

**NEW JERSEY HIV  
PLANNING GROUP**  
Monitoring and Evaluation  
Guidance



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## Definition of Monitoring and Evaluation

Monitoring can be defined as the ongoing process by which New Jersey HIV Planning Group (NJHPG) can receive regular feedback on the progress being made towards achieving their deliverable within their SMARTIE Recommendations. Contrary to many definitions that treat monitoring as merely reviewing progress made in implementing actions or activities, the definition used in this Guidance doesn't necessarily focus on asking questions like "*Are you completing the action steps NJHPG recommended?*" but rather asking questions like "*Is the New Jersey Department of Health (NJDOH) making progress on achieving the results and deliverables that we wanted to achieve?*" The difference between these two approaches is extremely important. In the more limited approach, monitoring may focus on tracking projects and the use of the agency's resources. In the broader approach, monitoring involves tracking the strategies and actions being taken by NJDOH, but most importantly tracks the end results or deliverables.

Evaluation is a rigorous and independent assessment of either completed or ongoing activities to determine the extent to which they are achieving stated objectives and contributing to decision making. The key distinction between monitoring and evaluation is that evaluations are done independently to provide managers and staff with an objective assessment of whether or not they are on track. They are more rigorous in their design and methodology, and generally involve more extensive analysis.

The aims of both monitoring and evaluation are very similar: *to provide information that can help inform future decisions, improve performance and achieve planned results.*

## Principles of Monitoring and Evaluation

1. **OWNERSHIP;** Ownership is fundamental in formulating and implementing changes and new projects to achieve the desired results. There are two major aspects of ownership to be considered: 1) the depth, or level, of ownership 2) the breadth of ownership.
  - a. Depth/Level of Ownership: Many times, organizations go through a planning process to fulfil requirements of their governing or supervisory bodies. In this the case, the plans, programs or projects have all been neatly prepared by the New Jersey HIV Planning Group (NJHPG) Community for submission to the New Jersey Department of Health (NJDOH). While it is important to have monitoring and evaluation systems, it is more important that people understand and appreciate *why* they are doing the things they are doing and adopt a results-oriented approach at work. The link between stakeholders & the department of health can vary depending on the work assigned. Accountability for each recommendation can look different depending on the aspects the DOH & NJHPG Leaders identify when building the Monitoring & Evaluation Framework. Buy-in from stakeholders is essential in the completion and implementation of recommendations.
  - b. Breadth of Ownership: There is an important question to address with respect to breadth of ownership: *who does the development program or project benefit or impact?* The NJDOH is ultimately responsible for achieving results across the entire state of NJ. This is why all SMARTIE Recommendations, include the stakeholders who may be needed when implementing these new practices, programs, and procedures.
2. **FOCUS ON RESULTS;** The monitoring and evaluation process should be geared towards ensuring that deliverables are accomplished. *Note; this means that the NJDOH will prioritize the output or deliverables rather than production or the action steps.* The NJDOH has the capacity and influence to impact high-level statewide results. While individual agency outputs and activities are very important, they will always have to follow the NJDOH's support in creating sustainable changes throughout the state. Outside partners and stakeholders should, wherever possible, remain centered on supporting the Integrated Plan and the implementation of NJHPG Recommendations. This argument is in line with the statewide approach to end HIV transmission as a unified front.
3. **REMINDERS;**
  - a. **Articulate Assumptions-** The process of creating a monitoring and evaluation framework requires NJHPG to be explicit about the wants and needs of the desired deliverables. Illustrate how much and what type of work should be done to achieve desired outcomes so the NJDOH can determine what resources will be needed for that work.
  - b. **Manage Expectations-** There needs to be a shared understanding of the relationship between NJHPG and the NJDOH. The action steps listed in the SMARTIE Recommendations may not be a realistic pathway to fulfil the Activity by completing the deliverable. The NJDOH may have barriers due to budget, capacity, policies, etc.
  - c. **Concentrate on Realistic Ideas-** The NJDOH may not have the necessary resources to complete every action item. However, a visual or physical depiction of change or the desired deliverable, could be used to see an Activity was completed.
  - d. **The relationships with stakeholders will be essential in achieving the desired deliverables for each recommendation.** Buy in from these organizations & agencies should be of the utmost importance to the DOH. The actions taken by each stakeholder

may be different however their responsibilities will be specified within the Monitoring and Evaluation Framework.

