

**Inception
Report and
Workplan –
Evaluation of
the Regional
Health
Institutions**

A c r o n y m s

CAREC	Caribbean Epidemiology Centre
CARICOM	Caribbean Community
CCHD	Caribbean Commission on Health and Development
CDB	Caribbean Development Bank
CEHI	Caribbean Environmental Health Institute
CFNI	Caribbean Food and Nutrition Institute
CHRC	Caribbean Health Research Council
CMO	Chief Medical Officer
COHSD	Council for Human and Social Development
CRDTL	Caribbean Regional Drug Testing Laboratory
ICT	Information and Communications Technologies
IDRC	International Development Research Centre
IOA	Institutional and Organisational Assessment
NGOs	Non governmental organisations
OECS	Organisation of Eastern Caribbean States
PAHO	Pan-American Health Organisation
RHI	Regional Health Institution
UMG	Universalialia Management Group
WHO	World Health Organization

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1. Introduction

Universalialia is please to submit this Inception Report and Workplan to the CARICOM Secretariat and to the members of the Steering Committee of the Evaluation of Five Regional Health Institutes (RHIs). The report includes the feedback received from the Steering Committee on March 9th and 10th during the Contract negotiation phase; it also provides additional details regarding the methodology, the nature of the deliverables, roles and responsibilities, timelines and budget.

The report is organised as follows:

- Further to this brief introduction, Section 2 presents the updated methodology.
- Section 3 discusses the roles and responsibilities of the various actors involved in the study
- Section 4 presents the team and the allocation of work
- Section 5 discusses the revised level of effort
- Section 6 gives an overview of the budget
- Appendix I contains the Evaluation Matrix
- Appendix II contains the following tools:
 - An interview protocol that will be used to conduct interviews with RHI Stakeholders
 - The Self-Assessment questionnaire for each of the RHIs
 - The Profile Sheet that will be distributed to each RHI prior to the field mission
 - A questionnaire that will be distributed to all Member Sates
- Appendix III contains a proposed outline for the Overall Evaluation report

2. Revised Methodology

2.1 Step 1 – Developing an Inception Report and Detailed Workplan

Duration: May 15th 2004¹

From March 23-31st 2004 the evaluation team leader conducted an orientation mission to CARICOM Secretariat offices in Guyana. During this visit, the team leader met also with Guyanese stakeholders to obtain their views on the relevance of the RHIs.

¹ Due to a six-week delay in the contracting process the workplan is presented to the Steering Committee on May 18th 2004.

2.2 Step 2 – Regional Analysis

Duration: April - June 2004

As noted in Universalialia's proposal, Step 2, which runs in parallel to Step 3, broadens the scope of the review process to reach out to RHIs, stakeholders and partners in CARICOM Member States.

The activities of Step 2 are the following:

Document review

- Document review
- International literature review of the nature of regional cooperation in promoting health-related matters
- International literature review of approaches to the coordination of complementary health institutions including identification of implications for the review of Regional Health Institutions in the Caribbean

Field visits in Member States

The Steering Committee and Universalialia agreed to visit a total of ten (10) of the CARICOM Secretariat Member States. Ten (10) of the fifteen (15) member countries will be visited in person. The following criteria are applied in selecting Countries for field visits:

- First priority: Host countries for Regional Health Institutions, CARICOM Secretariat and PAHO/CPC, namely Barbados, Guyana, Jamaica, St-Lucia and Trinidad and Tobago.
- Second Priority: Member States where there are language and other cultural differences, namely Surinam, Belize, and Haiti
- Third priority: Small states/OECS

Based on these criteria and priorities, a decision was made to visit the following countries:

- Guyana,
- Barbados
- Jamaica
- St-Lucia
- Trinidad and Tobago
- Surinam
- St-Vincent
- Antigua
- Grenada
- Dominica

Stakeholders to be Interviewed or Surveyed²

EXAMPLES OF STAKEHOLDER	METHODOLOGY	COUNTRIES
Representatives from the Ministry of Health	<ul style="list-style-type: none"> Survey instrument relating specifically on a) the demands in the country; b) the relevance of the RHIs; c) the quality of the services of the RHI; d) the gaps Interviews 	All BMC (survey) 10 targeted BMCs (interviews)
Representatives from the Ministry of Agriculture and/ or Environment	<ul style="list-style-type: none"> Survey instrument relating specifically on a) the demands in the country; b) the relevance of the RHIs; c) the quality of the services of the RHI; d) the gaps Interviews 	All BMC (survey) 10 targeted BMCs (focus group)
Representatives from the Ministry of Tourism	<ul style="list-style-type: none"> Survey instrument relating specifically on a) the demands in the country; b) the relevance of the RHIs; c) the quality of the services of the RHI; d) the gaps Interviews 	All BMCs (survey) 10 targeted BMCs (Focus group)
Representatives from the Ministry of Education	<ul style="list-style-type: none"> Survey instrument relating specifically on a) the demands in the country; b) the relevance of the RHIs; c) the quality of the services of the RHI; d) the gaps Interviews 	All BMCs (survey) 10 targeted BMCs (Focus group)
Food and Drug Authority ³ OECS Pharmaceutical Procurement Services Caribbean Regional Agency for Standards Setting (Barbados)	<ul style="list-style-type: none"> Survey instrument relating specifically on a) the demands, the supply, the gaps in health services in their countries; b) the relevance of the RHIs; c) the quality of the services of the RHI; d) options for the future Interviews 	To be determined OECS PPS (St-Lucia)
Medical Associations and other health-related NGOs, including but not restricted to: ⁴ <ul style="list-style-type: none"> Diabetes Association Heart-disease Association Nursing Bodies 	<ul style="list-style-type: none"> Interviews or Focus group discussion to discuss a) the demand, the supply and the gaps in health services in the country; b) the relevance of the RHIs; c) the quality of the services of the RHI, d) options for the future 	10 targeted BMCs
Universities <ul style="list-style-type: none"> UWI, University of Guyana, University of Suriname 	<ul style="list-style-type: none"> Interviews to discuss a) the demand, the supply and the gaps in health services in the country; b) the relevance of the RHIs; c) the quality of the services of the RHI, d) options for the future 	10 targeted BMCs
Private sector Pharmaceutical producers	<ul style="list-style-type: none"> Interviews 	Where they exist
Others	<ul style="list-style-type: none"> Other stakeholders as identified by the CMOs, the RHIs and within the parameters of the field visit duration 	To be determined
PAHO-CPC	<ul style="list-style-type: none"> Interviews 	Barbados
PAHO- Washington	<ul style="list-style-type: none"> Interviews 	Washington USA
CDB	<ul style="list-style-type: none"> Interviews 	Barbados

² This list may slightly vary from one Member country to the next.

³ Or equivalent

⁴ The full list of NGOs to be visited will be completed upon visiting the RHIs and through the feedback from the CMOs.

There is no single product arising from the work of Phase 2. Rather, it will be integrated into the required reports.

2.3 Step 3 – The Review of the Five RHIs

Duration: May - June 2004

Step 3 is estimated to require a minimum of some eight weeks. The major activities in Step 3 comprise the following in sequence:

- Further document review related to each RHI
- Tailoring of the IOA instrument for each RHI
- Circulation of the IOA self-assessment instrument to each RHI for self-assessment
- Initial review of the self-assessment IOA data from each RHI
- Tailoring of interview and data collection protocols on the basis of this data
- On-site inspection by UMG's two-person team
 - Key informant interviews with management and key staff
 - Focus groups/interviews with all staff
 - Review of facilities and systems
- Follow-up telephone conversations with management and staff to resolve any ambiguities
- Follow up documentary review

UMG will prepare a separate organizational review document for each RHI. These will be presented as a series of appendices in the Draft and to the Final Report.

2.4 Step 4 – Interim Report: Reporting on Findings

Duration: July and August 2004

The main activities of this step relate to the analysis and synthesis of the data collected during Steps 2 & 3. The main objective of Step 4 will be to develop a common understanding of the findings and to begin to build a consensus for the general lines of approach to the long-term renewal of the RHIs, individually and collectively, and the renewal of CARICOM Secretariat's ability to monitor and coordinate their activities.

