Guidance on how to collect the Movement CVA Counting Cash or Operational Readiness Indicators

Who is this guidance for?

This guidance/tool is written mainly for National Societies (NS) at country level. Specifically, technical and operational staff members within NS who are responsible for measuring and reporting on the level of NS CVA preparedness and implementation. Relevant departments within the NS (e.g. DM, finance, logistics, procurement, PMER, CEA, OD) should also be involved.

The CVA Operational Indicators are also for broader Movement use and are being incorporated into IFRC Emergency Appeal, DREF and Emergency Plan of Action standard formats. They can also be used where relevant by ICRC. Finally, they may be useful for other external actors implementing CVA who wish to use common CVA operational indicators for scale, speed and accountability.

When to use this guidance?

All NS engaged in a <u>Cash Preparedness (CVAP) journey</u> need to collect these indicators to be able to measure their progress when implementing CVA in operations. This will determine which CVAP Level they are in and will contribute to the Movement efforts and global commitments to measure operational progress (scale, timeliness and accountability) in CVA through the Counting Cash initiative.

Ideally, in all cases (even for NS not engaged in CVAP), NS engaged in operations with CVA should use the CVA operational indicators during and after an emergency response or resilience/development programme, and additionally at the end of every year.

In this regard, CVA operational indicators should be included in NS response plans, NS M&E plans, NS operational reviews and evaluations. Additionally, they should feature in any IFRC Emergency Plan of Action, Emergency Appeal, DREF, M&E plans and IFRC reviews and evaluations that have a CVA component.

INDICATOR 1: % CVA through a framework agreement delivery mechanism

This indicator measures how far a NS is able and ready to deliver CVA. A framework agreement is an institutionalised ability to deliver cash, that indicates NS leadership commitment to cash, versus a project agreement or no agreement which is a more ad-hoc delivery mechanism.



CVA able - how to measure?

The type of contract used for the delivery mechanism: framework agreement, project based, or no-contract.

- The unit is the type of contract used for the delivery mechanism, and can easily be adopted to new programmes/ operations where when necessary.
- The type of contract to be selected as: framework agreement, project based, or no-contract.
- A framework agreement is a usually one that can be multi-modality (It can cover a range of financial services), multi-project or programme (can cover multiple projects during a given time period and hasn't been design for one project or programme only) and therefore is often multi-year in nature.
- A project-based agreement will cover one project specifically and therefore is usually for one mechanism and is limited to the timeframes of the particular project and intervention. Whilst this may mean a relationship is in place between the NS and the financial service provider, it also means that when there is a new project or operation, a new or updated contract needs to be negotiated.
- No project or framework agreement may well be a legitimate way to design your cash project, in many contexts direct cash or cash in envelopes can still be a preferred mechanism. If you have used mainly cash in envelopes please do select the no agreement option.

Further considerations:

• Remember to consider, if you have an existing project or framework agreements make sure they are compatible with IFRC and ICRC procedures and procurement processes. This can be done ahead of any emergency to ensure the NS is cash ready.

CVA able- what to measure?

- NS should consider all types of contracts in CVA interventions, including framework and/or project-based.
- NS should consider the CVA programmes/operations during the target year in **all responses and programmes**. This includes: Emergency/crisis response; Recovery; Development; Resilience; and Anticipatory/Early Action (FbF, crisis modifiers).

CVA able - when to measure and where to collect data?

Timeframe:

- The timeframe should be for all CVA response/interventions across full calendar year, from 1 January to 31 December. Only consider the CVA specific contracts for that year.
- If multiple agreements are in place please estimate the % of CVA that was covered by framework agreements, project agreements and no agreements. Please note the % should always add up to 100%!

Where to collect data:

- To make the right selection, the National Society should re-visit the contracts held with financial service providers to ensure an accurate answer.
- Remember to map out all RCRCM partners in country and include CVA interventions delivered using the different Movement partnerships. This could include:
 - NS independently (own funding and own technical support)
 - \circ $\;$ NS with IFRC funding (i.e. DREF. EA, etc.) and/or technical support
 - NS with Partner National Societies (PNS) or PNS consortium funding and/or technical support.
 - NS with ICRC funding and/or technical support
 - NS with funding from other humanitarian, recovery or development actors (NGOs, UN, World Bank, etc.)

