Sida Evaluation 03/16

Swedish Support to Mashambanzou Care Trust

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Department for Africa

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Executive Summary for the Mid-term Evaluation of the Mashambanzou Care Trust

Mashambanzou is an interdenominational, non-profit making organisation established 1990. Its mission is to provide quality care and support for the poor people affected by HIV/AIDS in the high-density area of Harare and to help empower the local community to deal with the AIDS pandemic with compassion and dedication.

The Swedish Embassy has supported the Crèche in Mbare suburb for orphans and children in difficult circumstances since 2001 and the Palliative Care Unit in Waterfalls since 2002.

The objective of the mid-term evaluation was initiated as a result of People System Inclusive's task to develop a Human Resources Management System in order to take stock of the Swedish support.

The Trust is endeavouring to ensure that objectives are implemented cost effectively and in a transparent manner. There is a need to develop efficiency measurement tools through improved data capturing mechanisms including accounting procedures. However, transparency is one of Mashambanzou's greatest strengths.

A human resources system is developed in parallel with the mid-term evaluation, which will formalise policies, and thus avoid eventual issues rising from the lack of the same.

Introduction

1. This report details the findings and recommendation emanating from the situation review which was conducted by People and Systems Inclusive Management Consultants (PSI) as a component of the project to conduct a mid-term evaluation at Mashambanzou. The project is being undertaken at the invitation of the Swedish Embassy – First Secretary Ms Johanna Palmberg who consulted with Mashambanzou Programme Co-ordinator Sister Margaret McAllen. Specifically the mid term review is intended "to establish to what extent Mashambanzou has achieved its objectives and establish the extent to which the organisation's programmes are cost effective. Furthermore the mid term review is intended to look at the role of the Board of Trustees, the Advisory Executive and Management Committee in the decision making process at Mashambanzou".

(Page 2 of SIDA MEMO dated 3/10/02) Appendix A

Approach and Work Undertaken

2. In undertaking the assignment PSI followed the Inputs – Processes – Outputs model of programme evaluation. The assignment was undertaken in line with the work plan agreed upon as per contract terms and conditions. The work plan covered the following activities:

Project mobilisation, which involved designing of data collection instruments (questionnaires and interview schedules).

Conducting interviews with key stakeholders and beneficiaries of Mashambanzou. We held discussions with two Board members four members of the Advisory board, the whole management committee, staff members, and members of the community supported by Mashambanzou. We also interviewed the beneficiaries i.e. patients admitted at the unit and those supported through the home based care programme.

Inspection visits to Mbare crèche; the Palliative Care unit and the homes of four home based care patients were made.

Reviewing documents

3. We reviewed documents which include the following

- Annual reports for years 1998, 1999, 2000 & 2001
- Audit reports for period 1999, 2000 & 2001
- Minutes of the management and advisory committees
- Job Descriptions and Contract of employment for Mbare Crèche staff
- Submitted Budget proposals for the Care Unit and Mbare Crèche
- The 2002 Annual planning Report
- Financial reports for Mbare Creche and the Palliative Care unit-Swedish support programme. (actual and budget analysis)
- Project proposals submitted to National Aids Council and OAK foundation to support the Orphan programme and Home based care patient support programme respectively
- July 2002 to June 2003 Budget proposals for the care trust
- Statistics on the Palliative Care details of admissions, discharge, referrals and deaths.

4. Table 1 indicates the names of persons interviewed either individually or in a focus group meeting.

Table 1: Names and positions of people interviewed at Mashambanzou

NAME	DESIGNATION	NAME	DESIGNATION
MOLYNEAUX Mr Mike	B/Trustees – Chairperson	MUKUYANA Sithembiso	Counsellor – 001
JOYCE, Mr Peter	B/Trustees – Member	MANDAZA Otilia	Carer – PCU
MUNYARADZI Mrs	Advisory Committee	MARUVA Mavis	Carer – PCU
MACHAYA, Mrs M	Advisory Committee	MAJOME Faithful	Counsellor – Pastoral
McALLEN Sr Margaret	Co-ordinator – MBZ	MASAMBA Simon	General Hand
SMET Patrick	Networking Officer	MATEKA Hellen	SRN – HBC 1
CHIGWA Rosa	Proj. & Fin. Officer	MLAMBO Augustine	Pastoral Worker
MACHIRIDZA Charity	Bookkeeper	MUDANGANDI Ivy	Pastoral Worker
KELLY Sr Helen	Matron – PCU	PACHIRERA Rudo	Nurse Aide – PCU
BENNATI Fyp	Sec / Girl Friday	SANHEYO LUKE	Community
ABDUL Dorothy	Co-ord – Mbare	SHORA E L	W/E Rel SRN – PCU
BUKUTU Cathrine	Asst Cook – Mbare	PINDA, MRS	P/Time Sister-community
CAREY Sr Anna	SRN – Mbare	TAGARIRA Phyllis	SCN – HBC 1
DUNDURU Resta	Teacher – Mbare	TARUWINGA Letticia	Carer – PCU
MAROMO Stanford	Gen. Hand – Mbare	TOGA Roselyn	Counsellor – HBC2
MUTANDWA Susan	Asst. Cook – Mbare	KAMPIRA Benny	General Hand
MWASHITA Admire	Security – Mbare	KURANGWA Colleta	Housekeeper – Centre
NYAMURIDZO Shelter	Kitchen – Mbare	MADHLABUTA Roselyn	Nurse Aide
ZVATENDWA Nhende	Gen. Hand – Mbare	MAGAGULA Rosemary	Teacher – Mbare
BHOBHO Clothilda	Counsellor HBC 1	MAGAMA Samuel	Buyer
BVINDI Anna	Cleaner	MAKORA Br Kizito	Pastoral/Councillor
CHIDZUMA Sydney	Nurse Aide – PCU	CHIGANZA Samuel	Home based Care Patient
CHIROWODZA Joyce	SRN – PCU	SHOKO Martha	Home based Care Patient
CLEAR Sr Eileen	Councillor/postoral	KANDARE Tapiwa	Home based Care Patient
GABRIEL Loveness	Cook – PCU	MASUNDA Anna	Home based Care Patient
GUMBO Daniso	Counsellor – 002	GWASIRA Gilbert	Palliative Care Patient
GUNDAMUPANDA Peter	Gardner	ZHUWAO Antonio	Palliative Care Patient

5. This report details the findings of the diagnostic review, provides comments on issues raised and specifically assesses if Mashambanzou care Trust unit has achieved its objectives and the extent to which Palliative Care Mbare crèche and other programmes are cost effective. The report also analyses and comments about the role of the Board of Trustees, Advisory board and Management committee. We have also presented our recommendations, which we propose basing on our knowledge of how similar organisations function as a way of addressing the concerns of the stakeholders of Mashambanzou and improving efficiency in the organisation. The rest of this report is structured under the following headings.

