2016	
Review and finalize LF, TOC and IPTT and fix FYs/ LOP targets,	March 2016	
Develop detailed M&E plan and tools	March 2016	
Finalization of list of all eligible participants and registration of the individual households	August 2016	
Extend support for conducting Population Based Baseline Survey (Quantitative + Qualitative)	March-June 2016	
Design and implement the system of M&E and data synchronizing (online and off line) automated MIS for SHOUHARDO III M&E. (completion of McAID adaptation)	November 2016	
Panel Data Collection	November 2016, 2018 and November 2019	
Annual Monitoring Survey	August (each year)	The FY16 one is critical for setting base values of annual monitoring indicators
Annual Results Report Submission	November. (each year)	
Conduct Population Based Midterm Evaluation Survey (Quantitative and Qualitative)	March – May 2018	
Extend support for conducting Population Based End line Survey (Quantitative + Qualitative)	TBD in FY20	
Conduct assessment of SHOUHARDO III resilience on food and nutrition security	March 2020	

List of Tables

Table 4

Table I : Logical Framework of SHOUHARDO III Program

Table 2 : Indicators for Routine Monitoring /Data Collection

Table 3 : List of indicators which data will be collected through applying Management Score Sheet (MSS)

: Indicators for beneficiary based sample survey (BBSS)

Table 5 : Indicators for BBSS sample size estimation Table 6 : Estimation of sample size by indicators

Table 7 : SHOUHARDO III Data Quality Assurance Plan (IPTT Indicators will Include in

Y2)

List of Annexes

Annex A : Theory of Change (ToC) Diagram
Annex B : Theory of Change (ToC) Narrative

Annex C : Performance Indicator Reference Sheets (PIRS)

Annex D : List of SHO III's Performance Indicators
Annex E : Data Quality Assessment Guidance

Annex F : Data Flow for Annual Monitoring Indicators
Annex G : Data Quality and Completeness Checklist

Annex H: Guide for Participatory Monitoring & Evaluation Session

Annex I: Key Monitoring, Evaluation and Learning Tools

Annex J: Logical Framework

Annex K : Performance Indicator Tracking Tables