TABLE OF CONTENTS

Acronyms....................................................................................................................................................... 4
About the author.................................................................................................................................................. 5
Acknowledgments ............................................................................................................................................... 5
Executive Summary ........................................................................................................................................... 6
I. Introduction.................................................................................................................................................... 8
   1. Background................................................................................................................................................ 8
   2. Objectives and scope.................................................................................................................................. 8
II. Methodology .................................................................................................................................................. 9
   1. Approaches and Tools Used .................................................................................................................... 9
   2. Evaluation constraints ............................................................................................................................... 10
   3. Structure of the report .............................................................................................................................. 10
III. Taking stock of current DCA CTP .............................................................................................................. 10
    1. The overall scale of CTP in DCA .............................................................................................................. 10
    2. CTP projects’ design ................................................................................................................................. 12
    3. Management arrangements ...................................................................................................................... 14
IV. The operational effectiveness of DCA CTP approach ................................................................................ 14
    1. Preparedness .......................................................................................................................................... 14
    2. Timeliness .............................................................................................................................................. 16
    3. Response analysis .................................................................................................................................. 16
    4. Achieving results and monitoring .......................................................................................................... 17
    5. Capacity building ................................................................................................................................... 18
    6. Agility ..................................................................................................................................................... 19
    7. Sustainability ........................................................................................................................................ 20
V. The organisational effectiveness of DCA CTP approach ............................................................................. 20
   1. Progress made against 2013 recommendations ..................................................................................... 20
   2. Governance/leadership .............................................................................................................................. 23
   3. Risk management .................................................................................................................................... 24
   4. HR management ..................................................................................................................................... 25
   5. Systems and procedures ........................................................................................................................... 25
   6. Programme/project Management ............................................................................................................ 26
   7. External Relations .................................................................................................................................. 27
VI. Recommendations ...................................................................................................................................... 27
1. Increased preparedness ................................................................. 27
2. Systematic risk assessments.............................................................. 28
3. More strategic approach to learning.................................................. 29
4. Strengthening DCA’s financial and procurement systems ....................... 29
5. Contributing to the research agenda ................................................. 30
6. Looking beyond CTP: market-based programming ................................ 31

VII. Annexes ....................................................................................... 32
   Annex A – Contact list....................................................................... 32
   Annex B – Bibliography...................................................................... 33
   Annex C – Indicators used to measure DCA organisational effectiveness ...... 34
   Annex D – Complete OCAT table..................................................... 36

Figure 1 DCA’s number of CTP projects.................................................. 11
Figure 2 Share of different CTP modalities in DCA CTP ................................ 12
Figure 3 2013 Evaluation sectoral breakdown of CTP projects ...................... 13
Figure 4 2015 Evaluation sectoral breakdown of CTP projects ...................... 13
Figure 5 E-transfer Programme Timeline................................................ 16
Figure 6 DCA OCAT results................................................................... 23
**Acronyms**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CaLP</td>
<td>Cash Learning Partnership</td>
</tr>
<tr>
<td>CTP</td>
<td>Cash Transfer Programming</td>
</tr>
<tr>
<td>HRU</td>
<td>Humanitarian Response Unit</td>
</tr>
<tr>
<td>OCAT</td>
<td>Organizational Capacity Assessment Tool</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedures</td>
</tr>
</tbody>
</table>
About the author

Helene Juillard is an independent consultant with over a decade’s experience in the humanitarian sector. She has designed, supervised, evaluated and researched cash transfer and market based programmes. The writing and editing of the report have been supported by Nikita Blanes, independent consultant.

Acknowledgments

The views expressed in this report are the author’s alone and the author accepts sole responsibility for any factual inaccuracies.
Executive Summary

Humanitarian actors are increasingly recognizing the critical importance of Cash Transfer Programming (CTP) in the provision of cost-effective and efficient humanitarian assistance. Evidence shows CTPs achieve primary and secondary humanitarian outcomes in many contexts whilst having a positive effect on the economic wellbeing of communities. As a strong cash advocate and partner-based organisation, Danish Church Aid (DCA) commissioned this evaluation to assess the effectiveness of its CTP approach, highlighting organisational and programmatic strengths and weaknesses. First, it assessed the effectiveness of the projects using CTP that DCA supported or implemented since 2013. Second, it assessed DCA’s capacity, as an organisation, to effectively support its partner to design, implement and monitor CTP and, to a lesser extent, DCA’s capacity to directly deliver CTP. The primary focus of the evaluation was on learning. It used a participative approach, and relied on three phases: inception, data collection and reporting. Data collection took place between September and December 2016 through a desk review, 24 semi-structured interviews representative of various HQ departments, country offices and partners.

The report is divided into 6 sections, starting with the introduction, and a section on methodology. Section 3 describes the current range of DCA cash programming, while the main evaluation findings are captured in Section 4 and 5 looking respectively at the operational and organisational effectiveness of the DCA CTP approach. Section 6 provides recommendations.

DCA has long been using CTP to deliver its emergency response. Since 2006, the scale of CTP, both in terms of number of projects and financial volume has consistently grown. In 2014, CTP represented 7.6 million USD and in 2015, 8.1 million USD\(^1\). In total DCA is delivering 29% of its humanitarian portfolio through CTP. Since 2015, cash grant is the most common CTP modality used by DCA. There has been a shift from cash for work, as the most widely used modality, towards cash grants, since the last CTP evaluation in 2013. As in 2013, DCA is still focusing most of its CTP in the food security and livelihood sectors with some country specific examples of CTP being used in WASH, shelter and NFI. CTP is also used to cover multiple basic needs (i.e. the use of multipurpose cash grants); which use has notably increased and based on the interviewees, is likely to keep doing so. The use of CTP is not changing DCA DNA of being a partner-based organisation and CTP is consistent with DCA approach to partner empowerment. However, by posing distinct challenges on systems, humanitarian projects using CTP may be more likely to be applied than others for co-implementation or even self-implementation.

The assessment of DCA CTP’s operational effectiveness was based on 7 main criteria: preparedness, timeliness, response analysis, achieving results and monitoring, capacity building, agility and sustainability. The lack of preparedness plan has appeared both at DCA and at partner level and at country, regional and global level. No example has been shared of pre-crisis market analysis or framework agreement with financial service providers. However, based on the literature review and on the interviews, it appears that DCA’s flexible structure and committed team members are able to quickly deliver CTP. Yet better preparedness and anticipation could improve further the timeliness of the response. In terms of response analysis, thanks to increased acceptance of CTP, the decision to use CTP appeared to be taken jointly in most cases by DCA and its partners. In addition, with its experience, capacity and flexible funding, DCA and

---

\(^1\) 49 572 78 DKK as per the HRU Cash mapping. The amounts have been converted using Inforeuro exchange rate for January.
its partners demonstrated in several contexts the capacity to be “the first mover”, improving the effectiveness of its own programming but also potentially trickling down to other organisations’ responses. Concerning achieving results and monitoring, overall, all four evaluation reports and interviewees mentioned that one of the greatest achievements of the DCA project using CTP was to deliver the activities as planned. Furthermore, the quality of DCA face-to-face training has been recognised by all interviewees; despite the challenges faced when rolling out trainings to reach field level partner staff. At the partner level and with regards to CTP, there is no formal capacity assessment prior to the delivery of training, which makes the case for tailored capacity building. Operationally speaking DCA and its partners have demonstrated great capacity to adapt and be agile. Humanitarian CTP are by nature sustainably limited. Yet, by working through partners, the sustainability of DCA CTP approach can be seen as stronger.

The next part of the report focuses on assessing DCA’s organizational effectiveness in using CTP. This phase relied on a qualitative analysis of the data collected. Out of the 12 recommendations made in 2013, DCA achieved 6, partly achieved 3, and has not achieved the last 3. As such, cash preparedness is still a major gap, and the Procurement Manual was revised but did not include a comprehensive section on cash and vouchers, which is still highly needed. Lastly, only 4 CTP project evaluations were available out of 60 projects, showing that the evaluation frequency has not increased as recommended. Some additional findings highlighted that DCA program staff has the necessary knowledge, skills and experience to effectively design, implement & monitor CTP as needed but this is not necessarily the case with other departments (e.g. finance, logistics); procurement and financial systems are not fully adapted to suit CTP. However, senior management understands, supports and advocates for CTP and is willing to invest in needed planning, resources and systems. On the other hand, risk assessment does not happen on a routine basis.

Based on the organizational and operational evaluation and on past recommendations, the report suggests 6 recommendations. First, increase preparedness, more and better cash preparedness should be a priority for DCA and its partners. It should ideally be formalised in the preparedness plan but should be facilitated in a participatory manner in between DCA and its partners. Second, systematic risk assessments, as DCA is a partner-based organisation, risk assessment is critical and should happen at different levels. The third recommendation is a more strategic approach to learning. Beyond face-to-face training, alternative solutions to share the learning and encourage its retention could be sought in collaboration with the dynamic and proactive DCA learning lab. DCA should rely less heavily on its global advisor for training roll out and identify regional/national CTP champions that are in a position to deliver training to DCA and its partner team members. Fourthly, DCA should strengthen its financial and procurement systems. The evaluation focused mostly on finance and procurement but that should apply as well to ICT, administration, logistics and security. Sufficient resources should be planned for and programme team members should make sure it involves the support function from the start. Fifth, contributing to the research agenda, DCA could contribute to the overall research agenda through topics such as risk management when using CTP with community based organisations, the value for money of CTP through implementing partners. Last, DCA should look beyond CTP: market based programming. Support to the market can happen alongside emergency response or as part of preparedness or longer term plans to strengthen market systems so they can better withstand future shocks.
I. Introduction

1. Background

Over the past few years, the global dialogue on Cash Transfer Programming\(^2\) has progressed beyond initial debates about whether cash distributions are a valid response tool at all – to a general acceptance of their added value in appropriate contexts. Beyond livelihoods and food security sectors, Cash Transfer Programming (CTP) is increasingly considered to respond to other sector needs through a variety of delivery mechanisms and program designs. As the humanitarian system is under severe stress and organisations are asked to do more with less, CTP can present a unique opportunity to deliver more effective and appropriate aid.

