



CHRISTIAN HEALTH ASSOCIATION OF KENYA (CHAK)

END-TERM EXTERNAL EVALUATION OF CHAK STRATEGIC PLAN 2017 - 2022 AND 3 YEAR PROGRAMME 2020 - 2022

CONSULTANCY TERMS OF REFERENCE

THE GENERAL SECRETARY
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THE TERMS OF REFERENCE FOR CHAK END-TERM EXTERNAL EVALUATION OF THE STRATEGIC PLAN 2017 - 2022 AND 3-YEAR PROGRAMME 2020 - 2022

Purpose of the evaluation

The objective of this consultancy is to carry out the end-term evaluation of CHAK implementation of the Strategic Plan 2017 - 2022 and the 3-Year Programme 2020 - 2022 to ascertain achievements (results/output/outcome/impact) and assess the effectiveness, efficiency and relevance and provide findings, conclusions and recommendations for action in the subsequent strategic plan and three year programme.

Scope of the evaluation

To apply/use the OECD-DAC Criteria for evaluation of humanitarian organizations, to review CHAK Strategic Plan 2017 - 2022 implementation through the two phased 3-year programmes and more specifically evaluate performance and achievements of the second 3-year programme that covers the period 2020 – 2022, by independently assessing the performance against the objectives and target indicators in the strategy and 3-year programme implementation workplans, draw conclusions and make recommendations that CHAK will use in the light of the changing internal and external context to develop a new six-year strategic plan and the first 3-year implementation programme that would help CHAK and MHUs effectively respond to the current situation.

More specifically the evaluation should:

- a) Evaluate CHAK's performance in the light of goals and objectives for the strategic plan and the target indicators
- b) Evaluate CHAK's performance in the implementation of CHAK Strategic Plan 2017-2022 and the 3-Year Programme 2020 - 2022 against the approved objectives and indicators.
- c) Evaluate achievements and lessons learnt on CHAK implementation of the Health Systems Strengthening Medical Equipment Enhancement Programme (HSS-MEEP).
- d) Evaluate the relevance of the objectives and goals/outcome and recommend their review/retention in the next strategic plan or any re-alignment in the context of the changing political, legal, economic and social policy environment.
- e) Review the relationship between CHAK and its member health units (MHUs) to determine relevance/value addition and effectiveness in representation and advocacy on their issues with government and other key health stakeholders.
- f) Review CHAK's identity and core mandate to identify strategic positioning and advocacy strategies for the devolved County Government structures, universal health coverage policy direction and the primary health care (PHC) approach.
- g) Make recommendations on new strategic objectives based on the above to inform the development of a new strategic plan for the period 2023 - 2028 and a 3-year programme for the implementation of the first phase (2023 – 2025) of the new strategic plan.

BACKGROUND

Overview of the CHAK Strategic Plan 2017-2022

CHAK is a national faith based organization of the Protestant Churches' health institutions and programs from all counties of Kenya which was established in 1946 and is dedicated to promoting universal access to quality health care. The purpose of CHAK is to promote access to quality health care by facilitating health facilities to deliver accessible, comprehensive, quality health services to the people of Kenya in accordance with Christian values, professional ethics and national health sector policies. CHAK also engages communities to empower them seek and access quality health care.

The Strategic Plan 2017-2022 was intended to chart CHAK organization growth and provide strategic guidance for CHAK network as it engages in the Global Health Agenda defined in the Sustainable Development Goals (SDGs) and the Kenya Vision 2030 and Health Policy Framework which promotes Universal Health Coverage (UHC) for both communicable and non-communicable diseases as well as Reproductive, Maternal, Neonatal, Child and Adolescent Health. CHAK planned to scale up resource mobilization and partnerships for sustainable health systems strengthening and capacity building towards enhanced quality health care in the devolved health system in Kenya

The Strategic Plan 2017-2022 has the **vision**; *“Quality Healthcare for all to the glory of God”*
To achieve this vision, CHAK Secretariat would be guided by the **mission**; *“To facilitate provision of quality health services through health systems strengthening, innovative health programs, training, advocacy and partnerships as a witness to the healing ministry of Christ”*