- Findings, key issues and concerns
- Conclusion and Recommendations
- Implementation strategy

Findings, Key Issues and Concerns

6. Mashambanzou Care Trust is an interdenominational, non-profit making organisation established in 1990. Its mission is to provide quality care and support for the poor people affected by HIV/AIDS in the high-density area of Harare and to help empower the local community to deal with the Aids pandemic with compassion and dedication.

7. In an endeavour to realise its mission Mashambanzou Care Trust has set for itself the following broad goals as outlined in its 2002 Planning report:

a. To have an efficient and effective organisation which is focused at its mission.

b. To assist in the overall reduction and prevalence of STD/HIV infection among people.

c. To have patients in the Home Based Care (HBC) who are healthy, comfortable and are accepting their status.

d. To have orphans and children in difficult circumstances who are well educated self-reliant, empowered and have a sense of responsibility for the less fortunate.

e. To have patients cared for in the palliative unit. Provide the patients with quality care so that they live positive lives and if they do die, they die in a reasonably comfortable state.

f. The Swedish Embassy is directly involved in sponsoring the projects centred on the Mbare creche and the Palliative Care Unit whose goals are:

   – To have orphans and children in difficult circumstances attending creche.
   – To have patients cared for in the palliative unit. Provide the patients with quality care so that they live positive lives and if they do die they die in dignity and in a reasonably comfortable state.

8. As a way of facilitating the achievement of the goals Mashambanzou has made great effort to uphold its mission and is in the process of addressing some of the key issues mentioned below:

- Ensure financial stability
- Ensure that sound accounting practices and standards are adhered to
- Ensure compliance with Board of Trustees requirements
- Clarify communication lines within the organisation
- Develop clear Human Resources management systems and policies.

Decision making bodies

9. The decision-making bodies are:

i. the Management Committee

ii. the Advisory Board

iii. the Board of Trustees

The organogram of the organisation is as per Appendix B.

Management Committee

10. The management committee is composed of six members who currently are

- The Co-ordinator
- The Networking officer
- The Projects and Finance Officer
- The Administrative Secretary
- Team leader – Pastoral counsellor
- The Bookkeeper

Issues

11. It was noted that the roles, specific areas of work, scope of work and purpose of Management Committee needs to be clarified. We noted from minutes supplied that the committee save the purpose of:

1) Sharing information on issues such as report on project proposal submitted and approved.

2) General programmed events and any other general management issues.

The Management meetings should continue to be focused and achieve the following objectives:

- They should serve as an effective and regular space for feedback on the various departmental developments and offer basis to decide on the way forward.
- Sharing on ideas on how to respond to prevailing socio-economic situation i.e. strategic planning and management.
- Attend to routine staff concerns and decide on appropriate responses.
- Discuss on the day to day running of the programmes and offer support and counselling.

Advisory Committee

The Advisory committee is composed of seven members with varied qualifications and experience. These include the co-ordinator and the networking officer at Mashambanzou. Membership also includes the Director of Family Trust who was formerly employed by Mashambanzou and the Matron for City Health Department-Municipality of Harare. The criteria for selecting members is based on commitment of person chosen, his/her credibility in society and the benefit likely to be derived from his/her expertise.

12. It was noted that the committee is basically an organ that offers advice to Management which is non-binding in nature. They are supposed to meet twice a year but can meet regularly if need arises. However, the management committee has the free reign of contacting individual members for guidance. It was however felt that it would enable the development of the Advisory committee and its effectiveness, if it could meet quarterly and benefit from collective wisdom of the board derived when they meet as a team.

13. It was also felt and shared that it would be worthwhile the time of the organisation to receive minutes of Management meetings so that their deliberations are both informed and focused on topical issues. With the envisaged new structure at Mashambanzou we are recommending the eventual merging of the Advisory committee and the Board of Trustees into one board to be called the Board of

Directors. We believe this will result in clear roles and improve on efficient management. This however needs to be explored and thoroughly discussed at various forums within the organisation. We recommend that a final decision on the way forward be made within the next six months or before the expiry of year.

Board of Trustees

14. The Board of Trustees comprises of seven members.

15. This is the top decision making body for the organisation whose role is policy formulation and control. They meet every other month to check financial reports and approve recommendations on routine operational and administration issues.

16. While the board is commended for its expertise in finance and administration, we note the need for Mashambanzou to restructure the Board paying particular attention to the gender and racial imbalances in order for it to respond effectively to the current social developments not only in Zimbabwe, but globally where there is a conscious and concerted effort to involve all possible and capable representatives who are a true reflection of that society in the decision-making process of any organisation.

17. For Mashambanzou Care Trust the Board of the Trustees should continue to be composed of professionals and distinguished people in society covering such expertise as:

- Knowledge of HIV and community work
- Finance
- Legal
- Pastoral Care
- Human Resources Management

18. It is our recommendation that the Board of Trustees continue to be bound by the Mashambanzou notarial deed of amendment. There may be need however to review certain sections of the notarial deed so that it becomes consistent with the changes which have taken place at Mashambanzou.

Palliative Care Unit

19. The Palliative care unit was established to assist the poor, especially those with no housing facilities. It offers palliative care which enables the dying person to be as comfortable as possible and be prepared spiritually and emotionally for death. Specifically the palliative care unit has had the following successes:

- Relieving pain and symptoms control.
- Has brought peace and comfort to the underprivileged poor people in the Harare area who get admitted for various ailments especially as a result of HIV AIDS.
- Reduced the stigmatisation of HIV AIDS and assisted in improving relations between patients and their relatives.
- The unit creates an environment to network with all units of Mashambanzou Care Trust.
- Facilitates good rapport and networking with external organisations such as Island Hospice, referral hospitals and other organisations concerned with the plight of those poor people affected by HIV AIDS or dying from various ailments.

20. The unit activities are expanding each day as depicted by the table on appendix C which presents a record of the Palliative Care Unit admissions, discharges, referrals and deaths.

- We observed and were touched by the commitment and personal dedication shown by staff members especially the Palliative care matron who took us for the round and knew every patient by name, showed true love through touch, hugs and inspiring words. The patients we interviewed confirmed great appreciation of the support and care they receive from Mashambanzou. It has provided them with hope and inspiration. They were only concerned about the limited drugs supplied on discharge resulting in them relapsing after going back to their homes. Providing drugs may not be the responsibility of Mashambanzou Care Trust but it is a burden it has to carry as failure to provide the drugs will result in the patient being readmitted after a short lapse of time. The discharged patients are cared for under the Home based care programme co-ordinated by Mashambanzou Care Trust.

21. The major challenge facing the Palliative care Trust is to continue seeking donor support for the very worth course of providing quality care to the poor people affected by HIV AIDS.

