# QUALITY ASSURANCE & ACCOUNTABILITY INITIATIVE



NWCC & UNICEF Briefing 10th July 2020











School of Engineering

# RATIONALE

### **Context:**

- Increasingly complex operating environment
- Demands on the humanitarian sector to improve quality and AAP
- Repetitive quality issues across contexts

### Monitoring

- M+E systems designed for upwards accountability, not quality management
- Technology enables large volumes of data collection, overwhelming analysis capacity
- Field-level information is rarely used to improve decision making

### **Accountability to Affected Populations**

- Participation and accountability to affected populations are under-prioritised
- Voices of those affected by crisis are under-represented agency and cluster level
- Responses are often blind to different needs and vulnerabilities

# VISION

WASH Cluster platforms implement a **routine**, **collective approach** to response monitoring that supports **results-oriented**, **evidence-based decision making** to ensuring that **standards for quality** and **accountability** in humanitarian WASH responses are met and maintained, with continuous improvement. This requires an approach that:

- Supports data-driven prioritisation and decision making;
- Enables participation from all WASH partners in a strengthened coordination platform;
- Strengthens accountability to affected populations and between partners;
- Provides confidence that standards and objectives are being met.

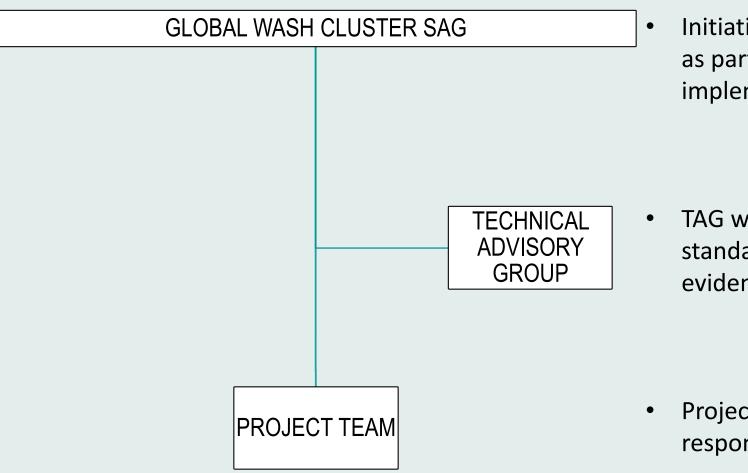
→ Initiative that is a key axis in the Global WASH Cluster's 2020-25 Roadmap *Delivering Humanitarian* WASH Anywhere and Any Time

# **VALUE FOR PARTNERS**

- Strengthened coordination role for clusters & UNICEF;
- Clear harmonisation of contextualised technical standards and approaches;
- Improved value from investments in assessments, monitoring and accountability systems;
- Streamlined reporting requirements;
- Information products that add value for decision making;
- Improved evidence base to be used for advocacy and lessons learned.

→ Change in the paradigm of data monitoring and analysis, not another reporting burden

# GOVERNANCE



Initiative will report to the GWC SAG as part of the Road Map 2025 implementation plan

• TAG will provide technical input on e.g standards, monitoring approaches, evidence base

 Project team (Oxfam and SI) responsible for deliverables

### **PROGRESS AND PLANNING NEXT STEPS**

#### PHASE 1: DEVELOPMENT 2019

- Research, concept development
- Field visits to understand context
- Early in-country testing
- Initial guidance and framework

#### PHASE 2: EARLY ADOPTION 2020

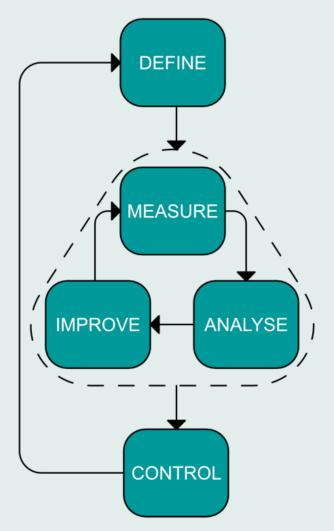
- Finalise guidance and framework
- Further piloting
- Remote support
- Dissemination, building engagement
- Learning and improvement

