

Monitoring, Evaluation, Accountability and Learning (MEAL) Policies & Procedures

Policy №.	POL-OOD-002
Applies to:	OverOps Employees
Sponsor:	EVP OverOps
Created On:	04/23/2014
Approved Revision:	08/01/2023 (version 4.0)
Effective Date:	10/01/2023

Purpose:

The purpose of these policies and procedures is to establish a systematic and consistently applied set of requirements for the design, operationalization, implementation and utilization of high-quality monitoring, evaluation, accountability, and learning systems.

Policies & Procedures:

POLICY № 1 - PROJECT MEAL SYSTEM DESIGN

CRS staff engage with our partners to design and develop MEAL systems that optimize equitable community participation; reflect agency, donor, and stakeholder information needs; inform adaptive management and contribute to catalyzing outcomes at scale and influence initiatives.

PROCEDURE № 1.1

Conduct participatory assessment of needs, capacities, and context to inform responsive and quality project design.

To demonstrate compliance, projects must produce the following prior to proposal submission: documentation of assessment findings and/or identification of secondary data or sectoral learning contributing to project design (cross-referenced with MEAL Procedure 6.1).

To demonstrate compliance, emergency responses must produce the following within 60 days of start date: documentation of assessment findings, based on primary and/or secondary data (cross-referenced with MEAL Procedure 6.1).

PROCEDURE № 1.2

Develop a theory of change, results framework and Proframe as part of project design to provide a foundation for a quality MEAL system.

To demonstrate compliance, projects must produce the following prior to proposal submission: Theory of change, Results framework, and Proframe (or Logframe). The Proframe (or Logframe) must include an indicator for active monitoring of feedback and/or

community satisfaction data, on an annual basis at minimum (cross-referenced with MEAL Procedure 6.6).

To demonstrate compliance emergency responses must produce the following within 60 days of start date: Results framework and Proframe (or Logframe). The Proframe (or Logframe) must include an indicator for post-distribution or post-activity monitoring or active monitoring of feedback and/or community satisfaction data, on a quarterly basis at minimum. (cross-referenced with MEAL Procedure 6.6).

PROCEDURE № 1.3

MEAL and Sectoral Advisors review MEAL design documents to improve MEAL quality.

To demonstrate compliance, projects and emergency responses greater than or equal to \$3 million in total value must produce the following prior to proposal submission: Documentation of a review by the regional MEAL advisor review (or global MEAL advisor in the case of global grants or HRD MEAL advisor for emergency responses) or his or her designate of the:

- *Theory of change (project only),*
- *Results framework,*
- *Proframe (or Logframe),*
- *MEAL content in budget (cross-referenced with MEAL Procedure 4.2),*
- *MEAL staffing structure; and*

Documentation of one sectoral advisor review or his or her designate of:

- *Theory of change (project only),*
- *Results framework,*
- *Proframe (or Logframe).*

PROCEDURE № 1.4

Create a MEAL System that meets stakeholder information needs and will inform adaptive management and project and agency learning.

To demonstrate compliance, projects and emergency responses intended to last at least 12 months at start date must provide the following (or donor-specified equivalents) within 120 days of the start date:

- *Data flow map(s),*
- *MEAL content in a detailed implementation plan (DIP),*
- *SMILER+ MEAL support and resources table; Responsibility, Accountability, Consulted or Informed (RACI) table or MEAL responsibilities included in DIP (cross-referenced with MEAL Procedure 5.1),*
- *Learning plan (or equivalent),*
- *Stakeholder communication plan,*
- *MEAL plan, performance indicator reference sheet (PIRS) or performance management plan reflecting all required evaluation events.*

To demonstrate compliance, emergency responses intended to last less than 12 months at start date must produce the following (or donor-specified equivalents) within 120 days of start date:

- *MEAL content in a detailed implementation plan (DIP),*
- *MEAL plan, performance indicator reference sheet (PIRS) or performance management plan reflecting all required evaluation events.*

PROCEDURE № 1.5

Select feedback, complaints and response mechanism channels based on community preferences to enable strong two-way communication.

