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Sida Decentralised Evaluation

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Final Evaluation of the National Integrated Monitoring and Evaluation System (NIMES) Capacity Development Project (CDP)

Final Report

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October 2014**

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The views and interpretations expressed in this report are the authors' and do not necessarily reflect those of the Swedish International Development Cooperation Agency, Sida.

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Abbreviations and Acronyms

APMER	Annual Project Monitoring Report
APR	Annual Progress Report
CAMER	County Annual Monitoring and Evaluation Report
CARPS	Capacity Assessment and Rationalisation of Public Service
CDPO	County Development Programme Officer
CDP	Capacity Development Programme
CMEC	County Monitoring and Evaluation Committee
COK	Constitution of Kenya
CPER	Comprehensive Public Expenditure Review
CSO	Civil Society Organisation
DAC	Development Assistance Committee
DAMER	District Annual Monitoring & Evaluation Reports
DDO	District Development Officer
DMEC	District Monitoring and Evaluation Committee
e-ProMIS	Electronic Project Monitoring Information System
ERS	Economic Recovery Strategy
GIS	Geographical Information System
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit (the German Federal Enterprise for International Cooperation)
MOPNDV2030	Ministry of Planning, National Development and Vision 2030
ICT	Information and Communication Technology
IEC	Information, Education and Communication
IFMIS	Integrated Financial Monitoring and Information System
IT	Information Technology
KENINFO	Kenya Information
KRA	Key Result Areas
Ksh	Kenyan Shilling
M&E	Monitoring and Evaluation
MED	Monitoring and Evaluation Department
MMEC	Ministerial Monitoring and Evaluation Committee
MoDP	Ministry of Devolution and Planning
MTP	Medium Term Plan
NGO	Non Governmental Organisation
NIMES	National Integrated Monitoring and Evaluation System
NPFM	National Performance Management Framework

ABBREVIATIONS AND ACRONYMS

NSC	National Steering Committee
KeMEA	Kenya Monitoring and Evaluation Authority
KRA	Key Results Area
OECD	Organisation for Economic Co-operation and Development
PDO	Provincial Development Officer
PITC	Project Implementation Technical Committee
PMAR	Project Monitoring Analytical Reports
SAGA	Semi-Autonomous Government Agency.
SEK	Swedish Krona
Sida	Swedish International Development Cooperation Agency
SIPU	Swedish Institute for Public Administration
TA	Technical Assistance
TAG	Technical Advisory Group
TOC	Technical Oversight Committee
UNICEF.	United Nations Children's Fund
UNFPA	United Nations Population Fund
UNDP	United Nations Development Programme
WB	World Bank
RBM	Results-Based Management (RBM)

Preface

This End-of-Project evaluation of the Swedish support to the Capacity Development Programme (CDP) for the operationalization of the National Integrated Monitoring and Evaluation System (NIMES) was commissioned by the Embassy of Sweden in Kenya, through Sida's framework agreement for reviews and evaluations.

Indevelop carried out the evaluation in August - October of 2014. The independent evaluation team included Bernt Andersson, Team Leader and member of Indevelop's Core Team of Professional Evaluators, Rikke Ingrid Jensen, Harriet Naitore, and Ian Christoplos who provided Quality Assurance. Sarah Gharbi was the Project Manager with overall responsibility for managing implementation and the evaluation process.

This report was circulated in draft form to the Embassy of Sweden in Kenya and the Monitoring and Evaluation Department (MED) under the Ministry of Devolution and Planning (MoDP) and their comments have been incorporated in the final report.

Executive Summary

This is an end-of-programme evaluation of the Swedish support to the Capacity Development Programme (CDP) for the operationalization of the National Integrated Monitoring and Evaluation System (NIMES) in Kenya.

The objective of the programme was to assess, develop and sustain the capacity necessary to ensure the effective implementation and coordination of NIMES. The objective was to be achieved through six Key Result Areas (KRAs) including development of policies, strategies and tools for Monitoring and Evaluation (M&E) and to strengthen M&E capacity at all levels.

The overall objective of the evaluation is to (i) assess the outcome of the Swedish support to the CDP, and (ii) Produce recommendations on how to further strengthen capacity support to NIMES in future. The data collection phase included one field trip to Kenya for fact-finding and interviews. The implementing organisations and stakeholders were engaged in the evaluation through structured interviews individually and/or in groups.

Effectiveness

The CDP has six KRAs with a total of 14 defined outputs. The main achievements are the development of the M&E Framework and Indicators Handbook, the development of the NIMES Communication Strategy and a comprehensive Situational Analysis and Needs assessment that was undertaken in August 2012.

However, several outputs have not been fully achieved. The partial achievements mostly refer to the development of documents that have not been approved or not been implemented. The M&E Policy and the M&E Framework have been developed but not approved and universalised¹, no nationwide capacity building strategy and plan for M&E was developed, The National Evaluation Plan was not finalised, the Communication Strategy has been developed but not been implemented in full and the Information and Communication Technology (ICT) strategy is yet to be formulated. In summary, 2 of the outputs have been fully accomplished, 7 outputs have been partially accomplished and 5 outputs have not been accomplished at all.

¹ The word *universalization* is used in the project documents and reports, meaning nationwide dissemination and implementation

Looking at the outcome level, the first Key result/outcome of universalising M&E tools has not been achieved, since the M&E framework is not yet approved and the Indicator Handbook was not widely disseminated to counties or line ministries at the time of the evaluation. With none of the outputs fully achieved, it cannot be expected that the second Key result/outcome could have been achieved and a culture of accountability institutionalised. The third Key result/outcome of assessing and strengthening technical and managerial competencies has been partially achieved, since the needs assessment has been done and a number of trainings conducted, although not guided by a training strategy or plan. Moreover, there is little evidence of capacity development outcomes at the level of MED. The fourth Key result/outcome about using ICT for timely reporting has not been achieved. The fifth Key result/outcome about establishing partnerships has been partially achieved. The sixth the Key result/outcome about the establishment of a Semi-Autonomous Government Agency has not been achieved.

Problems with the implementation have included MED's unresolved status, the broad scope of the programme, and the limited emphasis on analysis and dissemination of monitoring data to be used for planning, accountability purposes and for decision making. The CDP risk assessment is incomplete, lacking critical risk factors such as the non-approval of the M&E Policy and the M&E Framework, and the devolution and its impact on MED's mandate.

The initial delay of initiating the project has effectively reduced the implementation to about 2 years and it has been a challenge to implement all scheduled activities during a shorter period of time. The project has been implemented during a time of great changes in the government organization. The devolution process has created the counties as a new local government unit, replacing the districts. The level of debate around issues like un-clarity about the mandate of counties, their relation to central ministries etc, could not be foreseen when the CDP was planned. Another challenge has been that key products like the M&E Policy and the M&E framework were developed under one government which changed after the elections.

Relevance

CDP was designed to facilitate the full implementation of NIMES as guided by the NIMES Master plan and the draft M&E Policy. The context of the CDP in relation to the experiences and challenges in developing M&E in Kenya is explained in detail in these documents. There are however several factors associated with the implementation of the Constitution of Kenya (COK) 2010 that should have been anticipated and provided for in the design of CDP, but were not. These include the implementation of devolution that radically changed the governance architecture in the country and new priorities and strategic focus of a new government.

Apart from this, the programme is relevant in relation to Kenyan policies, strategies and reform programmes and is supportive of national values and principles of governance of the COK 2010 which include among others good governance, integrity,

transparency, accountability and sustainable development. The programme is also aligned to the constitutional mandates for the national government and the Transitional Authority to support capacity development at both levels of government.

CDP is also highly relevant in relation to the priorities of the Swedish country strategy, with its focus on democratic governance and promoting the establishment of one common mechanism for following up performance and commitments within and the Medium Term Plan 2008–2013. The programme will make the Government more efficient in implementing its policies and can be relevant for the poor only if those policies are pro-poor. The programme did not include a gender analysis. Gender equality has not been mainstreamed or targeted by the programme and consequently gender issues have not been prominent in the implementation.

Efficiency

Adequacy of resources, equipment and budget support were overall positively evaluated. Overall cost-effectiveness of CDP is found inadequate due to lack of full achievements of a number of outcomes, lack of progress in improving the Annual Progress Reports (APRs) and lack of progress in analysis and dissemination of M&E information.

MED had initial difficulties, mostly due to under-staffing; to assume responsibilities according to the work plans, but gradually became stronger when receiving more staff, particularly with the engagement of a Project Director in June 2013. There have been regular meetings with the Project Implementation Technical Committee (PITC) and the Technical Oversight Committee (TOC) to discuss the CDP work plans and reports. The main strength that benefitted program implementation is the dedicated staff of MED. Many of the staff has been trained in different aspects of M&E by the CDP. The evaluators were impressed with the capacities of the staff. The staff have participated and contributed to the implementation of CDP, while at the same time being trained by the CDP and also continued to perform their regular duties. However, MED has not reported on outputs, much less outcomes of the CDP programme. This is of particular concern given that this organisation is expected to be the lead authority in the country on M&E.

The implementation has been guided by detailed and appropriate Annual Work Plans and Budgets developed by MED. Semi Annual and Annual Progress reports have reported on the CDP progress. Although the report is mostly activity based, they follow the format of the work plans and give solid information on progress. Reports have remained largely activity based.

Impact

During the inception period, the indicator for impact was defined as the number of quality monitoring and evaluation reports leading to enhanced decision making at national and at devolved level. The latest published Annual Progress Report made available to the evaluation team was the APR 2011/2012, in essence developed before the CDP could be expected to have any significant impact. The End term review of

MTP I (equivalent to APR for 2012/13) was ready at the time of the evaluation but not published and not made available to the evaluators. It was not possible to verify the impact from the CDP on improvements of reporting and use of reports for planning and decision making.

Sustainability

The capacity development through the CDP during only two years of implementation did not have enough impact to institutionalise NIMES. The overall objective of supporting full implementation and coordination of NIMES is far from being achieved. Hence it is not realistic to expect sustainability of services that have not yet been established.

The economic sustainability of NIMES is tied to the approval of the National M&E Policy, with its proposal of allocating a set percentage of all government budgets to M&E activities. However, as noted earlier, the policy is yet to be resubmitted to the cabinet.

Recommendations

- Given the fact that the two most basic documents for the implementation of NIMES, the M&E Policy and the M&E Framework, have not yet been approved, MED should focus on providing information to policy makers on the value of M&E so that they may make more informed decisions about how to proceed.
- A nationwide capacity development strategy and plan for M&E should be developed, based on the 2012 Situation and Needs analysis. The strategy should include identifying and support capacitating of training institutions, public or private, covering the whole country.
- Communication and dissemination of information and analyses for planning, budgeting and decision-making, based on the information collected through NIMES, should be strengthened and the Communication strategy should be implemented in full.
- The ICT strategy should be developed and the MED website should be revamped and documents uploaded on a regular basis.
- Continued support to MED is still needed, including support to organisational development, but a pre-requisite for any future support is that greater ownership and connection to the political level can be demonstrated in relation to the approval and implementation of the M&E Policy and the M&E Framework.
- Support should be provided for M&E capacity development directly to the county level, possibly through a joint trust fund with World Bank to build on the early results of the current World Bank county project as well as to ensure a harmonized approach.

1 Introduction

1.1 BACKGROUND

NIMES and the Capacity Development Programme (CDP)

The National Integrated Monitoring and Evaluation System (NIMES) was established in 2004. It was created to track the implementation of policies, programmes and projects during the Economic Recovery Strategy period, which ended in 2007. The system has then been used to track the Medium-Term Plans (MTPs) of the Kenya Vision 2030, which is the country's economic blueprint.

One of the problems that NIMES was to address was the inadequate supply of data for planning and policy making, particularly at lower levels (villages, locations, divisions and districts). Also, the data collected at these levels was usually forwarded upwards to respective headquarters and hardly shared vertically with other line ministries and stakeholders or fed back to lower levels.²

Since 2004, NIMES has been used for tracking the performance of the Economic Recovery Strategy 2003-2007 and the MTP 2008-2012. During the implementation, NIMES has faced a number of challenges including inadequate resources and capacities for performance tracking, weak Monitoring and Evaluation (M&E) culture, weak linkages with other reform programmes, and a lack of timely and reliable data and lack of local training institutions³.

Despite the interventions made to strengthen M&E of public development programmes, the draft M&E Policy describes the following challenges still being experienced.⁴

- Weak M&E culture
- Weak M&E reporting structures and multiple and uncoordinated monitoring and evaluation systems within and among institutions
- Weak institutional, managerial and technical capacities

² Communication Strategy for NIMES. MED 2013

³ Monitoring and Evaluation Framework for Kenya. 2014

⁴ Draft M&E Policy. March 2012.

- Untimely, rarely analysed or disseminated data and low utilisation of data/information
- Weak legal framework

The CDP is designed against the background of the need to emphasise the institutionalising of M&E. It represents the beginning of a long-term process to establish sustainable capacity to implement, coordinate and manage NIMES.⁵

Devolution and the CDP

The promulgation of the Constitution of Kenya 2010 (COK 2010) ushered in a new governance structure dubbed “developmental devolved government” which is comprised of two levels of Government; the National Government and forty-seven County Governments that are “distinct and inter-dependent and shall conduct their mutual relations on the basis of consultation and cooperation”. The fourth Schedule of the COK 2010 stipulates the functions to be performed by each level of government. It further stipulates that if a function or power is transferred from one level of government to the other, arrangements shall be put in place to ensure that the accompanying resources for the performance of the function including human re-sources are transferred.

Through devolution, the national government is required to predominantly focus on policy making and regulatory functions, including research, setting standards and norms, and national legislation while the county governments focus on policy execution, service delivery; local development and operational level legislation.

The Sixth Schedule of the COK 2010 provided that the transfer of devolved functions from the national government to the county government would be phased over a period extending up to three years. However, in three months, following the election of the leaderships of the two levels of government in March 2013, there was rapid transfer of most of those functions. During this transition, issues and challenges relating to human resources capacities and deployment have been prominent, necessitating a nationwide Capacity Assessment and Rationalisation of Public Service programme at both levels of government. The overall objective of the Capacity Assessment and Rationalisation of Public Service programme is “to ensure that government functions are properly structured and staffed to facilitate transformation of the public service for efficient and effective service delivery at the national and county governments”.

The devolved system of governance resulted in County Governments assuming substantial development, service delivery and financial accountability responsibilities.

⁵ Proposal to the Embassy of Sweden. Request for specific and targeted support to a comprehensive capacity development programme as part of the implementation of NIMES for Kenya. January 2011

This requires NIMES to be institutionalised at the devolved level in order to facilitate “devolved level monitoring, particularly to track progress towards the achievement of the Millennium Development Goals at the local level and harmonisation of devolved level development activities”⁶. Full operationalization of NIMES at the devolved levels poses the greatest challenge to MED from both an institutional and technical capacity perspective. Institutionally, MED is a Department of a National Government Ministry that may not have an expressed legal mandate to hold the County Government to account in terms of implementing NIMES due to the constitutional provision on “distinctness” of the two levels of government. MED is also constrained by lack of sufficient technical capacity to support both the National Government and the 47 County Governments and their devolved units.

Support in developing the necessary technical capacity to support the universalization of NIMES at both levels of government is the core objective of the CDP. Furthermore, CDP also support both policy and strategy development initiatives by MED. Implementation of the CDP during the ongoing process of establishing the new devolved structure pose a particular challenge for the CDP.

1.2 THE PROGRAMME

The Government of Kenya initiated a capacity strengthening programme for coordinating NIMES. The Government of Sweden identified the programme as relevant for poverty reduction and social economic development and, together with Kenya and other partners developed a specific programme to support NIMES. This is being done within the framework of the MED under the Ministry of Devolution and Planning (MoDP). The Support is known as Swedish support to the Capacity Development Programme for the operationalization of the National Integrated Monitoring and Evaluation System⁷. The programme goals have been to assess, develop and sustain the capacity necessary to ensure the effective implementation and coordination of NIMES to enhance development results.

The objective is to be achieved through six Key Result Areas (KRAs) being⁸:

1. Developed and universalised M&E tools
2. Institutionalise culture of accountability through improved capacity for coordination of NIMES

⁶ National Monitoring Framework for the Vision 2030 MTP

⁷ TOR for final evaluation of the NIMES Capacity Development Programme

⁸ Appendix 1 of the Work Plan to Realize the Sida Funded Project Capacity Development Programme of the Implementation of the National Integrated Monitoring & Evaluation System (NIMES) for Kenya dated February 2012.

3. Assessed and strengthened technical and managerial competencies at the national and devolved levels
4. Timely reporting using Information and Communication Technology (ICT) in the production of M&E instruments
5. Established multi-sector partnerships to support NIMES implementation
6. MED transformed into a Semi-Autonomous Government Agency (SAGA)

There was initially another Key Results Area called Approved Scheme of Service for M&E Officers in Government and appointed M&E Officers at the devolved Level, which was later excluded.

