Monitoring & Evaluation Plan

Powered by

Dure Technologies

Table of contents

1. _Feasibility and Needs Assessment_

Aim of feasibility and needs assessment / inception report: To determine the feasibility of using, adapting, integrating and implementing OneImpact and defining project targets.

Action: **Organization X** will write a brief report answering the following questions and prior to the launch of the project. .

1. Is there a clear need which OneImpact is intended to address?
   - **Descriptive**
2. What is the cell phone coverage in the country?
   - **%**
3. Is it possible to adapt OneImpact to the context without compromising fidelity and integrity of solution?
   - **Descriptive**
4. What are the key components of OneImpact? Which one's impact on the predicted outcome, and how do they interact with each other?
   - **Descriptive**
5. Which strategies could be used to support tailoring OneImpact to participants over time?
   - **Descriptive**
6. What are the possible harms / adverse outcomes?
   - **Descriptive**
7. Is it possible to identify a region and specific population to implement the intervention?
   - **Descriptive**
8. Is it possible to integrate OneImpact into existing health response in this region?
   - **Descriptive**
9. What is required to implement the project (partner buy-in, resources etc.)?
   - **Descriptive**
10. What is the cost?
    - **Descriptive**
11. Define project targets
    - # of App users
    - % of active users
    - % of repeat users
    - Average efficiency response
    - # of reports generated
    - Social change implemented (descriptive)

2. *Ongoing monitoring*

Aim of ongoing monitoring: To determine whether targets are being met and if not to take corrective measures to ensure that they are.

Action: Organization X will provide monthly reports to STP, with the below data and will take corrective action to ensure that targets are met.

- Usability indicators
- Programmatic indicators
- Efficiency indicators
- # of reports generated
- Social change implemented (descriptive)

3. *Evaluation*

Aim of evaluation: To evaluate the outcome of the *OneImpact* intervention on the TB response.

Objectives:

1. To determine the acceptability and usability of *OneImpact*.
2. To determine the scalability of *OneImpact*.
3. To determine any social change in the TB response as a result of the *OneImpact* intervention.

Action: Organization X will conduct an end of project evaluation providing and write up a report with the below data and information to determine the outcome of the *OneImpact* intervention.

Acceptability and Usability

1. Did the relevant stakeholders use *OneImpact*? (at the end of the intervention)
   - Number of App users **(dashboard)**
   - % of active users **(dashboard)**
   - % of repeat users **(dashboard)**
   - Number of time different sections of *OneImpact* is used **(dashboard)**
   - Resolution status-issue type wise **(dashboard)**
   - Resolution efficiency – issue type wise **(dashboard)**
   - Programmatic indicators **(dashboard)**
   - Usage quality **(survey)**

Scalability

1. Was the possibility of harm adequately considered? And the likelihood of risks or adverse outcomes assessed? **(descriptive)**
2. Was the cost adequately considered and measured? **(descriptive)**
3. What were the long-term costs of maintenance and updating, how were costs met, and who took responsibility for them? **(descriptive)**

Social Change

1. How did *OneImpact* alter the patient experience; accessing information on TB, self-reporting adverse events and connecting with peers, and peer support? **(baseline and end of project questionnaires)**
2. How did *OneImpact* alter community data, responses and systems?
3. How did *OneImpact* alter NTP operations?

Criteria and sample size of evaluation participants

1. **Criteria to select <u>patients</u>**
   1. Active TB patients currently on treatment / former patients
   2. Equal representation from both genders
   3. Age between 18-49
   4. Participants who are part of the OneImpact initiative
   5. Participants who are willing to participate in both baseline and end-line survey

Minimum Sample Size: >80 people

2. **Criteria to select <u>Community Health Workers</u>**
   1. Equal representation from both genders
   2. Age between 18-49
   3. Participants who are part of the OneImpact initiative
   4. Participants who are willing to participate in both baseline and end-line survey