To demonstrate compliance, projects and emergency responses must provide the following prior to project start date: Documentation of feedback, complaints and response mechanisms channel(s) selected in project or response proposal or SMILER+ FCRM planning worksheet (or equivalent).

POLICY № 2 - PROJECT MONITORING

CRS staff engage with our partners to regularly collect, analyze, reflect upon, and utilize quality monitoring data to inform adaptive management, be responsive to community feedback, and to meet donor requirements.

PROCEDURE № 2.1

Conduct quarterly field visits to communicate with communities and observe anticipated and unanticipated changes in context and social dynamics.

To demonstrate compliance, projects and emergency responses must produce the following within 90 days of the start date and quarterly thereafter: Documentation of purpose(s) of field visit, noting date, location(s), and names of participating CRS staff, and feedback received from community and/or observed changes.

PROCEDURE № 2.2

Conduct annual data quality assessments to identify and address data quality issues.

To demonstrate compliance, projects, and emergency responses of two or more years in length must produce the following within 15 months of the start date and annually thereafter: A completed data quality assessment (DQA) report and action plan stating timeline and responsibilities.

PROCEDURE № 2.3

Contribute to agency global results metrics, including Participant and Service Delivery Indicators and sectoral indicators relevant to project scope and focus.

To demonstrate compliance, projects and emergency responses must produce the following during the reporting period of the prior fiscal year: Submission of data for a minimum set of Participant and Service Delivery Indicators (PSDI) in Gateway; and

To demonstrate compliance, projects and emergency responses must produce the following during the first fiscal year of implementation: completed Global Results 'Opt In / Opt Out' in Gateway.

PROCEDURE № 2.4

Reflect on a quarterly basis with partners on monitoring data and community feedback, disaggregated by gender and key vulnerability characteristics, to inform adaptive management practices and improve program quality.

To demonstrate compliance, projects must produce the following within 180 days of start date and quarterly thereafter: Documentation of the meeting, noting the date, attendees and action plan identifying assigned follow-up responsibilities (cross-referenced with MEAL Procedure 8.1).

To demonstrate compliance, emergency responses must produce the following within 90 days of start date and quarterly thereafter: Documentation of the meeting, noting the date, attendees and action plan identifying assigned follow-up responsibilities (cross-referenced with MEAL Procedure 8.1).

POLICY № 3 - PROJECT EVALUATIONS

CRS staff engage with our partners to conduct rigorous and utilization-focused evaluations that assess relevance, coherence, effectiveness, efficiency, impact, and sustainability and optimize equitable community and stakeholder participation.

PROCEDURE № 3.1

Document baseline values and targets in the indicator performance tracking table (IPTT) to track future progress and capture changes resulting from adaptive management during implementation.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects and emergency responses intended last at least 12 months upon start date must produce the following within 120 days of start date: Baseline values for all quantitative strategic objectives, intermediate results and output indicators in the IPTT (or donor equivalent).

PROCEDURE № 3.2

Develop terms of reference (ToR) for evaluation events which states evaluation questions and data collection methodology, identifies key sub-groups for comparison and plans for sharing findings back with community members and stakeholders.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects and emergency responses must produce the following prior to data collection for all required evaluation events: A ToR which includes evaluation questions, methodology for data collection, sampling methodology, key sub-groups for comparisons and plans for communicating findings with communities and stakeholders.

PROCEDURE № 3.3

MEAL and Sectoral Advisors review evaluation ToRs to improve evaluation quality and ensure appropriateness of evaluation scope and methodology to information needs.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects, or emergency responses greater than or equal to \$3 million in total value must produce the following prior to data collection for all required evaluation events: Documentation of review by a regional MEAL advisor (or global MEAL advisor in the case of global grants, or HRD MEAL advisor for emergency responses) or his or her designate and by a Sectoral Advisor or his or her designate on evaluation ToRs.