In 2011, Sweden signed a three year agreement with the Government of Kenya to support the CDP. The MoDP through the MED has the overall responsibility for the implementation of the programme. The total cost of the programme is Kshs. 415 million (equivalent to 41.5 million SEK). The total budget input from Sweden is 32 million SEK (equivalent to Kshs 320 million). 22 million SEK of the total budget is disbursed directly to the government through the National Treasury as revenue to implement work plan activities. The remaining 10 million SEK has been allocated to finance the cost of Technical Assistance (TA) and paid directly from the Embassy to the TA Company and reported to Treasury as Appropriation in Aid. The Technical assistance company SIPU AB was procured through an international open and competitive process. Sweden is the major donor supporting the CDP, others supporting CDP being UNICEF, UNFPA, UNDP, WB and GIZ .

1.3 THE EVALUATION

The overall objective of the evaluation is to (i) assess the outcome of the Swedish support to the CDP, and (ii) produce recommendations on how to further strengthen capacity support to NIMES in future. The objectives of the evaluation are:

1. Review the performance of the project in achieving results as per the project document and their contributions to the expected outcomes,
2. Identify factors, which facilitated or hindered the achievement of results both in terms of the external environment and those internal to MoDP/MED and document lessons learnt in the implementation stages. These should include but not limited to assessing the strengths and weaknesses in project design, management, coordination, human resource, and financial resources,
3. To assess and report on the achievements against expected results based on the OECD/DAC evaluation criteria,
4. Identify and describe strengths and weaknesses in the strategies/approaches taken and in the planning, implementation and monitoring of the programme. Describe problems and solutions to these sought by the programme,
5. Assess the combination of project budget support and traditional Technical Assistance, the management set up and steering/advisory group structure and how financial risk mitigation measures worked,

6. To assess the relevance of the technical support of the project management and the MED response and use of the support,
7. Based on the experience from the project implementation to extract general lessons learnt and recommendations aimed at further enhancement of the national capacity development in M&E,
8. Assess and issue recommendations regarding possible continued support to the CDP including form/modality, areas of emphasis and main outputs and outcomes.

The evaluation is based on the programme document: Proposal to the Embassy of Sweden/Sida. Request for Specific and Targeted Support to a Comprehensive Capacity Development Programme as Part of the Implementation of the National Integrated Monitoring and Evaluation System (NIMES) for Kenya, dated January 2011 and the Work plan to realise the Sida Funded Capacity Development Programme of the Implementation of the National Integrated Monitoring & Evaluation System (NIMES) for Kenya, dated February 2012.

1.4 EVALUATION METHODS

The criteria for the evaluation are OECD/DAC's standard criteria for the evaluation of development assistance, namely: relevance, efficiency, effectiveness, impact, and sustainability.⁹

The formulation of the evaluation questions have been guided by two sources: the overall evaluation objectives and the programme documents mentioned above. Further to the latter, the evaluators have applied the Semi-Annual CDP Report of February 2014 as basis for identified Key Results Areas for evaluation for effectiveness. Moreover, the overall (assumed) impact objective from the same report has been applied. Detailed questions and indicators are listed in the Evaluation matrix which is part of the Inception report in Annex 2.

For assessing the *effectiveness* of the programme, the evaluation has used the programme Key Result Areas as the outcomes of the programme and has assessed the outputs formulated by the programme under each Key Results Area/outcome.

The evaluation had three phases, inception phase, data collection phase and the analysis and reporting phase. The inception phase has been used to finalise the methodology and work plan, undertake a preliminary document review and develop a preliminary

⁹ See also: <http://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

evaluation framework. The primary sources of written material include the documents listed in Annex 7.

The data collection phase included one field trip to Kenya for fact finding and interviews. The work plan for the fieldwork is attached as Annex 5 and a time schedule for the entire evaluation can be found in Annex 6. Implementing organisations and stakeholders in counties were engaged in the evaluation through structured interviews individually and/or in groups. Data and information that have been collected was analysed after the field trip.

1.5 LIMITATIONS

A full impact evaluation was not contemplated in light of the budget and time constraints that the team has been requested to work within, as well as the relatively short period of time since the start of the programme in 2011, which became fully operational only in late 2012. For this reason, the evaluation was not able to ascertain whether the intervention has had a lasting effect on key stakeholders. Similarly, the weak achievement of outputs has meant that impacts are in many respects unlikely to have been achieved, and thus assessment of impact is somewhat of a moot point.

The evaluators intended to do a summary ICU (Independence, Credibility, Utility) assessment of the quality of M&E reports through analysing a selection of reports, specifically county level reports, according to the criteria of credibility, timeliness, completeness and utility (i.e. for decision making). Key stakeholders/users were to be interviewed or asked to do a self-assessment about their perceptions and experiences using the same criteria. But during the field visit to Kenya, the evaluators found that no M&E reports have yet been produced at county level, using the knowledge and skills built by the CDP. The counties were established in April 2013 and are yet to produce their first M&E report, for the financial year 2013/2014. The latest national Annual Progress Report made available to the evaluation team was the report for the financial year 2011/2012, published in 2013, that was not significantly impacted by the CDP. The End term review of MTP I (equivalent to APR for 2012/13) was ready at the time of the evaluation but not published and not made available to the evaluators.

The limited time for the evaluation restricted the possibility to visit the devolved level, although the team was able to visit 3 counties to assess the uptake and use of M&E tools and methods.

2 Findings and analysis

2.1 PROGRAMME DESIGN

The two programme documents, the Proposal to Sida¹⁰ and the Work Plan¹¹ present different programme structures. While the Proposal to Sida has an elaborated and hierarchical structure of activities, results and objectives, this is reduced in the work plan to the levels of activities, outputs and Key Results Areas. Furthermore, as noted in the Inception Report, the KRAs are different in the Proposal to Sida and the Work Plan. Since all programme activities and reporting are against the work plan, it was proposed and agreed in the Inception Report to evaluate against the work plan. The intention of the evaluation was however to evaluate the KRAs in both the Proposal to Sida and the CDP Work Plan. Since there is no reporting and no other accessible information on the development of the KRAs in the original Proposal to Sida, the evaluation concentrated on the evaluation of the KRAs in the work plan.

Theory of change

The work plan outlines six KRAs as the expected overall results for the CDP. A number of outputs are defined under each Key results area. There is no explicit mentioning of an overall objective in the work plan, but the evaluation has derived an overall objective from the text in the work plan, that also corresponds to the overall objective of the Proposal to Sida. The overall objective is the effective implementation and coordination of NIMES and the six KRAs should lead to this overall objective. The KRAs are formulated like outcomes and the evaluation refers to them as outcomes. Generally, the definitions of the KRAs are more ambitious than the sum of the outputs under each KRA.

The desired change that the CDP should contribute to is the full implementation and use (or universalization) of NIMES throughout the country at all levels, and the effective coordination of the system led by MED. This should be achieved by developing and providing an agreed structure of responsibilities and functions (through the M&E

¹⁰ Proposal to the Embassy of Sweden. Request for specific and targeted support to a comprehensive capacity development programme as part of the implementation of NIMES for Kenya. January 2011

¹¹ Work Plan to Realize the Sida Funded Project Capacity Development Programme of the Implementation of the National Integrated Monitoring & Evaluation System (NIMES) for Kenya dated February 2012.

Policy and the M&E Framework) and tools (i.e. Second Indicator Handbook, Evaluation framework) and through massive individual training at all levels.

From a capacity development theory perspective, which has three levels, individual, organisational and institutional levels, the CDP has activities both at the individual level with the trainings, and at institutional level with the development of the policies and frameworks, but is missing the organisational level, particularly for MED. There has been a strengthening of MED and responsibilities has been assigned to different MED staff, but no other organisational developments to respond to the challenges from the needs assessment of 2012 are reported. There was a discussion in 2013, where SIPU also provided a suggestion of an organisational model for MED, but at the time of the evaluation nothing has come out of this.

Design of the programme

Three elements in the CDP design have been identified as contributing to the limited results/impact: lack of critical preconditions, some flaws in the intervention logic, and inadequate risk assessment.

The CDP programme document repeatedly refers to the M&E Policy accord and the M&E framework as critical instruments for the implementation of the capacity building endeavours to be undertaken. However, neither of the two documents was approved for implementation prior to the implementation of the CDP. And now, three years after launch of the programme, approval is still pending, affecting MED's status as an implementing body both in terms of mandate and resourcing – and hence the implementation of the CDP. What is lacking is that the design was not informed by a risk and political economy analysis to identify possible ownership gaps if a new government would come to power after the elections.

A problem with the implementation has been MED's unresolved status (see above), the broad scope of the programme, and the limited emphasis on analysis and dissemination of monitoring data to be used for planning, accountability purposes and for decision-making.

The CDP intervention logic, in the form of the logical framework annexed to the project document, is incomplete, lacking indicators for the KRAs/outcomes.

Risk analysis and mitigation

Finally, the CDP risk assessment is incomplete, lacking critical risk factors such as the non-approval of the M&E policy and the M&E Framework, and the uncertainties surrounding devolution and its impact on MED's mandate. The most important risks identified in the programme document are the lack of capacity of MED, which is surprising given that this is exactly what the programme is supposed to tackle. Other risks are the possibility of trained officers moving to other posts, the possibility of NGOs not being willing to participate and the lack of government allocation of funds.

These risks are not followed up in progress reports. Instead, the reports introduce other risks like foreign exchange rates, the Integrated Financial Management Information System (IFMIS) being off-line, inadequate office/infrastructure/staff and insufficient TA support.¹²

The last progress report¹³ introduces an extensive risk analysis and mitigation matrix based on the recommendation of the two rolling audits commissioned by the Embassy of Sweden. The risks include technological risks (outdated and counterfeit computer software), operational risks (lack of stakeholder participation, conflicting schedules of activities, etc.), political risks (political interference), human resource risks (lack of team work, poor communication, high staff turnover, etc.), financial risks (delayed disbursements, lack of funds, etc.), and other risks. Considering that this was the last progress report before the programme ends, it seems late to introduce the risk mitigation strategy at this stage.

In reality, the main risks that have affected programme implementation are related to the political levels, since neither the M&E policy nor the M&E Framework have been approved. The effect of this is that there is a lack of institutional framework for MED. Another risk was the that county level M&E units would not be operational within the timeframe of the project, which means that although some individual training could be conducted of persons believed likely to become staff of those units, no organisational capacity building was possible. Yet another risk was the lack of government allocation of funds – which was actually identified in the programme document, but not followed-up – for MED to carry out the ambitions of providing not only the regular reporting functions but also providing policy briefs and other information for policy making and to implement the ambitious Communication Strategy. These possibilities, apart from the lack of funding, were not identified as risks by the project.

Obviously, there are no effects yet of the mitigation actions for the risk identified in the last progress report. For the other risks, the progress reports offer no follow-up of whether the risks have materialised or what the effects have been of the mitigation activities undertaken.

Summary

The theory of change is not entirely logical and there are some serious design flaws of the CDP in regards to the indicators and the assessment of risks and necessary pre-conditions as well as ownership issues with a possible new government. In hindsight it can be concluded that the programme design was not realistic and failed to take into

¹² Progress report July 2012-June 2013

¹³ Progress report July 2013-June 2014

account prevailing risks related to changes in governance structures, political processes and ownership. As such, the CDP risk assessment is incomplete lacking critical risk factors such as the non-approval of the M&E policy and the M&E Framework, and the devolution and its impact on MED's mandate.

2.2 EFFECTIVENESS

The Framework for the Implementation of CDP, Appendix 1 of the work plan for CDP, has been used by the evaluators for assessing the achievements of the intended outputs (see annex 4). Achievements of the outputs are further elaborated and analysed below. The contributions from the outputs to the Key Results/Outcomes are also analysed below.

2.2.1 Key Results Area 1: M&E framework developed and universalised

Output 1, M&E tools developed

The output does not state what tools should be developed, although the project document states that the most important would be the M&E Framework¹⁴ and the Second Indicator Handbook¹⁵. After inputs from SIPU and stakeholder consultations, the draft M&E Framework document was finalised in February 2014 and the Second Indicator Handbook in July 2014.

The M&E Framework describes institutional arrangements and responsibilities to implement and co-ordinate M&E both at national and sub-national levels, especially the mechanisms to co-ordinate and link national and county level M&E. The cost for the roll-out of the M&E Framework is estimated at 500 million Ksh annually over a five year period. The Framework has not yet been approved.

The work of developing a Second Indicators Handbook for measuring performance of the V2030 Mid Term Plan II was initiated in December 2012. Several trainings, workshops and consultations with both counties and line ministries have been done. The Handbook includes several sets of indicators for key national economic, social and governance performance outcome indicators, flagship projects annualised output indicators, gender monitoring indicators, human rights indicators and county performance indicators. The Second Indicator Handbook has been approved and was published in July 2014. Dissemination is ongoing, but the evaluation team did not find it in the ministries and counties visited during the evaluation in September.

¹⁴ Monitoring and Evaluation Framework for Kenya 2014. Draft January 2014.

¹⁵ Second Handbook of National Reporting Indicators for the Second Medium-Term Plan 2013-2017 of Kenya Vision 2030. July 2014

Summary

The outputs of developing M&E Framework and Indicators Handbook have been achieved. The Key result/outcome of universalising them has not been achieved, since the draft M&E Framework is not yet approved and the Indicator Handbook was not widely disseminated and used at the time of the evaluation. ‘Universalization’ is used in the meaning of nation-wide dissemination and use of the M&E tools. One important purpose of the visits to counties and line ministries was to get information that could contribute to assess the universalization. We did not find in any place that this had yet to happen. The non-approval of the framework hindered the efforts and contributed to the un-certainty about the will of the political leadership.

2.2.2 Key Results Area 2: Culture of accountability institutionalised through improved capacity for coordination of NIMES

Output 2.1, M&E Policy operationalized:

A National M&E Policy¹⁶ was finalised in 2012. Since the elections in 2013, the new government has not yet approved the policy. From the discussion with some of the informants, the evaluators got the impression that the new Government may need to review the policy to ensure that it is aligned to its strategic focus before it is approved.¹⁷ The draft policy was resubmitted to MoDP in May 2013. At the time of the evaluation, it was not evident to the evaluators whether there were any efforts underway to revise the policy and submit it to the cabinet for approval.

Output 2.2, M&E functions institutionalised among state and non-state actors:

The activities under this output mostly emphasise capacity building of staff at all levels (specific capacity building of MED staff comes under key result area 3). The Master plan for NIMES¹⁸ states the importance of capacity building:

“Perhaps the greatest challenge for NIMES will be the capacity to start-up the system, in the first place and to sustain its operations. NIMES will require a well-trained cadre of persons, at both the central and district levels, with statistical, research, report writing, development journalism, media, ICT, documentation, project monitoring and management skills. A programme for systematic capacity development has to be put in place to ensure that this training takes place. District capacity development is perhaps the most salient aspect that will be undertaken under NIMES. District capacities

¹⁶ National Monitoring & Evaluation Policy. March 2012

¹⁷ National Monitoring & Evaluation Policy. Page 12

¹⁸ NIMES Masterplan September 2010

in ICT, project monitoring, indicator development and preparation of monitoring reports, database development and infrastructure development are severely inadequate.”

The needs assessment undertaken in 2012¹⁹ further stresses the need for capacity building and recommends that “...MED should take advantage of the current capacity building opportunity being supported by SIDA and implemented by SIPU ... develop a capacity building Strategy/work plan, with appropriate costs, and how to operationalize such a plan.”

The needs assessment specifically recommends that: MED in partnership with relevant stakeholders should focus on comprehensive and systematic M&E capacity building and training programmes at the national and devolved levels. The targets should be institutions and structures such as Ministerial, district and County M&E Committees. Technical staff should also be trained to develop their skills on M&E including research and policy analysis, carrying out of multi-sectoral M&E, impact studies, data analysis, and information management and use for decision making and planning.”

Hence, the capacity building is supposed to be guided by a nationwide capacity building strategy and plan for M&E. The procurement of a consultant to assist in developing that strategy was however delayed while awaiting the finalisation of the M&E Framework. The significance of this is that the trainings undertaken have not been anchored in any capacity building strategy or plan. The following trainings of government staff and partners have taken place during the programme period:

- a) e-ProMIS training for District, County and Province Development Officers in Nakuru, Embu, Mombasa and Machakos, with 104 participants
- b) M& E trainings of 35 government staff from ministries, counties and MED were trained at Kenya School of Government on Result-Based M&E
- c) 80 people trained on Gender responsive M&E through the support of UN Women
- d) 1-day Sensitisation forums on establishment of M&E system in counties were held on 7:th and 8:th April 2014, for County government Executive Committee members (18 counties represented) and Chief Officers of Planning and Finance (15 counties represented)
- e) 3-day trainings on establishment of M&E systems in counties for Directors from the counties, in April – May 2014

¹⁹ Report on the NIMES Situational Analysis and Needs Assessment. Dr. Okwach Abagi, Lead Consultant. September 10 2012

The total number of people participating in the above mentioned trainings is close to 700 during the whole duration of the CDP. Each of the trainings seems to be valuable and within the scope of relevant capacity building for NIMES. However, in the absence of a capacity building strategy or training needs assessment, it is not possible for the evaluators to see if these are the most needed trainings.