Mbare Creche

22. Established in 1995 the crèche at Mbare offers school education to the needy children and is situated at the Mbare Hostels area. The creche targets children who are orphaned and living in economically difficult conditions. The crèche helps relieve the burden on caregivers who are in most situations grandparents. The crèche ensures the children are provided with nutritious food, are well taken care off in terms of medication. It also assist the children to gain self esteem and instils good values, good manners and prepare the children for commencing primary education. On leaving the crèche the children are assisted with school fees, levies school uniforms and other necessities. Their progress at primary school is monitored by the Orphan outreach programme, a programme which again falls under the umbrella of Mashambanzou.

23. We were impressed by the health and confidence of the children we saw at the crèche. Though the outside surroundings were somewhat filthy the children were happy and compared well with any other children. Mashambanzou has actually gone a long way in bridging the gap which could have been so evident without the support from Mashambanzou which sources funds from various donors including the Swedish Embassy.

24. The crèche has the capacity to accommodate up to eighty children. Limited space prohibits the staff from accepting many of the needy children who congregate outside the crèche gate. The children are however catered for when thy are provided with maheu or any other alternative nutritious snack under the introduced feeding scheme. The number of children catered for under the feeding scheme increased from fifty (50) in year 2000 to above seventy (70) in 2001. The numbers vary from time to time.

25. Just like the Palliative care unit the major challenge facing the day crèche is to source funds to improve the infrastructure and working conditions of staff. Management also has a challenge to improve relations with staff through counselling, in service training and improving communication channels

Related Findings

Perceived mission and objectives of the organisation

26. The understanding of the mission and objectives of the organisation by the founders, members of the Board, the Advisory Committee, staff and beneficiaries is a critical determinant in how the people in an organisation behave. This has a bearing on their general attitude towards each other and the nature of their commitment to the goals and aspirations of the organisation.

27. There is a generally shared understanding among the stakeholders in the organisation that is, in the main, the organisation is "an inter-denominational, non-profit making organisation aimed at providing quality care and support for the poor people infected and affected by HIV/Aids".

28. However, we note that while the co-ordinator and some members of staff who belong to religious orders may view their work as an outward expression of their spiritually felt vocation, i.e. service towards the poor and the infirmed, the rest of the workers at Mashambanzou, may not share that view. While they do acknowledge that their work is service – centred, they also regard Mashambanzou from an economic perspective, where it (Mashambanzou) is an employer which ought to offer them a sustainable life in terms of remuneration, and social security during the period when they are employed at Mashambanzou and/or when they eventually terminate employment.

29. It is our view that these differing perspectives towards the role that the work at Mashambanzou plays in the lives of the staff has given rise to conflicting expectations, dissatisfactions and concerns felt by some members in the organisation.

Transition towards a highly organised formal organisation

30. Mashambanzou management and working relations structures have evolved over time from when the organisation was run by management comprised of mainly the two founding members, and a small staff informally recruited to run the then only programmes, which include the Palliative Care Unit, counselling programme, home based care unit, income generating projects and the feeding scheme. Boards of Trustees and Advisory committees were set up mainly to support the visions of the founder members.

31. The programmes at Mashambanzou have now increased to include the Orphan outreach, Skills training Mbare day Crèche and the Education for life programmes. The staff compliment is now fifty-five.

32. We noted that although decisions are made by the management committee which is under the leadership of the Co-ordinator the perception shared by some members interviewed is that decisions are centralised in the co-ordinator and she seems to be in charge of all operational decisions, playing a critical role in the whole administration and decision making process at Mashambanzou. However, the size of the organisation has grown tremendously and the volume of work generated has increased as well. Whilst it is acknowledged that she has made tremendous effort to keep the organisation operating, it is evident that the work has outgrown the capacity of one person, however committed and dedicated**.** There is now an urgent need to review the situation with a view to appoint an assistant with specific responsibilities in order not to compromise on the quality service and be able to make quick decisions and communicate effectively.

33. Depending on one particular person to make most decisions for an organisation the size of Mashambanzou, creates a lot of stress on the part of the person making the decisions and among the staff members and other stakeholder. There is often a feeling of not being involved, of being overruled without consultation, alienation and confusion because of limited or delayed feedback. These concerns were raised at Mashambanzou.

34. The stakeholders including the current co-odinator who is the co founder of Mashambanzou are in support of the appointment of an Administrator who will be charged with the responsibilities of (inter alia) co-ordinating the Human resources issues. He\she will report to the co-ordinator and collect the department reports for presentation to the Management Committee. The proposal will relieve the Co-ordinator from routine duties and allow her to fully utilise her time in challenging tasks of planning and control.

The nature of the work at Mashambanzou

35. The staff at Mashambanzou works in a very stressful environment. Working with terminally ill people and dealing with bereavement issues on a daily basis are very emotional issues which can make the staff very vulnerable and prone to stress and emotional fragility. Staff expressed an acute lack of emotional and spiritual support and capacity building in order for them to cope with emotions that are generated in the course of their work. It was felt that the situation is exacerbated by a staff shortage at certain times which results in staff being overwhelmed with work and having little time to re-charge themselves. Management is aware that the nature of work undertaken by staff is stressful and tries to manage the stress through counselling offering training on programmes such as bereavement handling, counselling and other ways. This process of managing stress should however be an ongoing exercise which requires continuous innovation on the part of management.

Volume and scope of work

36. The volume and scope of work is increasing at a phenomenal rate as the organisation continues to respond to new and presenting needs that are generated in the course of the day to day programme work, without a matching increase in the human resource base and in some instances an appropriate match in financial resources. The quality of service is put at risk if no corrective action is taken to match the increased workload with appropriate resources.

Table 2: Some of the trend figures are as follows:

	1999	2001
Palliative Care unit	180	227
Outreach Programme – Patients visited	3 493	8 731
Number of visits to patients	8 268	11 860

37. From the interview discussions, it seems that some interventions were embarked upon without a thorough grasp and understanding of the depth, impact and resource demands of the programme. Some persons interviewed had the view that Mbare crèche continues to struggle because its founding was an emergency reactive decision taken in response to a request to assist the children living in difficult economic situations from the Mbare community. The benefits to the community has been immense, but it has also brought with it great pressure in terms of administration and control. At present, the feeding scheme at Mbare crèche is a programme that has emanated from the pressure posed by the hungry

children in the community around the crèche. However, for the programme to be successful there is need to make a conscious effort to deploy adequate material and human resources to respond to this need. This has created stress and dissatisfaction from the staff at Mbare Day crèche. Whilst they are still committed to see the programme continue and achieve the desired initial objectives they feel that the remuneration and conditions of service should take cognisance of the work pressures.

