**Checklist of key decisions and considerations when designing a CVA pilot project**

**Purpose of tool**

This tool outlines key decisions and considerations that may be helpful when planning a pilot project. It provides a checklist of key decisions such as defining the scope of the pilot, setting the objective, branch selection, as well as general considersations around other design and planning issues including feasibility and operational set-up.

A CVA pilot is a small-scale CVA intervention that supports real needs at the same time as keeping a conscious focus on the learning element, such as testing systems, procedures, tools and capacities. The pilot project will therefore need to conduct the necessary CVA project cycle steps (assessment, response analysis, set-up and implementation, M&E) as appropriate. However, certain key decisions in relation to scope and design can be made in advance to ensure the focus on learning. Documents to refer to when using the checklist include the [*External CVA basline for pre-crisis analysis,*](https://cash-hub.org/wp-content/uploads/sites/3/2024/06/1.3.f-External-CVA-baseline-for-CVA-pre-crisis-analysis-report-template-.docx) key NS or Movement response documents (e.g. Sit Reps, DREFs, Appeals), government and UN data, CWG reports, as well as NS knowledge of the area.

Using the checklist to define the CVA pilot project can either be applied as a desk exercise or as part of a scoping visit to an area/branch, when there is a tentative location in mind. A scoping visit could also provide an opportunity to meet with local government and community leaders to gauge acceptance of the pilot and conduct focus groups to determine preliminary selection criteria and calculate the transfer value, to support the proposal.

Below are some key steps and considerations to take into account when planning a CVA pilot:

1. Defining the scope

Disaster response/profile

* Is there a recent or a recurring disaster that the pilot can respond to? If not, is there a chronic longer-term issue that can be addressed? (e.g. food insecurity, poverty)
* Does the disaster have an ongoing Emergency Appeal that can be utilised for the pilot (i.e for situation and response analysis)?
* If the pilot will respond to a recurring disaster, is it likely to have a DREF that can be used at the time?

Geographical location

* Will the pilot be implemented in one location (e.g. a town or urban area) or across multiple areas?
* Is there a second or third affected location that also needs assistance and can be rolled out in a follow-up pilot?
* Is the location already known to the branch through existing programming or is it new?
* Are there existing relationships in place between either the branch/ HQ and local authorities in the intended location?
* If not, consider if it will be possible to establish an initial relationship in time for the start of the pilot, to ensure acceptance.

Pilot objective

* Objective of the pilot will be context specifc and in addition to testing the CVA processes, systems and tools, it could also be a combination of the following:
  + Testing of a new FSP and ways of working
  + To compare two different delivery mechanisms in terms of effectiveness and relevance (e.g. paper vouchers vs electronic vouchers through RedRose).
  + Testing or rolling out use of new technology equipment or an innovative system
  + To test a modality that is new for the NS, e.g. multipurpose cash
  + To influence government policy on the relevance of CVA in emergencies or to showcase the NS externally as a provider of a specific approach in the country context (e.g. using blockchain).

**Consider:**

* What is the rationale for choosing the pilot objective? As well as considering the importance of supporting a vulnerable population, this should be balanced with the benefit the pilot will bring for the NS in terms of addressing its CVA vision and what learning opportunities it will provide for future use of CVA.

For example, this could include:

* Recurring disaster where branch may need to respond regularly in the future.
* Branch that the NS would strategically like to capacity build in CVA.
* Use of technology that is of strategic interest for a partner/institutional donor.
* Setting the pilot objective should be anchored by the CVA vision and CVA operational readiness levels that the NS is aiming to achieve through CVAP.
* Keep the pilot as simple as possible, rather than trying to test everything at once. There is always scope to roll out a further pilot if there is more to test. Altnernatively, consider phasing in the more complex parts throughout the pilot, particularly around data management.

Timeframe

* How long will the pilot timeframe be? Does this need to align with any NS planning processes or emergency appeals?
* Will FSP contracting need to be done as part of the pilot timeframe or are pre-agreements in place?

Budget

* What funding is available for the pilot and who is funding it? How flexible is the donor if any adjustments need to be made once the pilot is underway, to accommodate lessons learned?

Scale

* What scale is the NS aiming to achieve through CVAP? Consider setting the pilot scale at 10-15% of the overall CVA vision/goal, based on how far into the CVAP investment the NS is at the time of the pilot.

Branch selection

* Which branch/s will be selected for the pilot and what will be the process? Consider:
* A branch that has participated in basic CVA training and is familiar with the SOPs
* A branch that undertook its own external CVA baseline for pre-crisis analysis
* Wilingness and commitment of the branch to undertake a CVA pilot for several months
* Branch capacity/potential to learn and to be fully involved from conception stage through implementation to lessons learned
* Availability of branch staff/volunters (Consider level of existing programming or any ongoing or likely responses)
* Is is there a suitable person with CVA knowledge who could take on the branch CVA Focal Point role as a counter part to the HQ role?

**Consider:**

* If more than one pilot is planned to be rolled out, prioritising other branches from the selection process.
* Having a formal discussion with the branch about expectations around the learning component, in particular the investment needed for conducting a lessons learned workshop or after action review.