Step 4, which is the first element of the Reporting Phase of the entire process described above, will comprise the following activities:

- Synthesis of data and the development of preliminary findings by the review team
- Follow-on interviews and data collection to “fill in information gaps” if any
- Articulation of a set of primary findings
- Articulation of general directions regarding the evaluation issues of future directions, and monitoring / evaluation
- Presentation of the Interim Report to the Steering Committee (end of July 2004). The Interim report will consist of a Power Point document.
- Facilitation of a one-day meeting with the CMOs during a one-day meeting to obtain feedback on the Interim report (Mid-August) .

Thus, the products of Step 4 are:

- A one-day meeting with the Steering Committee and the CMOs from amongst those Member States not visited in-person during Phase 2. Electronic copies of the document will be circulated by email prior to the meeting.
- An Interim report presenting major findings
- The final version of the Interim Report of major findings.

2.5 Step 5 – Developing the Draft Report

Duration: August - September 20-24 2004

The submission of the formal Draft Report will be scheduled for the September 20-24 window. The timing of the amendment of the Draft Report, and the submission of the Final Report is contingent on our securing feedback from reviewers within the time frames specified.

As indicated by the Steering Committee it is essential, to be able to provide Caribbean Ministers of Health an update on this important process during their scheduled mid-September meeting. Accordingly, Universalialia is willing to develop a condensed version of the Interim Report, in deck format, for potential use at this Ministers' meeting. We would develop this derivative product after the meeting with CMOs. In this way, we may be able to secure feedback and direction from Ministers and thus improve the overall quality and impact of the review as a whole.

In terms of activities, the Terms of Reference set out a period of eight weeks from the delivery of the Interim Report to the submission of the draft Final Report. However, due to the delays in the formal launch of the evaluation and, in recognition of the need to secure feedback related to the Interim Report, as well realities of schedules, somewhat more time may be needed to develop the Draft Report.

For example, it would seem to be prudent to await feedback on the Interim Report secured during the session with CMOs (see above), now planned for mid-August, before moving forward to build the Draft Report. Thus, the suggested submission date of September 20-24 reflects this prudence.

It is also for this reason that Universalialia has offered to develop a condensation of the Interim Report for potential usage at the mid-September ministerial meeting.

During that period, the following activities will be undertaken:

- Data collection with any informants who may have been unable to participate at an earlier stage (telephone interviews, email questionnaires)
- Team workshops to aggregate data and develop approaches for recommendations
- Report drafting
- Submission of the draft Report to the Steering Committee / Monitoring Group
- Development of a workshop to facilitate the review of the draft Report.

Thus, the products of Step 5 are:

- A condensation of the Interim Report for potential ministerial usage
- A draft of the Final Report (called Draft Report)
- Workshop for the Steering Committee/Monitoring Group. The Draft of the Final report will be presented to CMOs for review during a workshop to be convened after its submission in the September 20-24 window, at a venue to be determined. Details on the objectives, format of this workshop are to be finalized by June 2004 during the presentation of the Interim Report. The outcome of the Workshop will be incorporated into the Final report. With respect to Capacity Building of the CMOs, Universalialia will include a half a day session at the workshop to provide an overview of the methodology used for conducting IOAs and to share with the CMOs some tips and tools with respect to that methodology.

2.6 Step 6 – Final Report

Duration: October 2004

The sixth and final step of the evaluation process integrates the comments of all the reviewers into a final product. The Terms of Reference call for a period of up to three weeks from the receipt of these observations to the submission of the final document.

The activities to be undertaken during this step include:

- Final data gathering and final interviews, most likely to refine observations and seek guidance as to the final direction of the Final Report
- Synthesis and integration of comments received to prepare a Final Report
- Teleconferencing with the Steering Committee/Monitoring Group to review the Final report

The product of this sixth step is:

- The Final Report: The Final report will be presented to the CARICOM Secretariat in the October 18-22 window, assuming that key informants provide their inputs and observations in a timely manner as envisaged by the original Terms of Reference

3. Roles and Responsibilities

The following roles and responsibilities were discussed and agreed to:

3.1 Steering Committee

The Steering Committee will comprise Director, Human and Social Development, Programme Manager Health and Project Manager from the CARICOM Secretariat, Dr Karen Sealy, PAHO Representative, Dr. St-Clair Thomas, St. Vincent & Grenadines, representing the CMOs. The role of the Steering Committee is to

- 1) Advise the Project Manager on the implementation of the project;
- 2) Ensure that the context of the review is clearly articulated;
- 3) Review the reports from Universalialia and provide timely advice to include on the feasibility of the findings and the recommendations.

3.2 CARICOM Secretariat

The CARICOM Secretariat will:

- 1) Arrange for the finalization of the contract with a view to signing during the week March 24th-31st 2004.
- 2) Inform Member States and the Regional Health Institutions of the start-up of the project;
- 3) Facilitate meetings of the Steering Committee and establish contact between Universalialia and the RHIs and the Member States;
- 4) Keep clients informed about the progress and status of implementation of the project;
- 5) Facilitate the convening of CMOs workshop and final presentation of final report to the Ministers of Health on September 2004

3.3 Regional Health Institutions

The RHIs will:

- 1) Conduct a self-assessment using instruments to be prepared by Universalialia
- 2) Provide access to documentation and arrange meeting for both technical and administrative staff with Universalialia;
- 3) Provide feedback on findings of Universalialia
- 4) Provide additional names of stakeholders to be interviewed, as required.

3.4 Member States

The CMOs will be the focal points for the field visits and will be required to:

- 1) Provide logistical support for the field visits
- 2) Identify the range of stakeholders to be interviewed
- 3) Co-ordinate the collection of data from the questionnaire distributed to the Government representatives.

4. Team and Allocation of Work

In order to respond to the various requirements of the study, the teams will be organized as follows:

The team that UMG has assembled is comprised of the following⁵:

TEAM MEMBERS	PROFESSION	GENERAL PROJECT RESPONSIBILITIES
Dr Marie-Hélène Adrien	President of Universalialia	Team Leader
Dr Charles Lusthaus	Founding partner of Universalialia	Chief methodologist
Mr. Dale Thompson	Associated Universalialia consultant	Assistant methodologist and IOA specialist
Dr Ronald St.John	Senior public servant, on loan from Health Canada	Epidemiology specialist and policy advisor
Dr Mary L'Abbé	Senior public servant on loan from Health Canada	Food and nutrition specialist
Dr Anwar Islam	Senior public servant on loan from CIDA and Carleton University	Environmental health and drug testing specialist and policy advisor
Mr. John Marriott	Independent consultant	Health systems analyst and policy advisor, IOA support, health research, and cross-cutting analysis
Ms. Ann Mable	Independent consultant	Health systems analyst and policy advisor, IOA support, health research, and cross-cutting analysis

The work will be undertaken with the following division of labour:

Evaluation of RHIs		
RHI	TEAM MEMBER	TENTATIVE DATE
CAREC (Trinidad & Tobago)	J. Marriott; A. Mable; Dr. R. St-John;	May 11-14 2004
CEHI (St-Lucia)	D. Thompson; A. Islam	June 14-16 2004
CRDTL (Jamaica)	D.Thompson; A. Islam	June 9-12 2004
CHRC (Trinidad & Tobago)	J. Marriott; A. Mable;	May 17-19 2004
CFNI (Jamaica)	Dr. M. L'Abbé; D. Thompson	May 13-15 2004
STAKEHOLDER'S VISITS IN MEMBER COUNTRIES		
MEMBER COUNTRY	TEAM MEMBER	DATE
Guyana	Dr. MH Adrien	March 25-April 1st
Antigua	J. Marriott and A. Mable	April 15-17 2004
Dominica	J. Marriott and A. Mable	April 18-20 2004 (potentially in May)
Grenada	J. Marriott and A. Mable	April 21-23 2004
St-Vincent	J. Marriott and A. Mable	April 24-26 2004

⁵ An additional member either local or international from Health Canada may join the CEHI and CRDTL reviews if required.