Other activities have been carried out to achieve this output, i.e., the development of an M&E curriculum for universities. This started in 2012/2013 with the assistance of the SIPU team leader. A number of meetings were held with universities in Nairobi in 2013 to help them develop their curriculum for M&E. According to progress reports, several universities in Nairobi started giving M&E courses in 2013.

The Provincial Directors of Planning and County Development and Planning Officers were planned to be trained as trainers in M&E, but this training has also been delayed, awaiting the nationwide capacity development plan.

To equip the counties with Information Technology, the programme has procured 48 computers that will be distributed to the counties.

Output 2.2 is formulated as institutionalisation of M&E functions among state and non-state actors. Although the output indicators of engaging counties and institutions and conducting a number of training show good progress, the output as formulated is not achieved. The evaluators visited only three counties, but the clear impression is that the M&E function is not yet institutionalised. The counties are still being staffed, the individual training capacity is not paired with institutional capacity building, the institutional framework is not there, and the reporting procedures are still unclear to the counties.

Output 2.3, Framework for Programme evaluation:

The evaluation framework includes an evaluation plan and a list of a number of priority programmes to be evaluated. A workshop was held in June 2014 with participants from M&E units in line ministries and three counties, a total of 20 participants. The participants agreed to identify evaluations for a National Evaluation Plan.

The Progress report July 2013-June 2014 says that two evaluations have been finalised, one for the Constituency Development Fund and one for the Malaria Control Programme. The reports were not made available to the evaluation team and have not yet been published.

Output 2.4, County Peer review mechanism developed:

This output was not a priority and not included in any annual work plan. No guidelines have been developed on how to conduct county peer reviews and no County peer review reports have been published.

Output 2.5: Establish at least 1 institution for technical training in each county:

The review of universities curriculum and ensuring the county institutions have standardized curriculum is one of the main activities for this output. SIPU consultants, not least the former team leader, spent considerable time to assist in developing a curriculum. The direction of this work changed and focused on interacting with the academic institutions in the so called Nakuru group to give feed-back to the curricula that they prepare themselves.

County officers were engaged in 2013 (after the counties became operational) in identifying one institution in their county. Once identified, a common curriculum for these institutions can be adopted based on the work done with curriculum development already, and training of their lecturers will be undertaken. At the time of the evaluation, institutions are still being identified.

Output 2.6, NIMES communication strategy implemented:

A communication strategy has been developed.²⁰ The process of developing the strategy included stakeholder consultations and interviews at group level as well as individual level. The strategy identifies different target groups and their different needs as well as interventions by MED to communicate with them. It is expected that the communication strategy will require 37 million Ksh during a four year implementation period.

The communication strategy has not been implemented in full due to lack of funding from government and development partners. Documents that have been published include the Comprehensive Public Expenditure Review (CPER) 2013, the Annual Progress Report 2011/2012, NIMES Communication Strategy, a newspaper supplement, popular version and pamphlets of the CPER as well as 10,000 brochures and some T-shirts and banners about NIMES.

Summary

Four of the six outputs of this KRA have been partly accomplished, but none has been fully accomplished. For several outputs, documents have been developed but not approved and implemented.

With none of the outputs fully achieved, it cannot be expected that the Key result/outcome has been achieved and a culture of accountability institutionalised. This would have required that NIMES was able to produce complete and accurate M&E

²⁰ Communication Strategy 2013 – 2017 for The National Integrated Monitoring and Evaluation system (NIMES) April 2013

reports in a timely manner and that the reports were useful and being used for accountability purposes and for decision making.

2.2.3 Key Results Area 3: Technical and managerial competencies at the national and devolved levels assessed and strengthened

Output 3.1, Capacity needs assessed and situation analysis report produced

As outlined in the inception report, a comprehensive situational analysis and needs assessment of NIMES was undertaken in August 2012, including both MED, line ministries and devolved level; and for the situational analysis only - CSOs, private sector and development partners. And overall, it is found that the analysis/assessment addresses the main key NIMES challenges such as unfocused and untimely APR, overall low M&E capacity at MED, line ministry and devolved level, low ownership in terms of identified champions and inadequate resourcing. However when presenting the report in the 2012/13 CDP Annual Progress Report, emphasis was placed on MED achievements only; moreover no follow-up actions were proposed although some references was made to the NIMES assessment under KRA 2 in relation to the development of a nation-wide capacity development strategy.

In February 2014, a comprehensive ICT situational assessment was undertaken. ICT strategy development work is yet to be initiated as follow-up (see further below). However, a committee has been formed to spearhead the work.

Output 3.2, MED strengthened to coordinate national and devolved levels M&E system effectively

Based on the NIMES assessment, a total of 20 individual overseas short training courses have been implemented with the overall objective of enhancing staff's general competencies in M&E. And, cases of application of new knowledge were identified such as in the development of (i) the evaluation plan and (ii) training materials for county level. However, no impact has been identified at institutional level in the form of MED's core product – the APR. Indeed the APR is assessed to be less timely and less focused today in spite of the CDP. Further to the institutional level, the recommended development of a costed Capacity Building Strategy is yet to be undertaken. Finally, no evidence was found of capacity strengthening of MED staff through SIPU collaborative efforts (see also chapter 2.4).

A benchmarking study tour to South Africa was conducted in February 2014 for MED staff (4 officers) and the Ministry of Devolution and Planning's computer department. Follow-up on lesson learning are yet to be undertaken.

Moreover, a study tour to Sweden and the Netherlands was conducted in May 2014 for benchmarking of M&E systems at national, regional and local level. A total of 14 persons participated in the tour with eight staff members from MED, three from line ministries (health, education, and water) and 3 embassy/SIPU staff. In terms of outcome, the MoDP has drafted a memorandum to the PS of the ministry sharing the

lessons learnt for internal change. There is no evidence of follow-up. However, it has been agreed that MoDP will spearhead the implementation of the lesson learning.

Intense recruitment/deployment activities have been undertaken to ensure adequate human resources at MED, concerning the technical staff requirement. Difficulties were reported in having technical staff transfers due to shortage in the whole public service. However, during the same period staff turnover remained high with the loss of staff members to other entities. As a result the net result has been zero: five new technical staff members were recruited while five other staff members has left to join other government MDAs.

All equipment planned for procurement for MED has been purchased: 25 desk top computers, 3 iPads, 8 laptops, 1 one heavy-duty printer, 1 projector, and 2 motor vehicles. Moreover, 48 computers have been procured for county level. No further equipment needs have been expressed.

The semi-annual monitoring of MED activities is yet to be undertaken in spite of an approved 2013 concept note for guidance.

The ICT strategy is yet to be formulated. However, SIPU staff has formulated ToR for strategy development. Moreover, a parallel effort with a World Bank consultant is underway focusing on the development of e-NIMES. A consultant was engaged by SIPU and had finalized a mission report mid-June 2014 with recommendations and findings. The ICT group that was appointed to look at the way forward suggested an ICT committee that would analyse the consultants' assessment report for e-NIMES and define a way forward. This was still pending at the time of the evaluation. The development of MED ICT infrastructure will be initiated once the ICT strategy and the M&E Framework is approved.

Finally, the MED website is yet to be revamped. Documents are not being uploaded to the current website on a regular basis.

Summary

Output 3.1 – development of assessments - is fully accomplished. However, when it comes to output 3.2 - strengthening of MED - results at institutional level are limited. Indeed, the core product of MED, the APR, is assessed to be less timely and less focused today in spite of the CDP.

The Key result/outcome has been partially achieved, since the needs assessment has been done and a number of trainings conducted, although not guided by a training strategy of plan.

2.2.4 Key Results Area 4: Timely reporting using ICT in the production of M&E instruments

Output 4.1, Framework for Free Access and Exchange of data and information improved

As presented under output 2.2, a range of country/district staff members have been trained in e-PROMIS. Moreover, staff ministries of line ministries have received training demanded by them and based on their needs. In terms of outcomes of the training received, there has been an increase in project upload into e-Promis from 1,400 to 2,400 during a 12 months' period (June 2013 to June 2014). In terms of number of reports prepared using e-PROMIS, however, there is no clear evidence of change. E-Promis can facilitate the production of annual and semi-annual Project Monitoring Analytical Reports (PMAR) and District Annual Monitoring & Evaluation Reports (DAMERS) – but there has been no monitoring of the production of such reports from MED.

Due to the limited scope of e-PROMIS (an assessment was undertaken in February 2014), it has been proposed to develop a new e-system – e-NIMES – which will draw on a range of existing e-systems such as e-PROMIS, IFMIS, and KENINFO. However, the development is yet to be launched as per output 3.2.1.

In regard to broader-scoped indicators, the Second Indicator Handbook now includes both a number of gender indicators and human rights indicators.

Output 4.2, Framework for M&E supported by GIS developed and operationalize. SIPU developed a Geographical Information System project in 2013 which was rejected by MED. A new and adjusted proposal is yet to be presented by SIPU.

Summary

Neither output has been fully accomplished. Moreover in terms of timely reporting, the APR is delayed by a full calendar year rendering the report less relevant in terms of decision making for budgeting and planning purposes.

The Key result/outcome has not been achieved.

2.2.5 Key Results Area 5: Multi-sector partnerships to support NIMES implementation established

Output 5.1, M&E partnership platform established

The indicator for this output is the number of working partnership platforms that have been established. As far as the evaluators have been able to establish, MED is working with the following partnerships:

- Kenya Community of Practitioners
- Kenya Private Sector Association

- Kenya 4R
- Evaluation Society of Kenya
- Knowledge Management Kenya

The governance structure of NIMES also includes participation of stakeholders and representatives of several of the partnerships in the National Steering Committee, the Technical Oversight Committee and the Technical Advisory Groups.

The progress reports refer to the M&E weeks conducted in November 2012 (320 participants over a four day period) and November 2013 (520 participants for the four day period). Those events were aimed to be a collaborative and partnership platform for learning and sharing experience, as well as for knowledge sharing and training for M&E professionals. Main agenda items have been to launch and inform about the annual Progress Reports and the Comprehensive Public Expenditure Review.

Output 5.2, Resources have been mobilised for M&E

The indicator for this output is that additional funding has been requested, approved and mobilised

MED budget from government sources has increased from the start of the project, from 250 million KSh in FY 2011/2012 to 259 million KSh, an increase of 3.6%. Apart from Sweden, several development partners have also contributed to the implementation of NIMES, with the largest contributions from the World Bank, but also from UNDP, UNICEF and UNFPA. The GOK, in providing its counterpart contribution, undertook the following activities: Payment of travelling allowance, training of MED staff and other government officers on M&E, daily subsistence allowance during field visits, retreat allowances, stationeries, telephone bills, office rent etc. There have been problems with funding of M&E at district level. Financial support to all the districts for the preparations of the DAMERS from the CDP was sought and approved for 2012/2013 but not for 2013/2014²¹. In 2013-2014 activities reported under this output refer to the proposal in the M&E Policy to allocate 1% of budget for M&E. This has not yet materialized.

Summary:

The output about partnerships has been achieved, although the intention seems to have been to use the partnership platforms in a more extensive way. The output about mobilising resources has been partly achieved. This Key result/outcome has been partially achieved.

²¹ CDP Progress reports

2.2.6 Key Results Area 6: MED transformed into a Semi-Autonomous Government Agency

Output 6.1, Kenya Monitoring and Evaluation Authority (KeMEA) established:

The indicator for this output is the establishment of a Semi-Autonomous Monitoring and Evaluation Authority by transforming MED into a fully fledged semi-autonomous government agency. This was intended to provide MED, which is currently the more established driver of integrated M&E nationally, with the necessary legislative backing to facilitate better coordination and strengthening of an M&E culture among all players.

The main activity undertaken towards this output is the development of a draft M&E policy. However, the policy is yet to be approved by cabinet and the National Assembly. Information obtained by the evaluation team during interviews with key informants indicates that the delay in the approval of the policy may be attributed to challenges associated with a new government and the need to ensure that the policy is fully aligned to current government strategic focus. The absence of a champion to provide high-level leadership support has also been a major issue.

Furthermore, the government is currently pursuing strategies geared at achieving a lean and efficient public service and may not be keen on establishing new public agencies. Currently there is an on-going process aimed at reducing the existing SA-GAs. In this later context, it is unlikely that MED will be transformed into the Kenya Monitoring and Evaluation Authority (KeMEA).

Summary:

The output and the Key result/outcome about the establishment of a Semi-Autonomous M&E Agency have not been achieved.

2.3 RELEVANCE

2.3.1 Overall context analysis in the design of the Capacity Development Programme

The CDP is designed to facilitate the full implementation of NIMES as guided by the NIMES Master Plan and the draft National M&E Policy. The context of the CDP in relation to the experiences and challenges in developing M&E in Kenya is explained in detail in these documents.

The NIMES Master Plan from September 2010 identifies the main outputs from NIMES as the Annual Progress Reports and Mid-Term and End-Term Reviews of the Economic Recovery Strategy or successor medium-term plan, the Public Expenditure Review (PER) report, District Annual Monitoring and Evaluation Reports, (later County Annual Monitoring and Evaluation Reports when the counties became operational) and the Annual Project Monitoring Report. Other key outputs were to include the set of regularly monitored sector indicators and a core set of indicators for nation-

al monitoring, popular versions of the APR and Mid-Term Reviews and Terminal Evaluation Reports, report on the MDGs, policy research papers, policy briefs and seminars, in-depth analysis of census and survey data and quarterly project monitoring reports.

The Master Plan identifies the M&E gaps like the lack of project monitoring standards, the lack of an integrating institutional and policy framework for reporting, the incompleteness in coverage of the full scope of monitoring and evaluation activities within the framework; the weak coordination capacity, other weakness in the development of indicators, particularly for national and district monitoring, lack of provision for research to inform policy, lack of a communications strategy for building the monitoring and evaluation practice and culture and for receiving feedback and finally, inadequate capacity for sustaining NIMES. The CDP programme document takes its point of departure from the capacity gaps identified in the NIMES Master Plan.

The draft M&E Policy identifies a number of challenges that have been guiding the design of the KRAs of the CDP, i.e. the weak M&E culture reflected in KRA 2, the weak institutional, managerial and technical capacities reflected in KRA 3 and the rarely analysed or disseminated data and low utilisation of data/information reflected in KRA 4.

The beneficiaries of the CDP are the staff of MED, the M&E units at other line ministries and at county level, and other stakeholders involved in M&E, like the CSOs. The capacity building needs of the beneficiaries are to some extent identified in the NIMES Master Plan and were assessed during the initial implementation of the CDP in a comprehensive situational analysis and needs assessment undertaken in August 2012 including both MED, line ministries and devolved level, and for the situational analysis also CSOs, private sector and development partners.

Summary

The design of the Capacity Development Programme is clearly built upon an overall context analysis and identified needs of beneficiaries.

2.3.2 Factors external and internal to the CDP reflected in the programme design

While, the design of the CDP took cognisance of the impact of COK 2010 by providing for the support to the national government and the county governments, the challenges that are being experienced in the transition may not have been fully appraised and reflected in the design. For example, the challenges associated with the operationalization of the provision under Article 189 (1) (a) of the COK 2010 are described as follows: “Government of either level shall: Perform its functions, and exercise its powers, in a manner that respects the functional and institutional integrity of government at the other level, and respects the constitutional status and institutions of government at the other level and, in the case of county government, within the county level”. The emphasis on distinctness of the two levels of government is one of the

external factors posing challenges to effective coordination of M&E capacity development efforts.

The model of devolved system of governance ushered by the promulgation of the COK 2010 is both radical and pervasive. It entails reforming of political and administrative institutional structures, functions and mandates. Devolution processes take time to be fully operationalized. This is a factor that was not adequately taken into account during the programme design. It should have been identified as a possible risk and the necessary mitigating measures put in place.

The change of government which may have new strategic focus, new policies and priorities was not identified as a factor that could impact on the programme implementation. This was not identified as possible risk; hence no provision was made to respond to changes in political priorities.

Summary

There are several factors associated with the implementation of the COK 2010 that should have been anticipated and provided for in the design of CDP, but were not. These include the implementation of devolution that radically changed the governance architecture in the country and new priorities and strategic focus of a new government.