## Monitoring and Evaluation Framework

A clear framework, agreed among NJDOH and NJHPG Leadership at the end of the planning stage, is essential in order to carry out monitoring and evaluation systematically. This framework serves as a plan for monitoring and evaluation, and should clarify:

1. What needs to be monitored and evaluated?
2. Who is responsible for monitoring and evaluation of deliverables?
3. What methods of monitoring and evaluation will suffice?
4. What resources are required to fulfil these needs? *Is there capacity to complete this?*

The framework will be housed on Miro, a collaborative online workspace. It will be completed by NJHPG and the NJDOH to create a cohesive and realistic system used to monitor and evaluate the state's progress and completion of SMARTIE Recommendations.

<b>Monitoring and Evaluation Framework</b>						
Baseline Data	Desired Deliverables	Time Schedule or Frequency	Progress Update	Data Collection or Tracking Methods	Responsibility of Data Reporting	Outcome/Impact
The starting data pooled/re stated from the Integrated Plan	Pulled from NJHPG Recommendations	<i>Level of detail depends on the recommendations of NJHPG Committees and practical needs of the NJDOH.</i>	<i>Drafts, Campaigns, Educational Programs, Completed Deliverables , or Changes Made</i>	<i>Identify the Data Source that will be used &amp; describe how it will used to collect/track data.</i>	<i>Who is responsible for organizing the data collection and verifying data quality and source? Data Manager-the person responsible for tracking data &amp; outcomes</i>	<i>Data and Analysis- obtaining and analyzing accurate statewide data on the progress. Participation- get feedback from any stakeholders on the progress and implemented changes.</i>

A common challenge with monitoring and evaluation is how to “prove” that a particular outcome or impact is the direct result of a given intervention or output. Often, it is not possible to show complete certitude about the cause-and-effect relationship between outputs and outcomes in complex systems. Because there is no way to create controlled experiments, this research is often observational. It is even more difficult to show relationships between products and impacts, which are longer-term and usually affected by factors outside a project's control.

## Accountability

Accountability refers to “the principle that individuals, organizations and the community are responsible for their actions and may be required to explain them to others” (Measurement and Accountability - For the Public’s Health - NCBI Bookshelf (nih.gov)). The NJDOH’s accountability will be recorded by their contributions and progress to fulfilling each recommendation’s deliverables. Ensuring the NJDOH implements NJHPG recommendations requires a multi-faceted approach that focuses on transparency and accountability for the greater state of NJ.

1. Miro Board: The NJHPG and NJDOH will share a collaborative online dashboard that contains the agreed upon Monitoring and Evaluation Framework. This dashboard will be accessible to the NJDOH and NJHPG Support Team to regularly update it.
2. Public Reporting: The NJDOH will publicly report on its progress in implementing NJHPG recommendations at the quarterly General Assembly Meetings. If the NJDOH is unable to complete deliverables by their desired due date they must provide an explanation or valid reason as to why it was not completed. These quarterly reports will be published on the NJHPG website and shared with community stakeholders.
  - a. Community Forums: Utilize NJHPG Members and Guests to advocate and raise awareness about NJHPG recommendations and hold the NJDOH accountable for their implementation. This can be shown in ways like collecting data via a Collaborative Research Survey, having focus groups with tangible documentation (who was there, what was spoken about), organizing public forums, media campaigns, or alternative strategies.
3. Additional Oversight Option: If there is a necessity & capacity/resources establish a liaison, to monitor the NJDOH's implementation of NJHPG recommendations. This body could meet with their team to provide direction or clarity of recommendations, conduct site visits, and make recommendations for on how to complete the deliverables. (*possibly JSI as a consultant*)

By implementing this multi-pronged approach, there will be a system that effectively holds the NJDOH accountable for implementing NJHPG recommendations and ultimately improve the health and well-being of people living with or who are vulnerable for acquiring HIV in New Jersey.

## Future Planning

In the future NJHPG and NJDOH will work collectively to update or change SMARTIE Goals. These updates can occur when there is new data available, when the Integrated Plan needs to be renewed, or for any other statewide changes.

When changes happen it is the responsibility of NJDOH and NJHPG to report out to the state of New Jersey through regional councils including Consumer Advisory Boards (CABs), TGAs, and EMAs.

For individuals not included in structured bodies or HIV specific care, reporting out can be seen within NJHPG Website.



## Resources

- [imep\\_manual\\_15\\_feb\\_17.pdf \(ccrp.org\)](#)
- [pme-handbook.pdf \(undp.org\)](#)
- [Planning for monitoring and evaluation | Reintegration Handbook \(iom.int\)](#)
- [Measurement and Accountability - For the Public's Health - NCBI Bookshelf \(nih.gov\)](#)
- [developing-monitoring-evaluation-plans-guide.pdf \(sprep.org\)](#)