Evaluation of RHIs		
RHI	TEAM MEMBER	TENTATIVE DATE
CAREC (Trinidad & Tobago)	J. Marriott; A. Mable; Dr. R. St-John;	May 11-14 2004
CEHI (St-Lucia)	D. Thompson; A. Islam	June 14-16 2004
CRDTL (Jamaica)	D.Thompson; A. Islam	June 9-12 2004
CHRC (Trinidad & Tobago)	J. Marriott; A. Mable;	May 17-19 2004
CFNI (Jamaica)	Dr. M. L'Abbé; D. Thompson	May 13-15 2004
STAKEHOLDER'S VISITS IN MEMBER COUNTRIES		
MEMBER COUNTRY	TEAM MEMBER	DATE
Barbados	J. Marriott and A. Mable	April 27-29 2004
Jamaica	D. Thompson and Dr. M L'Abbé	May 10-12 2004
St-Lucia	D. Thompson and Dr. A. Islam	June 16-17 2004
Trinidad and Tobago	J. Marriott and A. Mable	May 14-15 2004
Surinam	J. Marriott and A. Mable	May 20-21 2004
Data Analysis, Interim, Draft and Final report will be lead by Dr. M.H. Adrien in collaboration with the various team members		
Presentation to the Steering Committee: Dr. M.H. Adrien and Mr. John Marriott, Mr. Dale Thompson		
Workshop for the Draft report: Dr. M.H. Adrien and Mr. John Marriott		

5. Level of Effort ⁽¹⁾

Activities	Number of days per person									Number of months	
	MHA	CL	DT	JM	AM	AI	RSJ	ML	Total		
Step 1 - Inception Phase											
1.1 Plan inception phase	1			0.5	0.5					2	0.1
1.2 Preliminary document review	1			0.5	0.5					2	0.1
1.3 Key informant telephone		2								2	0.1
1.4 Mission to field	6			3	3					12	0.6
1.5 Development of instruments for assignment	1	3	3	0.5	0.5					8	0.4
1.6 Draft report	3			0.5	0.5					4	0.2
1.7 Revised Report										0	0.0
Sub-total	12	5	3	5	5	0	0	0	0	30	1.5
Step 2 - Review of RHIs											
2.1 Planning activities for RHI reviews			0.5	1	1	2	2	2		8.5	0.4
2.2 Adaptation of instruments	1	1	3	0.5	0.5	1	1	1		9	0.5
2.3 On-site staff interviews			3	1	1	1	1	1		8	0.4
2.4 Document collection and analysis (2)	3	1	3	1	1	1	1	1		12	0.6
2.5 Stakeholder interviews			3	1	1	1	1	1		8	0.4
2.6 SR, Mgt and BD Interviews			3	1	1	1	1	1		8	0.4
2.7 RHI findings			3	1	1	1	1	1		8	0.4
2.8 RHI report	4	2	6	2	2	2	2	2		22	1.1
Sub-Total	8	4	24.5	8.5	8.5	10	10	10	0	83.5	4.2
Step 3 - Regional Institutional Analysis and Framework											
3.1 Plan IAF	1	1	1	1	1					5	0.3
3.2 Caricom Sec. Informants	5									5	0.3
3.3 Stakeholder and org Health mapping	2		3	0.5	0.5					6	0.3
3.4 High Level Caribbean informants e.g. MOH			3	4	4	1				12	0.6
3.5 Other Stakeholders informants-Donors	3			1	1	2				7	0.4
3.6 Regional resource analysis	3		1							4	0.2
3.7 Prelim Report	5	1	1	1	1	1	1	1		12	0.6
Sub-total	19	2	9	7.5	7.5	4	1	1	0	51	2.6

(1) Allocation of days may be slightly modified to accommodate the requirements and the scheduling of each step.

(2) Additional days are added to Dr M.H. Adrien and Dr C. Lusthaus for the review of the contractual arrangements between CAREC, CFNI and PAHO.

Inception Report - Workplan

Activities	Number of days per person									Number of months
	MHA	CL	DT	JM	AM	AI	RSJ	ML	Total	
Step 4 - Report on Findings										
4.1 Team synthesis of work	1	1	1	1	1	1	1	1	8	0.4
4.2 Data validation workshop with our HI Stakeholder	5	5							10	0.5
4.3 Development of Presentation Report	2			0.5	0.5				3	0.2
4.4 Revise Presentation Report	0.5								0.5	0.0
4.5 Discussion with CARICOM on report	3	3							6	0.3
Sub-total	11.5	9	1	1.5	1.5	1	1	1	27.5	1.4
Step 5 - Draft Report										
5.1 Additional data collection	1		1	0.5					2.5	0.1
5.2 Analysis of information	1		1		0.5				2.5	0.1
5.3 Team synthesis meeting	2	2	2	2	2	0	0	0	10	0.5
5.4 Report development	5	1	2						8	0.4
5.5 Meeting with CARICOM-feedback	3								3	0.2
Sub-total	12	3	6	2.5	2.5	0	0	0	26	1.3
Step 6 - Final Report										
6.1 Final data analysis and synthesis	2	2	2	2	2	2	2	2	16	0.8
6.2 Incorporation of feedback	2		0.5	0.5					3	0.2
6.3 Final report preparation	2		0.5	0.5					3	0.2
6.4 Final Report distribution	2								2	0.1
Sub-total	8	2	3	3	2	2	2	2	24	1.2
TOTAL	70.5	25	46.5	28	27	17	14	14	242	12.1
Number of months	3.525	1.25	2.325	1.4	1.35	0.85	0.7	0.7	12.1	

6. Timing of Activities

Activities	Signature of contract May 5th, 2004											
	M1	M2	M3	M4	M5	M6						
Phase 1 - Inception Phase	■	■										
Step 1 Initial Data Collection and Inception Report												
1.1 Primary Data Collection	■											
1.2 Orientation Mission	■											
1.3 Develop Survey Protocols	■											
1.4 Draft Inception Report	■											
1.5 Submit Inception Report [Milestone]	■											
Phase 2 - Data Collection	■	■	■	■	■	■	■					
Step 2 The Review of the RHIs												
2.1 Tailor Survey Instruments		■	■	■								
2.2 Schedule RHI Missions		■										
2.3 Distribute Survey Instruments [Milestone]		■										
2.4 Receive Data from RHIs [Milestone]				■								
2.5 Document Review		■	■	■								
2.6 RHI On-Site Missions		■	■	■	■							
2.7 Follow-on Data Collection				■	■	■						
Step 3 Regional Analysis		■	■	■	■	■	■					
3.1 Document Review		■	■	■								
3.2 Schedule Key Informants - Interviews/Meetings		■										
3.3 Tailor Survey Instruments		■	■	■								
3.4 International Literature - Review and Best Practice		■	■	■								
3.5 CARICOM Meetings			■	■	■	■						
3.6 Ministries of Health			■	■	■	■						
3.7 PAHO/WB/IDB Informants			■	■	■	■						
3.8 Other Regional Informants			■	■	■	■						
3.9 Follow-on Data Collection				■	■	■						
Phase 3 - Planning and Reporting				■	■	■	■	■	■	■	■	■
Step 4 Reporting on Findings												
4.1 Develop Interim Report				■	■	■	■	■	■	■		
4.2 Submit Interim Report [Milestone]						■						
4.3 Onsite Workshop [Milestone]							■					
4.4 Revise Interim Report							■	■				
4.5 Finalized Interim Report [Milestone]									■			
Step 5 Developing the Draft Report							■	■	■	■	■	■
5.1 Follow-on Data Collection (incl. delayed activities if required)							■	■	■	■	■	■
5.2 Report Preparation							■	■	■	■	■	■
5.3 Submit Draft Final Report [Milestone]										■		
5.4 Conduct Workshop(s) [Milestone]											■	
Step 6 Finalizing the Report											■	■
6.1 Receive Comments from CARICOM [Milestone]											■	■
6.2 Final Revisions to Report											■	■
6.3 Submission of Final Report [Milestone]												■

7. Estimated Budget

The overall budget for this assignment is two hundred and seventy-seven thousand nine hundred and fifty US dollars (US\$ 277, 950) broken down as follows:

			Costs	
1. Fees				
MHA	Project Manager	70.5 days @	\$1,000	\$70,500
CL	Chief Methodologist	25 days @	\$900	\$22,500
DT	Title Consultant 3	46.5 days @	\$850	\$39,525
JM	Institutional Health Specialist	28 days @	\$900	\$25,200
AM	Institutional Health Specialist	27 days @	\$900	\$24,300
AI	Technical Health Specialist	17 days @	\$900	\$15,300
RSJ	Technical Health Specialist	14 days @	\$0	\$0
ML	Technical Health Specialist	14 days @	\$0	\$0
Total Fees				\$197,325
2. Travel Expenses				
Travel from Canada to Caribbean				
	Plane	25 trips @	\$1,250	\$31,250
	Airport fees	25 trips @	\$25	\$625
	Taxis in Canada			\$500
Total travel from Canada to Caribbean				\$32,375
Hotel & Per Diem				
	Hotel in Caribbean	100 days @	\$150	\$15,000
	Per diem in Caribbean	100 days @	\$100	\$10,000
	Taxis in the field			\$1,000
Total Hotel & Per Diem				\$26,000
Total Travel Expenses				\$58,375
3. Other Expenses				
	Communications (telephone, fax)			\$2,500
	Courier			\$1,250
	Photocopies			\$1,500
	Document preparation			\$2,000
	Workshop preparation materials			\$2,000
	Coordination/logistics			\$3,000
	Overhead			\$10,000
Total Other Expenses				\$22,250
TOTAL BUDGET				\$277,950

Appendix I Evaluation Matrix for the Review of the RHIs

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
1.0 Understanding the Context of health in the Caribbean				
1.1 Regional Priorities	1.1.1 What are the present key health priorities of the Caribbean region?	No evaluation indicator (factual data gathering)	Documents (CCH 1; CCH2, etc.) RHIs staff and managers RHIs stakeholders ⁶	Document review Interviews with RHI staff and managers Interviews with RHI Stakeholders Questionnaire to Ministries of Health
	1.1.2 What have been the trends in health issues in the Caribbean region over the past decade?	No evaluation indicator (factual data gathering)	Documents (CCH 1; CCH2, etc.) RHIs staff and managers RHI stakeholders	Document review Interviews with RHI staff and managers Questionnaire to Ministries of Health
1.2 Member States priorities	1.2.1 What are the specific health priorities of the CARICOM Member States?	No evaluation indicator (factual data)	National health strategies and health-related documents RHIs stakeholders	Document review Interviews with RHI stakeholders Questionnaire to Ministries of Health of Member States
1.3 Important Factors to monitor in the environment	1.3.1 What factors affect the health of the population of each the CARICOM Member States?	No evaluation indicator (factual data gathering)	Documents RHI stakeholders	Documents Interviews with RHI stakeholders Questionnaire to Ministries of Health of Member States

⁶ Unless specified, the RHI stakeholders included in that category include: The Member States Ministries involved in addressing health issues; Civil Society organizations and private sector organizations of the CARICOM Member States involved in health issues; donors supporting RHI work; PAHO

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.0 What is the Performance of the RHIs?				
2.1 Effectiveness	Caribbean Epidemiology Centre (CAREC)			
	2.1.1 To what extent is CAREC fulfilling its mission, that is to improve the health Status of the Caribbean people by advancing the capability of member countries in Epidemiology, Laboratory Technology and Related Public Health disciplines through Technical cooperation, Service, Training, Research and a well-trained motivated staff?	<p>CAREC's areas of programs and services are aligned with its mission</p> <p>CAREC staff, Board and management indicate that their programs and services are aligned with their mission</p> <p>Perceptions and opinions of CAREC's stakeholders</p>	<p>CAREC annual reports</p> <p>CAREC stakeholders</p>	<p>Document review</p> <p>Interviews</p> <p>Questionnaire to Member States</p> <p>Self-Assessment questionnaire of CAREC</p>
	2.1.2 To what extent is CAREC delivering the services and programs it is mandated to do, including: <ul style="list-style-type: none"> • Health and disease surveillance? • Health analysis and trend assessment? • Laboratory services? • Education and training? • Research? 	<p>The outputs of CAREC's programs and services are geared at improving the capacities of the Member States in epidemiology</p> <p>CAREC's Board, management and staff perceive the outputs of CAREC as supporting the capacity of Member States</p>	<p>CAREC annual reports</p> <p>CAREC Board, staff, management</p> <p>CAREC stakeholders</p>	<p>Document review</p> <p>Interviews</p> <p>Questionnaire to Member States</p> <p>Self-Assessment questionnaire of CAREC</p>
2.1.3 Is CAREC delivering quality outputs?	<p>CAREC's outputs are reported to have made a difference in the capacities of Member States</p> <p>Epidemiology Experts of the evaluation team judge CAREC's output as quality outputs</p>	<p>Documents</p> <p>Epidemiology Experts</p> <p>CAREC Stakeholders</p> <p>CAREC Board, staff, Managers</p>	<p>Expert's judgment</p> <p>Observation</p> <p>Interviews</p> <p>Questionnaire to Member States</p> <p>Self-Assessment Questionnaire of CAREC</p>	

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.1 Effectiveness (cont'd)	2.1.4 Is CAREC providing services outside its existing mandate?	Evidence of CAREC programs, services or outputs that do not fall under CAREC's existing mandate	Documents Evaluation team epidemiology experts CAREC Stakeholders CAREC Board, staff, Managers	Evaluation team expert's judgment Observation Interviews Questionnaires Self-Assessment questionnaire of CAREC
	Caribbean Food and Nutrition Institute (CFNI)			
	2.1.5 To what extent is CFNI fulfilling its mission, that is to cooperate technically with member countries to strengthen their ability to analyze, manage and prevent the key nutritional problems and to enhance the quality of life of the people through promotion of good nutrition and healthy lifestyles behaviors?	CFNI's areas of programs and services are aligned with its mission CFNI staff, Board and management indicate that their programs and services are aligned with their mission Perceptions and opinions of CFNI's stakeholders	CFNI's annual reports CFNI's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member States Self-Assessment questionnaire of CFNI
2.1.6 To what extent is CFNI delivering the services and programs it is mandated to do, including: Supporting national plans and policies on nutrition? Building the human resources capacities of countries in the area of nutrition? Promoting and disseminating information related to food and nutrition? Conducting surveillance and carrying out research in food and nutrition in the Caribbean region?	The outputs of CFNI's programs and services are geared at improving the capacities of the Member States in food and nutrition CFNI's stakeholder, Board, management and staff perceive the outputs of CAREC as supporting the capacity of Member States	CFNI's annual reports CFNI's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member States Self-Assessment questionnaire of CFNI	

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.1 Effectiveness (cont'd)	2.1.7 Is CFNI'S delivering quality programs and services?	CFNI's outputs are reported to have made a difference in the capacities of Member States Food and Nutrition Experts judge CFNI's output as quality outputs	Documents Evaluation team food and nutrition experts CFNI Stakeholders, Board, staff, managers	Evaluation team expert's judgment Observation Interviews Questionnaire to Member State Self-Assessment questionnaire to CFNI
	2.1.8 Is CFNI providing programs and/or services outside its mandate?	Some of CFNI programs, services or outputs do not fall under CFNI's existing mandate	Documents Evaluation team food and nutrition expert CFNI Stakeholders	Expert's judgment Observation Interviews Questionnaire to Member States Self-Assessment questionnaire to CFNI
	Caribbean Environmental Health Institute (CEHI)			
	2.1.9 To what extent is CEHI fulfilling its mission, that is provide environmental health Leadership to Member States in order to improve and support policy development decisions that are consistent with the goals and targets of the Caribbean Cooperation in Health (CCHI) Initiative and in collaboration with national regional and international organizations?	CEHI's areas of programs and services are aligned with its mission CEHI's staff, Board and management indicate that their programs and services are aligned with their mission Perceptions and opinions of CEHI's stakeholders	CEHI's annual reports CEHI's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member States Self-Assessment questionnaire to CEHI