2.3.3 Changes in the implementation vis-à-vis the original CDP design responding to the changing needs of the partner and the context

The CDP has been evaluated based on the seven KRAs identified in the programme Work Plan²² and referred to in the TOR for the evaluation, although one of the KRAs was excluded from the CDP implementation, since it had little to do with capacity development and more to do with internal Government procedures (Approval of schemes for M&E Officers). The design of the programme did not change during implementation.

Summary

The design of the programme did not change during implementation in response to changing needs and context.

²² Work Plan to Realize the Sida Funded Project Capacity Development Programme of the Implementation of the National Integrated Monitoring & Evaluation System (NIMES) for Kenya dated February 2012.

2.3.4 Relevance in relation to Kenyan policies, strategies and reform programmes

The programme is relevant in relation to Kenyan policies, strategies and reform programmes. In supporting capacity development for the NIMES, whose long-term purpose “is to improve decision making, planning, budgeting, implementation, reporting, performance management, transparency and accountability”, the programme is supportive of national values and principles of governance espoused in the COK 2010 which include among others “good governance, integrity, transparency, accountability and sustainable development” Furthermore, NIMES is embedded in the National Performance Management Framework for public sector reform, and is therefore a core pillar of GoK’s Results-Based Management system as espoused in Kenya Vision 2030, the country’s development blue-print.

This is further demonstrated in the rationale for supporting capacity development for the successful implementation of NIMES i.e. “Successful implementation of the NIMES both at the national and devolved levels is expected to support production of real time M&E information that will guide and provide meaning to policy makers and citizenry on progress in implementation of policies, programmes and projects in the country”. Support to capacity building being provided to the devolved levels of government is also aligned to the Vision 2030 MTP monitoring framework- “... devolved level monitoring, particularly to track progress towards the achievement of the MDGs at the local level and ... for monitoring the differential effects of policies”.

The programme is also aligned to the constitutional mandates for the national government and the Transitional Authority to support capacity development at both levels of government. Currently, the government is undertaking a Capacity Assessment and Rationalisation of Public Service at both levels of government with the objective of aligning human resources capacity, skills and organisation structures with the constitutional mandates and functions for efficient and effective delivery of quality and responsive service delivery and equitable development. In this context NIMES/CDP is very relevant in relation to policies and programmes for the government at both national and county level.

Summary

The programme is relevant in relation to Kenyan policies, strategies and reform programmes.

2.3.5 Relevance in relation to Swedish policies and cooperation strategy for Kenya

Swedish development cooperation with Kenya²³ focused on three sectors for the period 2009-2013: democratic governance, natural resources and the environment and urban development. The CDP falls within the area of democracy and human rights with the objective of a more efficient state that respects and promotes human rights and the rule of law, where Sweden will include support to initiatives for a results-oriented public administration.

The summary of the Country Strategy for Kenya states that Sweden will work for the establishment of a mechanism for following up results and commitments set out in Kenya's poverty reduction strategy and to promote the establishment of one common mechanism for following up performance and commitments within the framework of the Kenya Joint Assessment Strategy and the Medium Term Plan 2008–2013.

As for the relevance in relation to the perspectives of the poor, this was assessed in the Embassy Assessment Memo²⁴, which identified initiatives with direct impact on poverty reduction, in which monitoring information and evaluation findings can be useful to government. M&E can be useful to support policy making, especially budget decision-making and national planning, to help government ministries in their policy development and policy analysis work, and in programme development, to help government ministries and agencies manage activities at the sector, programme, and project levels and to enhance transparency and support accountability relationships by revealing the extent to which government has attained its desired objectives.

The evaluators agree that M&E can certainly be helpful for all of these purposes in making the government more efficient in implementing its policies and activities. The question then is whether Kenya is pursuing a pro-poor policy for economic growth or not, and if so, whether NIMES is designed to hold the government to account for the relevant commitments in this policy. According to the country strategy for Kenya, Kenya has focused successfully on poverty reduction through sustained economic growth since year 2000. In 2007, the Kenyan Government presented its long-term vision – Vision 2030 – and the first of a series of five-year plans, the Medium Term Plan 2008–2012. Both documents lay strong emphasis on growth as a necessary precondition of poverty reduction.

²³ Strategy for Development Cooperation with Kenya January 2009-December 2013. Ministry for Foreign Affairs Sweden January 2009.

²⁴ Assessment memo for support to "A comprehensive Capacity development Programme as Part of the Implementation of the National Integrated Monitoring and Evaluation System (NIMES)

On the other hand, the country strategy also expresses concern that the political system in Kenya is still organised around ethnic identities and solidarities, and bound up with the personal standing of individual leaders, a state of affairs which primarily serves the interests of the elite. The poverty and development assessment made in relation to the implementation evaluation of the Swedish cooperation strategy for Kenya concluded that there has been a relatively strong and steady growth over the past two decades. This has not led to significant reduction of poverty²⁵.

The Programme proposal mentions gender, saying that one of the outcome indicators in the Results matrix should be that KENINFO, with a fully updated module for Gender Indicators, would be used for preparing gender analysis. The work plan follows up on this and suggests that one of the indicators should be the number of gender indicators updated in KENINFO. Apart from this, the document does not mention gender issues. No gender analysis has been done for the programme and the gender dimension is not analysed in relation to beneficiaries and stakeholders of the programme. The document does not formulate any desired results related to gender equality. However, during the implementation, one of the SIPU consultants was a gender expert and participated in NIMES gender mainstreaming efforts spearheaded by the Embassy of Finland and UN Women. As a result of this work, there are a number of gender indicators in the second Indicator Handbook.

Summary

The CDP was highly relevant in relation to the priorities of the country strategy. The relevance in relation to the perspectives of the poor is weak. The programme did not benefit from a gender analysis. Gender equality has not been mainstreamed or targeted by the programme; consequently gender issues have not been prominent in the implementation.

2.4 EFFICIENCY

2.4.1 Resources, adequate and applied in a timely manner

Three types of resources were transferred under CDP: equipment, budget support and human resources in the form of TA.

In terms of timely equipment delivery, severe delays were experienced due to cumbersome Kenya government procurement procedures. Moreover, the time needed for Sida's non-objection for procurement was perceived as contributing to the delay.

²⁵ Poverty Development Assessment - Implementation Evaluation of the Cooperation Strategy with Kenya 2009-2013

Delivery of budget support was delayed throughout the project cycle due to inadequate MED planning and budgeting exercises as per the delayed project progress reports. Moreover, government wide PFM challenges such as IFMIS down time, GoK liquidity issues, inadvertently and omission of CDP funding in printed estimates contributed to the weak budget efficiency. Implementation delays were experienced as a result. This contributed to the need for a CDP extension until December 2014, to allow for completion of all planned activities.

Human resources in terms of TA were perceived as being timely, although the availability of experts sometimes took precedence over internal MED sequencing needs.

In regard to adequacy of resources, the evaluation shows mixed results. In regard to equipment, the needs were reported as being fully met. For budget support, the evaluation shows an overall positive result. Only in regard to district budget allocations for facilitation of APR were the resources reported as being inadequate. Interviews with both MED and county staff indicated that more substantial yearly allocations of four times the initial budget would have been required to facilitate data collection at district and sub-district level. Moreover, budget support has as a modality facilitating easy shifts in expenditures.

Finally in regard to the adequacy of TA provided, limited evidence of positive outcomes were identified due to the applied approach and, to a lesser extent, the quality of outputs (see further Chapter 2.4.2). Sida project accounting procedures, having the TA approve all invoices from MED before payment is made by the Embassy, might have contributed to the non-integral approach of SIPU: the mutual role of technical support and financial control is not conducive for a good working relationship with the counterpart.

Summary

Resources were not always adequate and timely, when it comes to timeliness primarily due to the capacity problems at MED and general GoK PFM inefficiencies. For adequacy of resources, equipment and budget support were overall positively evaluated.

2.4.2 Cost-effectiveness of implementing arrangements with combination of budget support and technical support

Two levels of cost-effectiveness were evaluated: well argued budget spending and comparative cost analysis.

Regarding the former, well argued spending, the individual CDP budget allocations are assessed as relevant in relation to the designated activity as per the costed activities in the work plans. However, when it comes to overall results – improved reporting in the form of a high quality APR for decision-making – the CDP is not cost effective. In particular the cost-effectiveness in regard to analysis and dissemination of

collected data which is lacking. In regard to comparative cost analysis, it is assessed that the capacity development activities of CDP compare with those of other programmes based on an interview with SIPU financial controller.

Summary

Overall cost-effectiveness of CDP is found inadequate due to lack of full achievements of a number of outcomes, lack of progress in improving the APRs and lack of progress in analysis and dissemination of M&E information.

MED had initial difficulties, mostly due to under-staffing; to assume responsibilities according to the work plans, but gradually became stronger when receiving more staff, particularly with the engagement of a Project Director in June 2013.

2.4.3 Technical assistance

As for the efficiency of the technical support, the contract with SIPU for technical assistance to CDP was signed in December 2011. The SIPU consultants started their work in January 2012. Initial work in the beginning of 2012 was to develop a CDP work plan²⁶ together with MED.

The Terms of Reference for engaging a consultant for technical assistance were rather detailed and indicated that the consultant would be responsible for undertaking a long list of tasks, including carrying out the capacity needs analysis, designing an implementation plan, developing technical guidelines etc. In reality, the role of SIPU initially became by necessity, as perceived by SIPU, to take a leading role in all activities from developing and sharing ideas on how the programme could be implemented, to minor, but critical logistical and administrative issues. This gradually changed in 2013 when MED staff took more of a lead role and the role of SIPU staff became more supportive. In addition, SIPU initially acted as the Payment agency until funds were distributed to MED in November 2012.

The priorities of the work plan in 2013, and the major engagement of SIPU consultants, was to develop the M&E Framework and the Second Indicator Handbook. This work continued in 2014. Other major engagements by SIPU have been to participate in the development of a curriculum for M&E training at university level and the de-

²⁶ Work Plan to Realize the Sida Funded Project Capacity Development Programme of the Implementation of the National Integrated Monitoring & Evaluation System (NIMES) for Kenya dated February 2012.

velopment of an ICT strategy (see Chapter 2.2.3). SIPU also organised a study tour to Sweden and the Netherlands in May 2014 (see chapter 2.2.3).

According to SIPU, policy related issues impacted on the implementation of the project and on the tasks of SIPU. These issues include the un-clarity around the mandates of the counties, their relation to central ministries, the relations with the Constituency Development Fund, the organizational set-up of M&E in counties, the degree of independence for counties and their jurisdiction as well as financial issues, i.e. how large the devolved funds would be.

Both from MED staff and from the local SIPU advisers, the evaluators learned that at times there had been some irritations in the relations. This was to some extent due to SIPU having the role of assessing and approving invoices from MED to the Embassy of Sweden. This created some disturbances in the relationships with the SIPU consultants, due to their role as advisers and at the same time having responsibilities for controlling expenses. Interviews with MED staff revealed that SIPU staff did not consistently involve relevant MED staff and working groups in CDP activities.

Summary

The evaluators find that SIPU has put in considerable efforts to support MED in implementing the CDP. Relations seem to have been strained at times and insufficiently efficient, contributing to the difficulties in achieving some of the outputs.

2.4.4 Efficiency of institutional and governance procedures including the management set up and steering/advisory group structure

The governance structure of the CDP is described in the programme document. The Technical advisory committee of the M&E National Steering Committee had the oversight of the CDP. The Projects Implementation and Technical Committee was tasked with review and approval of all CDP documents and work plans and budgets as well as overseeing the implementation of the programme including initiating reports, programme evaluations and providing advice on human resource issues. The overall coordination of CDP was the responsibility of MED. The Director of MED was to be assisted by the Technical Advisory Groups. There have been regular meetings with the PITC and the TOC to discuss the CDP work plans and reports, while the TAGs have not met since 2012.

The implementation has been guided by detailed and appropriate Annual Work Plans and Budgets developed by MED. Semi Annual and Annual Progress reports have reported on the CDP progress. Although the reporting is mostly activity based, they follow the format of the work plans and give solid information on progress. The ambition of MED, as documented in the progress reports, has been to - with gradual increase in staff – also report on outputs. During the CDP period additional staff has been allocated to MED, but reports have remained largely activity based.

The main strength of MED is the dedicated staff. During the period of the CDP there has been a substantial increase and more is expected. Many of the staff has been trained in different aspects of M&E by the CDP. The evaluators were impressed with the individual capacities of the staff. The staff have participated and contributed to the implementation of CDP while at the same time being trained by the CDP and also continuing to perform their regular duties. However, MED has not reported on outputs, much less outcomes of the CDP programme. This is of particular concern given that this organisation is expected to be the lead authority in the country on M&E and is supposed to lead the capacity building efforts of all levels to properly reporting including reporting on outputs and outcomes.

MED had initial difficulties, mostly due to under-staffing; to manage the CDP and assume responsibilities according to the work plans, but gradually became stronger when receiving more staff, particularly with the engagement of a Project Director in June 2013. The information collected by the evaluation team indicates that management of CDP, including the division of responsibilities for implementation of KRAs among the MED staff has worked well, although there have been a number of challenges contributing to the non-achievement of several outputs (see page 41).

Summary

There have been regular meetings with the PITC and the TOC to discuss the CDP work plans and reports. The main strength that benefitted programme implementation is the dedicated staff of MED. Many of the staff has been trained in different aspects of M&E by the CDP. The evaluators were impressed with the capacities of the staff.

The implementation has been guided by detailed and appropriate Annual Work Plans and Budgets developed by MED. Semi Annual and Annual Progress reports have reported on the CDP progress. Although the report is mostly activity based, they follow the format of the work plans and give solid information on progress. Reports have remained largely activity based.

2.5 IMPACT

2.5.1 The CDP contribution to the implementation and coordination of NIMES at both national and devolved level

During the inception period, the indicator for impact was defined as the number of quality monitoring and evaluation reports leading to enhanced decision making at national and at devolved level²⁷.

The latest published Annual Progress Report (APR) at the time of the evaluation was the APR 2011/2012. The APRs are professionally made, informative on progress in relation to indicators and contain a summary of about 15 pages for easy access to the facts of the reports. The reports are disseminated during the annual M&E weeks.

The production of the reports is often delayed. The APR 2010/2011 was published in May 2012, the APR 2011/2012 in September 2013 and the APR 2012/2013 is expected to be published in September 2014. There are several reasons for the delay; among them is the late submission of reports from lower levels and from line ministries and the time required for MED to extract the information from reports using different formats. There has been a delayed submission of reports i.e. MAMERs and DAMERs²⁸. The timely publishing of APRs has not improved.

The Needs Assessment report from 2012 concludes that “The quality of ministerial annual M&E reports is also just above average. MED management expects the ministerial M&E report to be based on and follow NIMES national performance indicators. But most of the time the reports are general stories of the ministries’ operations and achievements”²⁹ and “Most DSOs are not able to provide the required data/statistics as required in the NIMES Guidelines. Either they do not have the necessary capacities or have limited financial resources to carry out such assignments”.³⁰

There are different factors behind the evaluators’ assessment that the quality of reports has not changed during the time of the CDP. First, the counties became operational only in April 2013 and the M&E units at the county levels are still being set up and staffed as verified by the county visits by the evaluation team. Second, the training at county level has been limited both in number of people trained and in content of the training. At the time of the evaluation, the counties had not yet produced any

²⁷ Inception report page 13

²⁸ Needs assessment 2012, page 57

²⁹ Needs assessment 2012, page 41

³⁰ Needs Assessment 2012, page 43

reports, so it was not possible for the evaluators to assess if the CDP had any impact on the reporting from district/county level.

Staff from line ministries has been trained and some ministries had participants in the study tour to Sweden and the Netherlands. Those participants that were interviewed were sensitized about NIMES, but that was clearly not enough to change routines regarding reporting and analysis at their ministries. The interviews and the reports that the evaluation team saw indicates that reporting has not yet changed.

Regarding the use of the APRs for planning and policy making, the publishing is too late to have an impact on the planning and budgeting for the year following the reported year. Since the devolved levels were in the process of producing their CAMERs at the time of the evaluation, it is too early to assess their use on planning and policy making.

The overall impression from the limited number of interviews with line ministries and counties is that there is so far little impact, explained by the delays in implementation of important documents like the M&E Policy, the M&E Framework, the Second Indicator Handbook, the Communication strategy etc.

Summary

It is not possible to verify the impact from the CDP on improvements of reporting and use of reports for planning and decision making. The End term review of MTP I (equivalent to APR for 2012/13) was ready at the time of the evaluation but not published and not made available to the evaluators.

