

# Cluster Coordination Performance Monitoring



# What is the CCPM?



- A self-assessment of cluster performance against the 6 core cluster functions and Accountability to Affected populations:
  1. support service delivery
  2. inform the HC/HCT's strategic decision-making
  3. strategy development
  4. monitor and evaluate performance
  5. capacity building in preparedness and contingency planning.
  6. Advocacy
  7. + section on Accountability to Affected Populations
- A country led process, supported by Global Clusters and OCHA
- The CPM can be applied by both clusters and sectors

# Where does the CCPM come from?



- Transformative Agenda



Improve coordination and accountability

- Developed by the IASC SWG on the Cluster Approach and endorsed by the IASC WG in 2012
- Piloted in 2012 and implemented from 2013 -

# Why monitor cluster coordination performance?



- Ensure efficient and effective coordination
- Take stock of what functional areas work well and what areas need improvement
- Raise awareness of support needed from the HC/HCT, cluster lead agencies, global clusters or cluster partners
- Opportunity for self-reflection
- Strengthening transparency and partnership within the cluster
- Show the added value and justify the costs of coordination

# The CCPM does not ...



- Monitor response (service delivery)
- Evaluate individual partners or coordinators
- Evaluate if/when clusters should be deactivated, merged etc. (Review of the cluster architecture)
- Exclude usage of other tools with the same purpose

# When to implement the CCPM?



- Protracted crises: Annually, but clusters decide when to implement it
- New emergencies: 3-6 months after the onset and once every year thereafter.
- If several core functions have been registered as weak  
➔ more frequent
- Avoid simultaneous commitments (e.g. the Strategic Planning Process, donor visits etc.)

# Who is involved?



- Ideally all clusters (cluster coordinators and partners)
- Global clusters: Technical and facilitation support
- OCHA-HQ: Technical and facilitation support when clusters don't have the survey tool
- OCHA-FO: coordinate across clusters (ICC) and ensure engagement of HC/HCT

# CCPM in steps



## CCPM IN STEPS



# Step I: Planning



- HCT decision on CCPM timeframe and participation
- Inter-cluster Coordination Group discussion
- Each cluster meets to:
  - Discuss the CCPM purpose, process, methodology and outputs;
  - Clarify timeframe for survey and completion of report;
  - Clarify role of government counterpart
  - Establish commitment to follow-up on agreed actions to improve performance.
- *Output I: Agreement on implementation and timeframe*

# Step II: The Survey



- **Three online questionnaires:**
  - i. The Cluster Description Report, completed by the cluster coordinator
  - ii. Coordination performance questionnaire, completed by the cluster coordinator, app. 20-25 min
  - iii. Coordination performance questionnaire, completed by the cluster partners, app. 20-25 min
- **Important:**
  - Responses are anonymous - but avoid sensitive comments
  - Important to fully complete the questionnaire
  - Survey results only shared externally after the cluster has contextualised it.

# Step II: The Survey



## Example of survey question:

‘Has your organization been involved in the development of the strategic plan?’

- No strategic plan (NA)*
- My organization was not asked to be involved*
- My organization was asked to be involved but has not contributed*
- My organization was asked to be involved, has contributed but contribution not adequately taken into account*
- My organization was asked to be involved, has contributed and contribution somewhat adequately taken into account*
- My organization was asked to be involved, has contributed and contribution adequately taken into account*

# Step II: The Survey



## Analysis and scoring of performance status

- The median score for each sub-category is calculated based on aggregated results of partners and coordinator.
- The median score is classified into a 4 categories of performance status:

Score	Performance status
>0.75%	Green = Strong
0.51-0.75%	Yellow = Satisfactory (needs minor improvement)
0.26-0.50%	Orange = Unsatisfactory (needs major improvement)
≤ 0.25%	Red = Weak

# Step II: The Survey



*Output II: The survey results are weighted and compiled into a report*

<b>1.Supporting service delivery</b>	
1.1 Provide a platform to ensure that service delivery is driven by the agreed strategic priorities	<b>Good</b>
1.2 Develop mechanisms to eliminate duplication of service delivery	<b>Unsatisfactory</b>
<b>2. Informing strategic decision-making of the HC/HCT for the humanitarian response</b>	
2.1 Needs assessment and gap analysis (across other sectors and within the sector)	<b>Satisfactory</b>
2.2 Analysis to identify and address (emerging) gaps, obstacles, duplication, and cross-cutting issues.	<b>Weak</b>
2.3 Prioritization, grounded in response analysis	<b>Satisfactory</b>

# Step III: Cluster analysis and action planning



- Review/amend the Cluster Description Report
  - Explain/contextualize findings
  - Identify actions for improvement (focus on weak and unsatisfactory performance), timeframe and responsible for follow-up
  - Pinpoint support requirements
- ! Clusters can request the secretariat of the global clusters or OCHA-HQ for facilitation support

## Step III: Cluster analysis and action planning



### *Output III: Final CCPM and Action Plan*

- Actions for improvement, timeframe and responsible for follow-up
- Awareness of support requirements (HC/HCT, Cluster Lead Agencies, Partners, OCHA, Global Clusters and national authorities)
- Shared with the HC/HCT and Global Cluster and, if applicable, the national authorities

# Step IV: Follow-up & Monitoring



## Follow-up:

- ICC: Review of Reports/Action Plans → identify common weaknesses to be addressed systematically.
- HCT: Presentation of Reports/Action Plans and discussion of support requirements

## Monitoring:

- Take stock of progress at monthly cluster meetings
- Quarterly progress reporting to the HCT

*Output IV: Quarterly reports to HCT*