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.1 Effectiveness (cont'd)	<p>2.1.10 To what extent is CEHI delivering the programs and services it is mandated to do, including:</p> <ul style="list-style-type: none"> • Its program: Integrated Watershed and Coastal Area Management (WCAM); Waste Management Program; Chemical Management Program; Climate change Program; Cleaner Production and Eco-Efficiency Program? • Its Technical and Advisory Services? • Its Leadership (consultation, conference) on environmental matters? • Its support to build the capacities of your country in environmental health? (Internships, training, laboratories) • In providing Environmental health outreach for the region? (Through information, website, mass media outputs, etc.) • Other services? 	<p>The outputs of CEHI's programs and services are geared at improving the capacities of the Member States in environmental health</p> <p>CEHI's stakeholder, Board, management and staff perceive the outputs of CAREC as supporting the capacity of Member States</p>	<p>CEHI's annual reports</p> <p>CEHI's Board, staff, management and stakeholders</p>	<p>Document review</p> <p>Interviews</p> <p>Questionnaire to Member States</p> <p>Self-Assessment questionnaire to CEHI</p>
	2.1.11 Does CEHI provide quality programs and services?	<p>CEHI's outputs are reported to have made a difference in the capacities of Member States</p> <p>Evaluation team expert on Environmental Health judges CEHI's output as quality outputs</p>	<p>Documents</p> <p>Environmental Health Experts</p> <p>CEHI Stakeholders, Board, staff, managers</p>	<p>Expert's judgment</p> <p>Observation</p> <p>Interviews</p> <p>Questionnaire to Member States</p> <p>Self-Assessment questionnaire to CEHI</p>

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.1 Effectiveness (cont'd)	2.1.12 Is CEHI providing programs and /or services outside its existing mandate?	Some of CEHI programs, services or outputs do not fall under CEHI's existing mandate	Documents Environmental Health Experts CEHI Stakeholders	Expert's judgment Observation Interviews Questionnaire to Member States Self-Assessment questionnaire to CEHI
	Caribbean Health Research Institute (CHRC)			
	2.1.13 To what extent is CHRC fulfilling its mission, that is to lead the coordination and the promotion of health research in the Caribbean Region and to provide advice, through the Ministers of Health to participating governments on matters related to health research, including the needs and the priorities of the Region?	CHRC's areas of programs and services are aligned with its mission CHRC's staff, Board and management indicate that their programs and services are aligned with their mission Perceptions and opinions of CHRC's stakeholders	CHRC's annual reports and other documents CHRC's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member States Self-Assessment questionnaire of CHRC
	2.1.14 To what extent is CHRC delivering the programs and services it is mandated to do, including: <ul style="list-style-type: none"> Promotion of health-related research in the Caribbean? Coordination of health-related research in the Caribbean? Provision of advice on matters relating to health research? Other services? 	The outputs of CHRC's programs and services are geared at improving the capacities of the Member States in health research CHRC's stakeholder, Board, management and staff perceive the outputs of CAREC as supporting the capacity of Member States	CHRC's annual reports and other documents CHRC's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member States Self-Assessment questionnaire of CHRC
2.1. 15 Does CHRC provide quality programs and services?	CHRC's outputs compare favorably with those of Environmental Health Experts judge CHRC's output as quality outputs	Documents Health Research Experts CHRC Stakeholders	Expert's judgment Observation Interviews Questionnaires	

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.1 Effectiveness (cont'd)	2.1.16 Is CHRC providing programs and /or services outside its existing mandate?	Some of CHRC's programs, services or outputs do not fall under CHRC's existing mandate	Documents Health Research Experts CHRC Stakeholders	Expert's judgment Observation Interviews
	Caribbean Regional Drug Testing Laboratory (CRDTL)			
	2.1.17 To what extent is CRDTL fulfilling its mission, that is to provide the governments of the Region with an efficient, well-equipped institutions to perform quality control analyses of drugs marketed in the region, whether imported or manufactured locally?	CRDTL's areas of programs and services are aligned with its mission CRDTL's staff, Board and management indicate that their program and services are aligned with their mission Perceptions and opinions of CRDTL's stakeholders	CRDTL's annual reports and other documents CRDTL's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member States Self-Assessment questionnaire of CRDTL
	2.1.18 To what extent is CRDTL delivering the programs and services it is mandated to do, including: Performing quality control analyses of drugs marketed in the region?	The outputs of CRDTL's programs and services are geared at improving the capacities of the Member States in drug testing CRDTL's stakeholder, Board, management and staff perceive the outputs of CAREC as supporting the capacity of Member States	CRDTL's annual reports and other documents CRDTL's Board, staff, management and stakeholders	Document review Interviews Questionnaire to Member State Self-Assessment questionnaire of CRDTL
2.1.19 Does CRDTL provides quality programs and services?	CRDTL's outputs compare favorably with those of Drug Testing Experts judge CRDTL's outputs as quality outputs	Documents Drug Testing Experts CRDTL Stakeholders	Expert's judgment Observation Interviews Self-Assessment questionnaire of CRDTL Questionnaire to Member States	

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.1 Effectiveness (cont'd)	2.1.20 Is CRDTL providing programs and/or services outside its existing mandate?	Some of CRDTL's programs, services or outputs do not fall under CRDTL's existing mandate	Documents Drug Testing Experts CRDTL Stakeholders	Expert's judgment Observation Interviews Self-Assessment questionnaire of CRDTL
2.2 Efficiency ⁷	2.2.1 To what extent is each of the RHI maximizing the use of its resources (people, physical plant, technology, financial resources) to deliver its programs and services	Overhead to total service or program costs	Documents; annual reports, financial statements	Document review Interviews Self-Assessment questionnaire of RHIs
	2.2.2 To what extent is each of the RHI providing good value for services to the Member States?	Costs per service or program provided Cost per client served Level of satisfaction of Member States	Documents; annual reports; financial statements RHI Stakeholders	Document review Interviews Self-Assessment questionnaire of RHIs
	2.2.3 How do the unit costs of the services of each of the RHI compare to those of other sources (i.e. universities, private sector, etc.) providing similar programs and services?	Costs per service or program provided in comparison to those of other sources	Documents indicating costs structure of RHI Documents indicating cost structure of other sources RHI stakeholders	Document review Interviews Self-Assessment questionnaire of RHIs
2.3 Relevance	2.3.1 To what extent are the RHI's programs and services aligned with the health priorities identified in the CCH 2 and other regional documents?	Each of the RHI's program and service support one or more element of the eight priorities of CCH2 and other regional document	Document Expert	Document review Expert's judgment Self-Assessment questionnaire of RHIs

⁷ The same questions (2.2.1 to 2.2.3 will be asked in relationship to each RHI)

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.3 Relevance (cont'd)	2.3.2 Has the demand for the services of each of the RHI changed in the last 5 years? In what way?	Perception of respondents Changes in health priorities in CCH 1 and CCH2	RHI stakeholders RHI Board, staff, management Health Experts on the Evaluation team	Interview Questionnaires Expert's judgment Self-Assessment questionnaire of RHIs
	2.3.3 To what extent is each of the RHI responding to the national needs of the Member States?	Level of satisfaction of Member states	RHI stakeholders	Interview Questionnaire to Member States Self-Assessment questionnaire of RHIs
	2.3.4 To what extent has each of the RHI the ability to adapt its services and programs to the emerging demands of the Member States and of the region?	Evidence of new program and services developed by RHIs over the past 5 years	Document RHI stakeholders RHI Board, staff, respondents	Interview Document Questionnaire to Member States Self-Assessment questionnaire of RHIs
	2.3.5 Are CARICOM Members seeking alternate groups / agencies to respond to their health related matters?	Evidence of support obtained by Member States through other sources than the RHIs in areas of a) epidemiology; b) environmental health; c) health research; d) drug testing; e) food and nutrition	Member States respondents RHI stakeholders	Interviews Questionnaire to Member States
	2.3.6 Has the relative level of contribution to each RHI from its funding partner changed over the last 5 years? If so, why?	Increase or decrease in level of contribution to each RHI, by funding partner Increase or decrease in amount of grant funding to each RHI	Document RHI Management	Interview Document review