PROCEDURE № 3.4

Conduct a mid-term review or evaluation to measure and document project progress, successes, challenges, and failures and to inform programmatic improvements.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects of four years or more in duration must produce the following within 50 percent of project life plus six months: A midterm review or evaluation report uploaded to Gateway (cross-referenced with MEAL Procedure 8.3).

PROCEDURE № 3.5

Conduct a real-time evaluation (RTE) during emergency responses to inform the next phase of the response and contribute to agency learning.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, emergency responses with a combined award greater than or equal to \$1 million in value and an anticipated length of one year or more must produce within 180 days of start date: An RTE report uploaded to Gateway (cross-referenced with MEAL Procedure 8.3).

PROCEDURE № 3.6

Conduct an after-action review or final evaluation to measure and document project progress, successes, challenges, and failures and contribute to larger agency learning.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects and emergency responses must upload the following to Gateway within 90 days of the end of data collection activities, noting the parameters based on total project or response value below: Greater than or equal to \$5 million: External evaluation report; Between \$1 million and \$5 million: Internal or external evaluation report; Less than or equal to \$1 million: After action review report or internal or external evaluation report (cross-referenced with MEAL Procedure 8.3).

PROCEDURE № 3.7

MEAL and Sectoral Advisors review evaluation reports to improve quality and contribute to greater dissemination of learning.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects, or emergency responses greater than or equal to \$3 million in total value must produce the following prior to finalization of reports for all required evaluation events: Documentation of a review by a regional MEAL advisor (or global MEAL advisor in the case of global grants, or HRD MEAL advisor for emergency responses) or his or her designate and by a Sectoral Advisor or his or her designate on evaluation reports.

PROCEDURE № 3.8

Reflect on evaluation findings with community members, partners, and other stakeholders to generate appropriate recommendations and inform agency learning.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects must produce the following prior to posting evaluation reports to Gateway for all required evaluation events: Documentation of the reflection event with partners and stakeholders, noting the date and attendees (cross-referenced with MEAL Procedures 7.2 and 8.2); and documentation of reflection event with community members in one or more project locations, noting the date and number of attendees (cross-referenced with MEAL Procedure 6.5).

To demonstrate compliance, emergency responses must produce the following prior to posting evaluation reports to Gateway for all required evaluation events: Documentation of the reflection event with partners and stakeholders, noting the date and attendees for all required evaluations (cross-referenced with MEAL Procedure 7.2 and 8.2).

POLICY № 4 - PROJECT MEAL BUDGET

CRS staff engage with our partners to budget for MEAL and data management activities to ensure the quality and appropriateness of MEAL data and systems.

PROCEDURE № 4.1

Budget for quality MEAL activities and sufficient staffing for MEAL implementation.

To demonstrate compliance, projects and emergency responses must produce the following as part of proposal submission: A MEAL budget, or a budget for MEAL activities in the overall budget section.

PROCEDURE № 4.2

MEAL Advisors review MEAL budgets to ensure they support quality MEAL practices and appropriate MEAL systems.

To demonstrate compliance, projects, and emergency responses greater than or equal to \$3 million in total value must produce the following prior to proposal submission: Documentation of a review by the regional MEAL advisor (or global MEAL advisor in the case of global grants, or HRD MEAL advisor for emergency responses) or his or her designate of the MEAL budget or MEAL content in the overall budget (cross-referenced with MEAL Procedure 1.3).

POLICY № 5 - MEAL HUMAN RESOURCES

CRS supports its staff and partners to advance the capabilities necessary to implement quality and appropriate MEAL systems and contribute to project and agency learning.

PROCEDURE № 5.1

Allocate appropriate MEAL roles to MEAL and non-MEAL staff for collection, analysis, and use of quality data in adaptive management processes and learning.