Minimum Sample Size: >5 people

3. **Criteria to select <u>Organization X members</u>**
   1. Equal representation from both genders
   2. Age between 18-49
   3. Participants who are part of the OneImpact initiative
   4. Participants who are willing to participate in both baseline and end-line survey

Minimum Sample Size: >3 people

4. **Criteria to select <u>NTP representatives</u>**
   1. Equal representation from both genders
   2. Age between 18-55
   3. Participants who are aware of the OneImpact initiative
   4. Participants who are willing to participate in both baseline and end-line survey

Minimum Sample Size: >3 people

Questionnaires Social Change

Baseline and end of project questionnaires – Patient experience

1. How would you rate the availability, quality and relevance of the information you receive on TB (1 is the lowest and 5 is the highest)? Please mention which are your primary sources of information (please tick one of the following; at the health facility / peer support groups / internet / App) and how often you have access to them (please tick one of the following; once a month/ once every two weeks/ once a week / every day)
2. How would you rate the availability, quality and relevance of the information on TB services you receive on TB (1 is the lowest and 5 is the highest)? Please mention which are your primary sources of information (please tick one of the following; at the health facility / peer support groups / internet / App) and how often you have access to them (please tick one of the following; once a month/ once every two weeks/ once a week / every day)?
3. How would you rate your ability to connect with other TB patients for peer support (1 is the lowest and 5 is the highest)? Please mention how you connect with other patients (please tick one of the following; at the health facility / peer support groups / internet / App)?
4. Is there a mechanism to report problems you face on your TB journey; please tick yes / no?
5. How would you rate your ability to report problems (1 is the lowest and 5 is the highest)? Please mention how you report problems (please tick one of the following; at the health facility / peer support groups / App / other)?
6. How often do you report problems (please tock one of the following; once a day / once a week / once a month / several times a month / once a year)?
7. How would you rate the response (1 is the lowest and 5 is the highest)?

Baseline and end of project questionnaires – Community data, responses and systems (Community Health Workers)

1. How would you rate the available tools / aids to share information on TB with the people with TB (1 is the lowest and 5 is the highest)?
2. How quickly are you able to contact patients in your network to understand different barriers to access they face and help resolve it? (1 for slowest and 5 for fastest)?
3. How would you rate your ability to track all the problems you respond to each month (1 is the lowest and 5 is the highest)?
4. How quickly do you respond to a patient's problem (on average); please tick one of the following; within 24 hours, within 48 hours, within 72 hours, more than 72 hours later.

Baseline and end of project questionnaires – Community data, responses and systems (Organization X team)

1. How would you rate the tools you have available to build the capacity of TB peer support groups (1 is the lowest and 5 is the highest)?
2. How would you rate your ability to capture accurately the efficiency of Community Health Worker responses to problems people with TB face (1 is the lowest and 5 is the highest)?
3. How would you rate the accuracy of the data available (for advocacy) on the problems (and their frequency) people with TB face regarding the availability, accessibility and quality of TB services (1 is the lowest and 5 is the highest)?
4. How accurately are you able to represent different challenges faced by people with TB to decision/policy makers (example NTP manager) and help advocate for better policies and services (1 for least effective and 5 for most effective)?

Baseline and end of project questionnaires – National TB Program

1. How would you rate the data available on the availability, accessibility and quality of TB services (1 for least effective and 5 for most effective)?
2. How effectively are you able to take positive decisions based on the evidence (1 for least effective and 5 for most effective)?
3. How effectively are you able to mobile resources based on the evidence to respond to the evidence (1 for least effective and 5 for most effective)?

Report template

Section 1: Background (outlining the feasibility of using, adapting, integrating and implementing OneImpact)

Summary of inception report

Section 2: Intervention targets

Drawing targets outlined in the inception report

Section 3: Implementation and Monitoring (outlining whether targets were regularly met and any corrective action taken)

Drawing from and summarizing monthly reports

Section 4: Outcome (outlining the outcome – acceptability and usability, scalability and social change – that resulted as a result of the intervention

Drawing from the evaluation report
Detailed OneIm