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
2.4 Financial viability	2.4.1 To what extent has each of the RHI been able to attract new financial sources (or maintain existing ones) to support its activities? (I.e. funding, grants, etc.)	Increase in number of funding partners; amount of resources mobilized Level of diversification of funding sources Increase in amount of funds received from existing funding partner	Financial documents Annual report RHI Management RHI financial staff	Interview Document review Self-Assessment questionnaire of RHIs
	2.4.2 To what extent has the funding partners of each of the RHI failed to meet a financial obligation or commitments? And if so why?	Evidence of unmet financial commitment	Financial documents Annual report RHI Management RHI financial staff	Interviews Document Review Self-Assessment questionnaire of RHIs
	2.4.3 Are the RHI actively developing resource mobilization strategies?	Existence (and quality) of a resource mobilization plan /strategy (or equivalent)	Document RHI Management RHI financial staff	Interview Document review Self-Assessment questionnaire of RHIs
	2.4.4 Are the RHIs revising their costs structure to reflect their emerging new financial needs?	Changes in cost structure (fee for services) over the last five years	Documents RHI Management RHI financial staff	Interviews Document review Self-Assessment questionnaire of RHIs
3.0 Factors affecting the performance of the RHIs (the same questions will apply to each RHI): To what extent are the following factors affecting the performance of each of the RHI?				
3.1 Strategic Leadership	3.1.1 Has the leadership of the RHI (Senior Management) articulated a clear vision, and a strategy for the RHI?	Existence of strategic plan (or equivalent) Quality of the plan (or equivalent) Level of satisfaction of RHI Board, staff and stakeholders towards RHI Management	RHI Board, staff, stakeholders Documents	Interviews Document review RHI self-assessment questionnaire

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.1 Strategic Leadership (cont'd)	3.1.2 Are both internal and external stakeholders of the RHI supportive of its leadership?	Expression of satisfaction of internal and external stakeholders with regards to the leaders of the RHIs	RHI internal and external stakeholders	Interviews and focus groups Questionnaire to Member States RHI self-assessment questionnaire
	3.1.3 Is the RHI's strategy supporting performance?	Strategy document (or equivalent) identifies activities, resources, timelines, roles and responsibilities and risk mitigation strategies that have a high probability of leading to expected goals Level of satisfaction of RHI Management	Strategy document (or equivalent) RHI Management and staff	Document review Interviews and focus groups RHI self-assessment questionnaire
	3.1.4 Does the RHI have a clear and distinct niche in the Caribbean Health's system?	Degree of uniqueness of the role, mandate and objectives of each of the RHI	Review of mandate of other organizations in the health system	Interviews Documents Questionnaire with Member States
	3.1.5 Is the leadership of the RHI acting in a transparent manner vis a vis its Board and stakeholders?	Level of satisfaction of the RHI Board on the transparency of the RHI management Evidence of regular reports of activities to the Board	Document Board members	Document review Interviews
3.2 Governance structure of the RHI?	3.2.1 Does the existing organizational charter of the RHI provide an adequate framework for creating structural means to carry out the mission of the RHI? Is this structure adequate for dealing with the external forces challenging the organization?	Existence of an Organizational Charter that includes clear definition of roles, reporting mechanisms, accountability procedures etc. Charter's framework allows the organization to carry out its mandate effectively.	Charter and governance documents Board members RHI Management	Document review Interviews Self-Assessment questionnaire of RHI

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.2 Governance structure of the RHI? (cont'd)	3.2.1 Does the governing structure have the mechanisms to review and assess the RHI's performance and, if appropriate, create conditions to support change?	Level of satisfaction of Board members and RHI Leaders with respect to the structure of the governing charters	Charter and governance document	Document review Interviews with Board members Self-Assessment questionnaire of RHI
	3.2.3 Do the existing contract agreement between the CAREC and PAHO continue to be relevant? If not, what are the optimal alternatives?	Level of satisfaction of CAREC and PAHO with respect to their contract agreement Legal expert's judgment on the ongoing appropriateness of these contracts	Contracts between CAREC and PAHO	Interview Document review Expert's opinion
	3.2.4 Do the existing contract agreement between the CFNI and PAHO continue to be relevant? If not, what are the optimal alternatives?	Level of satisfaction of CFNI and PAHO with respect to their contract agreement Legal expert's judgment on the ongoing appropriateness of these contracts	Contracts between CFNI and PAHO	Interview Document review Expert's opinion
	3.2.5 Does the governing structure have the various committees necessary to ensure legal and organizational accountability?	Existence of Board's sub-committee (as appropriate, i.e. Compensation, Audit, etc.) and enforcement of their roles and responsibilities	RHIs managers and Board members	Interviews Focus groups RHI self-assessment questionnaire
	3.2.6 Does the governing structure have a clear way to review and set organizational directions of the RHIs?	Existence and enforcement of mechanisms for review of RHI's directions (i.e. review of strategy meetings, etc.)	RHIs managers and Board members	Interviews Focus groups RHI self-assessment questionnaire
	3.3 Operational Structure of the RHI?	3.3.1 Is the mission of each of the RHIs supported by its operational structure?	Level of satisfaction of RHI staff and managers with existing operational structure	RHIs staff and managers

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.3 Operational Structure of the RHI? (cont'd)	3.3.2 Are Departmental lines in each of the RHIs (and other division of labor structures) defined in a way that supports performance? Are they clear?	Level of satisfaction of RHI staff and managers with existing operational structures	RHIs staff and managers	Interviews Focus groups RHI self-assessment questionnaire
	3.3.3 Are there clear lines of authority and accountability? (Individual, group, departments)	Level of satisfaction of RHI staff and managers with existing operational structures	RHIs staff and managers	Interviews Focus groups RHI self-assessment questionnaire
	3.3.4 Are the various units and departments adequately centralized and decentralized?	Level of satisfaction of RHI staff and managers (in central and decentralized locations) with existing operational structures	RHI Staff and managers	Interviews Focus groups RHI self-assessment questionnaire
3.4 Governing Structure of the overall grouping of RHI	3.4.1.Does the existing Governing Board Structure of the network of RHIs (the structure that governs the 5 RHIs) relevant to support the performance of the newtrok?	Perception of adequacy of the structure by the Governing Board of the distinct RHI, by the RHIs and by their stakeholders	Boards of the RHIs	Interview Document review RHI Self-Assessment questionnaire
	3.4.1 What changes in the governing structure of the network of RHIs would support greater performance and accountability? How feasible are these changes?	Alternate governing structure judged more appropriate for improved accountability (based on Expert's judgment)	Legal expert RHI Board members	Interview Document review RHI Self-Assessment questionnaire
3.5 Financial management system of the RHI?	3.5.1 Do the RHIs have the appropriate systems to conduct effective financial planning?	Evidence of regular financial planning undertaken Timeliness of budgets and other financial reports Appropriate profile of Financial staff	Budgets Financial reports Financial staff	Document review Interviews RHI Self-Assessment questionnaire

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.5 Financial management system of the RHI? (cont'd)	3.5.2 Do the RHIs have the appropriate systems to ensure financial accountability?	Auditor's satisfaction with the RHIs' control on cash and assets	Audited financial statements	Document review Interviews RHI Self-Assessment questionnaire
	3.5.3 Do the RHIs have the appropriate systems to ensure financial monitoring and	Existence of financial reports and statements and use of these for decision-making	Financial reports RHI Management RHI Financial staff	Interviews Document review RHI Self-Assessment questionnaire
3.5 Program and services management?	3.5.1 Do the RHIs have adequate program and services planning systems?	Existence of program plans that link resources to outputs and deliverables	Program planning reports Stakeholders Program staff	Interviews Document review RHI Self-Assessment questionnaire
	3.5.2 Do the RHIs have adequate program and services implementation systems?	Programs and services implemented on time and within budget Program risks managed appropriately Program and services changes made as necessary during implementation	Monitoring reports of programs and services Stakeholders Program staff	Interviews Document review RHI Self-Assessment questionnaire
	3.5.3 Do the RHIs have adequate program and services evaluation systems?	Existence of evaluation of program and services Evidence of mechanism to obtain stakeholder's feedback on program and service Evidence of use of evaluation to improve program delivery	Evaluations reports of programs and services Stakeholders	Interview Document review RHI Self-Assessment questionnaire