Danish Church Aid (DCA) is a rights-based organisation whose humanitarian response has been increasingly using CTP. DCA’s first use of CTP dates back to 2006 when DCA supported CTP in the Gaza strip. In 2015, DCA has supported CTP in 14 different countries\(^3\) with 28 partners amounting to more than 8 millions USD\(^4\). DCA primarily co-implements projects with local implementing partners, and CTP is no exception. At organisational level, DCA promotes the use of CTP where appropriate\(^5\). CTP is also a key programmatic and advocacy area in DCA’s International strategy related to Humanitarian Action.

To reach its ambitious CTP related objectives, DCA has commissioned a macro level evaluation of the effectiveness of its CTP approach.

2. Objectives and scope

The overall objective of the evaluation is to assess the effectiveness of DCA CTP approach, highlighting organisational and programmatic strengths and weaknesses. The evaluation explores the extent to which DCA, as an organisation, is using CTP and supporting its partners to do so, in the most effective way to cover humanitarian needs.

More specifically, the objectives of the evaluation are to:

1. Assess the effectiveness of the projects using CTP that DCA supported or implemented since 2013, date of the latest review of CTP in DCA\(^6\).
2. Assess DCA’s capacity, as an organisation, to effectively support its partner to design, implement and monitor CTP, and to a lesser extent DCA’s capacity to directly deliver CTP.

---

\(^2\) Cash Transfer Programming refers to all projects where cash (or vouchers for goods or services) is directly provided to beneficiaries. In the context of humanitarian assistance the term is used to refer to the provision of cash or vouchers given to individuals, household or community recipients, not to governments or other state actors. CTP covers all modalities of cash-based assistance, including vouchers. This excludes remittances and microfinance in humanitarian interventions (although microfinance and money transfer institutions may be used for the actual delivery of cash). – CaLP Glossary

\(^3\) South Sudan, Area x, Ethiopia, Palestine, Pakistan, Uganda, Lebanon, Syria, Nepal, India, Malawi, DRC, Zimbabwe, Uganda

\(^4\) Source : HRU Cash project mapping

\(^5\) DCA Humanitarian Action Policy June 2013

\(^6\) Cross T., 2013, Review of Cash Transfer Programming at Danish Church Aid, DCA
3. Identify global trends of (a) areas that have worked particularly well that could be systematised and (b) any improvements that would help strengthen a future CTP approach.

There are multiple stakeholders for this evaluation; first and foremost DCA and its partners to inform their current and future CTP and capacity building efforts, as well as CTP related guidelines and training material. The findings will also be relevant for other CaLP members looking to take stock of their own CTP approach.

The evaluation covers humanitarian projects implemented during the period 2013 – 2016.

II. Methodology

1. Approaches and Tools Used

The primary focus of this evaluation is on learning. It used a participative approach: the different stakeholders have been consulted and given an opportunity to review the evaluation findings.

This evaluation relied on three phases: inception, data collection and reporting. The purpose of the inception phase was to get a shared understanding of the evaluation approach and resulted in an inception report outlining the objectives and methodology.

The data collection took place between September and December 2016 through the following:

Secondary data collection: the Desk Review consisted in an examination of DCA and its partner literature both at country and organisation level. A detailed bibliography of documents used for the evaluation is in Annex B of this report. Four cash related evaluations have been identified through the Desk Review and used for the synthesis. This synthesis of secondary data served to inform the operational effectiveness of DCA CTP approach.

Primary data collection: Semi-structured interviews were conducted with 24 individuals, representing a good mix of HQ departments (HRU, Mine action, Funding, Finance and Logistics), country offices (Ethiopia, Cambodia, South Sudan, Nepal, Kenya, Uganda, Malawi, Zimbabwe, OPT, Syria/Turkey and Burundi) and partners (Lebanon, Zimbabwe and South Sudan). Semi-structured interviews have informed both evaluation questions about the operational and the organisational effectiveness.

A webinar was organised on December 9th 2017. Six DCA team members participated in the webinar which served both to present and discuss the preliminary findings based on the sharing of draft 1 of the report, gather recommendations and collect data to collectively discuss the organisational effectiveness.

The reporting phase relied on both a qualitative analysis of the data collected and on the use of the CaLP Organizational Capacity Assessment Tool (OCAT). The OCAT allows organisations to assess their capacity to deliver and/or scale-up CTP effectively. The assessment is organised in six categories: 1. Governance/leadership, 2. Organisational management, 3. HR management, 4. Financial Management, 5. Programme/project Management, and 6. External Relations. It is a simple tool to use, involving all departments.
2. Evaluation constraints

Four evaluation reports were found through the Desk review and interviews:

- Avenir Analytics, 2015, Humanitarian response to very vulnerable displaced Palestinian refugees from Syria and host families in poor refugee camps in Tyre, Southern Lebanon.
- DCA, Evaluation of the Danida+ and USAID cash transfer and seed provision intervention in Area 1, South Sudan.

This figure is low, especially considering the scale of CTP within DCA. As a result, the methodology for the evaluation of DCA CTP operational effectiveness had to be adapted. It relied more heavily on primary data collection through interviews. The lack of available documentation limited the triangulation of data. This also limits the strength of the findings and the evaluation’s ability to draw broad conclusions on the effectiveness of DCA’s CTP approach.

3. Structure of the report

Section 3 describes the current range of DCA cash programming. The main evaluation findings are captured in Section 4 and 5 looking respectively at the operational and organisational effectiveness of DCA CTP approach. Section 6 provides recommendations.

III. Taking stock of current DCA CTP

1. The overall scale of CTP in DCA

DCA has long been using CTP to deliver its emergency response. As per the interviewees, the first field experience dates back to 2006 in the Gaza strip. Previously, DCA had financially supported the use of CTP by the Thai Burma consortium in the nineties.

Since then, the scale of CTP, both in terms of number of projects and financial volume has constantly grew. In 2014, CTP represented 7.6 millions USD and in 2015, 8.1 millions USD. As per the interviewees, this trend is likely to continue, especially as CTP is an integral part of DCA’s International Strategy and Humanitarian Action Policy. Globally, it is likely that the use of CTP will further increase following UN Secretary-General Ban Ki-moon’s report for the World Humanitarian Summit where he called for cash to become humanitarian’s default method of support for affected populations where markets and operational contexts permit. This aligns with DCA’s vision that CTP should be considered equally with other modalities. In addition to the Secretary General’s report, the third of ten

---

7 49 572 787 DKK as per the HRU Cash mapping. The amounts have been converted using Inforeuro exchange rate for January.
commitments in the Grand Bargain\textsuperscript{8} is to “increase the use and coordination of cash-based programming.”

In total DCA is delivering 29\%\textsuperscript{9} of its humanitarian portfolio through CTP. In comparison the IRC has delivered 6\% of its humanitarian assistance through CTP with an organisational goal of 25\% by 2020\textsuperscript{10}. Globally, about 6\% of humanitarian aid is being delivered through CTP\textsuperscript{11}.

These figures, including the ones for DCA, are estimates as current ways of tracking aid don’t disaggregate by delivery modality and mapping tools such as the CaLP Cash Atlas or UNOCHA Financial Tracking Services are voluntary reporting and cannot be seen as comprehensive.

The figure below captures this growth from 2 projects in 2008 to 30 in 2015.

\textbf{Figure 1 DCA’s number of CTP project}

![Figure 1 DCA’s number of CTP project](source: the author)

In addition to the country level CTP related projects, DCA is also implementing at the global level and for the fourth year in a row a cash capacity (Cash Cap) project. The objectives of the Cash Cap are to improve the quality of and increase the number of projects financed by DCA with at least a cash component; both by focusing on partners’ capacity to implement quality CTP and on DCA’s capacity to support partners doing so.

\textsuperscript{8} The “Grand Bargain” originates from the World Humanitarian Summit. It aims to reform the humanitarian sector to make emergency aid finance more efficient and effective.

\textsuperscript{9} In 2015, CTP operations represented about 50 millions DKK out of 174 millions for the overall humanitarian portfolio.

\textsuperscript{10} The IRC, Commitment to cash.

\textsuperscript{11} High Level Panel on Humanitarian Cash Transfers, 2015, Doing cash differently, How cash transfers can transform humanitarian aid, ODI.
2. CTP projects’ design

The CTP modalities diversified, moving away from cash for work towards unconditional, unrestricted cash grants. In the 2013 evaluation, cash-for-work programming had been the most common type of cash programme implemented by DCA. In 2015, out of the 30 projects using CTP, only 1 was using solely cash for work and an additional 2 had a cash-for-work component. This shift from cash-for-work towards cash grants is aligned with the 2013 recommendation and has been captured in DCA CTP Standard Operating Procedures (SOP): “DCA and other NGOs are developing evidence and field-tested practice that leads us to prefer unconditional cash, depending on contextual factors.” As a result, only 8% of DCA overall CTP has been distributed through conditional grants in 2015. The graph below captures the share of the different modalities used in DCA humanitarian CTP. The percentage represents the financial volume spent and not the number of projects using such modalities.

**Figure 2 Share of different CTP modalities in DCA CTP**

Same as in 2013, DCA is still focusing most of its CTP in the food security and livelihood sectors with some country specific examples of CTP being used in WASH, shelter and NFI. Notably, the use of CTP to cover multiple basic needs (i.e. the use of multipurpose cash grants) has increased and as per the interviewees is likely to increase further in the future. This is also aligned with the recent development in the aid sector, with major donors such as ECHO embarking on multi-purpose cash. The two tables below show the comparison of the sectoral breakdown of DCA CTP projects that were considered for the 2013 evaluation and the present evaluation.