#### PHASE 3: WIDESPREAD ADOPTION 2021 →

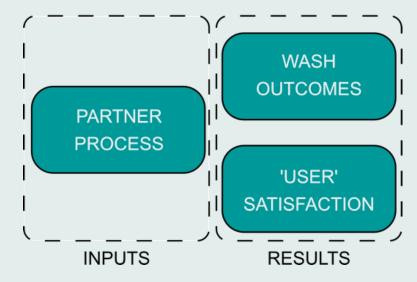
- Training and dissemination
- Remote support
- Additional tool development
- Learning evaluation
- Opportunities in other sectors and programme management

### **QAAS APPROACH**

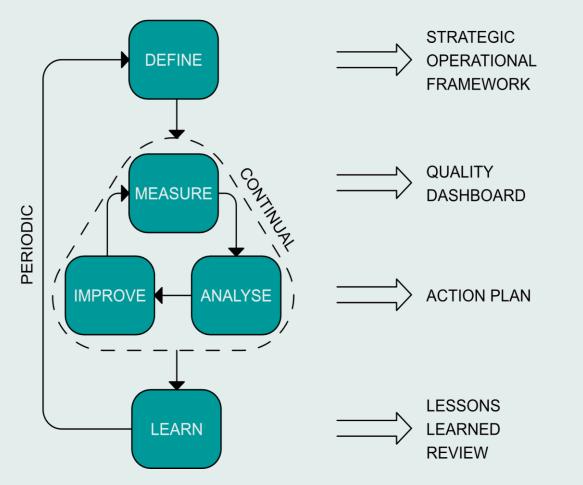
#### QUALITY ASSURANCE SYSTEM



#### MODULAR ANALYTICAL FRAMEWORK

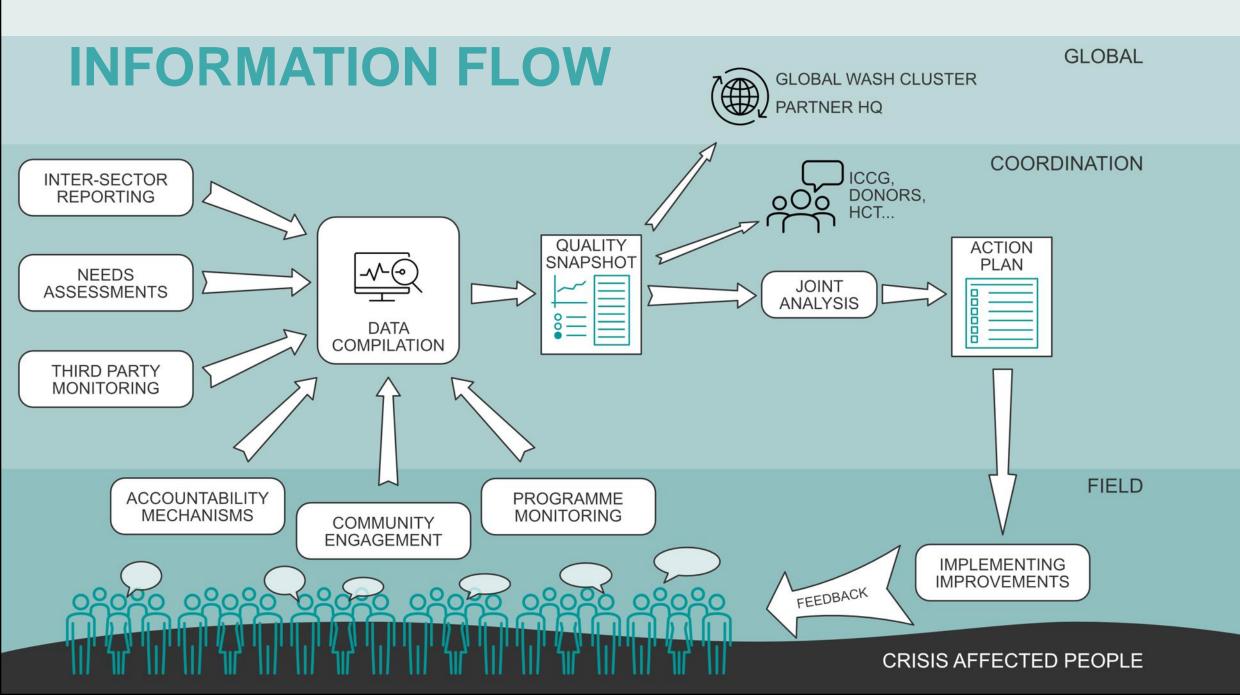


### **PROCESS STEPS**

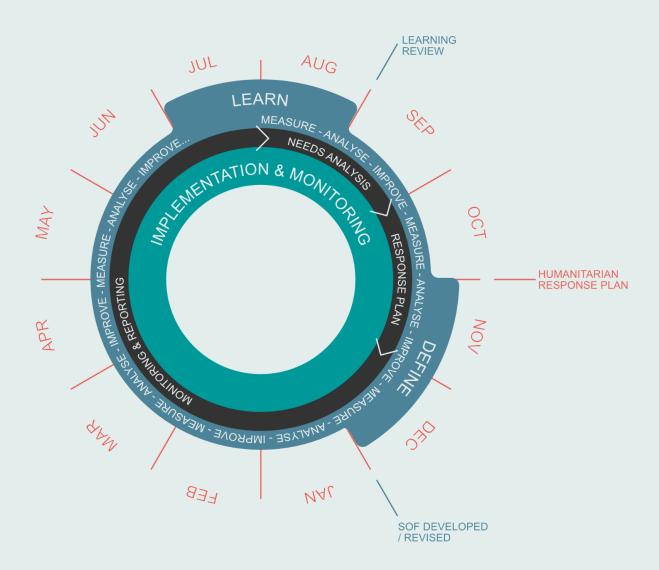


5 Steps:

- 1. Collectively **DEFINE** standards, objectives and approaches
- 2. MEASURE against these indicators using available data
- 3. Jointly **ANALYSE** the information to identify gaps
- 4. Plan and implement corrective actions to **IMPROVE** the response; provide **feedback** to affected populations
- 5. Document changes made and lessons learned to **CONTROL** future issues



# **PROCESS AND THE ANNUAL HPC**



#### DEFINE:

- November December
- After finalisation of HRP

### MEASURE-ANALYSE-IMPROVE:

Continuous

### <u>LEARN:</u>

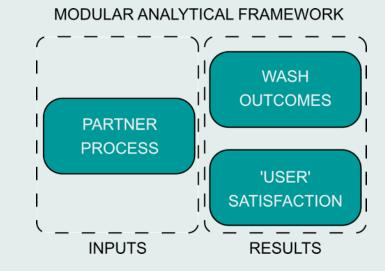
- July August
- Before HRP process

# **MODULAR ANALYTICAL FRAMEWORK**

- Monitoring framework identifying key quality indicators and data collection
- Modular system linked to specific WASH objectives
- Based on existing standards (SPHERE, CHS) and data collection approaches (Indicator Registry, MICS)

#### 3 Perspectives:

- 1. What **PROCESSES** do WASH partners have in place to ensure quality and accountability?
- How effectively are WASH partners achieving desired OUTCOMES?
- 3. How does the affected population **PERCEIVE** the way WASH services are delivered?



# **MODULE STRUCTURE**

Each module provides an analytical framework for evaluating a specific dimension of quality along with guidance on monitoring and analysis.