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.6 Process management?	3.6.1 Do the RHI have appropriate approaches and mechanisms to solve problem, resolve conflicts communicate internally and externally?	Existence of procedures Level of satisfaction of Staff and Managers	RHI personnel manual and procedures RHI Staff and Management	Observation Interviews Document review RHI Self-Assessment questionnaire
3.7 Linkages amongst the RHI?	3.7.1 Have the RHI created the appropriate networks, joint ventures, alliances and partnerships to support their ongoing performance?	Self-reported adequacy of alliances Expert's judgment of adequacy of linkages	Partnership agreements Individual RHI Staff and Management RHI network Experts	Document review Interviews Focus groups RHI Self-Assessment questionnaire
	3.7.2 Is there an adequate level of planning, and collaboration amongst the RHIs?	Self-reported adequacy of collaboration Level of satisfaction of other RHIs Expert's judgment of adequacy of linkages	Individual RHI staff and Management RHI Network	Interviews Focus Group RHI Self-Assessment questionnaire
3.8 Infrastructure	3.8.1 Do the RHIs have adequate facilities to conduct their activities	Evidence of adequate buildings, laboratories and utilities to conduct activities Evidence of adequate maintenance systems and budgets to support maintenance	Visits of RHI premises Staff and Managers	Observation Expert's judgment Self-Assessment questionnaire of RHI
	3.8.2 Do the RHIs have the appropriate technology to conduct their activities	Evidence of adequate information technology (hardware and software) to support activities	Visits of RHI premises Staff and Managers	Observation Expert's judgment Self-Assessment questionnaire of RHI

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.9 Human resources	3.9.1 Are the RHIs able to recruit (locally, regionally) the appropriate human resources to deliver their programs and services?	Professional staff is local Recruitment timeframe for professional suggests relatively access to local or regional resources Turnover rates	Personnel files RHI stakeholders (internal and external)	Interview or focus groups RHI Self-Assessment questionnaire Questionnaire from Member States
	3.9.2 Do the RHI have the right number, the right profile of human resources to deliver programs and services?	The right staff is at the right place doing the right job Perception of RHI staff and managers Degree of satisfaction of RHI stakeholders with RHI staff	Personnel files HR strategies (or equivalent)	Interview or focus groups Document review
	3.9.10 Do the RHI have adequate HR systems to manage its staff, including: Recruitment and selection processes Professional development Compensation and performance evaluation Personnel policies that are enforced Personnel policies that promote gender inclusion and equity Promotion and career development	Turnover and absenteeism rates are comparable to other similar organization HR policies enforced Existence of HR manual and procedures (or equivalent) Level of satisfaction of RHI staff	Personnel procedures and policies RHI staff	Interviews or focus groups Document review
3.10 Organizational culture	3.10.1 Do the RHI promote a performance-oriented culture, including: The right to make mistakes and to learn from mistakes? Reward for learning and using learning to improve quality of work? Rewards for performance? Teamwork?	Policies, approaches, symbols incentive patterns support performance Perception of RHI staff and managers	Organizational symbols RHI policies, procedures, compensation structures	Observation Document review Interviews and focus groups

KEY ISSUES	SUB-QUESTIONS	ILLUSTRATIVE INDICATOR	EXAMPLE OF DATA SOURCES	KEY DATA COLLECTION INSTRUMENTS
3.11 External factors	3.11.1 What are the key factors affecting the RHI's performance: Political Economical Demographic Socio-cultural Technological	Fact gathering	Documents RHI internal and external stakeholders	Self-Assessment questionnaire of RHI Document review
4.0 Overall performance of the RHI network				
4.1 Performance	4.1.1 Does the rationale for the network continue to make sense?			
	4.1.2 Does the network provide value for money			
	4.1.3 Is the network contributing to addressing health issues in the Caribbean region?			
5.0 Recommendations and Plan for the future				
4.2 Are there alternative arrangements?	4.2.1 Does the existing structural arrangement of the RHI makes sense?			
	4.2.2 Are there alternative structures or options that could be more effective or more efficient?			
	4.2.3 To what extent are these options feasible?			
	4.2.3 What are the implications of these options?			
6.0 Conclusions				

Appendix II Interview Protocol for RHI Stakeholders

This interview can be used for the Stakeholders in the Member State Countries. Questions can be adapted to match the various respondents from the Public Sector; Private Sector, NGO Community.

Introduction

- Thank you for agreeing to meet with members of the Universalialia team responsible for carrying out the Review of Regional Health Institutions mandated by the Caribbean Community (CARICOM).
- The overall objective of the review is to assess the effectiveness, efficiency, relevance and financial viability of the RHIs, specifically:
 - To evaluate the performance and the relevance of the five Regional Health Institutions (RHIs)
 - To determine the institutional framework and appropriate organizations through which technical cooperation in health at the regional level will be pursued; and,
 - To assess the capacity of CARICOM Secretariat to monitor, provide oversight and coordinate the operations of the five RHIs.
- The information that you will provide will remain confidential. The interview shall last approximately 1.5 hours
- Give brief overview of methodology if requested
- ENSURE THAT YOU TAKE THE BUSINESS CARD (Or full name and title of the respondent)

Background

- Get a brief understanding of the role of the organization of the respondent in the overall Health system/structure of the country
- Get a brief understanding of the role and responsibilities of the respondent

Health Priorities in the Country

Prompts

- What are the key current health priorities in your country?
- Which of the eight health priorities of CCH II are the most pressing in your country?
- To what extent have these health priorities shifted over the past decades?
- What are the key factors that affect the health situation in your country?
- Is the country and regional policy structure supportive to good performance? Why not?
- Is the context supportive of accessing appropriate human resources (labor market) from the region? Why or why not?
- Are the countries and regional institutions capable of supporting a Health network? Why or why not?

Appreciation of the RHI

Go through each RHIs and ascertain if it is satisfying the respondent.

Caribbean Epidemiology Centre (CAREC)

The mission of CAREC is to improve the health Status of the Caribbean people by advancing the capability of member countries in Epidemiology, Laboratory Technology and Related Public Health disciplines through Technical cooperation, Service, Training, Research and a well-trained motivated staff.

- What in your view are the role, mandate and functions of CAREC?
- To what extent does your country (your organization) interacts with CAREC? What kinds of services, collaboration, research has your country (your organization) been engaged in with CAREC? Give examples
- To what extent is CAREC contributing to improving the capacities of your country in 1) Epidemiology? 2) In Laboratory Technology
- Are you satisfied with the services provided by CAREC? More specifically:
 - Health and Disease Surveillance?
 - Health Situation Analysis and Trend Assessment?
 - Laboratory Services?
 - Education and Training?
 - Research?
- To what extent do you feel that, over the years, CAREC has been able to adapt its services to the need of the Caribbean countries? To the priorities set forward in CCH 2?
- Does CAREC provide you good value for service? Do you go somewhere else for obtaining the kinds of services that CAREC is mandated to provide?
- Is there an ongoing rationale for CAREC to remain a stand-alone institution?
- What are CAREC's most useful contributions to your country (organization)? What are its limitations?
- In your view what factors may limit CAREC's ability to assist your country better?

Prompts

- Its Leadership?
- Its ability to plan, implement, monitor its activities and services
- Its staff (not enough? Not the right kind?)
- The communication inside CFNI and between CFNI and its stakeholders?
- Its ability to access adequate grants and financial resources
- Its financial systems?
- Its internal culture (the incentive systems, the history, etc.)
- Its infrastructure (quality and quantity of its material, laboratories, etc.)
- Its Board structure or its operational structure

- External conditions (social, economic, etc.)?
- Its interaction with other active players in the Caribbean Health Networks?
- Other factors?

Caribbean Food and Nutrition Institute (CFNI) (1968)

The mission of CFNI is to cooperate technically with member countries to strengthen their ability to analyze, manage and prevent the key nutritional problems and to enhance the quality of life of the people through promotion of good nutrition and healthy lifestyles behaviors.

- What in your view are the role, mandate and functions of CFNI?
- To what extent does your country (your organization) interacts with CFNI? What kinds of services, collaboration, research has your country (your organization) been engaged in with CFNI? Give examples
- To what extent is CFNI contributing to improving the capacities of your country in addressing its nutritional problems?
- Are you satisfied with the services provided by CFNI? More specifically:
 - Supporting your national plans and policies on nutrition?
 - Building the human resources capacities of your country in the area of nutrition?
 - Promoting and disseminating information related to food and nutrition?
 - Conducting surveillance and carrying out research in food and nutrition?
- To what extent do you feel that, over the years, CFNI has been able to adapt its services to the need of the Caribbean countries? To the priorities set forward in CCH 2?
- Does CFNI provide you good value for service? Do you go somewhere else for obtaining the kinds of services that CFNI is mandated to provide?
- Is there an ongoing rationale for CFNI to remain a stand-alone institution?
- What are CFNI's most useful contributions to your country (organization)? What are its limitations?
- In your view what factors may limit CFNI's ability to assist your country better?