2.6 SUSTAINABILITY

2.6.1 Institutional sustainability of NIMES in terms of quality services

The capacity development through the CDP during only two years of implementation did not have enough impact to institutionalise NIMES. The overall objective of supporting full implementation and coordination of NIMES is far from being achieved. Hence it is premature to assess the sustainability of services that have not yet been established.

2.6.2 Economic sustainability of NIMES

The economic sustainability of NIMES is tied to the approval of the National M&E Policy (see chapter 2.2) with its proposal of allocating a set percentage of all government budgets to M&E activities. However, as described in chapter 2.2, the policy is yet to be resubmitted to the cabinet; however it has been submitted by MED to the PS of the MODP and is awaiting his approval.

3 Conclusions and Lessons learned

3.1 PROGRAMME DESIGN

A problem with the implementation has been MED's unresolved status, the broad scope of the programme, and the limited emphasis on analysis and dissemination of monitoring data to be used for planning, accountability purposes and for decision making. The CDP intervention logic, in the form of the logical framework annexed to the programme document, is incomplete. It lacks indicators for the Key Results Areas/outcomes. The CDP risk assessment is incomplete, lacking critical risk factors such as the non-approval of the M&E policy and the M&E Framework, and the devolution and its impact on MED's mandate.

The theory of change is not entirely logical and there are some significant design flaws of the CDP as regards the indicators and the assessment of risks and necessary preconditions as well as ownership issues with a possible new government.

One of the weakest parts of the programme design is the risk analysis. The risks identified were not the main risks which have been faced, and they have not been followed up in progress reports. Instead, the reports introduce other risks. In reality, the main risks that have affected programme implementation are related to the political levels, since neither the M&E policy nor the M&E Framework have been approved. Another risk is that county level M&E units would not be operational within the time frame of the programme and yet another risk was the lack of funding – which was actually identified, but not followed-up. The progress reports offer no follow-up of whether the risks have materialised or not, or what the effects have been of the mitigation activities undertaken.

3.2 EFFECTIVENESS

Achievements of outputs

The CDP has six KRAs with a total of 14 defined outputs. The main achievements of the CDP in relation to the KRAs are the development of the M&E Framework and Indicators Handbook, a number of trainings conducted, the development of the NIMES Communication Strategy, a comprehensive situational analysis and needs assessment of NIMES that was undertaken in August 2012, an increase in project upload into e-Promis and several partnership forums established, including the annual M&E weeks.

However, several outputs have not been fully achieved. The partial achievements mostly refer to the development of documents that have not been approved or not been implemented. The M&E Policy and the M&E Framework have been developed

but not approved and universalised³¹, no nationwide capacity building strategy and plan for M&E was developed, The National Evaluation Plan was not finalised, no guidelines have been developed on how to conduct county peer reviews, the Communication Strategy has been developed but not been implemented in full and the Information and Communication Technology (ICT) strategy is yet to be formulated. In summary, 2 of the outputs have been fully accomplished, 7 outputs have been partially accomplished and 5 outputs have not been accomplished at all.

Achievements of Key Results/Outcomes

The first Key result/outcome of universalising M&E tools has not been achieved since the M&E framework is not yet approved and the Indicator Handbook was not widely disseminated and used at the time of the evaluation.

With none of the outputs fully achieved, it cannot be expected that the second Key result/outcome could have been achieved and a culture of accountability institutionalised. This would have required that NIMES was able to produce complete and accurate M&E reports in a timely manner, that the reports were useful, and that they were being used for accountability purposes and for decision making.

The third Key result/outcome of assessing and strengthening technical and managerial competencies have been partially achieved, since the needs assessment has been done and a number of trainings conducted, although not guided by a training strategy of plan. Moreover, there is little evidence of capacity development outcomes at MED level.

The fourth Key result/outcome about using ICT for timely reporting has not been achieved. The fifth Key result/outcome about establishing partnerships has been partially achieved. The sixth the Key result/outcome about the establishment of a Semi-Autonomous M&E Agency has not been achieved.

Challenges

The initial delay of initiating the project has effectively reduced the implementation to about 2 years and it has been a challenge to implement all scheduled activities during a shorter period of time. The project has been implemented during a time of great changes in the government organization. The devolution process has created the counties as a new local government unit, replacing the districts. The level of debate around issues like un-clarity about the mandate of counties, their relation to central ministries etc, could not be foreseen when the CDP was planned. Another challenge

³¹ The word *universalization* is used in the project documents and reports, meaning nationwide dissemination and implementation

has been that key products like the M&E Policy and the M&E framework were developed under one government and after the elections, the government changed. During the design of the project, not enough emphasis was put on the fact that the development of new documents, like the M&E framework requires substantial time for the process of developing the document, including wide consultations in order to get everybody onboard. According to reports from MED and SIPU, it has been a challenge to manage the process and still keep the time schedule.

3.3 RELEVANCE

The programme is relevant in relation to Kenyan policies, strategies and reform programmes and is supportive of national values and principles of governance of the COK 2010 which include among others good governance, integrity, transparency, accountability and sustainable development. There are, however, several factors associated with the implementation of the COK 2010 that should have been anticipated and provided for in the design of CDP, but were not. These include the implementation of devolution that radically changed the governance architecture in the country and new priorities and strategic focus of a new government.

CDP is also highly relevant in relation to the priorities of the Swedish country strategy, with its focus on democratic governance and promoting the establishment of one common mechanism for following up performance and commitments within and the Medium Term Plan 2008–2012.

The programme will make the Government more efficient in implementing its policies and can be relevant for the poor only if those policies are pro-poor. The programme did not include a gender analysis. Gender equality has not been mainstreamed or targeted by the programme and consequently gender issues have not been prominent in the implementation.

3.4 EFFICIENCY

Adequacy of resources, equipment and budget support were overall positively evaluated. Overall cost-effectiveness of CDP is found inadequate due to lack of full achievements of a number of outcomes, lack of progress in improving the APRs and lack of progress in analysis and dissemination of M&E information.

Overall, the evaluators find that SIPU has made considerable effort to support MED in implementing the CDP. Relations seem to have been strained at times and less efficient according to interviews with MED staff, which contributed to the difficulties in achieving some of the outputs.

MED had initial difficulties, mostly due to under-staffing; to assume responsibilities according to the work plans, but gradually became stronger when receiving more staff, particularly with the engagement of a Project Director in June 2013. The main

strength that benefitted programme implementation is the dedicated staff of MED. However, MED does not seem to have used the capacities of the staff to properly report on outputs, much less outcomes of the CDP programme.

The implementation has been guided by detailed and appropriate Annual Work Plans and Budgets developed by MED. Semi Annual and Annual Progress reports have reported on the CDP progress. Although the report is mostly activity based, they follow the format of the work plans and give solid information on progress. Reports have remained largely activity based.

3.5 IMPACT

During the inception period, the indicator for impact was defined as the number of quality monitoring and evaluation reports leading to enhanced decision-making at national and at devolved level³². The latest national Annual Progress Report made available to the evaluation team was the report for the financial year 2011/2012, published in 2013, that was not significantly impacted by the CDP. The End term review of MTP I (equivalent to APR for 2012/13) was ready at the time of the evaluation but not published and not made available to the evaluators. There were at the time of the evaluation no reports from the new counties and the interviews and the reports seen from line ministries indicated that ministerial reports still followed the traditional format.

The overall objective is connected to the strengthening of implementation and coordination of NIMES, and this is detailed in the definition of the KRAs. Consequently, if the results of the KRAs are achieved, the possibilities of achieving the overall objective should be good and vice versa. The findings about effectiveness indicate that the overall objective, related to strengthening implementation and coordination of NIMES has not been achieved.

3.6 SUSTAINABILITY

The capacity development through the CDP during only two years of implementation did not have enough impact to institutionalise NIMES. The overall objective of supporting full implementation and coordination of NIMES is far from being achieved. Hence it is not realistic to talk about sustainability of services that have not yet been established.

³² Inception report page 13

The economic sustainability of NIMES is tied to the approval of the National M&E Policy, with its proposal of allocating a set percentage of all government budgets to M&E activities. However, the policy is yet to be resubmitted to the cabinet.

3.7 LESSONS LEARNED

- M&E is not just a technical function, but is inevitably going to be buffeted by political winds. The non-approval of the M&E Policy and the M&E Framework shows that there are political issues involved.
- There is a need for greater realism regarding the establishment of new government structures/institutions as demonstrated by the non-achievement of transforming MED into a Semi-Autonomous Government Agency which is attributed to the change in policy direction by the government regarding the establishment of Semi-Autonomous Government Agencies (SAGAs) that has necessitated a freeze on creation of new SAGAs and possible consolidation of the existing ones.
- Initial delays, as the shortening of the CDP from three to two years of implementation, must be given due attention and expected results should be reviewed against what would be realistic to achieve within the shorter time.
- Embassy assessments of programme impact on the overall objective of Swedish development cooperation regarding people living in poverty and under oppression and their ability to improve their living conditions should be more realistic. To assume that economic growth per-se will contribute to this is not enough.

4 Recommendations

According to the ToR, the evaluation shall give recommendations on how to further strengthen capacity support to NIMES in future, for further enhancement of the national capacity development in M&E. The evaluation shall also issue recommendations regarding possible continued support from Sweden to the CDP including form/modality, areas of emphasis and main outputs and outcomes.

The evaluation team learned that, due several factors that had hampered the achievements of the original project results, there were expectations both from MED and SIPU of a second phase of the CDP. The most important of such factors are the delayed initiation of the project, leaving only around two years for implementation, the unforeseen time consuming processes of developing the M&E Framework and other basic documents, the devolution process that created the counties – still not fully operational, and the change of government that had implications on the approval of the M&E Policy. The evaluation team can see the rationale in continuing with a second phase of CDP, building on what has been done and focus on the universalization of M&E.

Second phase of CDP

Continued support to MED gives an opportunity to “reap the fruits” of the substantial investments in CDP over the last couple of years. There is a need for some support to process and negotiate the M&E Framework. There is a need for strengthening reporting, including more analysis of data. There is also a need for promoting the Second Indicator Handbook. Further support to finalize the ICT strategy, built on the ICT consultant report is needed, as is support to the implementation of the Communication strategy and the finalization of the National Evaluation Plan.

Even if further support is focused on the counties, it will be important to have the central sector ministries and systems supporting the efforts at county level, or there will be a risk of developing county systems that does not feed into national systems, most importantly the APRs that give the national perspective of the development in the country.

What speaks against continued support to MED is the weak performance in achieving the outputs in 2012-2014. In summary, 2 of the outputs have been fully accomplished, 7 outputs have been partially accomplished and 5 outputs have not been accomplished at all. The evaluation report elaborates on the reason for the poor achievements and identifies several challenges as described above.

Direct support to counties

Renewed efforts will be needed to cover counties and could be based on a new capacity building needs assessment at county level. Data collection to feed into NIMES is done at local levels and to get quality and completeness in the data that feeds in to the system. Great efforts are needed to train people at the local levels. It is equally important that data is owned and used at local level. There should be sufficient capacity to analyze the data at local/county level for their own purposes, planning, monitoring and decision making. In order to compile data for the country, there must be an agreed format, following the Second Indicator handbook.

To support counties, Sweden could join a World Bank project currently being piloted in some counties³³. The project is planned to be implemented through a secretariat within the Council of Governors. The World Bank is discussing collaboration with USAID, Finland and Denmark and would welcome Sweden to join in providing grant funding. A trust fund will be established and the World Bank will be responsible for the financial oversight of the fund. The details of the project were not defined at the time of the evaluation. . The demand for information should also be strengthened, including through CSOs and other intermediaries.

4.1 RECOMMENDATIONS TO MODP

- Given the fact that the two most basic documents for the implementation of NIMES, the M&E Policy and the M&E Framework, have not yet been approved, MED should focus on providing information to policy makers on the value of M&E so that they may make more informed decisions about how to proceed.
- A nationwide capacity development strategy and plan for M&E should be developed, based on the 2012 Situation and Needs analysis. The strategy should include identifying and support capacitating of training institutions, public or private, covering the whole country.
- Communication and dissemination of information and analyses for planning, budgeting and decision-making, based on the information collected through NIMES, should be strengthened and the Communication strategy should be implemented in full.
- The ICT strategy should be developed and the MED website should be re-vamped and documents uploaded on a regular basis.

³³ M&E of County Integrated Development Plan (CIDP) implementation.

4.2 RECOMMENDATIONS TO SIDA

- Continued support to MED is still needed, including support to organisational development, but a pre-requisite for any future support is that greater ownership and connection to the political level can be demonstrated in relation to the approval and implementation of the M&E Policy and the M&E Framework.
- Support should be provided for M&E capacity development directly to the county level, possibly through a joint trust fund with World Bank to build on the early results of the current World Bank county project as well as to ensure a harmonized approach.

Annex 1 – Terms of reference

TERMS OF REFERENCE FOR FINAL EVALUATION OF THE NATIONAL INTEGRATED MONITORING AND EVALUATION SYSTEM (NIMES) CAPACITY DEVELOPMENT PROJECT

1. BACKGROUND

The Overarching vision of Kenya's development blueprint, the Vision 2030, is a globally competitive and prosperous nation offering high quality of life for all its citizens by the year 2030. It aspires to transform Kenya into a middle income country by the year 2030, and is being implemented through five year plans. The vision, anchored on equity in social, political and economic pillars has identified 120 flagship projects whose implementation is key to its realization. The Government of Kenya (GOK) is currently undertaking reforms in ten key sectors of the economy that form the foundation for socio-political and economic development as enablers for the realization of the vision and the human rights targets, especially the Millennium Development Goals (MDGs) which they contain. Monitoring and Evaluation is fundamental to the successful implementation of the vision and the accompanying five year plans by providing the means for supporting evidence based policy decisions, for evaluating development effectiveness and for making adjustments in implementation as needed. Kenya is in the process of implementing a new constitution enacted in 2010 that vests sovereignty with the people and hold public institutions and leaders accountable for delivery on socio-economic and other rights of the citizen. Monitoring and Evaluation, which is by and large about good governance and accountability, will be key to the realization of the letter and spirit of the new constitution. Demands for an effective and well-functioning national monitoring and evaluation system is therefore urgent and expected to increase.

The government Of Kenya (GOK) established the National Integrated Monitoring and Evaluation System (NIMES) in 2004 to help track the implementation of the then Economic Recovery Strategy (ERS). NIMES has continued to track successive five year medium term plans. The NIMES framework consists of five components: (i) Capacity development and policy coordination, (ii) Qualitative and quantitative data collection and indicator development, (iii) Research and Results analysis, (iv) projects monitoring and evaluation and, (v) Dissemination for advocacy and sensitization. The NIMES was aimed at strengthening the existing M&E systems, and ensuring better coordination and harmonization between the existing systems to enhance stronger governance arrangements across government sectors and institutions- all focused on

V2030 results and targets which are complemented by reforms in other sectors. It provides anchorage for the Results based management initiatives

In order to strengthen the NIMES system, the Government developed the Capacity Development Project (CDP). The overall objective of the CDP is that;:

The Monitoring and Evaluation Directorate (MED) and key partners are capacitated to carry out real-time M&E purposefully and use results for informed planning to help ensure realization of Vision 2030.

Swedish Support to NIMES

The Government of Kenya initiated a capacity strengthening program for coordinating the National Integrated Monitoring and Evaluation System (**NIMES**). The Government of Sweden identified the program as relevant for poverty reduction and social economic development and, together with Kenya and other partners developed a specific program to support NIMES. This is being done within the framework of the Monitoring and Evaluation Directorate (MED) under the Ministry of Planning, National Development and Vision 2030 (MOPNDV2030). The Support is known as Swedish support to the Capacity Development Programme (CDP) for the operationalization of the National Integrated Monitoring and Evaluation System (NIMES). The objectives of the programme are, to assess, develop and sustain the capacity necessary to ensure the effective implementation and coordination of NIMES to enhance development results. The objective is to be achieved through six Key Result Areas (KRA):

1. M&E framework developed and universalized;
2. Culture of accountability institutionalized through improved capacity for coordination of NIMES;
3. Technical and managerial competencies at the national and devolved levels assessed and strengthened;
4. Timely reporting using ICT in the production of M&E instruments;
5. Multi-sector partnerships to support NIMES implementation established;
6. MED transformed into a Semi-Autonomous Government Agency.

In 2011, Sweden signed a three year agreement with the Government of Kenya to support the CDP. The Ministry of Planning, National Development and Vision2030 through the Monitoring and Evaluation Directorate (MED) has the overall responsibility for the implementation of the programme The total cost of the programme is Kshs. 415 million (equivalent to 41.5MSEK). The total budget input from Sweden is 32MSEK (equivalent to Kshs 320 Million). 22MSEK of the total budget is disbursed directly to government through the Ministry of Finance as revenue to implement work plan activities. The remaining 10MSEK has been allocated to finance the cost of Technical Assistance (TA) and paid directly from the Embassy to the TA Company and reported to Treasury as Appropriation In Aid(A:I:A). The Technical assistance company was procured through an international open and competitive process. SIPU AB from Sweden emerged the winner

2. Objective of the Evaluation

The overall objective of the evaluation is to (i) assess the impact of the Swedish support to the CDP, and (ii) Produce recommendations on how to further strengthen capacity support to NIMES in future.