---

12 The terminology used in this evaluation is aligned with the CaLP glossary that can be accessed for further guidance on the meaning of the different terms on [http://www.cashlearning.org/resources/glossary](http://www.cashlearning.org/resources/glossary)

13 Cross T., 2013. Review of Cash Transfer Programming at Danish Church Aid, DCA, Denmark

14 In 2015, ECHO published the 10 common principles for multi-purpose cash based assistance to respond to humanitarian needs.
Figure 3 2013 Evaluation sectoral breakdown of CTP projects

<table>
<thead>
<tr>
<th>Countries Reviewed</th>
<th>Food Security / Livelihoods</th>
<th>WASH</th>
<th>Shelter</th>
<th>NFI</th>
<th>No Sector Specified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethiopia</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>India</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Myanmar</td>
<td></td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Palestine</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pakistan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Review of Cash Transfer Programming at Danish Church Aid, 2013

Figure 4 2015 Evaluation sectoral breakdown of CTP projects

<table>
<thead>
<tr>
<th>Food security/ livelihoods</th>
<th>Basic needs (i.e. multi purpose)</th>
<th>NFI</th>
<th>Shelter</th>
<th>Wash</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burundi</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethiopia</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lebanon</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OPT</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Malawi</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Myanmar</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nepal</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>South Sudan</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Syria</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uganda</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: The author

Scale-wise, the projects using CTP that have been reviewed for this evaluation rank from very small scale CTP, such as the shelter project in Uganda targeting 322 households, to large scale CTP, such as the shelter project in Nepal targeting 11,041 households. The scale of projects using CTP would at least compare to the scale of projects using other delivery modalities. And it seems that the modality used to deliver the project is not a barrier to its scale.

The CTP projects being supported by DCA are using a wide range of delivery mechanisms from mobile money to micro finance institutions and direct cash delivery. The selection of those mechanisms is context-specific and usually made jointly between DCA and its implementing partner. As per the interviewees and the documents reviewed there does not seem to be any global emerging trends as to which delivery
mechanism is preferred. There is; however, a commitment from DCA to promote financial inclusion, which therefore becomes one of the selection criteria when it comes to choosing delivery mechanisms.

This is a notable evolution compared to 2013 when almost all projects were using direct cash delivery. Direct cash delivery is still used in some countries as the last resort option in case no other reliable and accessible financial service provider is available. Although justifiable, this raises a question about risk assessment and management (Refer to Section V.3 for more on risk management).

3. Management arrangements

In-line with DCA’s overall way of working, most of the projects using CTP are implemented via partners. In 2015 there was a total of 28 different partners who implemented 30 projects using CTP in 14 countries, which is an increase from 2014, when 18 different partners implemented 21 projects in 12 countries. Furthermore, the number of partners in a position to deliver CTP or at the forefront of CTP is one of DCA strategic indicators15. As mentioned by one of the interviewees, direct implementation, whether CTP is involved or not, is DCA’s least preferred option. It will be considered only when “partner-based approach has been tested and found to not meet quality and accountability standards”16. Overall, DCA is currently considering being more flexible in terms of management arrangement, especially when it comes to humanitarian interventions, leaving the possibility for co-implementation17 or even self-implementation.

Out of all the projects reviewed, CTP projects in Ethiopia were being self-implemented, the ones in Uganda were under consideration for self-implementation too. CTP projects in Area 1 and in Nepal were being co-implemented. This set-up was chosen for a number of reasons: a) government regulations in Ethiopia, b) Lack of partner capacity in Uganda, c) scale of the response in Area 1 (30,000 households) and d) scale and urgency in Nepal.

In summary, the use of CTP is not changing DCA’s DNA of being a partner based organisation and CTP is consistent with DCA approach to partner empowerment. However, by posing distinct challenges on systems, humanitarian projects using CTP may be more considered than others for co-implementation or even self-implementation.

IV. The operational effectiveness of DCA CTP approach

1. Preparedness

In 2015, DCA has used CTP in 14 different countries, some of which are countries prone to recurrent disasters (e.g. Nepal, Myanmar) or crisis (e.g. South Sudan, Syria). Yet within all the countries actively taking part in the evaluation, only one, Palestine, had an Emergency Preparedness Plan capturing cash related issues. At the time of the evaluation, Myanmar was also considering developing a cash preparedness plan to increase the effectiveness of future flood responses.

15 Strategic indicator for 2017: 1. In all country programmes, at least three partners have documented humanitarian response, cash programming and ICT capacity within the previous two years.

Strategic indicator for 2018: In all country programmes, community-based disaster risk management and humanitarian action have been included in the programme strategic framework and at least three programme partners have humanitarian response capacity recognised at national level, and are cash and ICT leaders in country.

16 Danish Church Aid, 2016, Co-implementation (discussion paper - IMM Oct. 12), DCA, Denmark.

17 Co-implementation has been defined by DCA as: Co-implementation entails a project modality between DCA and partners where both parties take on an active role in the implementation of a given project. Thus, co-implementation adds a new project modality to “how DCA works with partners” where DCA takes on a number of activities and a direct role in the implementation of a project.
The lack of preparedness plan has appeared both at DCA and at partner level, and at country, regional and global levels. As a result, no example has been shared of pre-crisis market analysis or framework agreement with financial service providers.

Despite the lack of a formalised preparedness plan, capacity building efforts have taken place on a rolling basis, and in some instances before the crisis happens. As per the interviewees, all DCA country office have at least one member of staff that is trained in CTP. In addition, in the countries assessed, about 80% of the partners delivering humanitarian CTP are long-term partners that have been working with DCA for a long time, which facilitates the pre-crisis capacity building.

The potential effects of this lack of preparedness plans on the timeliness and overall effectiveness of humanitarian responses has not been documented within DCA. At global level though, the benefits of cash preparedness has been documented¹⁸ and could with no doubt benefit DCA and its partners. They can be summarised as so:

Programmatic benefits:

- Positive staff engagement on CTP, specifically promoting an understanding of the risk assessment process; and the need for cross-departmental (and cross CO) cooperation
- Improved understanding of vulnerability and household economy in key areas of assessment, including how these are impacted by disasters, and how this understanding can influence CTP design
- Identification of key commodities and services people require in an emergency, and guidance for future market assessments
- Identification of suitable linkages with other agencies involved in CTP
- Identification of potential CTP responses for different emergency scenarios
- CEP risk assessment conclusions provide support for future funding opportunities and donors are very supportive of preparedness risk assessment process
- Identification of capacity building needs for CTP at country level, specifically on market assessment

Operational benefits:

- Identification of most appropriate delivery mechanisms (including geographically-appropriate mechanisms, and specific mechanisms for different stages of the emergency response)
- Clear guidance on future steps for developing and testing suggested delivery mechanisms
- Identification of country-level operational capacity for CTP & future capacity building needs
- Opening a dialogue with future potential partners on CTP (NGOs and private sector)
- Linkages to the Emergency Preparedness Plan where this has already been developed, including segregation of duties and workflow mapping suggestions for CTP.

¹⁸ Save the Children, 2012, Cash Emergency Preparedness (CEP) pilots : CEP guidelines & Key findings from pilot assessments.
2. Timeliness

Timeliness of the response is a critical component of its overall effectiveness. Based on the literature review and on the interview, it appears that DCA’s flexible structure and committed team members are able to quickly deliver CTP. For example, interviewees mentioned that it took DCA and partners 4 weeks and a half to distribute the first mobile money batch in Burundi. This is extremely short especially compared with other experiences. The figure below shows a few examples of e-transfer timeline from Mercy Corps.

![Figure 5 E-transfer Programme Timeline](image)

Source: Mercy Corps, E-transfer implementation guide

Yet better preparedness and anticipation could further improve the timeliness of the response. During the interviews, two areas were highlighted:

The time between the signature of the agreement between DCA and the distributing partner with the expected first cash distribution can be very short, which forces the partner to rush the organisation of the distribution. For example, in South Sudan, in 2015 a partner agreement was signed in May with a first cash distribution planned in June.

Some of the project timeframes can be very tight. For example in Syria, out of a 12 months project, 12 months of activities have been planned, leaving little space for planning or learning.

The timeliness of the response had also been described as an area for improvement in the evaluation of Cambodia CTP response\(^\text{19}\): “The cash transfers reviewed, though entirely necessary, were still rather late in the day”. This does not seem to be specific to DCA as most of the other organisations faced similar delays.

3. Response analysis

The response analysis is the link between situational analysis (broadly speaking, needs assessment and other contextual information) and programme design; it involves the selection of programme response options, modalities and target groups; and should be informed by considerations of appropriateness and feasibility. Response analysis simultaneously addresses needs while analysing and minimising potential harmful side effects\(^\text{20}\).

\(^{19}\) Truelove S., Lim V., 2013. Cash Transfer Programmes and indebtedness in Cambodia, DCA, Cambodia

When it comes to the use of CTP, response analysis is the key stage at which DCA and its partners will decide upon the modality, the grant amount and the delivery modality.

The involvement of both DCA and its partner in the response analysis seems to have evolved in the past few years. During the interviews, more than 60% of the interviewees mentioned that the decision to use CTP was nowadays a joint decision between DCA and its partners. In about 20% of the cases the decision was described as being made by DCA along and in 10% the decision had been done by the partner and then presented to DCA.

Several interviewees recall the fact that previously DCA had to advocate first with partner for the use of CTP. One interviewee described the process as a “reverse response analysis” with all DCA Senior Managers being strong cash advocates willing to encourage its use when appropriate and the implementers being a bit resistant. This is quite unique in the sector, as most of the organisations currently using cash at scale had first to go through internal advocacy to develop acceptance by their senior managers.