Networking as a strategy to remain focussed

38. We note that the work at Mashambanzou can continue to increase in volume and scope in response to the ever-increasing needs of the poor and the community especially for those affected by HIV/AIDS. However, in order for the organisation to remain focussed it needs to continue or even make greater effort to network with other organisations which can absorb some of the new programme work that is generated.

39. It was also noted that some patients admitted at Mashambanzou need adequate and appropriate equipment and specialists (e.g. dermatologists) to treat complex ailments that may not be adequately treated at Mashambanzou. While we acknowledge and commend the reluctance of Mashambanzou staff to turn away needy people who are ill, it is important to note that an undiscriminating admission policy can result in the nursing staff feeling overstretched and having to cope with conditions they feel can be treated elsewhere. It is acknowledged that Mashambanzou is the preferred centre for palliative care to the poor people living in Harare. It however needs to monitor the situation and make prudent decisions which promotes continued existence and sustainability.

Communication

40. It has been noted that because of the organisation's size and its limitation in evolving an equally formal and responsive organisational communication network, poor communication is cited as one major concern for many members of staff. Poor communication creates an environment of suspicion, lack of trust among staff, frustration, hostility, anger, petty jealousies among staff and clique formation as people find alternative networks i.e. grape vine through which to gather information and communicate their own frustrations. Problems of effective communication between the centre and Mbare day crèche was cited. The suggested channels of communication have not been effective in solving the concerns of the staff from the crèche. An installation of a telephone line or availability of a cellphone may minimise the problems.

Recruitment Policy

41. We were advised that there was at one time a deliberate policy to recruit from the client base as a strategy to offer rehabilitation, economic and emotional supportive base for former clients of Mashambanzou. This was particularly encouraged in the case of counsellors who would bring in personal and emphatic experiences to share and help others cope with their situations. While this is commendable, it is important to note that such a policy embodies within itself inherent challenges to both the worker who used to be a client of Mashambanzou and the employer in particular the co-ordinator who used to be a supportive counsellor, not to mention the implications on the cost and effectiveness of such labour.

42. Whilst the policy of employing former clients is no longer being encouraged we gained the impression that some employees still expect greater leniency from management on the basis of being not in good health. As we could not easily depict the root of the problem, we therefore need to mention that the transition from client to worker and from counsellor to employer is riddled with new

expectations and possible conflicts emanating from the initial relationship with its old expectations. That transition needs orientation, counselling and support for both parties so that the roles are not confused or abused. This may result in the perpetration of dependency on the part of the ex-client who is now an employee. On the other hand the counsellor, who now is an employer may unconsciously perpetrate compliance and nurture a sense of emotional guilt on the part of the worker when they seek greater autonomy. This ambivalent relationship is a common phenomenon in client and counsellor circles. Lack of clarity and commitment to the new relationship, that of employer and employee, will always be a potential source of conflict if it is not well managed.

Concerns raised by Workers/staff

43. While the staff expressed their unwavering commitment to their work and to the organisation, which is evidenced by the time they invest in their work and the added tasks they take on voluntarily, there is evidence of frustrations and discontent which need to be handled carefully. If corrective action is not taken to appropriately address the genuine concerns as a matter of urgency the same commitment may be severely compromised. This is particularly in respect of the need to improve channels of communication.

44. Some concerns raised are:

(a) Need to improve salaries and benefits to include pensions, gratuity, bonuses, and medical aid which is comprehensive and accommodating dependencies.

(b) Selective system of awarding of transport allowance i.e. delivering some staff and giving inadequate allowances to some staff members.

(c) The absence of clear job grading systems.

(d) The absence of clear orientation guidelines.

(e) The absence of an organogram with clear reporting lines.

(f) The shortage of adequate safety and protective clothing especially that which is related to nursing and looking after people with HIV and Aids related condition, gloves, plastic aprons to cite a few items.

(g) The need for regular training and counselling for staff in order to develop skills and capacity to cope with the stressful nature of their work.

(h) The need to continuously review staff remuneration package in order to promote trust and commitment – i.e. ensuring they have reasonable remuneration to meet basic essentials such as food, medication and other necessities.

Socio-economic situation in the country

45. Mashambanzou has generally endeavoured to review the staff remuneration package upwards awarding benefits such as transport, medication to its staff members, free lunch and teas. However the staff members still appeal for further salary increments and improved benefits. The prevailing harsh socio economic situation, with a galloping inflation at above 175% and an acute shortage of many basic food commodities, continues to erode the ever-decreasing standard of living of Zimbabweans. This is more apparent to workers in non-profit making, service-centred organisations such as Mashambanzou whose salaries have not been particularly competitive. The economic situation in

Zimbabwe has a negative impact on the basic spirit of volunteerism because the consumer increasingly faces a situation that is so economically unviable that she/he cannot afford to offer any service for no or little remuneration. The staff at Mashambanzou now finds themselves so pressured economically that, they now express their disgruntlement with salaries and benefits because they are now struggling for their survival. The staff feels that management needs to fully grasp the dire situation that the ordinary worker at Mashambanzou is going through. At the same time Mashambanzou being a non-profit-making organisation may not have the capacity to be so flexile and responsive to meet the ever-increasing needs of the workers as is happening in certain private sector organisations. It is our appreciation that socio economic issues are beyond the control of Mashambanzou management's control. However as an employer it needs to come up with new and innovative way of relating to donors which take into account the fragile economic situation and to highlight the pressures that personnel experience.

Gender related issues

46. Mashambanzou has a substantial number of female employees and thus embodies within it particular emotional characteristics that are peculiar to how females process information, deal with stress, views, and handles power and relational issues. While we acknowledge the strengths of some of the ways females view and deal with these issues there may be a need for the organisation to take on board personal development programmes that address gender issues in order for members to fully understand and appreciate gender related challenges. This enables them to take advantage and turn the negatives into strengths. Generally women are hardworking, are good caregivers, and patient in listening and attending to issues of concern to the needy and the underprivileged. They have also generally been socialised to have greater capacity to be informal, selective in communicating particular emotions and feelings; We believe gender related issues especially with regard to use of informal channels of communication is posing a challenge to Mashambanzou. We recommend the holding of regular meetings and training programmes which deliberate on among other things strengths and weaknesses emanating from gender related issues so that strengths are encouraged and effects of weaknesses eliminated or minimised.

Financial transparency & emphasis on minimising costs

47. Financial transparency has been mentioned to be Mashambanzou's greatest strengths. However, Mashambanzou being true to the values upheld by its founders, has operated an organisation which has a very strong propensity to minimise costs. Some persons interviewed felt that Mashambanzou management has compromised certain critical economic needs of the workers. It needs to balance the need to minimise costs and the need to take heed of other important resources necessary in programme implementation. Genuine concerns of employees may need to be addressed as a matter of urgency. This may be in respect of the provision of adequate protective clothing, adequate uniforms, and other benefits such as medical benefit for employee dependants.