• NS with Government (i.e. as part of the National Disaster Agency response, delivering shock responsive social protection safety nets, etc.)

INDICATOR 2: % CVA expenditure

This indicator reflects the likelihood of a NS to use CVA by measuring the % of total expenditure on CVA within a NS/Movement response. It measures scale in terms of expenditure on CVA. Additionally, it can show how far CVA is mainstreamed across NS operations and can give an indication of how far CVA is a predictable response modality.

Indicator	Level 1	Level 2	Level 3	Level 3+
% CVA expenditure	Up to 10% is CVA	11 - 40% is CVA	41 - 70% is CVA	Over 71% is CVA
EO.	EO3	103	KO 3	KO3
OR % NS branches delivering CVA	0% NS branches delivering CVA	up to 50% of NS branches delivering CVA	51% to 100% NS branches delivering CVA	51% to 100% NS branches delivering CVA

CVA scale/expenditure - how to measure?

Indicator 2 measures the % of CVA in terms of value or expenditure delivered by the NS, per response or intervention. It should also be combined at the end of each year. The total value of all CVA distributed per response should be calculated in local currency and then converted into % value of the total direct response expenditure (CVA, goods and services where possible).

CVA scale/expenditure - what to measure?

NS need to capture the amount for **all CVA modalities** delivered within a given response or intervention.

- **Cash or Vouchers:** Value of cash grants or vouchers delivered only. Includes all types of cash (conditional, unconditional, cash for work) and vouchers (commodity, value, combination). Do NOT include the service fees or any other indirect costs.
- In-kind: The monetised value of in-kind that has reached people's hands only. Include costs for all commodities distributed (food, NFIs, shelter, WASH, health, livelihoods, etc.). Do not include any indirect cost or fees (transport, warehousing, loading uploading, distribution).
- NS needs to capture / calculate the total value of all cash, vouchers and the total value of in-kind distributed that year in local currency. Then convert this into a % CVA expenditure or the Counting Cash tool will do this for you if using Counting Cash.
- NS should consider capturing this indicator for any of the following responses and programmes that had a CVA component. This could include: Emergency/crisis response; Recover; Development; Resilience; and Anticipatory/Early Action (FbF, crisis modifiers)

For NS who are Level 3 and above, there is the potential for capturing and reporting on the following, to understand the use of CVA across sectors and contexts.

• **Multi-sector objectives:** NS should gather the # of people or qualitative information related to the following sectors: Immediate/basic needs; Health & Care; Shelter & Settlements; WASH; Food security and nutrition; Livelihoods; Education; ICRC EcoSec; and Other.

- **Population status:** # or qualitative information about the status of the people supported (e.g. host, IDPs, refugees, indigenous people)
- **# or qualitative information on contexts where people assisted live in** contents of rural, urban and peri-urban areas, natural disasters, conflict, complex emergency, health outbreaks etc.
- **#** and/or qualitative information about the people supported by different delivery mechanisms: CVA in hand/envelope, bank, card, remittance company, mobile money, etc.

CVA scale/expenditure - when to measure and where to collect data?

Timeframe:

- The timeframe should be for all CVA response/interventions across a full calendar year, from 1 January to 31 December. Only include the value of those receiving CVA and in-kind delivered that year.
- In cases where CVA carried over from one year to the next, count only the value of actual CVA expenditure, not planned between January and December, to avoid double counting.

Where to collect data:

- To make the calculation, the NS should measure both expenditure of CVA provided during the year independently and/or with support from partners.
- Remember to map out all RCRCM partners in country and include CVA interventions delivered using the different Movement partnerships. For a suggested list please see indicator 1 above.