Strategic directions

The six-year plan has its core activities organized into 5 strategic directions as below;

1. Health service delivery
2. Health systems strengthening
3. Capacity Building and Research
4. Advocacy and Partnerships
5. Sustainable financing and resource management

Strategic Direction 1: Health Service Delivery

Strategic priorities

1. Communicable Diseases
 - a. HIV&AIDS
 - b. Tuberculosis (TB)
 - c. Malaria
 - d. Neglected Tropical Diseases
2. Non Communicable diseases
 - a. Hypertension
 - b. Diabetes
 - c. Breast Cancer
 - d. Bronchial Asthma

- e. Health for the aged
- 3. Reproductive, Maternal, Neonatal and Child Health and Family Planning
 - a. MNCH
 - b. Family planning and Reproductive health
 - c. Nutrition in MNCH
- 4. Environmental and Nutrition health
- 5. Orphans and Vulnerable Children (OVCs)
- 6. Mental Health
- 7. Visual Impairment

Strategic Direction 2: Health Systems Strengthening

Strategic priorities

- 1. Institutional Organization Development
 - a. Infrastructure development
 - b. Governance and management capacity building
- 2. Regional structures strengthening
- 3. County engagement structures
- 4. Health Care Technical Services
- 5. Human Resources for Health Management
- 6. Health Quality Management Systems

Strategic direction 3: Monitoring and Evaluation, Research and Learning

Strategic priorities

- 1. Monitoring and Evaluation
- 2. Research
- 3. Learning and Capacity Building
- 4. Medical Education through teaching hospitals and member Medical Training Colleges (MTC)
- 5. Communication and Documentation
- 6. Health Management Information Systems

Strategic Direction 4: Sustainable financing and resource management

Strategic priorities

- 1. Resource mobilization
- 2. Healthcare financing for Universal Health Coverage
- 3. Financial management
- 4. Audit and systems strengthening
- 5. Asset Management
- 6. CHAK Guest House management

Strategic Direction 5: Advocacy, Partnership and Networking.

Strategic Priorities

- 1. Strategic partnerships for health

2. Advocacy for CHAK member health network
3. Networking for knowledge sharing

STRATEGIC PLAN IMPLEMENTATION PROCESS

The Strategic Plan objectives, activities and M&E indicators were detailed in a logframe. The implementation management structure was organized under four departments and supportive units of HR, M&E, ICT and HMIS.

CHAK has undertaken the implementation of the strategic plan through;

- i. Two 3-Yearly Programmes which were funded by Bread for the World – Church Development Service (EED) and CHAK own sources including other partners. The first 3-year phase was completed and evaluated during the mid-term external evaluation.
- ii. Project proposals were developed targeting various components of the plan that mobilized additional resources and provided opportunities for priority activities implementation
- iii. Engagement in strategic partnerships with the Ministry of Health, Council of Governors, County Health Departments, Development Partners and other NGOs

One major development during the past 3-years was the onset of the **COVID-19 pandemic** and its major impact on the health systems, economy, worship activities, social programmes and education. The first case was identified in Kenya on 18th March 2020 and major Government led containment measures that included movement restrictions, lockdowns and curfews were instituted which had major impact on the utilization of routine health services and delays in the implementation of several project activities until the restrictions were eased. Innovation through use of technology for virtual meetings and trainings was adopted and has continued to be used. Routine screening and infection prevention and control measures were introduced at various places of worship, public facilities and health facilities as part of the COVID-19 response guidelines. Kenya established testing, contact tracing, treatment and surveillance systems and engaged a robust media engagement strategy through partnership and support by the private sector, development partners and various implementers to create awareness on COVID-19 prevention measures. Kenya COVID-19 response programme was successful rolled-out and daily status reports were routinely released. A COVID-19 vaccination plan was developed by Government with a target of immunizing 27m Kenyans by December 2022. There were delays in the initial roll out of the vaccination services due to global supply chain challenges but the programme was able to begin in the second quarter of 2021 with donations and supplies from the COVAX facility. Vaccine hesitancy from myths and misinformation has impacted massive vaccination roll out plans. CHAK participates in the vaccine deployment taskforce and has participated in the vaccine advocacy and service provision through its projects and MHUs. The shocks experienced in the health sector calls for building of resilient health systems.