To demonstrate compliance, projects and emergency responses must provide the following (or donor-specified equivalents) within 120 days of the start date:

SMILER+ MEAL support and resources table, Responsibility, Accountability, Consulted or Informed (RACI) table or MEAL responsibilities included in DIP (cross-referenced with MEAL Procedure 1.4).

PROCEDURE № 5.2

CRS and partner staff co-implement MEAL activities to contribute to relevance, appropriateness, and ownership of the MEAL system and to capacity strengthening objectives.

To demonstrate compliance, projects which are implementing with partner organizations and greater than or equal to \$3 million in total value must produce the following within 120 days of start date: Plan for co-implementation of one or more MEAL activities by MEAL staff and/or program managers on an annual basis in the project DIP or other documents.

POLICY № 6 - ACCOUNTABILITY TO THE PEOPLE WE SERVE

CRS staff engage with our partners to increase our community accountability by giving voice to the people we serve through participation, open and respectful communication, and feedback,

complaints, and response mechanisms which are responsive to community preferences and in line with the CRS Safeguarding Policy and Safe and Dignified Programming framework.

PROCEDURE № 6.1

Conduct participatory assessment of needs, capacities, and context to inform responsive and quality project design.

To demonstrate compliance, projects must produce the following prior to proposal submission: documentation of assessment findings and/or identification of secondary data or sectoral learning contributing to project design (cross-referenced with MEAL Procedure 1.1).

To demonstrate compliance, emergency responses must produce the following within 60 days of start date: documentation of assessment findings, based on primary and/or secondary data (cross-referenced with MEAL Procedure 1.1).

PROCEDURE № 6.2

Establish feedback, complaints, and response mechanisms (FCRMs) in response to community communication preferences that are accessible to diverse community members and in line with the CRS Safeguarding Policy and Safe and Dignified Programming framework.

To demonstrate compliance, projects must produce within 90 days of start date: Standard Operating Procedures at project (or CP level) for the FCRM which specify channel(s), response time commitments by feedback and complaint category, roles and responsibilities for FCRM implementation, protocol for escalation of sensitive complaints and plans for ongoing communication of FCRM access to community members.

PROCEDURE № 6.3

Respond to community feedback and complaints in a timely and safe manner.

To demonstrate compliance, projects and emergency responses must produce the following within 90 days of start date: A registry of i) feedback received, ii) the date feedback was received, and iii) the date of referral or response. The registry must demonstrate that all programmatic feedback and complaints have been responded to or referred as per the project FCRM Standard Operating Procedures or within 30 days of its receipt, at minimum. In addition, the registry must demonstrate that all sensitive feedback and complaints have been responded to or referred as per the FCRM Standard Operating Procedures, not exceeding 72 hours of receipt.

To demonstrate compliance, emergency responses must produce the following within 30 days of start date: A registry of i) feedback received, ii) the date feedback was received, and iii) the date of referral or response. The registry must demonstrate that all programmatic feedback and complaints have been responded to or referred as per the project FCRM

Standard Operating Procedures or within one week of its receipt, at minimum. In addition, the registry must demonstrate that all sensitive feedback and complaints have been responded to or referred as per the FCRM Standard Operating Procedures, not exceeding 72 hours of receipt.

PROCEDURE № 6.4

Establish CP-level data management systems for feedback, complaints, and response mechanism (FCRM) data for greater efficiency and use of feedback in adaptive management processes.

To demonstrate compliance, country programs must demonstrate that the following was established or maintained during the prior fiscal year: An integrated registry of feedback, complaints and response mechanism data and quarterly reporting or an associated dashboard updated on a quarterly basis, at minimum.

PROCEDURE № 6.5

Give voice to community members in evaluation processes through co-design of evaluations and engagement in interpretation and reflection on findings.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects must produce the following prior to posting evaluation reports to Gateway for all required evaluation events: Documentation of reflection event with community members in one or more project locations, noting the date and number of attendees (cross-referenced with MEAL Procedure 3.8).