The lack of partner willingness had also been identified as one of the main barriers to the development of CTP use within DCA in the 2013 evaluation: “Significant barriers to expanding the cadre of local partners willing to engage in cash are seen as major challenges among DCA headquarters staff.” This does not seem to be the case anymore even if it is difficult to draw conclusions as to what has caused this increased acceptance: DCA advocacy and capacity building efforts, or overall increased acceptance within the humanitarian sector, donor advocacy, and so on.

DCA decision to use CTP in a certain context, such as in South Sudan, has been described as “bold” and “courageous” by several interviewees, relying on “60% conviction and 40% evidence”. Yet the use of CTP in South Sudan has proven to be a success and the experience of DCA and its partners has influenced the food security cluster and the Cash Working members. With its experience, capacity and flexible funding, DCA and its partners were therefore able to be “the first movers”, improving the effectiveness of its own programming but also potentially trickling down to other organisations’ responses.

4. Achieving results and monitoring

The achievement of results is always linked to a specific project and it is difficult to draw generic conclusions. Yet, overall, all four evaluation reports and interviewees mentioned that one of the greatest achievements of the DCA project using CTP was their ability to implement the activities planned.

When it comes to achieving the intended results, it seems that the transfer value and frequency has sometimes proven difficult to set, and to achieve the intended results. For example in Cambodia, the evaluation\(^{21}\) reports that the livelihood grant was disbursed in several instalments and was therefore rather used to meet immediate basic needs as opposed to invest in productive assets (which would have required saving the first grant received and waiting for the next one). The Lebanon evaluation

---

\(^{21}\) Truelove S., Lim V., 2013. Cash Transfer Programmes and indebtedness in Cambodia, DCA, Cambodia
report\textsuperscript{22}, describes how the amount of the food voucher had to be decreased due to exchange rate loss. In Gambella, DCA and its partner distributed fresh food vouchers and as per the evaluation, it seems that the amount does not “give access to fresh food for the whole two weeks between top-ups.”\textsuperscript{23} Those findings are also complemented by interviewee feedback on DCA CTP guidelines. Most of them found the document helpful and supportive but clear guidance and step-by-step process on the transfer value calculation has been the most frequently received suggestion on how to improve the guidelines.

Beyond the determination of transfer value at response design stage, it seems that market monitoring to inform the continuous adequacy of the grant amount could be done more systematically. Out of the countries interviewed, only Zimbabwe and South Sudan mentioned regular market monitoring.

The impact and process monitoring for projects using CTP is done in a similar fashion as any other projects, using a combination of field visits, post distribution monitoring and spot checks. This set up has long been established and has not changed depending on the modality used. One interviewee though mentioned higher scrutiny for projects using CTP, but this does not come out of the monitoring plans examined.

All countries involved in this evaluation have been using Magpy or were in the process of setting it up. Despite the challenges that mobile data collection could present in terms of skills, power supply or internet connection, the interviewees were all praising the quality of the support received (both in terms of capacity building and on-going technical support) and the added value of using the software in terms of accessible real time data and ease of data collection process. The use of mobile data collection is not related to the use of CTP but along with Magpy, they are within the International Strategy.

As mentioned earlier, out of more than 60 projects using CTP, implemented between 2013 and 2016, only four evaluations have been found. This was not the case in 2013: “DCA has a significant number of evaluations of its cash programming, which is positive... All countries included in this study had at least one in-depth evaluation report on cash-based projects, except for Cambodia, which is in the early phase of implementation. This is a good starting place and DCA can aim to increase this in the future.” The rationale for this lack of evaluation reports is unclear: it may be that evaluation exists but can’t be located anymore (although each interviewee has been asked about such relevant documentation), or that no evaluation was undertaken. Looking at DCA’s evaluation policy, project evaluations are mandatory only above a certain scale (5m DKK for humanitarian response) and when “the potential for learning is greatest, for example in innovative pilot projects.” So the low number of evaluations can also be an indicator of CTP being considered as a routine option.

5. Capacity building

The quality of DCA face-to-face training has been recognised by all interviewees. Numerous examples were provided when DCA global cash advisors or HRU team members came to deliver a cash training at the beginning of a response. Participants of the training that were interviewed rated sharing of tools

\textsuperscript{22} Avenir Analytics, 2015. Final evaluation Humanitarian response to very vulnerable displaced Palestinian refugees from Syria and host families in poor refugee camps in Tyre, Southern Lebanon, DCA, Lebanon.

\textsuperscript{23} Tønning M., 2015. Review of DCA Fresh Food E-voucher project, Gambella. DCA, Ethiopia
that can directly be used for project implementation and community mobilisation as the most useful training benefit. Several country offices, such as South Sudan, have generalised the good practice of kick off meetings at the beginning of each project. In South Sudan it consists of a two-day workshop to go in the detail of each project implementation plan. Although not specific to CTP neither to learning, this has been described as very useful and relevant.

At partner level and CTP-wise, there is no formal capacity assessment that is done prior to the delivery of training. The capacity assessment is generic and not specifically tailored to the use of CTP. As a result, there is nothing related to CTP in Step 0. Even if there was, DCA is primarily looking at its existing long-term partners to delivery CTP in a humanitarian context, some of them working on utterly different topics (migration, environment, etc.). This approach makes the case for tailored capacity building; its design could rely on a rapid self-assessment inspired from the OCAT.

Capacity building takes place at several levels. The expertise sits primarily with global cash advisors who are in charge of building the capacity of both DCA staff and partner staff. In country DCA programme teams are then supposed to be in charge of follow up capacity building with partners. Several interviewees mentioned the challenges of doing so. If a DCA staff member has just been training on CTP and has no direct experience in designing and implementing CTP, then it will be difficult for him to train others on this modality.

Several interviewees also mentioned the challenges of reaching field partners’ staff. In some instances, training is delivered at capital/HQ level with partner staff working there. Those staff members are then in charge of sharing the content of the training with their colleagues working in the field and delivering the project. Here, there is a risk of diluting the key messages. Another challenge is the language in which the training is delivered. An extreme example provided was in Syria, with a training being delivered in Turkey in English with partner field staff in Syria who only spoke Arabic.

Beyond the difficulty to reach first line staff with capacity building efforts, a fifth of the interviewees mentioned the high turnover in partner staff and the challenge to retain already trained staff in CTP, a valuable skill in the humanitarian sector. This challenge is not specific to DCA and could be generalised to the whole sector, beyond CTP. From its end, DCA is committed not to hire partner staff.

To share experiences and learning, intranet seems to be the go-to-platform, where tools, templates and training materials are easily stored and accessible. Several interviewees regretted the fact that it was not accessible to partners. This gap should be filled by the cash toolbox to be launched in December 2016.

6. Agility

Agility was not the primary focus of the evaluation, but within the course of the interviews, several relevant discussion points were shared by participants.

Operationally speaking, DCA and its partners have demonstrated great capacity to adapt and be agile. DCA has been able to set up different implementation models and successfully deliver in those different cases: self-implementation in Ethiopia, co-implementation in Nepal, South Sudan, partner implementation in Zimbabwe, Lebanon, Malawi, etc.
At project level, there has been no example of DCA and/or its partners switching from one modality to another, although they have been in a position to tailor the grant amount to the size of the family, for example in Zimbabwe. This is quite rare when it comes to humanitarian CTP.

Contrary to the findings of this evaluation, one interviewee described DCA as being too “bureaucratic” when it comes to the use of CTP and too focused on compliance as opposed to implementation: this bureaucracy resulting an increased rigidity.

7. Sustainability

Humanitarian CTP have by nature a limited sustainability. Yet, by working through partners, the sustainability of DCA CTP approach is stronger. Some partners, such as Lutheran World Foundation, have been able to fundraise further to further deliver CTP. In addition, implementing partners in South Sudan are now also using CTP with other partners, beyond their partnership with DCA.

Beyond CTP, DCA is now starting to look at Market Based Programming. Interviewees from South Sudan mentioned supporting the supply side.

V. The organisational effectiveness of DCA CTP approach

1. Progress made against 2013 recommendations

The table below presents the recommendations that were made in the 2013 evaluation with their progress and status in 2016, at the time of the present evaluation. The recommendations’ order has been rearranged to bring the ones that are still relevant first and would need attention from DCA.