1. Design and feasibility considerations

Needs assessment

* Are there any existing needs assessments or data that can be helpful in support designing the pilot objective?
* This could be anything from a formal Emergency Needs Assessment, government data, partners or external agencies assessments/reports (e.g. through CWG) or OCHA situation reports.
* Also consider existing social protection data.

Appropriateness of CVA

* Does the available data, or current understanding of the affected population, show a tangible need for CVA assistance?

Markets

* Are the markets functional enough in the area to support CVA?
  + This information could be available from the pre-crisis CVA baseline analysis, if the NS or any partners have conducted a RAM or MAG, or externally through the CWG.
* Is there physical access for beneficiaries to markets in the proposed location?

Modality choice

* Is there a need for a specific modality, according to the available data and understanding of the affected population? (e.g. multipurpose cash because a range of basic needs require support)

Targeting

* What vulnerable affected people might be targeted for the pilot? (Referring to existing assessment data)

Transfer value

* Can a transfer value (i.e. Minimum Expenditure Basket) be estimated in advance through any existing data, such as through the national CWG? This will be helpful for determining the pilot budget and whether available funding is feasible for the scale.

Acceptance of CVA

* Are the community and government likely to accept a CVA programme?
  + If the branch does not already have a presence in the area, some preliminary indication of acceptance will key to gain before commencing.
* Are there any local government preferences or policies for CVA that need to be considered?

Linking CVA with social protection

* Is there an active social protection system and is the pilot a good opportunity to test linking CVA with social protection, perhaps in a phased approach? Note: this might only be feasible in a longer pilot (e.g. more than 12 months)

1. Operational considerations

FSPs and use of innovative technology

* Is there an existing FSP contract that can be used or will the pilot involve contracting a new FSP and testing a new delivery mechanism?
* Has the NS identified a new technology approach it wants to trial (e.g RedRose, blockchain) and for what aspects of the project? (e.g. data collection or data management)
* If there is an FSP in mind, are there enough vendors/service providers in the pilot project area to cover the scale of the project?
* If needed, is there adequate network coverage in the pilot area? Are the intended FSP and/or technlogy provider and their vendors willing and available to participate in the pilot to the extent needed?
  + Consider that this may include regular meetings, demonstrations of hardware, trainings and feedback sessions with branch staff and beneficiaries, in addition to the distribution/encashment process.
* Is the intended new FSP and/or use of innovative technology appropriate for the target group? Can the pilot timeframe allow for any necessary sensitisation and training?

Cost efficiency

* Considering the location and any logistical constraints, is the intended delivery mechanism/FSP likely to ensure a more cost effective means of delivering CVA compared to other ways? (e.g. cash-by hand, vouchers)

Other actors

* Who are the other operational agencies in the area, if any?
* What stakeholders not already mentioned may be involved in the pilot?

HR/resources

* What resources and capacities already exist at present with the NS? What new resources will be needed to implement the CVA pilot? Are these available? Consider:
  + - HR (staff and volunteers)
    - Logistics
    - Other support

Risks

* What are the likely risks associated with the pilot and can they be mitigated/controlled?

Security

* What is the security situation in the proposed pilot location?

Administration/office space

* Will a new office base need to be established in the pilot location or can the branch existing office space be used?

1. Implementation considerations

Registration

* How will the target group be registered? Or are they already registered? (For example, if the pilot is an add on to an existing programme or will be using government lists).

Seasonality

* Consider any seasonal migration patterns. Will the intended beneficiaries be available and present in the project location during the distribution timeframe?

Data management

* Will data management (this could include aspects of assessment, registration, delivery and monitoring) require investments in new technology to be more efficient? If these are not already in the intended scope objective, relevant components may need to be considered.

1. Monitoring and learning

Lessons learned and

* Can the lessons learned workshop date be allocated in advance of starting, with all necesssary participants committed to attending?
* Is this likely to be be shared in the Movement (eg throug the Cash Hub) and externally?
  + Consider other humanitarian organisations, decision makers, technology providers, donors and government.

**Considerations around learning**

* Conducting a pilot can provide multiple opportunities for learning during the process, not just at the end.
* The pilot should not just be about testing of the approach, but also a refining of it through ongoing learning. Be willing to adjust and adapt aspsects of project design as necessary throughout the implementation, based on evidence (e.g. PDM results)
* Adjust data collection tools and approaches where necessary, throughout implementation.
* The first time a milestone is reached, e.g first distribution, CEA launched, PDM etc., take time to do a team debrief and write up results, documenting what worked well, what didn’t and what is to be adapted next time.
* The objective of the lessons learned workshop or any After Action Review will not just be to evaluate the project progress and achievements, but also on reviewing the suitability of systems and processes for CVA, and also to understand the NS experience with the FSP or technology provider.
  + Suggest to ensure this is well understood with the branch before commencing.
* Developing a case study of the pilot and sharing externally on the CashHub may be suggested.

**Key documents to be produced**

Minimum documents that should be produced from the pilot include:

* Project proposal, including budget, timeline, logframe and risk register
* PMER plan, including CEA components
* PDM reports
* Final report
* Lessons learned workshop

These are not only essential for the smooth implementation and reporting during the pilot process, but also for the purpose of lessons learned. Having a documented record of the process and results from the pilot will ensure the NS is able to utilise key learning in any future CVA projects.