The objectives are:

- Review the performance of the project in achieving results as per the project document and their contributions to the outcome
- Identify factors, which facilitated or hindered the achievement of results both in terms of the external environment and those internal to MED/Ministry of planning and document lessons learnt in the implementation stages. These should include but not limited to assessing the strengths and weaknesses in project design, management, coordination, human resource, and financial resources.
- To assess and report on the achievements against expected results based on the OECD/DAC evaluation criteria of effectiveness, efficiency, impact, sustainability, relevance, appropriateness, coherence, coverage and aid effectiveness.
- Identify and describe strengths and weaknesses in the strategies/approaches taken and in the planning, implementation and monitoring of the program. Describe problems and solutions to these sought by the program.
- Assess the combination of project budget support and traditional Technical Assistance, the management set up and steering/advisory group structure, financial risk mitigation measures worked.
- To assess the relevance of the technical support of the project management and the MED response and use of the support.
- Based on the experience from the project implementation to extract general lessons learned and recommendations aimed at further enhancement of the national capacity development in M&E;
- Assess and issue recommendations regarding possible continued support to the CDP including form/modality, areas of emphasis and main outputs and outcomes..

3. Evaluation methodology

Based on OECD DAC guidelines for development evaluations, the consultants should develop a suitable methodology for this exercise. The evaluation will be inclusive and participatory, involving all stakeholders into the analysis. The evaluation will consider the social, political and economic context which affects the overall performance of the outcome achievements. During the evaluation, the consultants are expected to apply the following approaches for data collection and analysis.

- Desk Review of relevant documents and reports.

- Key information Interviews with Ministry of planning/MED, SIPU, Embassy of Sweden and other Donors.
- Briefing and Debriefing sessions with Ministry of Planning/MED, M&E Steering Committee, Sweden as well as other donors.
- Interviews with Ministry of Planning/MED, SIPU, Key stakeholders within government (Treasury, Sector ministries, Parliament, Counties etc.), Public administration experts, civil society, Private sector among others.

4. Deliverables

The consultant is expected to deliver four key written outputs as agreed deliverables:

- **Inception Report** produced within two weeks of contract being signed detailing the evaluation team's intended methodologies, activity work plan and structure of the report.
- **Draft Evaluation Report;**
- **Final Evaluation Report** including a 2-3 page executive summary, and with evidence based conclusions on each of the evaluation objectives and lessons learnt. Annexes including among others the Terms of reference for the evaluation as well as a list of questions used during interviews.
- The Evaluators shall present the key findings of the evaluation at a wrap up meeting with GOK and Sida representatives. The Evaluators shall present the draft report a week later and the final report two weeks after.

5. Implementation Arrangements.

Detailed evaluation programme will be developed by the MED together with the Swedish Embassy. Additionally MED will be responsible for setting up meetings with the various stakeholders as well as arranging for any field visits. Key project and other relevant materials will be sent by MED before the start of the fieldwork. The consultants will be briefed by MED and Sida upon signing contracts. An oral debriefing of the proposed work plan will be done and approved prior to the commencement of the evaluation process.

6. Composition, Skills and Experience of the Evaluation Team.

The consultancy team will consist of two International and one national expert with the following expertise.

Team Leader

- Advanced Degree in Economics, Public Administration/management, Law, Political Science, Development studies or related field.
- At least 10 years work experience in public administration
- Approved by Sida as a member of the core team
- Previous team leader experience in conducting evaluations of large central government programmes/Projects
- Fluency in English

- Immediate availability for the indicated period.

International Expert

- Advanced University degree in Economics, Public Administration, Law, Development studies or related field
- At least 7 years' experience working on Public administration issues

National Expert

- Advanced University Degree in Economics, Public Administration, Law, Development studies or related field.
- At least 10 years' working experience in Public Administration in Kenya or other African Countries in the ministries of Finance and or Planning..
- Sound understanding of the specifics and developments and policies in public sector reforms in Kenya specifically Planning, budgeting, Performance management and Monitoring and Evaluation.

7. Evaluation Governance Arrangements.

The recruitment of the consultant will be undertaken by the Swedish Embassy from companies with framework agreements with Sida in the area of Monitoring and Evaluation. The current framework is a ranked arrangement where firms must be considered in order of their rank.

A review group comprising the MED, World Bank and Sida will review the responsiveness of the proposal by the top ranked firm to the Terms of Reference and the reasonableness of the proposed budget. If for any reasons the review team finds it unresponsive the next ranked firm will be considered. The firms in order or rank are:

1. Indvelop AB
2. SIPU International AB
3. Orgut Consulting AB

Since SIPU International AB is providing TA to the CDP and will therefore be a subject of evaluation, they are disqualified from undertaking the assignment. Orgut Consulting AB is the next in rank for purposes of this evaluation only.

8. Timeframe

The assignment is expected to commence on 15th July 2014. The detailed schedule of the Evaluation and the length of the assignment will be discussed with the consultants prior to the assignment. The estimated duration of consultants' assignment is 20 days for the team leader and 15 days each for the other two consultants. The final report should be delivered by 15th August 2014.

Annex 2 – Inception Report

1 Assessment of Scope of the Evaluation

1.1 BACKGROUND AND CONTEXT

The Overarching vision of Kenya's development blueprint, the Vision 2030, aspires to transform Kenya into a middle income country by the year 2030, and is being implemented through five year plans. The implementation of the Vision 2030 and the recent promulgation of a new constitution have presented new M&E demands from a capacity perspective. The Government of Kenya (GOK) is currently undertaking reforms in ten key sectors of the economy for the realization of the vision and the human rights targets, especially the Millennium Development Goals (MDGs).

Monitoring and Evaluation is fundamental to the successful implementation of the vision and the accompanying five year plans by providing the means for supporting evidence-based policy decisions, for evaluating development effectiveness and for making adjustments in implementation as needed. Monitoring and Evaluation, which is by and large about good governance and accountability, will be key to the realization of the new constitution enacted in 2010. Demands for an effective and well-functioning national monitoring and evaluation system are therefore urgent and expected to increase.

The GOK established the National Integrated Monitoring and Evaluation System (NIMES) in 2004 to help track the implementation of the then Economic Recovery Strategy (ERS). NIMES has continued to track successive five year medium term plans. The NIMES framework consists of five components: (i) Capacity development and policy coordination, (ii) Qualitative and quantitative data collection and indicator development, (iii) Research and Results analysis, (iv) projects monitoring and evaluation and, (v) Dissemination for advocacy and sensitization.

1.2 THE PROGRAMME

The Government of Kenya initiated a capacity strengthening programme for coordinating the National Integrated Monitoring and Evaluation System (**NIMES**). The Government of Sweden identified the programme as relevant for poverty reduction and social economic development and, together with Kenya and other partners developed a specific programme to support NIMES. This is being done within the framework of the Monitoring and Evaluation Directorate (MED) under the Ministry of Devolution and Planning (MDP) then Ministry of Planning, National Development and Vision 2030 (MOPNDV2030). The Support is known as Swedish support to the Capacity Development Programme (CDP) for the operationalization of the National In-

tegrated Monitoring and Evaluation System (NIMES). The objectives of the programme are, to assess, develop and sustain the capacity necessary to ensure the effective implementation and coordination of NIMES to enhance development results.

The overall objective of the CDP is that the Monitoring and Evaluation Directorate (MED) and key partners are capacitated to carry out real-time M&E purposefully and use results for informed planning to help ensure realization of Vision 2030. The objective is to be achieved through six Key Result Areas (KRA) being:

7. M&E framework developed and universalized;
8. Culture of accountability institutionalized through improved capacity for coordination of NIMES;
9. Technical and managerial competencies at the national and devolved levels assessed and strengthened;
10. Timely reporting using ICT in the production of M&E instruments;
11. Multi-sector partnerships to support NIMES implementation established;
12. MED transformed into a Semi-Autonomous Government Agency.

In 2011, Sweden signed a three year agreement with the Government of Kenya to support the CDP. The MDP through the Monitoring and Evaluation Department (MED) has the overall responsibility for the implementation of the programme. The total cost of the programme is Kshs. 415 million (equivalent to 41.5 MSEK). The total budget input from Sweden is 32 MSEK (equivalent to Kshs 320 Million). 22 MSEK of the total budget is disbursed directly to government through the National Treasury as revenue to implement work plan activities. The remaining 10 MSEK has been allocated to finance the cost of Technical Assistance (TA) and paid directly from the Embassy to the TA Company and reported to Treasury as Appropriation In Aid(A:I:A). The Technical assistance company SIPU AB was procured through an international open and competitive process. As far as the evaluators understand, Sweden is the major donor supporting the CDP others being UNICEF, UNFPA, UNDP, WB and GIZ.

1.3 EVALUATION PURPOSE AND OBJECTIVES

The overall objective of the evaluation is to (i) assess the outcome of the Swedish support to the CDP, and (ii) Produce recommendations on how to further strengthen capacity support to NIMES in future. The objectives of the evaluation are:

9. Review the performance of the project in achieving results as per the project document and their contributions to the expected outcomes
10. Identify factors, which facilitated or hindered the achievement of results both in terms of the external environment and those internal to MDP/MED and document lessons learnt in the implementation stages. These should include but not limited to assessing the strengths and weaknesses in project design, management, coordination, human resource, and financial resources.

11. To assess and report on the achievements against expected results based on the OECD/DAC evaluation criteria of effectiveness, efficiency, impact, sustainability, relevance, appropriateness, coherence, coverage and aid effectiveness.
12. Identify and describe strengths and weaknesses in the strategies/approaches taken and in the planning, implementation and monitoring of the programme. Describe problems and solutions to these sought by the programme.
13. Assess the combination of project budget support and traditional Technical Assistance, the management set up and steering/advisory group structure and how financial risk mitigation measures worked.
14. To assess the relevance of the technical support of the project management and the MED response and use of the support.
15. Based on the experience from the project implementation to extract general lessons learnt and recommendations aimed at further enhancement of the national capacity development in M&E;
16. Assess and issue recommendations regarding possible continued support to the CDP including form/modality, areas of emphasis and main outputs and outcomes.

1.4 COMMENTS TO TOR

In this section there is sole focus on the content of the terms of reference and the impact it will have on the assignment at hand. Three different issues are being addressed: evaluation objectives, -criteria and -scope.

As described in chapter 1.3 above, the TOR lists a total of eight *objectives* for the evaluation. And while the evaluators concur with the overall intent of the different objectives, the clarity of some of the objectives could be improved. More specifically, the evaluators assess that objectives two and four are driving at essentially the same purpose. It is therefore proposed that the two evaluation objectives are consolidated into one single objective as follows: “Identify factors, which facilitated or hindered the achievement of results both in terms of the external environment and those internal to MDP/MED document lessons learnt in the implementation stages. These should include but not be limited to assessing the strengths and weaknesses in project design, management, coordination, human resource, and financial resources. Describe problems and solutions to these sought by the programme.”

In terms of evaluation *criteria*, the evaluators believe that the OECD DAC evaluation criteria listed in objective three are designed for the evaluation of humanitarian assistance.³⁴ The appropriateness is seen as redundant with relevance and aid effectiveness

³⁴ See: Beck Tony, ALNAP. *Evaluating humanitarian action using the OECD-DAC criteria*. (2006) Page

and coherence will be dealt with as sub-topics under relevance; and coverage under effectiveness. It is therefore proposed to use the five OECD DAC criteria for the evaluation of development assistance; namely: relevance, efficiency, effectiveness, impact and sustainability.

Related to the issue of evaluation criteria, is the issue of evaluation scope and in particular the inherent difficulties of assessing impact and sustainability. For the CDP this challenge is compounded by the recent nature of the assistance to be evaluated: the project was only launched in 2011. Moreover, the review of the background project documentation has revealed some problems with the intervention logic of the project in terms of e.g. consistency in number and content of Key Result Areas (KRA), and unclear causal links between inputs and impact in the form of a fully developed logical framework. However, a finite number of KRA and an overall objective had to be formulated for the evaluation. Hence in the evaluation framework presented in chapter 2, the evaluators have developed evaluation questions and indicators based on the latest project report available over and above the data made available in the TOR and the project document. The evaluation will also assess the KRAs developed by the project and analyse to what extent they have been achieved.

2 Evaluation Framework

2.1 EVALUATION METHODOLOGY

As identified in chapter 1.4, the five criteria proposed as basis for the evaluation are OECD DAC's standard criteria for the evaluation of development assistance, namely: relevance, efficiency, effectiveness, impact, and sustainability.³⁵

The formulation of the evaluation questions are guided by two sources: the overall evaluation objectives and the latest project documentation. Further to the latter, the evaluators have applied the Semi-Annual CDP Report of February 2014 as basis for identified Key Results Areas for evaluation under effectiveness. Moreover, the overall (assumed) impact objective from the same report has been applied. Detailed questions and indicators are listed in the Evaluation matrix in Section 2.2 below.

Indicators have been identified per evaluation question with the aim of applying both quantitative and qualitative measures for results as feasible.

³⁵ See also: <http://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

Per indicator, information sources have been identified in the form of e.g.: political economy studies, institutional assessments, Swedish and Kenyan policies and strategies, progress reports, workshop evaluations, CDP/NIMES budgets and minutes of committee meetings. Moreover a range of stakeholder interviews are planned such as interviews with: MED/Embassy/SIPU staff, PITC/NSC committee members, and M&E committee's members of line ministries and district/county.

For assessing the *effectiveness* of the programme, we are using the programme key result areas as the outcomes of the programme and will assess the outputs formulated by the programme under each key area/outcome. Information will be sought in the progress reports, in interviews with MED/Embassy of Sweden /SIPU staff and through observations and interviews with other ministries and during the field trip to some districts. One of the evaluation questions is if selected partnerships are contributing to programme results (see the Evaluation matrix below, point 1.3). It is unclear to the evaluators what selected partnerships this refers to. These selected partnerships need to be defined.

For assessing the evaluation questions on *relevance*, the evaluators have formulated a number of indicators (see the Evaluation matrix below, point 2.). Document reviews will give information to assess several indicators related to the design of the project and to policies and strategies of Kenya and Sweden. This will be complemented by interviews.

The *efficiency* questions will be assessed through progress reports, both from MED and SIPU, and other documents about the implementation. The evaluators will look into timeliness of release of funding from Embassy or National Treasury vs production of MED products and M&E reports. This coupled with adherence to approved work plans has according to MED been a major concern to a number of implementers/stakeholders

The programme design will be evaluated to understand whether the system of components was effective for programme delivery and whether a different design might have improved its effectiveness and efficiency. Specific questions may include if the programme's theory of change was sound and what were the consequences of designing the programme's components as inter-dependent, both in terms of implementation and outcome.

The evaluation will assess whether resources were used appropriately and economically to produce the desired results and if the programme is accountable and transparent in the use of resources.

The evaluation will also look at whether efficient structures have been developed so as to create conditions for the functionality and coordination of NIMES.

The evaluation will also attempt to do a comparative cost-analysis of capacity development activities with similar activities (as feasible), i.e. costs for training and costs

for seminars and other capacity development activities. The efficiency of the Project Implementation and Technical Committee (PITC), the M&E National Steering Committee (NSC) and the SIPU project management will be assessed according to the Evaluation framework below.

A full impact evaluation is not contemplated in light of the budget and time constraints that the team has been requested to work within, as well as the relatively short period of time since the start of the project in 2011. For this reason, we do not expect to be able to ascertain whether the intervention has had a lasting effect on key stakeholders, similarly, the team will not be in a position to assess any longer-term structural effects the programme may have brought to individuals and institutions. The expected *impact* of the project is derived from the semi-annual report of Feb 2014 and the following evaluation question has been formulated: *To what degree has CDP contributed to the implementation and coordination of NIMES at both national and devolved levels.* This will be assessed, as far as possible, by number of quality monitoring and evaluation reports leading to enhanced decision making at national and at devolved level. Decision makers and key stakeholders will be interviewed.

To respond to the issue of *sustainability*, institutional and financial sustainability will be assessed as outlined in the evaluation matrix. The evaluation will also assess whether MED and other organizations have developed the financial, human and technical capacity and motivation to continue activities/interventions and if the programme activities/interventions can become self-sustaining financially in the absence of continued support. A prerequisite for sustainability is ownership and this will be analysed as part of the assessment.

2.2 EVALUATION MATRIX

Below is presented the evaluation matrix forming the basis for the evaluation identifying evaluation questions, indicators and sources per evaluation criteria.

