**Annex E: Capacity Building for Malaria Capability and Maturity Model**

Objective

The Capability and Maturity Model (CMM) assesses how a team or organizational units work together to achieve set objectives. The tool uses a five-scale scoring system ranging from "initial" to "optimizing." CBM adapted the tool to assess the maturity of National Malaria Control Programs (NMCPs) across five dimensions – monitoring and evaluation (M&E); strategic planning, supply chain, leadership, management, and governance, and human resources – each with its own elements (see Figure 1). The five dimensions integrate essential aspects of NMCPs’ functions. The dimensions and elements are illustrated further in the following pages.

Resources required

Figure 1: CMM dimensions and elements snapshot

The time, materials, and human resources required to complete the CMM is minimal. It usually takes about half to a full day to complete, in which all relevant stakeholders gather in a room to go through the different assessment dimensions and elements. The only materials required are common office supplies (projector, post-its, markers, etc.) and meeting costs for food and beverages.

Intended users

The assessment is usually conducted by the long-term advisor but is designed to be a self-assessment tool that can be administered by NMCP staff.

Implementation process

Advisors can conduct the CMM assessment on an annual, semi-annual, or quarterly basis. The advisor leads the discussion and notes changes since the last assessment, if any. Depending on the preference and receptivity of the NMCP’s leadership, some advisors may choose to conduct the CMM assessment quarterly. Under CBM, some advisors, with the support of the NMCP, have rolled out the CMM assessment to sub-national teams so that regional health offices in charge of malaria activities can self-assess their progress as well.

At the end of the CMM assessment, the advisor will compile the responses using the framework to share it with the NMCP. The advisor should also share the results with the implementing partner.

One key aspect of the CMM is that the NMCP can conduct this assessment without an advisor as the tool is designed for self-assessments. However, before the NMCP uses the tool independently, it is recommended that the advisor conduct the first assessment to model the process and familiarize the NMCP staff on how to use the framework.

Expectation outcome and application

The outcome of a CMM assessment is a completed framework which can help inform intervention areas and priorities for the NMCP, and more specifically, the advisor’s individual work plan. The framework for all five dimensions is shown in the following pages.

| **Elements** | **Level 1**Initial | **Level 2**Managed | **Level 3**Defined | **Level 4**Quantitatively Managed | **Level 5**Optimized |
| --- | --- | --- | --- | --- | --- |
| **Dimension: M&E** |
| **Integration** | The M&E processes are not developed. | The M&E processes are not incorporated into the NMCP planning cycle on a regular basis. | Internal M&E and adherence to SOPs are integrated into the NMCP regular planning cycle. | Evaluation of progress toward stated goals, external audits, and presentation of results to the NMCP at large are included among the planned activities. | External audit results of SOP adherence and progress toward stated goals are periodically analyzed by the NMCP as part of its regular planning cycle with analysis geared toward quality improvement of organizational and program activities and policies. |
| **Costing** | Costing of the plan has never been conducted. | Costing of the plan is not complete. | Costing of the M&E activities is included in planning. | The actual costs of M&E activities are continuously tracked and compared against budgets. | NMCP analyzes several costing scenarios to choose the most efficient way for maintaining effective M&E activities. |
| **Infrastructure** | M&E is never or regularly tracked by hand. | M&E is tracked by hand, limited to nonexistent IT infrastructure available to electronically capture and store data. | IT infrastructure is available, well maintained, and technologically fit for data collection and storage. | The NMCP tracks the availability, maintenance, and technological fitness of its IT infrastructure for the M&E system. | IT infrastructure availability, maintenance, and updating for the M&E system is properly planned and budgeted. |
| **Data quality** | No national and sub-national M&E officers are able to ensure valid and reliable data. | Some national and sub-national M&E officers are able to ensure valid and reliable data. | All national and sub-national M&E officers are able to ensure valid and reliable data, and to explain that data’s importance to NMCP members at large. | The NMCP identifies and tracks indicators to measure data validity and reliability. | The NMCP periodically reviews its procedures to ensure that M&E data remain valid and reliable. |
| **Data use for decision-making and planning** | Data is not used for decision-making and planning. | Some data is sometimes used for decision-making and planning. | Data is often used for decision-making and planning. | The NMCP consistently uses data for decision-making and planning. | The NMCP periodically reviews its decision-making processes to ensure that the data being used continues to be valid and reliable.  |