Financial Control and Cost effectiveness

48. An analysis was made to establish if the organisation is operating cost effectively. Cost effectiveness is basically the ability to choose the appropriate way of achieving desired goals at minimum cost. It involves strategic planning steps as follows:

- Identifying goals and objectives to be achieved within a defined period.
- Establishing the activities to be undertaken in order to achieve the set objectives.

- Setting standards of achieving the set objectives in terms of the quality of desired results.
- Deciding on the resources required to achieve the desired objectives and achieving them at the desired efficiency levels (efficiency being the ability to make the best use of available resources in the process of achieving goals).
- Costing out the list of activities in terms of the resource allocation i.e. salary bill, materials such as food, drugs, the infrastructure set up and other related costs.
- Creating a budget in terms of the determined costs and allocating income depending on the funds available or likely to be secured.

49. After the above planning process results are monitored and evaluated according to set standards and monetary allocations made. In an economically, and politically stable environment it is easy to measure efficiency and cost effectiveness. The standard set and budget allocated becomes the benchmark. However in a turbulent and very unstable environment being experienced in Zimbabwe measuring efficiency becomes very difficult. The assessment is more complex in the case of organisations like Mashambanzou whose scope of work, challenges and demands continue to widen each day. Matching the costs in terms of direct cost per child or patient was rather difficult at the time of our intervention as mechanisms to capture the necessary data need to be put in place. The crèche and the Palliative Care Unit are still to develop adequate methods and procedures for measuring cost effectiveness. The challenge is a phenomenon peculiar not only to Mashambanzou but is an issue apparent in most donor funded organisations especially those which receive funding and support in the form of money and material goods whose values may not be easily ascertained.

50. From the data which was available we evaluated cost effectiveness at Mashambanzou by analysing the budgets made available to us and check if the budget allocations were being put to good use i.e. being utilised for the purposes for which the funds were donated for. We analysed the budget, actual results and variance analysis reports. We also held interviews and observations checking on coherency and consistence of facts with regard to spending patterns. The analysis was rather difficulty as the costs are affected by a number of issues such as regular fluctuation in numbers both at Mbare crèche and at the Palliative care unit In addition some of the donations are in the form of material goods such as food which needs accurate costing to be properly accounted for. The donation provided by the Swedish Embassy was highly subsidised by support from other individual donors who donated money and consumable goods. The financial reports we obtained revealed a general trend of positive variances indicating a conscious effort to maintain budget limits. The reason given for the positive variance was also because of the extra support obtained from other donors for the programmes. We were advised that the information on budget actual and variance analysis is regularly supplied to the Swedish Embassy.

51. Although we did not have the data for detailed efficiency measurement such as establishing the cost of maintaining a child or patient per day we made the following observations about spending patterns and transparency at Mashambanzou;

(a) There's is a culture of saving instilled by the co-founder of the unit who includes the current Co-ordinator. The comment was made by a number of persons interviewed.

(b) We were advised that goods are normally bought in bulk thereby ensuring cost saving through bulk buying discounts.

(c) From the discussion with the kitchen personnel both at the Palliative unit and at Mbare crèche only food for immediate consumption is cooked and there is close monitoring of quantities used.

(d) Multiple roles are performed by one person thereby saving on costs.

(e) Another observation also confirmed during the interview discussion is that a concerted effort is made to ensure that the intended beneficiaries do actually receive the desired care and support. The campaign to minimze costs is forefront in any monetary discussion.

52. Mashambanzou maintains books and records which are regularly audited by Price Waterhouse & Coopers. It does send regular financial reports to donors who support various programmes and this includes the Swedish Embassy. We believe transparency is consistently checked and monitored.

53. The Crèche and the Palliative Care unit would have been closed if cost consciousness and effectiveness was not being applied, especially during these periods of acute shortages and hyper inflation.

54. In order to measure performance and cost effectiveness at the centres there is a great need to develop cost effectiveness measurement tools i.e. by establishing data collection forms and cost elements measurement techniques such as:

- Data on maintaining a patient at the centre i.e. food, boarding, welfare up-keep and other direct cost.
- Data on maintaining a child at crèche in terms of salaries, cost of food and other direct costs. A lot of evaluating data needs to be maintained to check efficiencies in terms of the cost elements. For example, efficiency in salary bill may be measured in terms of proportionate cost per child through comparing the total wage bill and the teachers/student ratio.

55. Statistics have to be maintained on a daily basis capturing the record of:

- Number of patients at the hospital and number of children attending crèche
- Cost of food consumed daily
- Number of carers, nurses and teachers on duty

56. We nevertheless need to mention that it is difficult to accurately have data to measure certain efficiencies such as overall cost of maintaining a patient at the hospital as the patients constantly fluctuate affecting the distribution and apportionment of certain fixed and semi fixed costs. Another difficulty which may arise in the exercise of maintaining relevant data is the fact that certain decisions are made responding to certain needs at a particular point in time. The patient to client ratio may for example be affected by the severity of the illness thereby creating a need to have, say one carer to one patient at certain times.

57. Depending on a well-defined set of standard the unit should decide on the ideal procedures of doing things or ways of saving cost. This may include deciding on:

- The ideal patient and staff ratio in terms of
  - Nursing staff
  - Caregivers
  - Cooks and cleaners
  - Teacher and student ratio

58. We however need to point out that the cost benefit of maintaining certain data (mentioned above) and regularly analysing it for efficiency has to be carefully thought of. Simple procedures in the form of forms have to be drafted. (See Appendix D) for proformas.

Strengths/Successes and Challenges of Mashambanzou in general

Strengths/Successes

59. The strengths/successes we observed and most of which were confirmed at the Annual Participatory review include:

- Mashambanzou is meeting the core objectives of providing quality care to poor people affected by Aids while upholding the core values of the organisation.
- Its continued existence from 1990, with a marked expansion both in size, outreach and depth of work.
- Mashambanzou's influence has spread beyond Zimbabwe to South Africa, Zambia, and Malawi (its involvement in "school without walls")
- It has remained financially stable and able to attract Donor funds during these challenging times.
- Commitment dedication and unity of purpose among all stakeholders.
- Respect of the core values which include:
  - Faith and trust in God
  - Compassion
  - Dedication and Commitment
  - Generosity
  - Hospitality
  - Inspiring Hope
  - Reverence
- Reduced stigmatisation of HIV and AIDS.
- Financially stable and good credibility.
- Increased community recognition and participation.
- Increased networking with affiliate bodies and support groups which include:
  - Hospitals and clinics
  - Zimbabwe Aid Network
  - Island Hospice
  - Family support
  - Shelter Trust
  - Police
  - Connect
  - Tose Respite Care Home
  - Ministry of Labour and Social Welfare

Challenges

60. The challenges being faced for which efforts to address and minimise are being made include:

- The need to improve the communication system and have proper reporting lines.
- Lack of sufficient, comprehension of organisational capabilities by staff and lack of appreciation of

staff expectations by management due to insufficient access to relevant information and poor communication.