ALTERNATIVE INDICATOR 2: % NS branches delivering CVA

This is an alternative indicator to be used when the data required for % CVA expenditure cannot be gathered. It reflects NS scale and uptake of CVA by measuring the % of branches on CVA within a **NS/Movement response**. It can show how far CVA is mainstreamed across a NS give an indication of how far CVA is a predictable response modality.



CVA scale/branches- how to measure?

Alternative Indicator 2 measures the % of branches delivering cash per response or operation. It should also be combined at the end of each year.

The following guidance is suggested for measuring this indicator:

- The unit is number of **branches** delivering CVA as a % over the total number of branches
- **Branches:** are the geographical areas or branches through which the NS is structured. The can be called different things depending on the NS e.g. branches, areas, centres etc.
- CVA Branches: NS needs to capture /calculate the number of branches delivering CVA

• **Total Branches:** NS needs to capture /calculate the total number of branches available nation-wide for programmes/operations

CVA scale/branches- what to measure?

- Transform the total value from the total branches delivery cash and the total branch of the NS overall. Calculate this as a % or the Counting Cash tool will do this.
- NS should consider capturing this indicator for any of the following responses and programmes that had a CVA component. This could include: Emergency/crisis response; Recover; Development; Resilience; and Anticipatory/Early Action (FbF, crisis modifiers)

For NS who are Level 3 and above, there is the potential for capturing and reporting on the following, to understand the use of CVA across sectors and contexts.

- **Multi-sector objectives:** NS should gather the # of people or qualitative information related to the following sectors: Immediate/basic needs; Health & Care; Shelter & Settlements; WASH; Food security and nutrition; Livelihoods; Education; ICRC EcoSec; and Other.
- **Population status:** # or qualitative information about the status of the people supported (e.g. host, IDPs, refugees, indigenous people)
- **# or qualitative information on contexts where people assisted live in** contents of rural, urban and peri-urban areas, natural disasters, conflict, complex emergency, health outbreaks etc.
- # and/or qualitative information about the people supported by different delivery mechanisms: CVA in hand/envelope, bank, card, remittance company, mobile money, etc.

CVA scale/branches - when to measure and where to collect data?

Timeframe:

• The timeframe should be for all CVA response/interventions across a full calendar year, from 1 January to 31 December.

Where to collect data:

• Remember to map out all RCRCM partners in country and include CVA interventions delivered using the different Movement partnerships. For a suggested list please see indicator 1 above.

INDICATOR 3: # of days from disaster to CVA delivery (only for emergency responses and approved early action)

This indicator seeks to demonstrate that a NS has the enabling systems, processes, people and tools in place that ensure timeliness in meeting people needs with CVA during times of crisis. It measures the timeliness of CVA delivery and can indicator how far CVA is adequality pre-positioned.

Indicator	Level 1	Level 2	Level 3	Level 3+
# days from disaster to CVA delivery (only for emergency) responses and approved early action)'	28 days	14 days	7 days	2 days

Speed of CVA implementation – how to measure?

This indicator measures the average number of days between a rapid onset disaster, or trigger for responding to a chronic crisis, and the delivery of CVA into recipients' hands. This indicator focuses **mainly** <u>on emergency responses only</u>, as timeliness is critical in these contexts.

Calculation steps:

- Analyse each of the emergency responses, individually, to calculate the average number of "wait" days from the date of the rapid onset disaster or when anticipatory action was approved. Count the time between that date and when the first recipient/HH received CVA in their hands.
- Aggregate results from all the different emergency responses to capture the result per response.
- Adding up the results from different emergency responses, calculate the average number of wait days across all emergencies last year this will capture the average result for the year.

Speed of CVA implementation – what to measure?

The NS needs to capture time for CVA delivered in emergency responses only

- Recovery and Development CVA should not be included, to avoid influencing the emergency
 response results. This is because in recovery or development programmes recipients may be
 identified weeks or months before, but the project might be designed to deliver the CVA at
 specific dates due to some conditionality (i.e. shelter grant requires the walls to be constructed,
 livelihoods CVA is linked to seasonality and planting season, etc.).
- Capturing this indicator is very useful to help NS identify barriers that need to be addressed, to enable timely delivery of CVA. These could then be improved through a NS CVA preparedness approach.
- Disaggregating this indicator per location could also provide useful insights on the challenges that might be experienced in some parts of the country.