<table>
<thead>
<tr>
<th>2013 recommendations</th>
<th>2016 evaluation</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop contingency plans for scaling up CTP. Contingency plans will include an adapted country-specific operational plan for cash and staff and partner training on CTP assessment techniques and decision-making trees.</td>
<td>CTP scale up happens now on a routine basis. Partner trainings are implemented very regularly, including refresher trainings outside of humanitarian crisis time. However cash preparedness is still a major gap. Out of the 11 country offices interviewed during the evaluation, only one had a contingency plan capturing CTP consideration (OPT)</td>
<td>Not achieved</td>
</tr>
<tr>
<td>The DCA Prolog unit should revise the DCA Procurement Manual sections on cash grants and vouchers to avoid confusion down the line.</td>
<td>The Procurement Manual has been revised in 2016 but the revision did not include a comprehensive section on cash and voucher as suggested. This is still strongly needed, especially if DCA wants to encourage co-implementation in case partners do not have strong systems.</td>
<td>Not achieved</td>
</tr>
<tr>
<td>Increase evaluation frequency of cash-based programmes. Perhaps setting a goal of 50% of all countries with cash-based projects should have external or consortium evaluations in 2013 is a realistic next step.</td>
<td>For the 2016 evaluation, only 4 CTP project evaluations were available for the period 2013-2016. That makes 4 evaluations out of more than 60 projects.</td>
<td>Not achieved</td>
</tr>
<tr>
<td>Goals for increasing the speed of programming should also be set. Time from the decision to respond to the first cash in hand for beneficiaries should be a key indicator tracked and monitored</td>
<td>Timeliness of the response has been flagged as a concern both in the Cambodia evaluation and in Nepal. There is no tracking of the time taken between the decision to use CTP and the first cash in hand. However this monitoring would be valid only if compared with other organisations in a given context using the same modality and with other modalities, to assess the comparative effectiveness of DCA and of CTP.</td>
<td>Partly achieved</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>DCA should develop several global cash-based project indicators for the most common sectors of food security and livelihoods that DCA will track to inform impact over time. Conduct comparative analysis of cash transfer programs and in-kind, or direct distribution programmes, to further inform the work.</td>
<td>Those recommendations on research agenda topic may not be that relevant anymore in 2016 as the body of evidence has globally grew. However, DCA has not fully taken advantages of its position to contribute to the overall CTP agenda.</td>
<td>Partly achieved</td>
</tr>
<tr>
<td>DCA should continue its positive engagement with new cash partners, specifically through provision of a deployed advisor to help set up the initial programme framework, offer training and refresher orientations to staff so that they feel comfortable with all of the language, terms, and methods, and make available to all partners a cash technical library that contains templates, manuals, and other documents that can be referenced by local staff.</td>
<td>DCA’s partners delivering CTP has constantly increased over the previous year. There is also record of training and refresher. The cash technical library was not available yet at the time of the evaluation but it was planned by the end of the year. One of the major limitations in this section is the fact that partners can’t access DCA intranet where all CTP related resources are shared.</td>
<td>Partly achieved</td>
</tr>
<tr>
<td>Goals for expanded cash programming should be set using the current scale of cash per country as a baseline.</td>
<td>The use of CTP is not a barrier to the scale of the project.</td>
<td>Achieved</td>
</tr>
<tr>
<td>DCA Regional Offices and Partners should pilot the use of different technologies to make payments to beneficiaries.</td>
<td>DCA and its partners are now using a wide range of payment mechanisms that are being selected on context specific criteria.</td>
<td>Achieved</td>
</tr>
<tr>
<td>DCA headquarters should explore ways to incorporate cash-based programming in its development programmes</td>
<td>This was not the primary purpose of the evaluation but based on interviewees, CTP seems to be used on a routine basis in Safer Community work.</td>
<td>Achieved</td>
</tr>
<tr>
<td>DCA has an existing track record with some of its local partners on how to introduce and generate buy-in among local NGO partners.</td>
<td>Lack of buy-in among local partners was not mentioned during this evaluation process. Interviewed partners have been using CTP for several years now and do not need to be convinced about its added value. This needs to be balanced with the fact that partners agreeing to take part in the evaluation may have already been CTP converts.</td>
<td>Achieved</td>
</tr>
<tr>
<td><strong>In addition, it has not been possible to determine what created buy-in (DCA actions, global trends, etc.).</strong></td>
<td><strong>Confront the preference for cash-for-work and ensure that the proper cash-based programme modality is chosen that best applies to the needs of the beneficiaries.</strong></td>
<td><strong>Unconditional, unrestricted CTP now represents more than 3 quarters of DCA CTP modalities.</strong></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>For an agency that works exclusively through partners, DCA will need to continue to provide timely technical assistance, friendly consultations on issues, foster an attitude of cooperation with partners, and have the capacity to bolster local NGO staff capacity to support cash-based programming in the field. Provision of templates, guidance documents, and other practical tools will ensure that local NGO partners have quality examples to adapt relevant to their contexts and expedite implementation. Clear guidance and examples also helps to assuage fears around new programming and will improve team morale</strong></td>
<td><strong>The support provided to partners has been spoken in high terms by all interviewees. What may be needed now is to prioritise and be strategic in the support provided.</strong></td>
<td><strong>Achieved</strong></td>
</tr>
</tbody>
</table>

NB: some recommendations are not captured in the table above as they are deemed non adequate by the current evaluator. For example: “DCA should adopt a global cash monitoring standard of 15% to 20% of all beneficiaries following a cash distribution as an element of Standard Operating Procedures.” To be representative, samplings should not be decided overall but should be tailored to each specific project.
The next part of the report focuses on assessing DCA’s organizational effectiveness in using CTP. Below is a discussion on indicators, adapted from the CaLP’s Organizational Capacity Assessment Tool (OCAT), which have been used as benchmarks to measure DCA’s capacity to support partners to design, implement and monitoring timely and at scale CTP. A full list of indicators is accessible in Annex C. For visualisation purposes the result of the OCAT is as below, the full scoring matrix is available in Annex D.

![Figure 6 DCA OCAT results](image)

2. Governance/leadership

DCA has shown real leadership within the organization and outside on CTP delivery and scale up. First, DCA has a clear vision of where & why CTP as a modality fits into its mission/mandate, goals and structure. DCA promotes the use of CTP where appropriate. The international humanitarian community and call to support cash to become the humanitarian’s default method of support for affected populations where markets and operational contexts permit, aligns with DCA’s vision that CTP should be considered equally with other modalities. This vision has been formalised in DCA’s International strategy related to Humanitarian Action in which CTP is a key programmatic and advocacy area. As a result, the scale of CTP has constantly grown in DCA both in terms of financial volume and the number of projects.

---

24 DCA Humanitarian Action Policy June 2013
Second, **CTP is integrated into strategic planning and emergency preparedness activities.** DCA has been adapting its decision-making criteria and frequency of choice modality according to the findings of project evaluations, research and partner experiences and recommendations. For example, the CTP modalities diversified since 2013, moving away from cash-for-work towards unconditional/unrestricted cash grants since the 2013 recommendation, and the feedback from partners. The use of CTP to cover multiple basic needs, as previously noted, has increased and as per the interviewees is likely to continue to do so, which also aligns with the recent development in the aid sector where major donors, such as ECHO, are beginning to show interest and fund multi-purpose cash projects. Preparedness was already identified as a weaker area for DCA’s operational effectiveness, affecting here its ability to rank high on emergency preparedness activities. However, despite the lack of formalised preparedness plan, capacity building efforts have taken place on a rolling basis and in some instances before the crisis happens, and all DCA country offices have at least one member of staff that is trained in CTP (according to interviewees). Furthermore, DCA has been using CTP on a routine basis in Safer Community work exploring different ways to incorporate cash-based programming in its development programmes, and more broadly integrating CTP to its mission and programmes.

Third, **senior management understands, supports and advocates for CTP and is willing to invest in needed planning, resources and systems.** DCA senior managers, and DCA as a whole have been great advocates internally and externally for CTP. This can be illustrated by the active role that DCA is playing with the CaLP board. Partner reticence to implement CTP is no longer perceived as a barrier as it may have been in the past. Of course, increased acceptance of CTP as a humanitarian response cannot solely be attributed to DCA advocacy and capacity building, but they certainly positively impacted DCA’s organizational capacity to work with partner organisations on CTP. The findings of this report on DCA CTP’s scale, design and management show its willingness as a whole to invest the resources and planning to deliver CTP and be a leader in the area.

The fourth benchmark is **sufficient donor or internal funding can be secured for CTP to meet response needs and to justify the required investment in organizational capacity.** CTP delivery is growing in scale and amount, as previously demonstrated, increasing from 7,6 millions USD in 2014 to represent a total of 8,1 millions USD in 2015. DCA is working on making CTP a more widespread choice, and strengthening its organizational an operational capacity to deliver efficiently the modality when appropriate. The decreasing need to convince partners of CTP, the increasing acceptance of CTP as a humanitarian response, and the trainings, are increasing their ability to secure the necessary funding to respond to demand and the necessary investment. DCA’s funding flexibility also means that DCA and its partners were often able to be the ‘first movers’, using CTP in areas where it has not been the case before.

### 3. Risk management

Risk management was identified during the evaluation and the webinar, as one of DCA’s weaker areas. Along with preparedness, risk assessment has been defined as another area where DCA ‘doesn’t rank high’ as one participant said.

**Risk assessment does not happen on a routine basis.** It was pointed out throughout the webinar, and in the interviews and past evaluations that risk assessment is not systematic nor is it done equally at all levels. Participants highlighted the discrepancies between risk management at global versus project
levels and at DCA versus partner levels. At project level, risk management happens more regularly but not necessarily in a formalised way, more as part of overall good programming. At country level for example, there are few comprehensive and accessible country risk assessments. When they exist, such as in Syria, they are not updated regularly and staff is not necessarily aware of it. Risk management should be envisioned at project but also at country and organisation levels. This lack of rigorous risk assessment was already part of the 2013 recommendations.

Furthermore, the share of risks between partners and DCA is neither clearly identified nor mitigated. CTP is not intrinsically more risky than another modality but it presents different types of risks. Partners’ roles in CTP are not always clearly defined in terms of who is bearing the cost for a given risk or who is liable for loss. These are not automatically captured in the partnership agreement.

4. HR management

Internal and external capacity building on CTP is both an area of success and an identified area for more strategic delivery. First, DCA program staff has the necessary knowledge, skills and experience to effectively design, implement & monitor CTP as needed but this is not necessarily the case with other departments (e.g. finance, logistics). DCA works mainly with partners, often with whom they have already worked with in the past. Also, as mentioned before, every DCA country office has at least one member of staff that is trained in CTP, and the quality of face-to-face training has been widely recognised. However, not all departments are equally involved in or even familiar with CTP. The finance department was reported as not being aware of how they could contribute to CTP implementation. The role of the finance department came up strongly in the webinar. Although their role in finance reporting remains very clear, their added value in terms of designing, delivering and monitoring CTP should be strengthened.

Second, staff learning and development builds knowledge and skills in line with CTP industry good practice, and involves and includes management, program and operations staff. Continuing on the first point, face-to-face trainings of staff and partner organizations is considered a success. As a CaLP member, DCA provides trainings on CTP based on identified good practices.

There are however many obstacles that challenge its sustainability and resulting efficiency. Beyond the difficult outreach and high turnover, DCA does not do enough formal capacity assessment, such as tailored capacity building of its partners.