Another major addition during this period was the BfdW funding support for the **CHAK Health Systems Strengthening Medical Equipment Enhancement Programme (HSS-MEEP)** whose objective was to strengthen capacity of the diagnostic and treatment medical equipment and quality assurance capabilities including enhancing capacity of the HCTS programme.

CHAK provided leadership to the Kenya Faith Based Health Services Consortium (KFBHSC) to develop an MoU with the National Government MOH and County Governments through the Council of Governors. This has provided a partnership framework to facilitate and guide inclusion and support.

The Government is driving UHC scale up through legislative and strategic reforms of the National Health Insurance Fund (NHIF) following recommendations of expert teams of consultants on Essential Benefits Package and Health Financing. The NHIF Amendment Act 2021 will scale up reforms towards social health insurance.

CHAK 3-YEAR PROGRAMME: 2020 - 2022

The second phase of the Strategic Plan had a large component implemented through a 3-Year Programme 2020 - 2022 which was funded by Bread for the World – Church Development Services with co-funding from CHAK and other donors. The programme had a development goal, several objectives and indicators targeting 5 strategic directions. These included;

Development Goal:

Improved access to quality health care services to communities in Kenya through empowered CHAK member health units that are well aligned to the global and national strategy on Universal Health Coverage (UHC) and Primary Health Care (PHC), as well as policies and guidelines in the devolved county health system.

Kindly specify the project objective to be accomplished within the project period (outcome level).

Project objectives: The 3-year programme had 5 objectives;

1. Health services delivery strengthened and scope expanded to include non-communicable diseases using PHC strategies
2. Health Systems Strengthened for efficient quality service delivery
3. Advocacy, partnerships and networking for support and enabling policy environment
4. Resource mobilization and Financial management enhanced for sustainable health care financing for UHC
5. M&E Data Management, Research and Training enhanced

Project indicators

The project indicators are elaborated in the Project Agreement Document which will be availed for the consultants review;

Objective 1: Health services delivery strengthened and scope expanded to include non-communicable diseases

Indicators:

1. By 2022 the proportion of ANC mothers attending 1st ANC that achieve 4th ANC visits within the 80 selected health facilities is increased by 20% from the 2020 baseline
2. *95% of the Patients receiving HIV testing services at all MHUs achieve Viral Suppression by 2022*

3. Awareness and education on hypertension and diabetes is created to reach a total of 500,000 people and subsequently screen a total of 378,000 people (M: 151,200 and F: 226,800) for elevated Blood Pressure and Diabetes at the community and health facility level by 2022

Objective 2: Health Systems are Strengthened and improved for efficient quality service delivery

Indicators:

1. CHAK RCCs consolidating MHUs needs and issues and facilitating appropriate responses that result to 40% of MHUs receiving support by 2022

Objective 3: Advocacy, partnerships and networking for support provide enabling policy environment

Indicators:

1. *MHUs experience predictable support by National and County Government based on formal MOUs in at least 35 counties.*

Objective 4: Resource Mobilization and Financial management enhanced for sustainable health care financing for UHC

Indicators:

1. 80% of CHAK MHUs levels 2-4 accredited to UHC programmes of MOH/NHIF and County Governments

Objective 5: Monitoring systems, data management and research are enhanced.

Indicators:

1. *100% CHAK MHUs enlisted in MOH Master Facility List (MFL) and reporting service delivery data in the MOH DHIS2 KeHIS Data System.*

EVALUATION PROCESS

The evaluation process should include the following;

1. Prepare an inception report with the proposed methodology/evaluation approach, stakeholder engagement, ethical considerations, reporting and timelines
2. Develop data collection tools/interview guide and data analysis system/templates for the evaluation process
3. Carry out desk review of all relevant CHAK Policies, Reports and Publications and Health Sector Laws, Policy documents, strategic plans and reports. These will include but not limited to;