For NS who are Level 3 and above, there is the potential for capturing and reporting on the following, to understand the use of CVA across sectors and contexts.

- **Multi-sector objectives:** NS should gather the # of people or qualitative information related to the following sectors: Immediate/basic needs; Health & Care; Shelter & Settlements; WASH; Food security and nutrition; Livelihoods; Education; ICRC EcoSec; and Other.
- **Population status:** # or qualitative information about the status of the people supported (e.g. host, IDPs, refugees, indigenous people)
- **# or qualitative information on contexts where people assisted live in** contents of rural, urban and peri-urban areas, natural disasters, conflict, complex emergency, health outbreaks etc.

• # and/or qualitative information about the people supported by different delivery mechanisms: CVA in hand/envelope, bank, card, remittance company, mobile money, etc.

Speed of CVA implementation - when to measure and where to collect data?

Timeframe:

The total per year should also be calculated across the responses, from 1st January to 31st of December for an average yearly total.

- When the same recipients/HHs/groups receive different numbers of instalments i.e. CVA for basic needs for three months, delivered to the same household/person over time that year; the calculation should only be for the delivery of the first instalment and not consider the rest.
- If a response with CVA carries over from one year to the next, the NS shouldn't include this one into the calculation for the second year. In relation to timeliness only the responses that have started in the year of measurement are taken into consideration.

For NS who are Level 3 and above, there is the potential for capturing and reporting on the following, to understand the use of CVA across sectors and contexts.

- Consider analysis of timeliness by locations, by mapping of CVA responses and average delivery times per branch/location were CVA was implemented.
- Context types: rural, urban peri-urban, remote, easy access, etc. might have a negative influence on timelines
- Timeliness by delivery mechanism in the NS used more than one in the last year

Where to collect data:

- To make the calculation, the National Society should measure the speed of CVA provided during the year independently and/or with support from partners.
- Remember to map out all RCRCM partners in country and include CVA interventions delivered using the different Movement partnerships. For a suggested list please see indicator 1 above.

INDICATOR 4: # of CVA with key CEA / AAP activities

This indicator measures CVA quality and accountability and how far CVA has key components of Community Engagement and Accountability (CEA) or Accountability to Affected People (AAP).

Indicator	Level 1	Level 2	Level 3	Level 3+
# of CVA with key CEA/AAP activities	No or 1 activity	2 activities	3 activities	3 activities

CVA quality and accountability – how to measure?

• The key activities for NSs to evidence use of are;

- **Feedbacks and Complaints Response Mechanism (FCRM).** Evidence should exist that a feedback mechanisms is in place, is used by recipients and that the feedback is acted upon and leads to adaptations or changes in the programme or operation.
- Post Distribution Monitoring (PDM). Evidence exists that PDMs are completed and any feedback is acted upon and leads to adaptations or changes in the programme or operation.
- **Recipient Communication Plan (RCP).** Evidence exists that recipients have been consulted at the programme design stage and are participation and consultation happens at key stages of the programme or operation. Again this should lead to adaptations or changes to the programme or operation.

CVA quality and accountability - what to measure?

- Adding up the results from different emergency responses, calculate the average number of CEA/AAP activities across all programmes and operations in the year – this will capture the average result for the year.
- NS should consider capturing this indicator for any of the following responses and programmes that had a CVA component. This could include: Emergency/crisis response, Recovery, Development, Resilience, and Anticipatory/Early Action (FbF, crisis modifiers)

For NS who are Level 3 and above, there is the potential for capturing and reporting on the following, to understand the use of CVA across sectors and contexts.

- **Multi-sector objectives:** NS should gather the # of people or qualitative information related to the following sectors: Immediate/basic needs; Health & Care; Shelter & Settlements; WASH; Food security and nutrition; Livelihoods; Education; ICRC EcoSec; and Other.
- **Population status:** # or qualitative information about the status of the people supported (e.g. host, IDPs, refugees, indigenous people)
- **# or qualitative information on contexts where people assisted live in** contents of rural, urban and peri-urban areas, natural disasters, conflict, complex emergency, health outbreaks etc.
- # and/or qualitative information about the people supported by different delivery mechanisms: CVA in hand/envelope, bank, card, remittance company, mobile money, etc.