| **Elements** | **Level 1**Initial | **Level 2**Managed | **Level 3**Defined | **Level 4**Quantitatively Managed | **Level 5**Optimized |
| --- | --- | --- | --- | --- | --- |
| **Dimension: Strategic planning** |
| **Vision and mission** | An organizational vision and a mission statement have not been articulated by the organization. | An organizational vision and a mission statement have been articulated but are not well known throughout the organization and are not reviewed or revised regularly. | An organizational vision and a mission statement are reviewed regularly across the organization, with people contributing to related success factors for the organization.  | The NMCP tracks key indicators to measure the understanding of and alignment with the NMCP mission and vision by individuals across the organization.  | A vision and mission statement, along with related success factors, are reviewed/revised regularly with input from around the organization. Their importance is easily articulated across the organization, and carefully considered in relation to the organization’s strategic direction. |
| **Critical success factors** | The NMCP has not identified any critical success factors. | The NMCP has identified some critical success factors in a non-systematic way. | The NMCP has systematically identified critical success factors that affect implementation of its strategic plan, including epidemiological, political, technological, and financial variables. | The NMCP tracks changes in the critical success factors that affect implementation of its strategic plan. | The NMCP periodically reviews its strategic plan, adjusting to changes in the identified critical success factors. |
| **Goals and objectives** | The NMCP does not have clearly articulated goals and objectives. | The NMCP has clearly articulated goals and objectives, but explicit priorities, a timeline, and responsibilities at the national and sub-national levels are not explicit. | The NMCP has clearly articulated goals and objectives, with explicit priorities, a timeline, and responsibilities at the national and sub-national levels. | The NMCP has identified and tracks key indicators to measure progress toward its goals and objectives. | The NMCP periodically makes decisions to consolidate achievements and accelerate progress toward its goals and objectives. |
| **Implementation plan** | The NMCP has not identified activities and developed a timeline for implementation in support its goals and objectives. | The NMCP has identified activities and developed a timeline for implementation in support its goals and objectives. | The NMCP has implemented some of the activities based on its timeline but is behind schedule on other activities. | The NMCP has implemented most of its activities based on its timeline. | The NMCP reviews progress of its implementation plan based on completed activities and makes adjustments as appropriate. |
| **Communications plan** | The NMCP does not implement any Activity to inform its staff about the program goals, objectives, and implementation plan. | The NMCP implements isolated activities to inform its staff about the program goals, objectives, and implementation plan. | The NMCP has and implements a communications plan to ensure that its staff is well informed about the program goals, objectives, and implementation plan. | The NMCP has identified and tracks key indicators to measure how well its staff is informed about the program goals, objectives, and implementation plan. | The NMCP periodically reviews its communications plan to ensure that its staff is well informed about the program’s goals, objectives, and implementation plan. |

| **Elements** | **Level 1**Initial | **Level 2**Managed | **Level 3**Defined | **Level 4**Quantitatively Managed | **Level 5**Optimized |
| --- | --- | --- | --- | --- | --- |
| **Dimension: Supply Chain** |
| **Logistics management information system (LMIS)** | Basic logistics management information processes and systems are not developed. | Basic logistics management processes are not used consistently, and systems are mostly manual. | Logistics management processes are well defined and documented, and some technology is used. | Logistics management processes are well defined and documented, and technology is internally integrated; LMIS data is sometimes used for decision-making.  | Continuous improvements in the LMIS are practiced and technology is fully integrated; LMIS data is always used for decision-making. |
| **Stock, inventory** | Stock management processes and inventory control are not in place. | Stock management processes are not used consistently, and inventory control is not uniform. | A basic stock management system exits, and inventory is consistently managed across levels. | Stock management procedures are well defined and documented; valid, up-to-date inventory information is available at each level. | Inventory and stock management are practiced consistently across all levels, and the national level has a clear picture of lower levels’ inventory needs and gaps. |
| **Product selection, procurement** | No policies or procedures exist for product selection; procurement does not occur. | No policies or procedures exist for product selection; procurement is ad hoc. | Processes for reviewing new and existing products before procurement decisions are clearly defined. | Processes for reviewing product selection and procurement mechanisms are defined, documented, and communicated to stakeholders. | A designated team or individual(s) consistently ensures that the appropriate products are procured in a timely manner. |
| **Storage and warehousing** | The warehouse does not meet any of the international warehouse standards. | The warehouse meets some of the international warehouse standards. | The warehouse meets most of the international warehouse standards. | The warehouse meets all of the international warehouse standards.  | The NMCP continuously reviews the warehouse to ensure that international standards are maintained and that any needed improvements are made. |