- Ever increasing needs and widening of scope of work.
- Underlying fear of victimisation expressed by some staff members (real or imagined) which stifles free expression and initiative.
- Difficulties encountered in monitoring and controlling disbursements (stock control).
- Absence of well-defined channels of communication and comprehensive Human Resource systems.
- Inadequate documented financial control policies and procedure manuals including efficiency measurement tools.
- Staff burnout.

Other challenges which Mashambanzou may not have control of include:

- Government involvement (Government – NGO suspicions).
- Political and economical instability in the country.
- Economic hardships – increasing dissatisfaction on part of staff due to inflation which is continuously eroding the buying power of all Zimbabweans.

Recommendations

61. From the situation analysis study we have conducted, it emerges that there is indeed need for a number of changes in order to promote the sustenance of a coherent, focused organisation that resolutely pursues its mission and in turn offers an environment that nurtures all its staff, spiritually, mentally emotionally and economically.

62. We would like to state that from our observations and basing on information provided, Mashambanzou Palliative Care unit is endeavouring to ensure that objectives are being implemented cost effectively and in a transparent manner. The right environment for trust and good faith should however be constantly checked and systems for the efficient monitoring should be developed as an on going exercise. There is a need to develop efficiency measurement tools through improved data capturing mechanisms. Furthermore there is a need for systems to be developed and maintained in order to monitor and ensure that accounting procedures are being followed at all times. Accounting and procedure manuals save inter alia the following purposes:

- Prescribe policies, procedures, and internal financial controls designed to protect funds from misuse and loss;
- Serve as a tool for planning, monitoring, controlling and evaluating organisation performance;
- Safeguard the assets of the organisation;
- Assist to secure, as far as possible the completeness and accuracy of financial records;
- Promote and maintain operational efficiency;
- Promote and maintain control consciousness from all those responsible for running the organisation.
- Serve as a training document for new and existing staff;
- Serve as a reference point for the internal and external auditor;
- Achieve uniformity and continuity in methods of processing information within the organisation over time;
- Makes it easy to measure monetary efficiency and cost effectiveness.

63. Financial transparency has been mentioned to be Mashambanzou's greatest strengths. However, Mashambanzou needs to balance the need to minimise costs and the need to take heed of other important resources necessary in programme implementation such as the need to implement a good and effective human resources system, and the need to continuously review the remuneration and conditions of service for employees.

64. We note the importance to involve all the members in the organisation to periodically review its mission and chart a new responsive vision in the light of changes in its operating environment.

65. There is need for Mashambanzou to revamp, and strengthen its communication channels so as to ensure that there is a transparent network on how information flows from one person to another and free the Co-ordinator from the role of being the hub of the information network. Such an arrangement works only in very small and newly formed organisation.

66. It is important that the management at Mashambanzou go beyond only acknowledging the stressful nature of the work environment and create ongoing supportive structures and programmes that can enable the staff to receive emotional and spiritual support as an integral part of their work. Peer-

counselling, mentors retreats and training are examples of supportive tools that can be made available to staff at Mashambanzou. Refresher programmes for relevant training already undertaken should be conducted.

67. The absence of formal and written down Human resources systems undermines the morale of staff and creates an environment with potential for labour problems that result from inconsistent practices. The situation should however be addressed through the current exercise of developing Human Resource systems.

68. We are recommending the recruitment of a suitably qualified and experienced Administrator with both in NGO and Industry experience who can introduce a blend of formal and systematic administration techniques, which promote the values of Mashambanzou.

69. We are recommending a clear segregation of duties among the members of the management team, in particular the duties of the Administrator and the Director, so that each member plays an effective role in leading and shaping the organisation rather than play a subordinate or ineffective role.

70. The Advisory Committee is providing valuable service to Mashambanzou. However we believe that there is need for the Advisory Committee to meet more often (ideally quarterly) so that it plays a more effective role. Furthermore there should be close liaison between the Advisory and the Board of Trustees which is the policy making board. Each board should receive minutes of the other so that they make informed decisions.

71. In order for organisations to weather the current turbulent economic environment there is need to be more aggressive in networking with other organisations and learn new ideas. There is need to creatively pursue one's goals in a focussed way so that most of the organisation's energies is ploughed into making a difference in that particular and unique way. Mashambanzou being a donor dependent organisation needs to evolve and develop sophisticated ways of investing finances in order to cushion the donated funds from being eroded by inflation. An income generating venture developed by Mashambanzou would enable the organisation to meet some of its administrative costs such as staff salaries and benefits that Donors are reluctant to fund. The unit may for example open a tuckshop or tuckshops for selling unused donated items and T-shirts with Mashambanzou logo. The venture will compliment the income generated from sale of T-shirts outside the country.

Implementation Issues

72. In all probability an assignment involving any form of review or assessment of how an organisation is operating creates expectations among staff members for greater fairness in handling staff issues. This is more apparent in the case of this assignment aimed at coming up with both a mid term report and a review of Human resource systems. Employee expectations will need to be carefully managed in order to:

- Contain the degree of disappointment if expectations are not met;
- Create an environment conducive to acceptance of results of the study and continued dialogue in improving the organisation as a whole.

73. We recommend that Mashambanzou implement, a formal communication programme to enable strong and holistic sectional relationships to be established and formalised. Meetings should be held circulated and letters relating to change should be issued to all stakeholders. Specifically:

- A general notice announcing the completions of the assignment and highlighting any major conclusion should be issued.

- We recommend that the above announcements should be made as speedily as possible as any delays may lead to frustration and suspicion.
- We recommend that a general review should be undertaken after a period of say six months. Complains and grievances which arise in the interim should be attended on an adhoc basis and on their individual merits.

74. We recommend that the current Co-ordinator Sister Margaret McAllen and the Network Officer Patrick Smet or the Administrator to be appointed be assigned the responsibility of investigating and resolving any complains raised by staff.

75. It is recommended that training workshops that will embody the change process that impact on Mashambanzou be encouraged, so that all the members in the organisation, staff, Advisory Committee, Board of Trustees and the founding Director are all enabled to take advantage of the strengths that are presented in the proposed recommendations.

76. All change is painful but brings new possibilities for survival and growth. Yet on the other hand resistance to all change is equally painful yet it brings in with it new possibilities of hostility annihilation and eventual collapse of an organisation.