5. Systems and procedures

DCA has been designing and implementing CTP since 2006 and has since developed systems and procedures, which are enshrined in its guidelines, design and implementation of its CTP projects. Cash/funding reserves are available where possible to enable faster CTP response to humanitarian and operational needs in emergencies. Timeliness of cash delivery is one of the successful components of DCA CTP responses and yet is one that could be strengthened further with improved preparedness. DCA’s flexible funding is also a great asset to allow for a timely response. Proposals and program budgets have routinely sought sufficient resources for security, finance, Information Management and other operational capacity and infrastructure needed for CTP.

Procurement and financial systems are not fully adapted to suit CTP. Looking at procurement, several programme interviewees mentioned the lack of clarity and guidance on the selection criteria to use for contracting a FSP. On the other hand, Prolog was also asking Programme for technical specifications
to support FSP selection. The on-going discussion for global FSP selection could be a good opportunity for both Prolog and Programme to come up with some joint criteria to use at country and project levels for FSP selection.

Procurement procedure was brought up during the webinar as one area that needed further clarification, especially the procurement manual as a resource that should be used as a guide. The Procurement Manual has been revised in 2016 but the revision did not include a comprehensive section on cash and vouchers as suggested by the 2013 evaluation (e.g. the cash and voucher section is less than a page long within a 120-page document). Value vouchers and cash grants are excluded from the scope of the manual, without any reference to the selection of payment service providers or contract follow-up. The manual does not cover service provision for payment service (i.e. the identification and contracting of FSP), nor does it provide guidance on the selection of traders for voucher provision, neither does it refer to the commodities and service quality control when vouchers are used. Furthermore, it does not specify what amount and where procurement fees apply (on the full amount to be transferred or on the service fees only). This is still very much needed, especially if DCA wants to encourage co-implementation with partners who may not have strong systems in place.

When it comes to finance, beyond a lack of clarity of the finance department’s role, there seems to be a lack of involvement from the finance department, which, in turn, results in a lack of clear and supportive financial procedures and systems.

6. Programme/project Management

This section brings together some of the previous questions and issues, but is a good reminder and benchmark to look at for overall CTP project management. First, **CTP is integrated into mechanisms for learning, sharing and using good practice.** Indeed, the CTP trainings, the intranet and upcoming Cash Tool box, the CaLP membership, are all part of lesson learning and sharing framework that DCA promotes on CTP.

Second, **Policies & procedures (P&Ps) to design, implement and monitor are in line with CTP good practice and are mostly used effectively, including needs and market assessment, feasibility and risk analysis, and response options analysis.** DCA CTP Standard Operating Procedures are known and used by most of the project level interviewees. Most of them rate the guideline as being useful. Further technical guidance, such as how to calculate the grant amount, could be added in the SOP, as well as a discussion on the share of roles and responsibilities in between the different departments and between DCA and its partners.

As discussed above, there is room for improvement in terms of pre-crisis analysis and risk assessment.

The monitoring system used for CTP project is the regular DCA framework; it uses a combination of monitoring visits, spot check, post distribution monitoring and feedback/complaint mechanism. This works well and is adapted to CTP. What could be strengthened is market monitoring, which does not happen on a regular basis across projects.

The active involvement of DCA in the definition of the Core Humanitarian Standards (CHS) also transpires from the interviews. Stronger linkages could be developed between the CHS and CTP, especially multi purpose grants, as both place affected communities at the centre of the response.
7. External Relations

DCA’s growing presence in CTP at the international level, and its growing number of partners and projects warrants an assessment of its external relations and management of relationships. First, capacity exists and is prioritised for the appropriate level of coordination and collaboration. At country level, as per the interviews, DCA is actively involved in the existing coordination forum. At global level, DCA is an active member of the Cash Learning Partnership (CaLP) and participates in the Geneva-based Cash Working Group chaired by OCHA and the CaLP. DCA demonstrates effective advocacy & communication strategies & systems to reach all relevant stakeholders with appropriate messaging for CTP. In the Humanitarian Exchange Language initiative, DCA leads the group on CTP and new technologies and aims to pilot the cash hashtag. DCA is also advocating with the ECOSOC(?) to encourage multipurpose cash grants. CTP is one of the strategic priorities of DCA and the dedicated resources for external coordination are aligned with this organisational commitment.

DCA’s relationship with ACT Alliance members bring added value for CTP and are effectively managed. Within the ACT Alliance, DCA has an identified expertise in CTP. DCA can (and has) put its CTP experts at the disposal of other ACT alliance members in case of large-scale emergencies. When it comes to capacity building, most of the large scale DCA implementing partners are ACT Alliance members, such as the Lutheran World Federation (LWF). DCA invested in building their organisational capacity to design, deliver and monitor CTP, until they reach a level where they are able to fundraise on their own for projects using CTP.

As part of the evaluation, it has not been possible to comment on the DCA relationship with service providers and donors.

VI. Recommendations

1. Increased preparedness

More and better cash preparedness should be a priority for DCA and its partners. Cash preparedness usually encompasses several elements:

- **Pre-crisis assessment of CTP appropriateness:**
  - As part of country level situation analysis, pre-crisis market information should be gathered (through primary and secondary data collection) and analysed to determine the capacity of the market systems to absorb an increase in demand.
  - The accessible and reliable CTP delivery mechanisms have been identified in the areas where DCA and its partners work in and in the areas that are prone to disasters.
  - Framework agreements with Financial Service Providers have been signed at global, regional and country levels.
  - It is recognized that there is overall CTP acceptance from local authorities, donors and communities.

- **Pre-crisis capacity building:**
  - At project level key programme staff have the knowledge and skills to assess CTP appropriateness, design an appropriate response and ensure implementation and rapid scale-up when relevant.
At project level finance and procurement staff know how they can support effective CTP. This could be achieved through more strategic CTP learning approach (see recommendation 3.)

- **Increased understanding of existing social safety nets:** Social safety nets are important to capture at situation analysis stage as they can be used as a platform to deliver future emergency response. The mapping of existing social safety nets should include a review of targeting mechanisms already in place, payment systems, complaint and feedback mechanisms, administrative structures and Government capacity.

Most of this information already exists at country level, not necessarily within DCA but amongst the members of the cash-working group or within the organisations that have used CTP in the past. Pre-crisis time is the good time to collect and gather this information. Ideally they should be analysed so that the DCA response to predictable and upcoming disasters can be better anticipated. These elements could be formalised in a preparedness plan to overcome the challenge of high turnover.

2. **Systematic risk assessments**

CTP is not more risky than any other modality, but it presents different types of risks that should be assessed and mitigated. It is important to determine what the potential risks are, who is at risk, the gravity of the impact and its likelihood of occurring, and whether risks can be mitigated through programme design features, such as the choice of transfer modality, delivery mechanism, or complementary activities. Finally, it is necessary to weigh these risks against the potential benefits, or against the risks of alternative interventions, including in-kind assistance, and when there is no alternative: what would happen if DCA provided no assistance at all?

Risk assessments should capture who bears the risk and who is liable. Risks are traditionally classified into three different categories; first as contextual risks (i.e. external to the organization: political, economic, environmental), second as programmatic risks (i.e. failure to meet programme objectives and/or potential harm caused) or third as internal risks (i.e. internal to DCA and/or its partners).

As DCA is a partner-based organisation, thus risk assessment is critical and should happen at different levels to obtain:

- an understanding of the risks for the community receiving the grants;
- an understanding of the risks for the partner delivering the grants (or subcontracting this risk to a Financial Service Provider);
- an understanding of the risks for DCA to support and/or co-implement CTP.

Risk assessment should be followed by a discussion on the existing mitigation measures, in order to have access to them, and knowledge of the organisation’s or partner organisation’s appetite for risk. This would further ensure that the decision to use CTP at the response analysis stage is an informed one.

This exercise should happen pre-crisis. It should ideally be formalised in the preparedness plan but should be facilitated in a participatory manner in between DCA and its partners.
3. More strategic approach to learning

DCA has made many efforts and allocated significant resources on capacity building. This has been recognised and appreciated by most interviewees. However, those same efforts and resources could be used more efficiently.

A first step would be to ensure that capacity building schemes are the result of an assessment of the organisations’ and trainees’ skills and capacity (either from DCA or partner staff). In order to assess the organisations’ capacity, a simplified version of the OCAT tool could be used as a self-assessment tool of partner’s capacity to design, implement and monitor CTP. To assess the individuals’ capacity, the CaLP competency framework could be adapted and used as a benchmark for capacity assessment and training design.

Beyond face-to-face training, alternative solutions to share the learning and encourage its retention could be sought in collaboration with the dynamic and proactive DCA learning lab. That can include:

- the dissemination of existing e-learnings on CTP and market by the CaLP, the IRC or the IFRC,
- the promotion of horizontal learning through a discussion platform, peer review, and internal evaluation.
- Mentoring: DCA has a lot of skilled and experienced staff willing to share with their peers.

DCA should rely less heavily on its global advisor for training roll out and identify regional/national CTP champions that are in a position to deliver training to DCA and its partner team members. They should have mandatory experience in first-hand CTP project design and delivery.

Capacity building efforts should focus on pre-crisis time to ensure programme and support staff, both in DCA and its partners, has the necessary skills and knowledge to rapidly implement quality CTP at scale. To support this effort, an adapted CaLP competency framework could be used.

At global level, DCA is an active member of the CaLP board but it could strengthen its role in the Technical Advisory Group.

4. Strengthening DCA’s financial and procurement systems

Successful program implementation is dependent on effective management, program expertise, and operations support. This is even more relevant when it comes to DCA, as it encourages co-implementation when partners do not have strong support systems. DCA’s operations therefore need to be in a position to support DCA delivery of CTP but also DCA’s partners’ delivery.