Table 1 Evaluation Matrix

Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
A. Criteria: Effectiveness		
Issue: “The extent to which the development intervention’s objectives were achieved, or are expected to be achieved, taking into account their relative importance”		
1.1 Is the intervention logic appropriate to reach the CDP objectives?	Causal links between actions implemented and expected results are identified.	Desk study of CDP documentation Analysis of context data
1.2 Has the CDP reached its objectives?		
1.2.1 CDP activities are contributing to the development and universalization of M&E tools/framework.	Output 1 , M&E tools developed: A number of tools(what tools?) are developed and standardized; A number of monitoring and evaluation instruments (what instruments?) have been pre-	Desk study of Progress reports. Interviews with MED staff, SIPU and planning units. Analysis of the M&E Framework document

	pared using M&E tools. Tools and instruments are used. An M&E framework is documented, including description of tools and instruments, indicators and processes.	
1.2.2 A culture of accountability institutionalized through improved capacity for coordination of NIMES.	Output 2.1, M&E Policy operationalized: An M&E Policy document is approved. Output 2.2, M&E functions institutionalized among state and non-state actors: 47 counties engaged, trained and equipped for NIMES. Output 2.3, framework for Programme evaluation: A number of evaluations conducted on public programs annually. Output 2.4, County Peer review mechanism developed: Guidelines developed on how to conduct County peer review; A number of County peer review report published. Output 2.5, Establish at least 1 institution for technical training in each county: A number of technical training institutions offering M&E training existing in each county. Output 2.6, NIMES communication strategy implemented: A number of IEC materials produced and disseminated (and evaluated).	M&E Policy approved, disseminated and in use. Desk study of Progress reports and interviews with MED, SIPU and planning units at county level. Document on Framework for Programme evaluation and Programme evaluation reports. Study the efforts to create a National Evaluation Plan, which was attempted as a first step. Guidelines on County Peer review. County Peer review reports. Desk study of Progress reports. Interviews with MED and SIPU. Evidence of trainings conducted. Interviews with MED and SIPU. Review of IEC material.
1.2.3 Technical and managerial competencies have been strengthened at national and devolved levels.	Output 3.1, capacity needs assessed and situation analysis report produced. Output 3.2, MED strengthened to coordinate national and devolved levels M&E system effectively: MED staff and Central Planning and Monitoring Units (CPPMUs) provided with necessary skills and equipments; NIMES ICT strategy has been developed.	Progress reports, needs assessment reports and situation analysis reports. Desk study of Progress reports. Training reports and reports from study tours. Interviews with MED, SIPU and CPPMU staff.
1.2.4 Reporting, data dissemination, sharing and feedback across all levels using ICT aligned to NIMES.	Output 4.1, framework for Free Access and Exchange of data and information improved: A number of institutions and officers able to upload e-ProMIS; A number of projects uploaded in the e-ProMIS; A number of NIMES indicators updated with recent data in KENINFO and e-PROMIS; A number of M&E reports prepared using the systems; A number of gender indicators updated in KENINFO; A number of Human rights indicators updated in KENINFO. Output 4.2, framework for M&E supported by GIS developed and operationalized.	Desk review of Progress reports. And draft/final reviewed guidelines for M&E indicators Interviews with MED, SIPU and staff responsible for KENINFO. Interviews with MED, SIPU and GIS responsible staff.
1.2.5 A multi-sectoral partnership to support NIMES implementation established.	Output 5.1, M&E partnership platform established: A number of working partnership platforms	Interviews with MED and SIPU.

	have been established. Output 5.2 , resources have been mobilized for M&E: Additional funding requested, approved and mobilized.	Interviews with MED and SIPU. Budgets.
1.2.6 Is MED transformed into a Semi-Autonomous Government Agency (SAGA).	Output 6.1, Kenya Monitoring and Evaluation Authority (KeMEA) established:	Progress reports and interviews with MED and SIPU. M%E Act approved and gazetted. Board members recruited.
1.2.7 Is the overall objective of strengthen the implementation and coordination of NIMES at both national and devolved levels in Kenya achieved?	No indicators have been defined. The evaluators define a well functioning M&E system as a system that produces timely, correct and valuable information for decision making.	Interviews with MED, SIPU and stakeholders.
1.3 Are selected partnerships contributing to programme results?	It is unclear to the evaluators what selected partnerships this refers to. These selected partnerships need to be defined	

B. Criteria: Relevance

Issue: “The extent to which the objectives of a development intervention are consistent with beneficiaries’ requirements, country needs, global priorities and partners’ and donors’ policies”

Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
2.1 Did the Capacity Development Project (CDP) design build upon overall context analysis, included identified needs of beneficiaries?	Existence of ex ante country assessments of the context and of the specificities guiding accountability needs including the Open Government initiative Percentage of stakeholders declare that the CDP answers to their needs	Analysis of ex ante assessments and other studies Interviews with stakeholders
2.2 Were factors external and internal to the CDP reflected in the project design?	Existence of ex ante political economy studies Existence of an ex ante institutional assessment of MED Percentage of beneficiaries interviewed declaring that the project fulfils their needs.	Analysis of ex ante assessments and other studies Interviews with stakeholders
2.3 Did changes in the implementation vis-à-vis original CDP design respond to the changing needs of the partner and the context?	Existence of shifts in activities due to changing needs and opportunities including changing harmonization needs Analysis of the shifting role of NIMES in relation to aid effectiveness	Analysis of CDP status reports, reviews Interviews with stakeholders
2.4 Relevance in relation to Kenyan policies, strategies and reform programs.	Alignment between CDP objective and relevant Kenyan policies, strategies and reform programs	Analysis of relevant policies/strategies/programs Interviews with stakeholders
2.5 Relevance in relation to Swedish policies and cooperation strategy for Kenya.	Alignment between CDP objective and Swedish policies and cooperation strategy for Kenya	Analysis of relevant policies/strategies/programs Interviews with Embassy staff

C. Criteria: Efficiency

Issue: “A measure of how economically resources/inputs (funds, expertise, time.) are converted to results”

Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
3.1 Were the resources applied in a timely manner?	Timely delivery of equipment Timely distribution of budget support Timely allocation of human resources	Analysis of SIPU/NIMES progress reports Interviews with MED/SIPU/Embassy staff
3.2 Were adequate resources applied?	Level of budget support vis-à-vis stated needs Quality of technical assistance	Analysis of MED budgets and requests for funding, Assessment of balance between the three budget components, i.e. MED, Sida/CDP and SIPU components, both in budget and outcome. Analysis of beneficiary evaluation reports of training events Interviews with MED, beneficiaries (line ministries, district/county M&E committees), Embassy/WB project manager, and SIPU staff
3.3 Were implementing arrangements cost-effective	MED budget spending is well argued for Comparative cost-analysis of capacity development activities with similar activities (as feasible)	Analysis of MED budgets and budget support review reports Cost analysis of comparable training activities Interviews with MED/SIPU/Embassy of Sweden staff
3.4 To what extent were institutional procedures appropriate and efficient?	Functionality of the Project Implementation and Technical Committee (PITC) in terms of early detection of CDP implementation problems and correction in a timely manner Functionality of the M&E National Steering Committee (NSC) in terms of quality policy advice including on the coordination with other accountability initiatives. Functionality of SIPU project management in terms of timely and adequate reporting Functionality of CDP financial risk mitigation measures in terms of adequacy Functionality of government procedures-procurement –Ministerial Tender committees and accounts	Review of committee minutes and CDP progress reports Interviews with PITC/NSC members, MED/SIPU/Embassy staff
D. Criteria: Impact		

Issue: "The positive and negative, primary and secondary long-term effects produced by a development intervention, directly or indirectly, intended or unintended"

	Indicators (quantitative/qualitative)	Sources
4.1 To what degree has CDP contributed to the implementation and coordination of NIMES at both national and devolved level? ³⁶	Number of quality monitoring and evaluation reports leading to enhanced decision making at national and at devolved level	Review of MED, and beneficiary (line ministries, district/county M&E committees) M&E reports Interview with partner, beneficiaries and donors

E. Criteria: Sustainability

Issue: "The continuation of benefits from a development intervention after major development assistance has been completed. Probability of long-term benefits. The resilience to risk of the net benefit flows over time."

Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
How likely is the institutional sustainability of NIMES in terms of quality services?	Partners (Key stakeholders within government: Treasury, Sector ministries, Parliament, Counties) show clear uptake of tools and methods; and ownership of activities and results Key users have taken up M&E finding.	Review of recent political economy studies as available Interviews with MED, beneficiaries (line ministries, district/county M&E committees), SIPU, donors
How likely is the adequate economic sustainability of NIMES?	Willingness of Government of Kenya for continued financial support for NIMES in the absence of donor funding Efforts undertaken to obtain alternative sources of income?	Interviews with MED, beneficiaries (line ministries, district/county M&E committees), Ministry of Finance (MoF), donors

3. Evaluation Approach

3.1 DESIGN OF THE EVALUATION

The evaluation will have three phases, inception phase, data collection phase and the analysis and reporting phase.

The inception phase has been used to finalise the methodology and work plan, undertake a preliminary document review and develop a preliminary evaluation framework.

³⁶ Objective is lifted from semi-annual report of Feb 2014

The primary sources of written material include the documents listed in Annex 4. Documents have been received from MED during the inception period. They have been analyzed as part of the initial desk study. The draft inception report has been sent to MED and the Embassy. The inception report constitutes an agreement on how to proceed with the evaluation.

The data collection phase will include one field trip to Kenya for fact finding and interviews. The proposed preliminary work plan for the fieldwork is attached as Annex 5 and a time schedule for the entire evaluation can be found in Annex 6. Implementing organizations and stakeholders in counties will be engaged in the evaluation through structured interviews individually and/or in groups and through self-assessments of capacity building achievements.

Data and information that has been collected will be analysed after the field trip and a draft evaluation report will be sent to MED and the Embassy at the latest on 23 September 2014.

3.2 DATA COLLECTION, SOURCES OF INFORMATION, ANALYSIS

The field visit will start with a briefing session with the MDP/MED, M&E Steering Committee and the Embassy.

The evaluators will also visit some counties to get information on the use of NIMES at the devolved level. Within the limited time allocated to the evaluation, the evaluation team will split up and the three members will try to visit 2 counties each. Counties will be selected based on performance regarding uptake of NIMES, regional balance. At least three different regions will be visited. The final selection will also be based on travel time for the evaluators.

A combination of quantitative and qualitative methods will be used for the collection of data and information including the following:

- Desk review of documents, plans, minutes and reports;
- Analysis of primary and secondary data from the M&E system, from implementing organisations, plans, budgets and reports and of relevant databases and information systems;
- Formal and informal individual and group interviews, using semi-structured discussion guidelines with consented informants to obtain a wide range of informants' perceptions;

It is expected that the evaluation methodology will be largely qualitative, and will not seek to replicate the data already collected in Progress reports and other reports. The data that will be collected is defined in Annex 2. In order to meet the objective of the assignment, a variety of methods will be used as described above. Data will be collected from MED, and from other stakeholders. A number of documents have been received during the inception period. They have been analyzed as part of the initial desk study. The remaining documents that will be needed are expected to be made available by the MED when the team arrives.

The evaluators will do a summary assessment of the quality of M&E reports through analysing a selection of reports according to the criteria of credibility, timeliness, completeness and utility (i.e. for decision making). Key stakeholders/users will be interviewed or asked to do a self-assessment about their perceptions and experiences using the same criteria, using the following matrix:

Table 1. Matrix for summary assessment of the quality of M&E reports

Assessment	I totally agree	I agree	I neither agree or disagree	I disagree	I totally disagree
1. The information in the M&E reports is generally accurate.					
2. The information in the M&E reports includes data from all counties.					
3. The information in the M&E reports includes information on all indicators.					
4. M&E reports are delivered according to schedule.					
5. M&E reports are distributed to other ministries and devolved units in a timely fashion.					
6. M&E reports are used for decision making.					
7. M&E reports are used for planning purposes.					

Different sampling methods can be used and will be determined when developing the detailed plan for the field work. It will be important to allow for the identification of ‘key informants’, representing the target groups and relevant stakeholders.

As with all evaluations, it is important that respondents express their views openly and without prejudice. The tone and openness of the discussions will be established from the outset by the evaluators (supported by donors if present). The purpose of evaluations and the potential for learning and improvement will be emphasized. The evaluators will make it clear that they are independent evaluators (and not employees of any donor organization), and that the final assessment and findings will be theirs.

At the outset respondents will be informed about the purpose of the evaluation, and that opinions expressed will be treated sensitively. Senior officials and those in positions of authority will be asked whether they do not mind being quoted, but that in the main, quotes will not be attributed to particular individuals. Judgments and views expressed will be those of the authors interpreted from information received from

respondents. If matters of particular sensitivity arise, complete confidence will need to be given to sources, and such matters will be raised with the donor in the first instance. It will be important to the evaluation process to establish conditions that encourage open and frank dialogue, as this is essential to the sharing of ideas. A tentative list of organizations and persons to be interviewed is annexed in Annex 6. The evaluation team will present and discuss the preliminary findings in a de-briefing workshop with the MDP/MED, M&E Steering Committee, the Embassy of Sweden as well as other donors at the end of the data collection phase.

After the field work the evaluation team will proceed with the data analysis and reporting.

In order to elicit and interpret the meaning of what has been read, seen and heard, to reduce bias, and to obtain a more ‘holistic’ view of the implementation and monitoring of the Project, different forms of triangulation will be used, comparing a variety of data from different sources (*data triangulation*) and using different methods (*methodological triangulation*).

The evaluation team will develop the draft report which will be shared with the Embassy, GOK and other stakeholders for comments. The report will be finalised taking the feedback into consideration. The report will be written in English and will include an Executive Summary. Be submitted in both hard and soft copies.

3.3 WORK PLAN

The agreed work plan is presented below.

Table 2: Milestones and deliverables 2014

Inception work	14 - 30 July
Submission of Draft Inception report	31 July
Review by MED and the Embassy,	1 - 12 August
Consolidated comments on Inception report	12 August
Finalization of Inception report	13 – 15 August
Finalisation of schedule for field work	18 - 22 August
In-country missions	25 August – 5 September
Wrap-up meeting	5 September
Drafting the report and quality assurance,	8 - 23 September
Submission of draft report	23 September
Comments on draft report	30 September
Work on final report and final quality assurance	1 - 6 October
Final report submitted	7 October

According to TOR, MED will be responsible for setting up meetings with the various stakeholders as well as arranging for any field visits.” We will seek the advice of MED in selecting the counties and line ministries to be visited by the evaluation team.

3.4 THE USE OF THE EVALUATION

The evaluation will assess the impact of the Swedish support to the CDP, and produce recommendations on how to further strengthen capacity support to NIMES in future.

We also understand that the Embassy is considering possible continued support to the CDP and that recommendations should include form/modality, areas of emphasis and main outputs and outcomes of a possible future support.

3.5 LIMITATIONS

The limited time for the evaluation limits the possibility to visit the devolved level, although the team will split up and visit at least 6 counties to assess the uptake and use of M&E tools and methods.

The limited time for the evaluation does not make it feasible to do an in-depth assessment of the quality of the M&E reports, although the team will conduct a summary ICU (Independence, Credibility, Utility) assessment of selected reports combined with interviews.

Related to the issue of evaluation criteria, is the inherent difficulty of assessing impact and sustainability. For the CDP this challenge is compounded by the recent nature of the assistance to be evaluated: the project was only launched in 2011 and the project actually commenced in December 2012 based on the completion assessment exercise done July/August 2012.

4. Other issues and recommendations

4.1 QUALITY ASSURANCE

Quality Assurance (QA) and back-stopping will be provided by Indevlop: Ian Christoplos will provide Quality Assurance and technical support; Katarina Norderstål (Project Administrator) will provide logistics and administration support; Sarah Gharbi (Project Manager) will provide management and co-ordination, and liaison with the Embassy. The evaluation will comply with Sida's Evaluation Guidelines 2010.

4.2 FIELD TEAM

The field team will comprise Bernt Andersson, Rikke Ingrid Jensen and Harriet Naitore. The team will work together on all aspects of the evaluation, but each team member will have specific responsibilities for different sets of the evaluation questions.

The field team members will adopt a flexible approach, which will require them to work independently at times in order to consult with as wide a range of stakeholders as possible. However findings will be shared and agreed, through continuous dialogue between team members and this will ensure that conclusions reached are considered, well founded, and arrived at through consensus of opinions.