Conclusion

77. In conclusion we would like to confirm that Mashambanzou is indeed achieving its objectives of providing care to those affected by the AIDS epidemic. It should be commended for successfully accomplishing its mission whilst operating under very stressful conditions both socio-economic and psychological, with scope of work widening by the day and the dollar being constantly eroded by inflation. The beneficiaries, the relatives and the community are more than grateful. The patients at the care unit did confirm that MPCU does provide excellent care beyond their expectations and we actually observed this ourselves. This was further confirmed by the home-based care patients we visited who had been in and out of the hospital. It was mentioned by all persons interviewed that the children at Mbare crèche are immensely benefiting from the support they are getting.

78. Both management and staff have sacrificed a great deal to keep the organisation going and maintain a reasonably high level of cost effectiveness. It is the consultants' view that the money donated by SIDA is indeed being put to good. It would however be in the best interests of Mashambanzou to expeditiously streamline organisational structure at the top in order to minimise potential for conflict and delayed decision-making. It is also important for Mashambanzou to consider the development and implementation of performance measuring systems on the basis of which effective planning and performance monitoring of the organisation can be done in the future.

79. We acknowledge our appreciation of the co-operation obtained from all stakeholders who provided documentation, information and provided feedback comments on our initial draft report.

Appendix A

Terms of Reference for a Mid-term Review of the Swedish Support to Mashambanzou Combined with the Development of a Human Resources Management System

1. Background

The Strategic Planning Fund through the bilateral agreement with Zimbabwe was created in 1998 to support projects/programmes in an effort to combat the spread of HIV/AIDS.

Since 2001 the Swedish Government has decided that development co-operation should focus on support to civic society within the areas of human rights and democracy and HIV/AIDS.

Mashambanzou is an inter-denominational non-profit making organisation committed to provide quality care and support for poor people affected by HIV/AIDS in the high-density suburbs of Harare, established in 1990 and placed in Waterfalls, Harare. In Waterfalls they run a palliative care unit, in Mbare a crèche and a home-based care programme in most of the Harare high-density suburbs reaching the poorest strata of the population.

The Embassy presently supports the crèche in Mbare (since 2001) and the palliative care unit (since 2002).

During Mashambanzou's annual planning exercise early 2002 it identified that the organisation would benefit from the development of a human resources management system as the organisation has grown quite rapidly, and needs structures in place for better financial and programmatic follow-up. Hence, a request was forwarded with a quote from one company to the Embassy. However, the Embassy requested Mashambanzou to get two additional quotes from other companies, totalling three to choose from. As time passed it became evident to combine the development of the human resources management system with a mid-term review.

2. Purpose and scope of A) the mid-term review combined with the B) development of a human resources management system'

The Embassy evaluates projects it supports in different ways on a regular basis as a means to assess the quality of the projects it supports.

A. Mid-term review

The mid-term review should establish to what extent Mashambanzou has reached its objectives, and establish if the programmes are cost effective. Further, it shall look at the role of the Board of Trustees and the Advisory Executive and the Management Committee in the decision making process.

B. Development of a human resources management system

The development of the human resources management system should identify current practices as well as opportunities for improvement. Key issues to be addressed are current human resources management policy and procedures, organisation structures, reporting relationships, staff attitude and satisfaction, terms and conditions of service, employment contracts, job descriptions, job grading and pay structure, code of conduct and performance management in accordance with the proposal from People Systems Inclusive (PSI), dated April 2002.

Findings from the mid-term review are expected to assist and guide the Embassy forward as regards the programme, as well as the organisation itself and other interested stakeholders.

The development of a human resources management system is expected to assist Mashambanzou in becoming a better organisation in delivering services.

3. The A) mid-term review and B) human resources management system methodology

A) The mid-term review will consist of:

- Desk review of the project proposal, workplan and budget submitted by Mashambanzou to the Swedish Embassy, project narrative and financial reports etc. and other relevant documentation
- Interviews with Mashambanzou staff at the Mbare crèche and Palliative Care Unit and Board of Trustees

B) The human resources management system development methodology will follow the proposal from PSI, dated April 2002.

The proposed timetable for the mid-term review is 10 man-days, and the proposed timetable for the human resources management system development is 15 man-days, totalling to 25 man-days.

4. Reporting

A) Mid-term review

A draft mid-term review report shall be presented to the Embassy latest two weeks after the completion of the task. The Embassy will comment on the draft report within two weeks of receiving the report. A final report shall be submitted latest one week after the Embassy's comments have been submitted to the consultant. The reports shall be written in English and include an executive summary, and not exceed 30 pages excluding annexes. The final report shall be submitted in three copies as well as a copy on a diskette. The consultant is expected to present the final report during a joint meeting between the consultant, Mashambanzou and the Embassy.

Subject to decision by Sida, the report will be published and distributed as a publication within the Sida Evaluation Series. The mid-term review shall be written in Word 97 Office for Windows NT (or in a compatible format) and should be presented in such a way that enables publication without further editing.

B) Human resources management system methodology

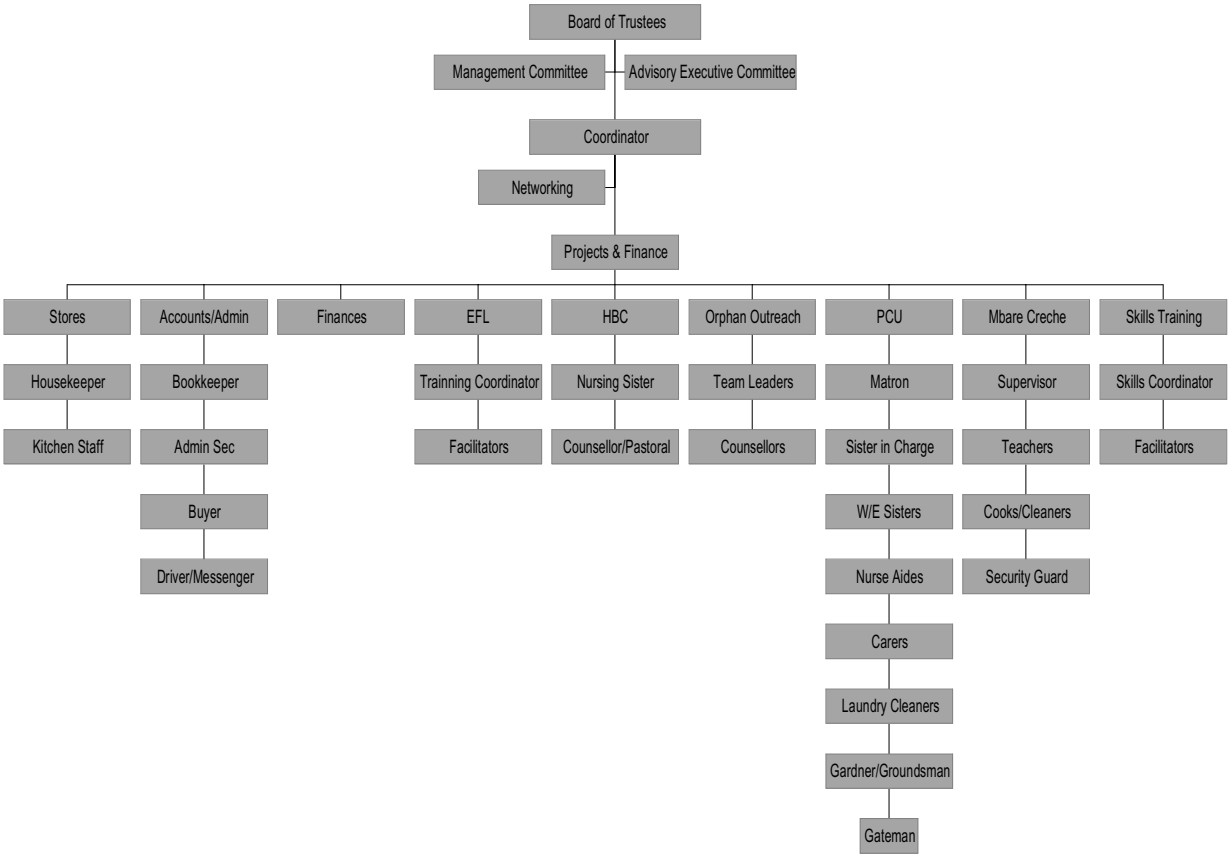
A draft report is to be presented to Mashambanzou latest two weeks after the completion of the task. A copy of the draft report shall be sent to the Embassy. Mashambanzou and the Embassy will comment on the draft report within two weeks of receiving the report. A final report shall be submitted latest one week after Mashambanzou's and the Embassy's comments have been submitted to the consultant. The reports shall be written in English and include an executive summary, and not exceed 30 pages excluding annexes. The final report shall be submitted in three copies as well as a copy on a diskette. The consultant is expected to present the final report during a joint meeting between the consultant, Mashambanzou and the Embassy.