The evaluation focused mostly on finance and procurement but that should apply as well to ICT, administration, logistics and security.

The sharing of roles and responsibilities should be discussed between DCA’s different departments and captured in the CTP guidelines.

Due to the flexible nature of DCA’s operational models, this share of role and responsibility should be agile enough that it can adjust to different contexts. Sufficient resources should be planned for and programme team members should make sure it involves the support function from the start. The CaLP,
in collaboration with the Fritz Institute, is currently developing a matrix\textsuperscript{25} that can be used as a discussion starting point.

The following are being attributed:

Finance is responsible for:

- Ensuring appropriate adherence to audit compliance throughout the project cycle;
- Financial Service Providers assessment;
- Taking part in the market assessment;
- Encashment process planning;
- Payment reconciliation after the cash distribution.

Logistics is responsible for:

- Taking part in the market assessment;
- Selection of the delivery mechanism;
- Trader selection in case vouchers are used;
- Identification and contracts with the Financial Service Provider after receiving the programme implementation details from the programme team;
- Managing the relationship with the FSP and the traders;
- Market monitoring.

This share of role and responsibilities is just a suggestion and should be discussed and agreed upon at organisational level. The important point here is that a clear share of roles and responsibilities should exist to ensure effective delivery of CTP.

The Procurement Manual has been revised in 2016 but the revision did not include a comprehensive section on cash and voucher as suggested. This is still strongly needed. What could be added:

- Overall description of the Cash supply chain;
- Description of the suggested share of roles and responsibilities between DCA and partners, and between the different functions.
- Value vouchers and cash grants: concerning the use of value vouchers, trader selection will still need to be done and should therefore be covered in the manual. Cash grants imply the identification of payment service providers which should also be covered;
- Selection process for payment service providers, recommendations on criteria to be used for the selection, minimum content of the contract for service provision;
- Selection process for traders to be involved in voucher schemes, quality control of the services and commodities provided;
- The amount that applies to procurement procedures (on the full amount to be transferred or on the service fees only).

5. Contributing to the research agenda

DCA is uniquely placed in the sector, both because it is a partner-based organisation and because its senior managers are strong cash advocates. DCA is already taking advantage of this position by actively promoting the use of CTP when appropriate and by sharing their experience through different

\textsuperscript{25} The document is called « Programme Cycle Chart » and accompanies CaLP training module for Operation staff
platforms, such as the CaLP Board. However, it could further contribute to the overall research agenda on topics such as risk management when using CTP with community-based organisations, and on the value for money of CTP through implementing partners.

The little number of evaluations was somehow aligned with DCA’s overall evaluation strategy, yet, internal evaluations could be a good way to promote further learning.

6. Looking beyond CTP: market-based programming

The increased uptake of CTP has triggered an increased consideration of local markets. Market assessments have emerged as a common practice since CTP is routinely considered to cover emergency needs.

Humanitarian organisations in general, and DCA in particular, are therefore becoming conscious of the added value of using the local market to deliver their response.

Beyond using markets, humanitarian organisations are increasingly exploring the possibility to support market actors to be in a position to deliver aid. This can translate into:

- Supporting the supply side by supporting market actors (e.g. distributing grants to traders so they are able to restock);
- Supporting market services, such as rehabilitating storage space, distributing grants to transporter so they can repair their fleet;
- Advocating so the normative environment is conducive for markets, such as advocating with the Trade Ministry to lift the import quota in case of food shortage.

Support to the market can happen alongside emergency responses or as part of preparedness or longer term plans to strengthen market systems so they can better withstand future shocks.

Market-based programming was beyond the scope of this evaluation but seems to be an area largely untapped within DCA.
## VII. Annexes

### Annex A – Contact list

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation</th>
<th>Position</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Andreas Kiaby</td>
<td>DCA</td>
<td>Sr. Hum coordinator</td>
<td>South Sudan</td>
</tr>
<tr>
<td>2. Angela Marcher</td>
<td>DCA</td>
<td>Head of Procurement and Logistics</td>
<td>HQ</td>
</tr>
<tr>
<td>3. Catherine Goudouneix</td>
<td>DCA</td>
<td>Hum officer</td>
<td>Syria/Turkey</td>
</tr>
<tr>
<td>4. Chiranjibi Rijal</td>
<td>DCA</td>
<td>Livelihood Officer</td>
<td>Nepal</td>
</tr>
<tr>
<td>5. Christer Lænkholfm</td>
<td>DCA</td>
<td>Sr. Hum advisor</td>
<td>HQ</td>
</tr>
<tr>
<td>6. Diego Matsvange</td>
<td>DCA</td>
<td>Food and emergency officer</td>
<td>Zimbabwe</td>
</tr>
<tr>
<td>7. Erik Johnson</td>
<td>DCA</td>
<td>Head of humanitarian response</td>
<td>HQ</td>
</tr>
<tr>
<td>8. Fred Bully</td>
<td>DCA</td>
<td>Program officer</td>
<td>South Sudan</td>
</tr>
<tr>
<td>9. Glenn Hughson</td>
<td>DCA</td>
<td>Cash expert</td>
<td>HQ</td>
</tr>
<tr>
<td>10. John Musingusi</td>
<td>DCA</td>
<td>Program officer Right to Food and Humanitarian Action</td>
<td>Uganda</td>
</tr>
<tr>
<td>11. Lalit Bahadur Thapa</td>
<td>DCA</td>
<td>Programme Coordinator</td>
<td>Nepal</td>
</tr>
<tr>
<td>12. Louis Kawenda</td>
<td>DCA</td>
<td>Humanitarian officer</td>
<td>Malawi</td>
</tr>
<tr>
<td>13. Louis Kawenda</td>
<td>DCA</td>
<td>Humanitarian officer</td>
<td>Malawi</td>
</tr>
<tr>
<td>14. Majken Hansen</td>
<td>DCA</td>
<td>Head of International Finance Unit</td>
<td>HQ</td>
</tr>
<tr>
<td>15. Mani Kumar</td>
<td>DCA</td>
<td>Head of Programs</td>
<td>Myanmar</td>
</tr>
<tr>
<td>16. Morten Högensen</td>
<td>DCA</td>
<td>Globalfunding officer</td>
<td>HQ</td>
</tr>
<tr>
<td>17. Nidal Hamdouna</td>
<td>DCA</td>
<td>Program officer</td>
<td>OPT Gaza</td>
</tr>
<tr>
<td>18. Noanne Laida</td>
<td>DCA</td>
<td>Coordinatrice de Progamme Humanitaire</td>
<td>Burundi</td>
</tr>
<tr>
<td>19. Patrick Kibuku</td>
<td>DCA</td>
<td>Head of Programs</td>
<td>Kenya</td>
</tr>
<tr>
<td>20. Peter Bo Larsen</td>
<td>DCA</td>
<td>Country director Cambodia</td>
<td>Cambodia</td>
</tr>
<tr>
<td>22. Ali</td>
<td>LP1</td>
<td></td>
<td>South Sudan</td>
</tr>
<tr>
<td>23. Nadine Alkhateeb</td>
<td>Najdeh</td>
<td>Program Coordinator</td>
<td>Lebanon</td>
</tr>
<tr>
<td>24. Mvuselelo Huni</td>
<td>ORAP</td>
<td>Director</td>
<td>Zimbabwe</td>
</tr>
</tbody>
</table>
Annex B – Bibliography

Avenir Analytics, 2015. Final evaluation Humanitarian response to very vulnerable displaced Palestinian refugees from Syria and host families in poor refugee camps in Tyre, Southern Lebanon, DCA, Lebanon.


Danish Church Aid, n.d. Partnership Policy for International Cooperation, DCA, Denmark.

Danish Church Aid, n.d. Cash Transfer Programming Standard operating procedures and administrative requirements for the four main categories of cash transfer programmes: Unconditional Cash, Conditional Cash, Vouchers, Cash-for-Work, Denmark.

Danish Church Aid, 2012, Evaluation Policy, Denmark.

Danish Church Aid, 2015. Evaluation of the Danida+ and USAID cash transfer and seed provision intervention in Area 1, South Sudan

Danish Church Aid, 2016, Co-implementation (discussion paper - IMM Oct. 12), DCA, Denmark.

Danish Danish Church Aid, 2016, Community Based Emergency Preparedness Plan, OPT.

Danish Church Aid, 2016, Fresh Food E-Voucher Pilot Project Case Study, Ethiopia.

Danish Church Aid, 2016, HRU Cash mapping, Denmark.

Cross T., 2013. Review of Cash Transfer Programming at Danish Church Aid, DCA, Denmark.


International Rescue Committee, n.d., Commit to cash.

High Level Panel on Humanitarian Cash Transfers, 2015, Doing cash differently How cash transfers can transform humanitarian aid, ODI.


Mercy Corps, n.d., E-transfer implementation guide


Save the Children, 2012, Cash Emergency Preparedness (CEP) pilots: CEP guidelines & Key findings from pilot assessments.


Truelove S., Lim V., 2013. Cash Transfer Programmes and indebtedness in Cambodia, DCA, Cambodia.
Annex C – Indicators used to measure DCA organisational effectiveness

1. Governance/leadership
   - The organization has a clear vision of where & why CTP as a modality fits into its mission/mandate, goals and structure
   - Senior management understands, supports and advocates for CTP and is willing to invest in needed planning, resources and systems
   - CTP is integrated into strategic planning
   - Sufficient donor or internal funding can be secured for CTP to meet response needs and to justify the required investment in organizational capacity

2. Risk management
   - Preparedness plans are updated, referred to and inclusive of all modalities
   - Risk assessment happen on a routine basis. Share of risks between partners and DCA is clearly identified and mitigation measures put in place.