PROCEDURE № 6.6

Actively seek community feedback and monitor satisfaction with program quality on an ongoing basis to inform adaptive management decisions.

To demonstrate compliance, projects must produce the following prior to proposal submission: A Proframe (or Logframe) with an indicator for active monitoring of feedback and/or community satisfaction data, on an annual basis at minimum (cross-referenced with MEAL Procedure 1.2).

To demonstrate compliance emergency responses must produce the following within 60 days of start date: A Proframe (or Logframe) with an indicator for post-distribution or post-activity monitoring or active monitoring of feedback and/or community satisfaction data, on a quarterly basis at minimum (cross-referenced with MEAL Procedure 1.2).

POLICY № 7 - ACCOUNTABILITY TO OUR STAKEHOLDERS

CRS programming is accountable to its partner, donors and to other stakeholders by developing inclusive processes which optimize community, partner, and stakeholder engagement; meeting donor MEAL requirements; and openly communicating our learning from success, challenges, and failures.

PROCEDURE № 7.1

Integrate donor MEAL requirements into the MEAL system and check on compliance during implementation.

To demonstrate compliance, projects must produce the following within 30 days of start date and updated annually thereafter: A checklist or other documentation, inclusive of project DIP, reflecting compliance with donor MEAL requirements.

To demonstrate compliance, emergency responses must produce the following within 60 days of start date and updated annually thereafter: A checklist or other documentation, inclusive of project DIP, reflecting compliance with donor MEAL requirements.

PROCEDURE № 7.2

Engage partners and other stakeholders in reflection on progress, successes, challenges and failures and evaluation findings to increase the relevance and ownership of recommendations and contribute to larger learning and influence initiatives.

To demonstrate compliance, projects and emergency responses must produce the following prior to posting evaluation reports to Gateway for all required evaluation events: Documentation of the reflection event with partners and stakeholders, noting the date and attendees (cross-referenced with MEAL Procedures 3.8 and 8.2).

POLICY № 8 - LEARNING

CRS staff engage with the communities we serve and our partners and other stakeholders to enhance project and agency knowledge management and learning and to contribute to greater impact and program quality.

PROCEDURE № 8.1

Reflect on a quarterly basis with partners on monitoring data and community feedback, to inform ongoing and adaptive program management.

To demonstrate compliance, projects must produce the following within 180 days of start date and updated quarterly thereafter: Documentation of the meeting, noting the date, attendees and action plan identifying assigned follow-up responsibilities (cross-referenced with MEAL Procedure 2.4).

To demonstrate compliance, emergency responses must produce the following within 90 days of start date and quarterly thereafter: Documentation of the meeting, noting the date, attendees and action plan identifying assigned follow-up responsibilities (cross-referenced with MEAL Procedure 2.4)

PROCEDURE № 8.2

Reflect on evaluation findings with community members, partners and other stakeholders to generate appropriate recommendations and inform agency learning.

[Required only when CRS is the prime recipient and responsible to conduct and manage evaluation events.] To demonstrate compliance, projects must produce the following prior to posting evaluation reports to Gateway for all required evaluation events: Documentation of the reflection event with partners and stakeholders, noting the date and attendees (cross-referenced with MEAL Procedures 3.8 and 7.2); and documentation of reflection event with community members in one or more project locations, noting the date and number of attendees (cross-referenced with MEAL Procedure 6.4).

To demonstrate compliance, emergency responses must produce the following prior to posting evaluation reports to Gateway for all required evaluation events: Documentation of the reflection event with partners and stakeholders, noting the date and attendees for all required evaluations (cross-referenced with MEAL Procedures 3.8 and 7.2).

PROCEDURE № 8.3

Contribute to greater knowledge management of project and agency learning by posting evaluation and review reports and, in turn, utilizing other reports to inform future program design.