5. Organisation and Co-ordination

The consultant will report directly to the responsible Programme Officer within the Embassy as regards the mid-term review, in this case Johanna Palmberg. As regards the human resources management system methodology the consultant will report directly to Mashambanzou. The contract for the assignment will be between the consultant and the Embassy.

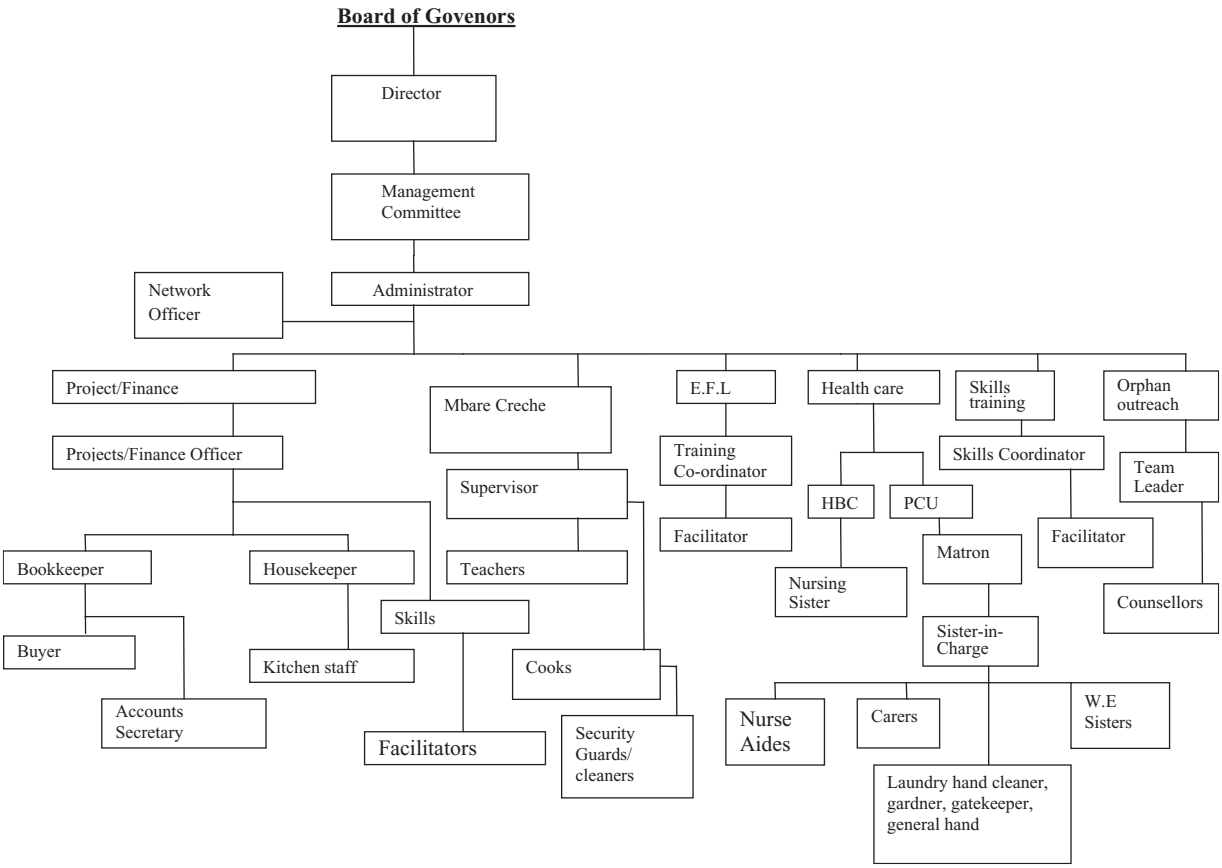
Appendix B

Current Organisational Structure



Appendix C

Proposed Organisation Structure



Appendix D

RECORD OF PALLIATIVE CARE ADMISSIONS, DISCHARGES, REFERRALS AND DEATHS

DETAILS	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	TOTAL
Admissions	28	39	69	89	141	159	180	217	227	303	**1452**
Discharge	10	10	25	21	52	49	54	89	101	129	**540**
Referrals	6	4	25	12	9	16	8	9	8	19	**116**
Deaths	9	21	32	49	71	83	97	116	104	186	**768**

Appendix E

PRO FORMA
RECORD OF PATIENTS AT THE CENTRE

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
FEMALE																														
MALE																														
TOTAL																														

PRO FORMA
RECORD OF CLEANING DETERGENTS AND OTHER CONSUMABLES

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Soup (KGs)																														
Surf (KGs)																														
Vim (bottles)																														

PRO FORMA
RECORD OF FOOD CONSUMPTION
QUANTITY OF FOOD CONSUMED EACH DAY

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Bread (loaves)																														
Roller Meal (KGs)																														
Value of Green Vegetables																														
Other Consumables																														

PRO FORMA
RECORD OF CHILDREN AT THE CENTRE

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
FEMALE																														
MALE																														
TOTAL																														

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