Annex 3 – Questionnaire for Counties and Line Ministries interviews

Evaluation questions (EQ)	Detailed evaluation questions	Documents to be seen at the County/Ministry
D. Criteria: Effectiveness		
1.2 Has the CDP reached its objectives?		
1.2.1 CDP activities are contributing to the development and universalization of M&E tools/framework.	Output 1, M&E tools developed: 1. What are the documents guiding your M&E work?	Evidence of documents (M&E Plan, M&E Framework, M&E Strategy, Handbook of Indicators).
1.2.2 A culture of accountability institutionalized through improved capacity for coordination of NIMES.	Output 2.1, M&E Policy operationalized: 2. Has the M&E Policy been disseminated to you? 3. What use do you have of the policy? Output 2.2, M&E functions institutionalized among state and non-state actors: 4. Have this County/Ministry been engaged, trained and equipped for NIMES? Output 2.3, framework for Programme evaluation: 5. Have any evaluations been conducted on public programs? Output 2.4, County Peer review mechanism developed: 6. Do you have the Guidelines developed on how to conduct County peer review? 7. Have you done any County peer reviews and published reports? Output 2.5, Establish at least 1 institution for technical training in each	M&E Policy Framework for Programme evaluation Evaluation reports Country Peer Review Guidelines Published County Peer Reviews Training curriculum ICT material received

	County: 8. Are there a number of technical training institutions offering M&E training existing in the County?	
	Output 2.6, NIMES communication strategy implemented: 9. What IEC materials have been disseminated to you?	
1.2.3 Technical and managerial competencies have been strengthened at national and devolved levels.	Output 3.1, capacity needs assessed and situation analysis report produced. 10. Is there a needs assessment for this County/Ministry? 11. What training has the staff had?	County/Ministry Needs Assessments
1.2.5 A multi-sectoral partnership to support NIMES implementation established.	Output 5.2, resources have been mobilized for M&E to the County/Ministry? 12. Additional funding requested, approved and mobilized to the County/Ministry?	
1.2.7 Is the overall objective of strengthen the implementation and co-ordination of NIMES at both national and devolved levels in Kenya achieved?	13. Are you happy with the process within the County/Ministry to produce you reports? 14. Are the reports complete with data from all units, departments and organizations in the County/Ministry? 15. Are you able to deliver the reports in a timely manner? - What feed-back do you get from MED?	County Annual M&E reports (CAMER) Ministerial M&E Reports
E. Criteria: Relevance		
Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
2.1 Did the Capacity Development Project (CDP) design build upon overall context analysis, included identified needs of benefi-	16. Does the CDP answers to needs in the County/Ministry?	

ciaries?

F. Criteria: Efficiency

Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
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17. Timely delivery of equipment?

3.1 Were the resources applied in a timely manner?

18. Timely distribution of budget support?

19. Timely allocation of human resources?

D. Criteria: Impact

Evaluation questions (EQ)	Indicators (quantitative/qualitative)	Sources
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4.1 To what degree has CDP contributed to the implementation and coordination of NIMES at both national and devolved level?³⁷

Number of quality monitoring and evaluation reports leading to enhanced decision making at national and at devolved level.

20. What use do you have of the M&E reports?

21. For decision making?

22. What else would you like to tell us?

³⁷ Objective is lifted from semi-annual report of Feb 2014

Annex 4 – Follow-up on the Framework for the Implementation of Capacity Development Programme for the NIMES

No.	Results Area	Outputs	Output Indicators	Achievements
1.	Developed and universalized M&E tools	1.1 M&E tools developed	(1.1.1) No of tools developed and standardized (1.1.2) No. of <u>monitoring and evaluation</u> instruments prepared using M&E tools	The M&E framework document was finalized in February 2014 and the Second Indicator Handbook in July 2014. The expected result of universalizing them has not been achieved, since the M&E framework is not yet approved and the Indicator Handbook was not widely disseminated and used at the time of the evaluation. The output is partly achieved.
2.	Institutionalized culture of accountability through improved capacity for coordination of NIMES	2.1 M&E policy operationalized	(2.1.1) Approved M&E policy document	A National M&E Policy was finalized in 2012. After the elections in 2012, the new government has not yet approved the policy. At the time of the evaluation. The policy was re-submitted to MODP in 3013., but, there were no efforts underway to revise the policy and submit it to the cabinet. The output is partly achieved.

No.	Results Area	Outputs	Output Indicators	Achievements
		2.2 Institutionalization of M&E functions among state and non-state actors	(2.2.1) No. of Counties engaged (2.2.2) No. of Institutions engaged (2.2.3) No. of trainings conducted on M&E and NIMES	All counties have been engaged in capacity building activities, mostly trainings. A number of trainings have been conducted, like the e-ProMIS training for DDOs/CDPOs and PDPs with 104 participants, the M&E trainings of 35 government staff from ministries, counties and MED at Kenya School of Government on Result-Based M&E, the training of 80 people on Gender responsive M&E through the support of UN Women, the 1-day Sensitization forums on establishment of M&E system in counties for County government Executive Committee members and Chief Officers of Planning and Finance, and the 3-day trainings on establishment of M&E systems in counties for Directors from the counties, in April – May 2014. The total number of people participating in the above mentioned trainings are close to 700. The output is partly achieved
		2.3 Framework for Program Evaluation	(2.3.1) No of evaluations conducted on public programs annually.	The National Evaluation Plan is still being developed. Two evaluations have been finalized, one for the Constituency Development fund and one for the Malaria Control Programme. None of the evaluation reports have yet been published. This output is not achieved.
		2.4 County Peer Review mechanism developed	(2.4.1) Guidelines on how to conduct County peer review developed (2.4.2) No. of County peer review reports produced	No guidelines have been developed on how to conduct county peer review and no County peer review reports have been published. This output has not been achieved.
		2.5 Establish at least 1 institution for technical training delivery selected	(2.5.1) No. of technical training institutions offering M&E trainings in each county.	At the time of the evaluation, institutions are still being identified. This output has not been achieved.

No.	Results Area	Outputs	Output Indicators	Achievements
		in each County ³⁸		
		2.6 Implementation of NIMES communication strategy	(2.6.1) No of IEC materials produced	A communication strategy has been developed but not been implemented in full. Some IEC material have been produced, specifically for the M&E weeks This output has been partly achieved.
3	Assess and strengthen technical and managerial competencies at the national and devolved levels.	3.1 Capacity needs assessment and situation analysis report	(3.1.1) No of Needs assessment reports (3.1.2) No of situation analysis reports	A comprehensive situational analysis and needs assessment of NIMES was undertaken in August 2012. In February 2014, a comprehensive ICT situational assessment was undertaken. This output has been achieved.
		3.2 MED strengthened to coordinate national and devolved levels M&E system effectively	(3.2.1) No. of MED staff and in the Central Planning and Projects Monitoring Units (CPPMUs) with the necessary M&E skills (3.2.2) Types and no. of equipments.	A total of 15 individual overseas short training courses have been implemented with the overall objective of enhancing staff's general competencies in M&E. A study tour to Sweden and the Netherlands was conducted in May

³⁸ The Result Area number 3 has been modified whereby the institutionalized training has been moved to Result Area 2(2.4 outputs).

No.	Results Area	Outputs	Output Indicators	Achievements
			(3.2.3) NIMES ICT strategy	2014 for bench-marking of M&E systems at national, regional and local level. All equipment planned for procurement for MED has been purchased: 25 think pads, 3 iPads, 8 laptops, 1 one heavy duty printer, 1 projector, and 2 motor vehicles. The ICT strategy is yet to be formulated. This output has been partly achieved.
4	Timely reporting using ICT in the production of M&E instruments	4.1 Framework for Free Access and Exchange of data and information improved	(4.1.1) No. of institutions and officers able to upload e-ProMIS. (4.1.2) No. of projects uploaded in the e-ProMIS. (4.1.3) No. of NIMES indicators updated with recent data in KENINFO. (4.1.4) No. of M&E reports prepared using the systems. (4.1.5) No. of gender indicators updated in KENINFO. (4.1.6) No. of Human rights indicators updated in KENINFO	Training on e-ProMIS for DDOs/CDPOs and PDPs in Nakuru, Embu, Mombasa and Machakos, with 104 participants. There has been an increase in project upload into e-Promis from 1,400 to 2,400 during a 12 months' period (June 2013 to June 2014). In terms of number of reports prepared using e-PROMIS, however, there is no clear evidence of the achievements The Indicator Handbook 2 includes indicators for both gender and human rights. This output has been partly achieved.
		4.2 Framework for M&E supported by GIS developed	(4.2.1) M&E GIS framework	SIPU developed a GIS project which was rejected by MED. A new and adjusted proposal is yet to be presented by SIPU. This output is not achieved.

No.	Results Area	Outputs	Output Indicators	Achievements
5	Establish multi-sectoral partnerships to support NIMES implementation.	5.1 M&E Partnership platforms ³⁹	(5.1.1) No. of working partnership platforms established	MED is working in partnership with Kenya Community of Practitioners, Kenya Private Sector Association, Kenya 4R, Evaluation Society of Kenya and Knowledge Management Kenya. participation of stakeholders and representatives of several of the partnerships is included in the National Steering committee, the Technical Oversight Committee and the Technical Advisory Groups. M&E weeks conducted in November 2012 (320 participants over a four day period) and November 2013 (520 participants for the four day period). This output is achieved.
		5.2 Resources mobilized for M&E	(5.2.1) Amount of resources mobilized (5.2.2) No. of funding proposals approved.	This output has not materialized awaiting the approval of the M&E policy. This output is not achieved.
6	MED transformed into a Semi-Autonomous Government Agency (SAGA)	7.1 Kenya Monitoring and Evaluation Authority (KeMEA)	(7.1.1) Monitoring and Evaluation act. (7.1.2) Gazettement of M&E Act. (7.1.3) Board members recruited into KeMEA.	The output about the establishment of a Semi-Autonomous M&E Agency has not been achieved.

³⁹ CoPs, CMECs, TAGs, TOC, NSC, Societies, breakfast meetings, regular meetings and forums

Annex 5 – Schedule for field work and persons interviewed

Day	Time	Activity	Participants
Tuesday 26 August	8.00-10.00	Internal consultant meeting	BA, RIJ, HN
	10.30-11.30	Briefing, Embassy of Sweden	Nicholas Imbugwa
	14.00-16.00	Briefing meeting with CDP/MED and SIPU	Nicholas Imbugwa, Samson Machuka, Director and MED staff
Wednesday 27 August	9.00-13.00	Meeting with MED	Samson Machuka, Director,
	14.00-16.30	Meeting with SIPU	Isaiah Eyahonga Baridi Manyasa Peter Muhati
Thursday 28 August	9.00-12.00	Separate meetings with MED staff	Margareth Githinji, Esther Kibuti, Vivianne Simwa, Mr. Peter Nyambok, Peter Nyongesa, Aloyce Rate-mo, Caroline Cheptapok, Grace Owiti, Rodgers Achieng, Charles K. Tanui,, Francis Muteti
	13.30-15.30	Embassy of Sweden	Anders Rönquist, Nicholas Imbug-wa
	18.00-19.30	Kenya Open Data & Government Task Force	Al Kags, Chairman
Friday 29 August	9.00-10.30	Ministry of Education, Jogoo B House	Agnes Koori, Deputy Chief Economist
	11.30-13.00	Ministry of Devolution and Planning, Treasury Building	Beatrice Manyonge, Chief Economist, Benson Kimauri, Chief Economist
Monday 1 September	9.00-10.30	Ministry of Health, Afya House	Elkanah Ong’uti, Chief Economist
	9.00-10.30	Ministry of Devolution and Planning, Treasury building	James Mwanzia, Chief Economist
	11.00-12.30	Ministry of Environment, Water and Natural Resources, Maji House	George Ochieng, Economist, Margaret Egessa, Marion Siona and Rolex Kirui, Economist CPPMU
	14.00-15.30	Nairobi County	Grace Karimi
	16.00-17.00	National Taxpayers Association	Otieno Michael Oloo NTA Advisor, Martin Napisa, National Co-ordinator
Tuesday 2 September	10.00-12.00	Muranga County	Elijah Kinaro
	14.30-16.00	Kenya National Bureau of Statistics, Herufi House	Zachary Mwangi, Ag. Director General
	15.00-16.00	Kenya Private Sector Alliance, 5:th Floor, Shelter Afrique Building	Kennedy S. Okumu, M&E Officer
Wednesday 3 Sept.	8.00-11.00	Transport to Nakuru	
	11.00-13.00	Nakuru County	Shem Siah
Thursday 4	9.00-10.00	WB	Philip Jespersen, Senior social De-

ANNEX 5 –SCHEDULE FOR FIELDWORK AND PEOPLE INTERVIEWED

September			velopment Specialist
	12.30-13.30	MED	David Kiboi, Chief Economist
	13.45-14.30	Ministry of Devolution and Planning	Stephen Wainaina, Economic Planning Secretary/State Department of Planning
	14.00-15.00	National Treasury, Treasury Building	Jackson Kinyanjui, Head of External resources Department
	14.00-15.00	Ministry of Agriculture	Wellington Lubira Samuel Gicheru Moses Mburu
	15.30-16.30	Transition Authority, Extelecoms House, 5:th Floor, Haile Selassie Avenue	Stephen K. Makori, Chief Executive Officer, Grace Chemitei
Friday 5 September	9.00-12.00	Preparation for debriefing	
	13.00-14.30	Debriefing meeting. Embassy of Sweden	Anders Rönquist Nicholas Imbugwa
	14.30-16.00	Internal planning meeting	BA, RIJ, HN
Sunday 7 September		Telephone interview	Finn Hedwall, SIPU

Annex 6 – Time schedule

Preliminary Work Plan “Final Evaluation of the National Integrated Monitoring and Evaluation System (NIMES) Capacity Development Project’																	
							August				September				October		
Tasks	BA	RIJ	HN	W29	W30	W31	W32	W33	W34	W35	W36	W37	W38	W39	W40	W41	W42
Inception work	4	2	1														
Submission Draft Inception Report						31 July											
Review of Inception report																	
Comments on Inception report								12 Aug									
Preparations for field visits																	
Field work including wrap-up meeting	10	10	9														
Report writing	4	3,5	3,5														
Submission Draft Report														23 Sept			
Feedback on Draft Report															30 Sept		
Finalization of the report	2	0,5	0,5														
Submission Final Report																7 Oct	
Total days	20	16	14														
BA = Bermt Andersson; RIJ = Rikke Ingrid Jensen; HN= Harriet Naitore																	

Annex 7 – Documents reviewed

- Assessment memo for support to "A comprehensive Capacity development Programme as Part of the Implementation of the National Integrated Monitoring and Evaluation System (NIMES)
- CDP Work plans 2012 – 2014. MED
- Communication Strategy 2013 – 2017 for The National Integrated Monitoring and Evaluation system (NIMES) April 2013
- Curriculum for trainings
- Inception report. SIPU. November 2011
- Mission Report M&E ICT 03/2014. SIPU International 16 May 2014 (revised 22 June 2014) by Peeter Pruuden
- Monitoring and Evaluation Framework for Kenya. MED. Draft 2014
- National M&E Policy. March 2012.
- National Steering committee Minutes
- NIMES Masterplan September 2010
- Progress reports. MED. July 2012-June 2014
- Proposal to the Embassy of Sweden. Request for specific and targeted support to a comprehensive capacity development programme as part of the implementation of NIMES for Kenya. January 2011
- Report on the NIMES Situational Analysis and Needs Assessment. Dr. Okwach Abagi, Lead Consultant. September 10 2012
- Report of MED/SIPU staff visit to Mombasa and Kwale Counties 27th to 28th February, 2014
- Second Handbook of National Reporting Indicators for the Second Medium-Term Plan 2013-2017 of Kenya Vision 2030. July 2014.
- Strategy for Development Cooperation with Kenya January 2009-December 2013. Ministry for Foreign Affairs. Sweden January 2009.
- TOR for final evaluation of the NIMES Capacity Development Programme
- Training reports 2011 – 2014. MED
- Work Plan to Realize the Sida Funded Project Capacity Development Programme of the Implementation of the National Integrated Monitoring & Evaluation System (NIMES) for Kenya dated February 2012.
- Workshops reports
- Work reports and Annual reports. SIPU. November 2011 - June 2011



Final Evaluation of the National Integrated Monitoring and Evaluation System (NIMES) Capacity Development Project (CDP)

The objective of the project was to develop capacity for implementation and coordination of the National Integrated Monitoring & Evaluation System in Kenya through development of policies, strategies and tools for M&E and through training to strengthen M&E capacity. The main achievements are the development of the M&E Framework and Indicators Handbook, the development of a Communication Strategy and a comprehensive Situational Analysis and Needs assessment. However, several outputs have not been fully achieved. The partial achievements mostly refer to the development of documents that have not been approved or not been implemented. The project has been implemented during a devolution process that created the counties as a new local government unit, replacing the districts. Another challenge has been that key products like the M&E Policy and the M&E framework were developed under one government and after the elections, the government changed and has not yet improved these documents.

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