3. HR management
   - Management, program, finance, logistics and other staff have the necessary knowledge, skills and experience to effectively design, implement & monitor CTP as needed
   - Staff learning and development builds knowledge and skills in line with CTP industry good practice, and involves and includes management, program and operations staff

4. Systems and procedures
   - Financial systems are adapted to suit CTP with controls appropriate to the amount of transfer & the degree of risk, are in line with CTP good practice and routinely used effectively
   - Procurement systems are adapted to suit CTP with controls appropriate to the identify the most appropriate financial service provider.
   - Proposals and program budgets routinely seek sufficient resources for security, finance, Information Management and other operational capacity and infrastructure needed for CTP
   - Cash/funding reserves are available where possible to enable faster CTP response to humanitarian and operational needs in emergencies

5. Programme/project Management
   - Policies & procedures (P&Ps) to design, implement and monitor are in line with CTP good practice and are routinely used effectively, including needs and market assessment, feasibility and risk analysis, and response options analysis

6. External Relations
   - Effective advocacy & communication strategies & systems reach all relevant stakeholders with appropriate messaging for CTP
• Capacity exists and is prioritised for the appropriate level of coordination and collaboration, is sufficiently resourced, regularly engaged in, and recommendations appropriately acted upon with effective result
• Relationships with ACT Alliance members, service providers, donors and other partners bring added value for CTP and are effectively managed.
Annex D – Complete OCAT table

### Category 1: Governance/Leadership

<table>
<thead>
<tr>
<th>#</th>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>The organization has a clear vision of where &amp; why CTP as a modality fits into its mission/mandate, goals and structure</td>
<td>There is no mission statement or org. chart, or they have not been reviewed</td>
<td>Organizational structure has been reviewed but not yet adapted to CTP</td>
<td>Organizational structure has been reviewed, adapted to CTP but not rolled out</td>
<td>Organizational structure has been adapted to CTP and been fully rolled out</td>
<td>3</td>
</tr>
<tr>
<td>1.2</td>
<td>Senior management understands, supports and advocates for CTP and is willing to invest in needed planning, resources and systems</td>
<td>Senior management does not understand or support CTP</td>
<td>Senior management supports CTP, but is not willing or able to invest as needed</td>
<td>Senior management supports CTP and is willing to invest, but not yet fully done so</td>
<td>Senior management drives CTP change, makes investment as and when needed</td>
<td>4</td>
</tr>
<tr>
<td>1.3</td>
<td>CTP is integrated into strategic planning</td>
<td>No strategic or contingency planning process, or CTP not considered</td>
<td>CTP is partially integrated into strategic and contingency plans</td>
<td>CTP is fully integrated into strategic &amp; contingency plans, and preparedness activities underway</td>
<td>CTP is fully integrated into strategic &amp; contingency planning, and preparedness activities are complete</td>
<td>3</td>
</tr>
<tr>
<td>1.4</td>
<td>Sufficient donor or internal funding can be secured for CTP to meet response needs and to justify the required investment in organizational capacity</td>
<td>Fundraising does not seek CTP funding</td>
<td>Fundraising can find some CTP donors, but cannot secure much CTP funding</td>
<td>Fundraising can find CTP donors, develop strong proposals and secure some CTP funding</td>
<td>Fundraising can find CTP donors, develop successful proposals and secure sufficient CTP funding</td>
<td>3</td>
</tr>
</tbody>
</table>
## Category 2: Risk Management

<table>
<thead>
<tr>
<th></th>
<th>Preparedness plans are updated, refered to and inclusive of all modalities</th>
<th>No preparedness plan</th>
<th>Existing preparedness plan but not refered to/updated or does not include CTP</th>
<th>Plan exists and include CTP but is not used/not known</th>
<th>Effective preparedness plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>No risk assessment in place</td>
<td>Risk assessment happen but the share of risks is not clear.</td>
<td>Risks are clearly identified and share but there is no sufficient mitigation measures in place. Or mitigation measures are in place but the share of risks is not clear</td>
<td>Risks are jointly identified, adequate mitigation measures decided and sourced.</td>
<td></td>
</tr>
<tr>
<td>2.2</td>
<td>Management, program, finance, logistics and other staff have the necessary knowledge, skills and experience to effectively design, implement &amp; monitor CTP as needed</td>
<td>Few staff have skills to implement CTP, with no plans to develop capacity</td>
<td>Some staff have the required skills to implement CTP, but plans are made to develop capacity</td>
<td>Most staff have the required skills to implement CTP, and work is underway to develop full capacity</td>
<td>All staff have the required skills to implement CTP effectively with plans for regular review</td>
</tr>
</tbody>
</table>

## Category 3: Human Resource Management

<table>
<thead>
<tr>
<th>#</th>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1</td>
<td>Management, program, finance, logistics and other staff have the necessary knowledge, skills and experience to effectively design, implement &amp; monitor CTP as needed</td>
<td>Few staff have skills to implement CTP, with no plans to develop capacity</td>
<td>Some staff have the required skills to implement CTP, but plans are made to develop capacity</td>
<td>Most staff have the required skills to implement CTP, and work is underway to develop full capacity</td>
<td>All staff have the required skills to implement CTP effectively with plans for regular review</td>
<td>2</td>
</tr>
</tbody>
</table>
3.2 **Staff learning and development** builds knowledge and skills in line with CTP industry good practice, and involves and includes management, program and operations staff.

<table>
<thead>
<tr>
<th>Score</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Category 4: Systems and procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No staff L&amp;D or does not include CTP</td>
<td>Staff L&amp;D includes CTP but not fully in line with good practice</td>
<td>Staff L&amp;D includes CTP in line with good practice, but not for all mgmt., program &amp; operations staff</td>
<td>Staff L&amp;D includes CTP in line with good practice, and reaches all mgmt., program &amp; operations staff</td>
<td>3</td>
</tr>
</tbody>
</table>

### Category 4: Systems and procedures

<table>
<thead>
<tr>
<th>#</th>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1</td>
<td>Financial systems are adapted to suit CTP with controls appropriate to the amount of transfer &amp; the degree of risk, are in line with CTP good practice and routinely used effectively</td>
<td>No P&amp;Ps in place or do not include CTP</td>
<td>P&amp;Ps in place but not fully in line with good practice; P&amp;Ps are not known to or routinely used by staff</td>
<td>P&amp;Ps in place &amp; in line with good practice, but no process for review; P&amp;Ps known &amp; routinely used but not always effectively</td>
<td>P&amp;Ps in place &amp; in line with good practice, with process for regular review; P&amp;Ps are known &amp; routinely used effectively</td>
<td>2</td>
</tr>
<tr>
<td>4.2</td>
<td>Procurement systems are adapted to suit CTP with adequate controls to the identify the most appropriate financial service provider</td>
<td>No P&amp;Ps in place or do not include CTP</td>
<td>P&amp;Ps in place but not fully in line with good practice; P&amp;Ps are not known to or routinely used by staff</td>
<td>P&amp;Ps in place &amp; in line with good practice, but no process for review; P&amp;Ps known &amp; routinely used but not always effectively</td>
<td>P&amp;Ps in place &amp; in line with good practice, with process for regular review; P&amp;Ps are known &amp; routinely used effectively</td>
<td>2</td>
</tr>
</tbody>
</table>
### Category 5: Program/Project Management

<table>
<thead>
<tr>
<th>#</th>
<th>Criteria</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1</td>
<td>Policies &amp; procedures (P&amp;Ps) to design, implement and monitor are in line with CTP good practice and are routinely used effectively, including needs and market assessment, feasibility and risk analysis</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#</th>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1</td>
<td>Policies &amp; procedures (P&amp;Ps) to design, implement and monitor are in line with CTP good practice and are routinely used effectively, including needs and market assessment, feasibility and risk analysis</td>
<td>No P&amp;Ps in place or do not include CTP</td>
<td>P&amp;Ps in place but not fully in line with good practice; P&amp;Ps are not known to or routinely used by staff</td>
<td>P&amp;Ps in place &amp; in line with good practice, but no process for review; P&amp;Ps known &amp; routinely used but not always effectively</td>
<td>P&amp;Ps in place &amp; in line with good practice, with process for regular review; P&amp;Ps are known &amp; routinely used effectively</td>
<td>4</td>
</tr>
<tr>
<td>6.1</td>
<td>Effective advocacy &amp; communication strategies &amp; systems reach all relevant stakeholders with appropriate messaging for CTP</td>
<td>No advocacy or communication strategies in place, or do not include CTP</td>
<td>Some advocacy &amp; communication strategies in place, but not in line with CTP good practice</td>
<td>Most advocacy, &amp; communication strategies are in place and in line with CTP good practice</td>
<td>Effective advocacy, &amp; communication strategies are in place and in line with CTP good practice, and are regularly reviewed</td>
<td>3</td>
</tr>
<tr>
<td>6.2</td>
<td>Capacity exists and is prioritised for the appropriate level of coordination and collaboration, is sufficiently resourced, regularly engaged in, and recommendations appropriately acted upon with effective result</td>
<td>No coordination in place or attempted, or CTP is not considered</td>
<td>CTP coordination is engaged in on an ad-hoc basis, or is not routinely acted upon</td>
<td>CTP coordination is routinely engaged in &amp; acted upon, but staff not fully resourced</td>
<td>CTP coordination is routinely resourced, engaged in &amp; acted upon, with regular assessment of results</td>
<td>3</td>
</tr>
<tr>
<td>6.3</td>
<td>Relationships with ACT Alliance members, service providers, donors and other partners bring added value for CTP and are effectively managed</td>
<td>No partnerships in place though helpful, or do not cover CTP</td>
<td>Partnerships not all added value, or not effectively managed, or not in line with CTP good practice</td>
<td>Partnerships bring added value, are effectively managed in line with CTP good practice, but not regularly reviewed</td>
<td>Partnerships bring added value, are effectively managed in line with CTP good practice, and are regularly reviewed</td>
<td>3</td>
</tr>
</tbody>
</table>