To demonstrate compliance, projects must post evaluation reports for all required evaluation events to Gateway within 30 days project close (cross-referenced with MEAL Procedures 3.4, 3.5 and 3.6).

To demonstrate compliance, emergency responses must post evaluation reports for all required evaluation events to Gateway within 90 days of response close (cross-referenced with MEAL Procedures 3.4, 3.5 and 3.6).

PROCEDURE № 8.4

Contribute to greater knowledge management of project and agency learning by posting past performance references (PPRs) and utilizing other PPRs to inform future program design.

To demonstrate compliance, projects must produce the following within 30 days of project close: PPRs posted to Gateway.

To demonstrate compliance, emergency responses must produce the following within 90 days of response close: PPRs posted to Gateway.

PROCEDURE № 8.5

Reflect on the appropriateness of the MEAL system and the FCRM during implementation in order to identify opportunities for improvements in efficiency, data quality and data utility.

To demonstrate compliance, projects and emergency responses intended to last at least 2 years upon start must produce the following within 15 months of start and annually

thereafter: an action plan for improving the MEAL system and FCRM, identifying recommendations for improvement, person(s) responsible and timeline.

PROCEDURE № 8.6

Organize reflection events to facilitate cross-project learning from success, challenges and failures.

To demonstrate compliance, country programs must produce a documentation of a reflection event, which included staff from two or more projects, produced during the prior 18 months, at minimum.

POLICY № 9 – RESPONSIBLE AND OPEN DATA

CRS staff engage with our partners to collect, manage, utilize, archive and (when necessary) responsibly destroy data in a way that protects constituent privacy and rights, and is in accordance with CRS Responsible Data Values and Principles and international and local regulations.

PROCEDURE № 9.1

Document consent or assent from respondents in order to improve data privacy protection and ethics in all data collection activities.

To demonstrate compliance, projects and responses must produce the following for all data collection activities: Documentation of written or verbal consent or an alternative lawful basis for processing data from adult respondents prior to data collection in accordance with local regulations and institutional review board (IRB) or ethics committee approval as relevant. For respondents who are considered minors by local regulations or an IRB, child assent and consent or an alternative lawful basis for processing data from a parent or guardian must be obtained.

At a minimum, the assent and consent forms must state:

- Purpose(s) and objective(s) of data collection;*
- Purely voluntary nature of participation;*
- Potential risks related to participation in data collection, if any;*
- Potential benefits related to participation in data collection, if any;*
- What data is being collected;*
- How this data will be used;*
- How long data will be stored;*
- Who data will be shared with;*
- How respondent confidentiality will be maintained; and*
- Alternative lawful basis for processing data refers to contract, legal obligation, vital interests, public task or legitimate interest.*

POLICY № 10 – RESEARCH

CRS staff engage with our partners to conduct research in accordance with ethical standards and in order to contribute to agency learning and strategic objectives.

PROCEDURE № 10.1

MEAL advisors review research protocols to improve quality, ensure appropriateness of methods, and determine need for external ethical review.

To demonstrate compliance, all research activities must provide the following prior to initiation of data collection activities: Documentation of a review by either a regional MEAL or PIQA MEAL technical advisor or his or her designate.

PROCEDURE № 10.2

Create and maintain a research record in Gateway to improve knowledge management and access to research findings.

To demonstrate compliance, all research activities must create a research record in Gateway prior to the initiation of data collection and post the research protocol and research report to the research record; and post the de-identified dataset and codebook to the agency central data repository within 180 days of the end of data collection.

Adherence:

Country Programs, emergency responses, projects, and research activities may be audited against the MEAL procedure audit trails (V4.0) by the agency Internal Audit team. All Country Programs, projects, and emergency responses will submit annual self-assessments of compliance with the MPPs V4.0.

Interpretation and Questions:

Please contact [Catholic Relief Services](#) with any questions.