CVA quality and accountability - when to measure and where to collect data?

Timeframe:

• The timeframe should be for all CVA response/interventions across a full calendar year, from 1 January to 31 December.

Where to collect data:

• Remember to map out all RCRCM partners in country and include CVA interventions delivered using the different Movement partnerships. For a suggested list please see indicator 1 above.

INDICATOR 5: *#* of people supported with CVA

This indicator reflects the overall scale and uptake of the NSs CVA interventions.

Indicator	Level 1	Level 2	Level 3	Level 3+
			°°°	
# of people supported with CVA	0-200 people	201-1000 people	1,001 – 10,000 people	Over 10,001 people

CVA scale/people supported - how to measure?

This indicator measures the number of crisis affected people that were supported by NS CVA during the last year. This needs to be captured after every CVA response/intervention and combined at the end of the year (January to December). This indicator is calculated by taking the total overall number people supported per response/intervention with CVA (cash and vouchers).

The following guidance is suggested for measuring this indicator:

- The unit is the **number of people** supported.
- Be careful when making the calculations and always use the person as the unit. The NS might use different target units, such as individual, household (HH) or group.
- When needed, convert HH or group unit into people, by dividing by the average number of people in a HH (relevant by context) or group.

Further considerations:

- To reduce risk of double counting when person/HHs/groups receive several instalments of CVA they should be <u>counted ONLY ONCE</u>. The volume of CVA in terms of expenditure is captured and reflected in Indicator 2.
- It may be challenging to collect this data with high levels of accuracy. In this case, it is better to collect data and note the assumptions that you have made rather than collect no data at all. Seek to improve data collection practice overtime to improve the data accuracy.

CVA scale/people supported - what to measure?

NS need to capture the total number of people supported, for **all CVA modalities** delivered within a given response and in a given year.

- NS should document all types of CVA grants, including unconditional, conditional and CVA for work, as well as all types of vouchers, including commodity, value, and combination.
- NS should consider people that benefited from CVA during the target year in **all responses and programmes**. This includes: Emergency/crisis response, Recovery, Development, Resilience, Anticipatory/Early Action (FbF, crisis modifiers)

For NS who are Level 3 and above, there is the potential for capturing and reporting on the following, to understand the use of CVA across sectors and contexts.

- **Multi-sector objectives:** NS should gather the # of people or qualitative information related to the following sectors: Immediate/basic needs; Health & Care; Shelter & Settlements; WASH; Food security and nutrition; Livelihoods; Education; ICRC EcoSec; and Other.
- **Population status:** # or qualitative information about the status of the people supported (e.g. host, IDPs, refugees, indigenous people)

- **# or qualitative information on contexts where people assisted live in** contents of rural, urban and peri-urban areas, natural disasters, conflict, complex emergency, health outbreaks etc.
- *#* and/or qualitative information about the people supported by different delivery mechanisms: CVA in hand/envelope, bank, card, remittance company, mobile money, etc.

CVA scale/people reached - when to measure and where to collect data?

Timeframe:

- The timeframe should be for all CVA response/interventions across full calendar year, from 1 January to 31 December. Only include the value of those receiving CVA delivered that year.
- In cases where CVA carried over from one year to the next, count only the actual number of people that have received CVA, not planned, between January and December, to avoid double counting.

Where to collect data:

- To make the calculation, the National Society should measure both people reached with CVA during the year independently and/or with support from partners.
- Remember to map out all RCRCM partners in country and include CVA interventions delivered using the different Movement partnerships. For a suggested list please see indicator 1 above.
- NS should avoid double counting of people when CVA is supported by two or more partners (i.e. IFRC and PNSs) or multiple donors. People should only be counted once, even if they received CVA transfers more frequently.