Each module includes:

- References to globally recognised standards
- Key Quality Indicators (KQI) and benchmark guidance
- Relevant monitoring approaches
- Questions to support data analysis and prompt further discussion

# MODULES

Completed: Satisfaction Safety People Centred • Participation Programming Inclusion • Feedback • Water quantity • Water quality Public Health Risk Sanitation • Handwashing • Water supply Sanitation WASH Services • Hygiene Menstrual hygiene

#### Planned:

Risk Communication & Community Engagement (RCCE)	WASH in Health Care Facilities	
Market Based Programming	WASH in Schools / Institutions	
+Ot	hers	

### **PUBLIC HEALTH MODULE**

MODULE	PUBLIC HEALTH RISK				
	Reduce public health risks by creating barriers to faecal-oral transmission along the pathways described in the F-diagram				
COMPONENT	WATER QUANTITY	WATER QUALITY	EXCRETA DISPOSAL	HANDWASHING	
STANDARD	SPHERE 2018	SPHERE 2018	SPHERE 2018	SPHERE 2018	
	Water supply standard 2.1:	Water supply standard 2.2: Water quality	Excreta management standard 3.1:	Hygiene promotion standard 1.1:	
	Access and water quantity	Water is palatable and of sufficient quality	Environment free from human excreta	Hygiene promotion	
	People have equitable and	for drinking and cooking, and for personal	All excreta is safely contained on-site to avoid	People are aware of key public health risks	
	affordable access to a sufficient	and domestic hygiene, without causing a	contamination of the natural, living, learning,	related to water, sanitation and hygiene, and can	
	quantity of safe water to meet	risk to health.	working and communal environments.	adopt individual, household and community	
	their drinking and domestic needs.	1		measures to reduce them.	
KEY QUALITY	Outcome:	Outcome:	Outcome:	Outcome:	
INDICATOR	% of affected population using a	% of affected population using water for	% of affected population disposing of their faeces	% of affected population washing their hands with	
	sufficient quantity of water for	drinking and cooking that is acceptable	safely every time they defecate	soap at key times	
	drinking, cooking, cleaning and	quality			
	personal hygiene	1			
BENCHMARK	Quantity (I/p/d) agreed by WASH	Quality agreed by WASH cluster partners	Safe disposal means that faeces is disposed of in	Soap: Effective cleansing agents include solid or	
GUIDANCE	cluster partners through	through consultation with different affected	a way that effectively prevents contact with	liquid soap, detergent, chlorinated water or ash,	
	consultation with different affected	groups, an understanding of treatment	people, the environment and other potential	the choice of appropriate method should be made	
	groups or by reference to national	methods and an analysis of waterborne	vectors. Minimum requirements and approaches	based on local context and acceptability	
	standards	risks in the context	to be agreed by the WASH cluster partners		
	1	1		Key times: As defined by cluster partners, but	
	1	1		generally before touching food (eating, preparing	
	1	1		food or feeding a child) and after contact with	
	1	1		excreta (after using the toilet or cleaning a child's	
	I			bottom)	

# **FIRST STEPS**

### **Collective standards setting:**

• Definition document that sets out contextualised standards

### Monitoring and reporting:

- Limit reporting requirements to data that is useful for decision making
- Recognise the limits of 4Ws approach geographic gaps and duplication
- Prioritise tracking outcomes over outputs and reach setting indicators
- Share information that reflects the ground truth, highlight data gaps
- Beware of averages and aggregations look for differences and inequalities

### Joint analysis:

- Use meetings to agree priority issues and plan for action
- Find opportunities to bring constituents voice to analysis

# **QAAI NEXT STEPS**

#### Support to countries

- Actively seeking countries to pilot
- Remote or in-country support

### Additional guidance, tools development

- Guidance for developing SOF
- Tools and templates for monitoring, analysis and learning + case studies
- Additional module development based on need

#### **Dissemination and engagement**

- GWC Partners
- Donors
- UNICEF as key partner

# WAYS TO SUPPORT

- Provide feedback on the guidance, framework and tools from users' perspective
- Let us know what good practice you see
- Share case studies, evaluations, similar initiatives that we can learn from

# FEEDBACK, QUESTIONS

- What good practice is already happening that we can learn from?
- What are the pre-requisites for implementing QAAS?
- How can we address barriers?
- What additional tools, trainings, support do we need to develop to support the process?





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