CHAK documents

- CHAK Strategic Plan 2017 - 2022
- Three Year Funding Proposal & Budget 2020 - 2022
- Project Funding Contract and approved workplans
- Annual Budgets
- Six monthly Narrative Progress Reports to Bread for the World
- Health Systems Strengthening – Medical Equipment Enhancement Project (HSS-MEEP) documents and Report
- Quarterly and Annual Project Reports to other Donor Partners

- Funded Projects Work Plans, Budgets and Reports
- Published Annual Association's Reports
- CHAK Constitution, Governance Charter and Management Policy Documents
- CHAK Publications
- CHAK Times Newsletters
- Audited Accounts
- Annual Health Conference and AGM Reports
- Minutes of EXCO, Sub-Committees and AGM
- CHAK Website
- CHAK Communication Strategy
- Other Evaluation Reports

Health Sector Laws and Policy Documents

- Kenya Health Policy 2015-2030
 - MDGs, SDGs and the Kenya Vision 20/30
 - Universal Health Coverage (UHC) Policy 2020 -2030
 - National Health Sector Strategic & Investment Plan 2019 - 2023
 - MoU between Government MOH & Council of Governors and the Kenya Faith Based Health Services Consortium (CHAK/KCCB/SUPKEM/MEDS)
 - Kenya Health Act 2020
 - NHIF Amendment Act 2021
 - Kenya Health Partnership Framework Policy
 - Kenya National AIDS Strategic Framework
 - Kenya Demographic Health Survey (KDHS) Report and DHIS2/Kenya HMIS Reports
 - COVID-19 Pandemic status reports
 - COVID-19 Pandemic Response Policy Guidelines
 - Kenya HIV/AIDS Annual Reports
4. Facilitate review/evaluation of the performance of CHAK in the implementation of the Strategic Plan 2017 - 2022 and 3-Year Programme 2020 – 2022, in a workshop of CHAK members, EXCO and Secretariat Staff. A four-day workshop will be held with a representative group of all MHUs from the 4 Regions of CHAK held centrally at the CHAK Guest House in Nairobi, who will be substantially engaged through focus group discussions
 5. Conduct interviews of key informants/stakeholders – to include Chairman, Treasurer, RCC Chairs, Trustees, MOH, County Government Representatives, MEDS, Auditors, Donor representative, Consortium Partners, CHAK Management Team and focus group discussion of Technical project staff, patient/community representatives
 6. Assess and document the achievement of results/impact by the Secretariat and member health units through the implementation of activities in the Strategic Plan and 3-Year Programme
 7. Assess the progress and achievements of the implementation of the Health Systems Strengthening – Medical Equipment Enhancement Project (HSS-MEEP)
 8. Facilitate documentation of lessons learnt, gaps and challenges to facilitate learning and inform the new strategic plan development

9. To facilitate environmental analysis/scanning through a SWOT process by a representative team of CHAK members & secretariat that will identify relevant environmental context to inform the new strategic priorities
10. Compile the evaluation report which highlights findings, conclusions and recommendations for action
11. Present the draft evaluation report to Management Team and EXCO and incorporate their feedback and recommendations for action in the final evaluation report
12. Submit to CHAK two hard copies and a soft copy of the final evaluation report for dissemination to stakeholders and use in the development of new Strategic Plan and the first 3-Year Programme

Expected outputs

- i. Inception Report
- ii. Evaluation Report and it's dissemination to Management and EXCO
- iii. Executive Summary of the evaluation report which highlights key findings, conclusions, recommendations for action and lessons learnt

Time frame

The evaluation process shall be conducted within the months of June and July 2022. The total external consultancy days shall be limited to **30 days** covering all the TOR with time allocated as follows;

Activity/Item	No. of Consulting Days
1. Preliminary meetings – Discuss TOR	1
2. Desk Review of relevant documents	5
3. Develop inception report, the Study tools and Planning	2
4. Interviews with key Stakeholders	9
5. Facilitation a Consultative Workshop with CHAK member health facilities and Secretariat	4
6. Interviews follow up with Management and Staff	2
7. Draft Report Writing	4
8. Presentation of Draft Report to Management Team	1
9. Finalization and Presentation of Final Report to EXCO	2
TOTAL	30