| Elements | **Level 1**Initial | **Level 2**Managed | **Level 3**Defined | **Level 4**Quantitatively Managed | **Level 5**Optimized |
| --- | --- | --- | --- | --- | --- |
| **Dimension: Leadership, management, and governance** |
| **Problem identification** | The NMCP has policies, plans, and procedures for introducing new tools and technology into clinical and management operations. | The NMCP has some isolated procedures for problem identification, solution, and sharing across the organization. | National and sub-national NMCP units use SOPs to identify clinical, management, and governance problems; design and implement solutions; and report them to the NMCP. | The NMCP tracks identification of clinical, management, and governance problems by national and sub-national units and the solutions they designed and implemented. | The NMCP periodically analyzes clinical, management, and governance problems identified by national and sub-national units and the solutions they designed and implemented. The results of these analyses are shared, and lessons learned taken into consideration for improving policies, plans, and procedures. |
| **New tools/ technology** | The NMCP has and implements policies, plans, and procedures to promote engagement and participation of the private sector in planning, implementation, and evaluation of malaria control activities. | The NMCP has some isolated experiences in managing introduction of new tools and technology into clinical and management operations. | The NMCP has policies, plans, and procedures for introducing new tools and technology into clinical and management operations. | The NMCP has identified and tracks key indicators to measure the effects of new tools and technologies on clinical and management operations. | The NMCP periodically reviews its policies, plans, and procedures for introducing new tools and technology into clinical and management operations. |
| **Public-private Partnerships** | The NMCP has and implements policies, plans, and procedures to ensure transparency of its management and financial decisions. | The NMCP has some PPP experience, but does not have policies and procedures to promote full engagement of the private sector in planning, implementation, and evaluation of malaria control activities. | The NMCP has and implements policies, plans, and procedures to promote engagement and participation of the private sector in planning, implementation, and evaluation of malaria control activities. | The NMCP tracks key indicators to measure the engagement and participation of the private sector in planning, implementation, and evaluation of malaria control activities. | The NMCP periodically reviews its policies, plans, and procedures to ensure engagement and participation of the private sector in planning, implementation, and evaluation of malaria control activities. |
| **Transparency** | The NMCP has and implements policies, plans, and procedures to engage and keep informed key Ministry of Health and multi-sectoral stakeholders on the program’s strategies, challenges, accomplishments, and needs. | The NMCP has some experience in promoting transparency but does not have policies and procedures to ensure transparency of its management and financial decisions. | The NMCP has and implements policies, plans, and procedures to ensure transparency of its management and financial decisions. | The NMCP has identified and tracks indicators to measure implementation of transparency best practices by staff and management units at national and sub-national levels. | The NMCP periodically reviews its policies, plans, and procedures to ensure consistent implementation of transparency best practices by staff and management units at national and sub-national levels. |
| **Information dissemination** | The NMCP does not have any initiatives to inform key Ministry of Health and multi-sectoral stakeholders on the program’s strategies, challenges, accomplishments, and needs. | The NMCP has some isolated initiatives to inform key Ministry of Health and multi-sectoral stakeholders on the program’s strategies, challenges, accomplishments, and needs. | The NMCP has and implements policies, plans, and procedures to engage and keep informed key Ministry of Health and multi-sectoral stakeholders on the program’s strategies, challenges, accomplishments, and needs. | The NMCP has identified and tracks key indicators to measure the level of information that key Ministry of Health and multi-sectoral stakeholders have on the program’s strategies, challenges, accomplishments, and needs. | The NMCP periodically reviews its policies, plans, and procedures to ensure that key Ministry of Health and multi-sectoral stakeholders are well informed on the program’s strategies, challenges, accomplishments, and needs. |

| Elements | **Level 1**Initial | **Level 2**Managed | **Level 3**Defined | **Level 4**Quantitatively Managed | **Level 5**Optimized |
| --- | --- | --- | --- | --- | --- |
| **Dimension: Human Resources for Health** |
| **Technical/****management capacity** | No or hardly any NMCP team members are updated on the most recent technical approaches recommended in the programmatic areas (clinical management, information system, logistics, etc.).  | Some NMCP team members are updated on the most recent technical approaches recommended in the programmatic areas (clinical management, information system, logistics, etc.), but there are no plans for keeping officers updated.  | The NMCP has and implements plans for keeping its officers updated on the most recent technical approaches recommended in the programmatic areas (clinical management, information system, logistics, etc.).  | The NMCP regularly assesses competencies of its officers to ensure their alignment with the most recent technical approaches recommended in the programmatic areas (clinical management, information system, logistics, etc.).  | The NMCP periodically reviews the content and procedures of its training programs to ensure alignment of its officers with the most recent technical approaches recommended in the programmatic areas (clinical management, information system, logistics, etc.).  |
| **Staff retention** | The NMCP does not have any practices for increasing its staff’s job satisfaction, motivation, and retention.  | The NMCP has some isolated practices for increasing its staff’s job satisfaction, motivation, and retention.  | The NMCP has and implements policies, plans, and interventions to increase its staff’s job satisfaction, motivation, and retention.  | The NMCP regularly assesses its staff’s job satisfaction and motivation through key indicators and measures retention rates and effectiveness of its personnel management system.  | The NMCP periodically reviews its policies, plans, and procedures to increase the job satisfaction, motivation, and retention of its officers.  |