Prompts

- Its Leadership?
- Its ability to plan, implement, monitor its activities and services
- Its staff (not enough? Not the right kind?)
- The communication inside CFNI and between CFNI and its stakeholders?
- Its ability to access adequate grants and financial resources
- Its financial systems?
- Its internal culture (the incentive systems, the history, etc.)
- Its infrastructure (quality and quantity of its material, laboratories, etc.)
- Its Board structure or its operational structure
- External conditions (social, economic, etc.)?

- Its interaction with other active players in the Caribbean Health Networks?
- Other factors?

Caribbean Health Research Centre (CHRC) (1965)

The mission of CHRC is to lead the coordination and the promotion of health research in the Caribbean Region and to provide advice, through the Ministers of Health to participating governments on matters related to health research, including the needs and the priorities of the Region.

- What in your view are the role, mandate and functions of CHRC?
- To what extent has your country (organization) benefited from the research/ advice that CHRC has coordinated or promoted? Give examples
- To what extent are you satisfied with the services that CHRC provides to your country, more specifically:
 - Its leadership in promotion of health-related research in the region? In your country?
 - Its role in coordination of health-related research in the region? With your country?
 - Advices received through the Conference of Ministers responsible for Health on matters relating to health research?
- To what extent do you feel that, over the years, CHRC has been able to focus its research on in the evolving priorities of the region? Does CHRC's research role support the priorities of CCH 2?
- Does CHRCI provide you good value for the promotion and coordination role it plays? Are they other groups that play a leadership role in health research in the region? In your country? How do they compare with CHRC?
- Is there an ongoing rationale for CHRC to remain a stand-alone institution?
- What have been CHRC's most useful contributions to the promotion and coordination of Research your country (organization)? What are its limitations?
- In your view what factors limits CHRC's ability to assist your region/country better?

Prompts

- Its Leadership?
- Its ability to plan, implement, monitor its activities and services
- Its staff (not enough? Not the right kind?)
- The communication inside CHRC and between CHRC and its stakeholders?
- Its ability to access adequate grants and financial resources
- Its financial systems?
- Its internal culture (the incentive systems, the history, etc.)
- Its infrastructure (quality and quantity of its material, laboratories, etc.)
- Its Board structure or its operational structure
- External conditions (social, economic, etc.)?
- Its interaction with other active players in the Caribbean Health Networks?
- Other factors?

Caribbean Environmental Health Institute (CEHI) (1988)

The mission of CEHI is to provide Environmental Health Leadership to Member States in order to improve and support policy development decisions that are consistent with the goals and targets of the Caribbean Cooperation in Health (CCHI) Initiative and in collaboration with national regional and international organizations

- What in your view are the role, mandate and functions of CEHI?
- To what extent does your country (your organization) interact with CEHI? What kinds of services, collaboration, research has your country (your organization) been engaged in with CEHI? Give examples
- To what extent is CEHI contributing to improving the capacities of your country in addressing its environmental health problems?
- Are you satisfied with the services provided by CEHI? More specifically:
 - Its program in integrated watershed and Coastal Area Management (WCAM)? Its Waste Management Program? Its Chemical management program? Its Climate change program? Its Cleaner Production and Eco-Efficiency program?
 - Its Technical and Advisory Services?
 - Its Leadership (consultation, conference) on environmental matters
 - Its support to build the capacities of your country in environmental health? (Internships, training, laboratories)
 - In providing Environmental health outreach for the region? (Through information, website, mass media outputs, etc.)
- To what extent do you feel that, over the years, CEHI has been able to adapt its services to the need of the Caribbean countries? To the priorities on Environmental Health identified in CCH 2?
- Does CEHI provide you good value for service? Do you go somewhere else for obtaining the kinds of services that CEHI is mandated to provide?
- Is there an ongoing rationale for CEHI to remain a stand-alone institution?
- What are CEHI's most useful contributions to your country (organization)? What are its limitations?
- In your view what factors may limit CEHI's ability to assist your country better?

Prompts

- Its Leadership? It's ability to plan, implement, monitor its activities and services
- Its staff (not enough? Not the right kind?)
- The communication inside CEHI and between CEHI and its stakeholders?
- Its ability to access adequate grants and financial resources
- Its financial systems?
- Its internal culture (the incentive systems, the history, etc.)
- Its infrastructure (quality and quantity of its material, laboratories, etc.)
- Its Board structure or its operational structure

- External conditions (social, economic, etc.)?
- Its interaction with other active players in the Caribbean Health Networks?
- Other factors?

Caribbean Regional Drug Testing Laboratory (CRDTL) (1975)

The mission of the CRDTL is to provide the governments of the Region with an efficient, well-equipped institutions to perform quality control analyses of drugs marketed in the region, whether imported or manufactured locally

- What in your view are the role, mandate and functions of CRDTL?
- To what extent does your country (your organization) interacts with CRDTL? What kinds of services, collaboration, research has your country (your organization) been engaged in with CRDTL? Give examples
- To what extent is CRDTL contributing to improving the capacities of your country in performing quality control analyses of drugs marketed in the region?
- Are you satisfied with the services provided by CRDTL and the access it provides you to perform quality control analysis of drugs?
- To what extent do you feel that, over the years, CRDTL has been able to adapt its services to the need of the Caribbean countries? To the priorities on Environmental Health identified in CCH 2?
- Does CRDTL provide you good value for service? Do you go somewhere else for obtaining the kinds of services that CRDTL is mandated to provide?
- Is there an ongoing rationale for CRDTL to remain a stand-alone institution?
- What are CRDTL's most useful contributions to your country (organization)? What are its limitations?
- In your view what factors may limit CRDTL's ability to assist your country better?

Prompts

- Its Leadership? It's ability to plan, implement, monitor its activities and services
- Its staff (not enough? Not the right kind?)
- The communication inside CFNI and between CFNI and its stakeholders?
- Its ability to access adequate grants and financial resources
- Its financial systems?
- Its internal culture (the incentive systems, the history, etc.)
- Its infrastructure (quality and quantity of its material, laboratories, etc.)
- Its Board structure or its operational structure
- External conditions (social, economic, etc.)?
- Its interaction with other active players in the Caribbean Health Networks?
- Other factors?

Is the Network of RHI as a Whole Providing Services Required to Tour Country?

- In your view, to what extent is there overlap in the services of the RHIs with each other?
- What areas are distinctly pertinent to one RHI or the other?
- Is the rationale for the RHI network still valid?
- Is the network of RHI effective?
- Is the network efficient?
- Is the network Relevant?
- Is the network financially viable?
- What needs to change in building a future of Health network for the region?

Conclusion

- Do you have any additional comments?
- Are there specific documents that we should read?

Thank you for your collaboration

Provide indications of next steps (Key findings in June, Draft in August, final in September)

CAREC Self-Evaluation Questionnaire

1. Your Team

Please identify who, inside or outside CAREC, has been consulted in filling out this self-assessment questionnaire.

2. CAREC's Performance

CAREC's performance is concerned with four broad and over-riding issues: its effectiveness in reaching the goals and objectives as described in its mission and mandate, its efficiency in using resources wisely, its ability to respond to the changing demands of its internal and external stakeholders and its ability to continuously attract adequate resources to ensure the viability of the organization. CAREC's performance in these terms is understood as organizational effectiveness, efficiency, relevance and financial viability.

In this section we would like you to provide us with data on CAREC's performance in terms of effectiveness, efficiency, relevance and financial viability. For each of these four areas, you will be asked to answer specific questions.

2.1 Effectiveness of CAREC

Below are the major factors related to the effectiveness of CAREC. Please provide the data-requested to the evaluation team during its visit to your organization (if the data is available) and indicate the source of the data.

Effectiveness	Your Assessment of CAREC's Effectiveness
2.1.1 Please outline the mandated programs and services of CAREC and specify what activities you undertake in these areas.	
2.1.2 Over the last five years has CAREC undertaken programs and services outside its mandated priority areas of work? What are they?	
2.1.3 Please identify CAREC's major clients (national governments, regional organizations, institutions such as universities, the private sector, the general public, others) and indicate what kind of programs and services you provide to each.	

Effectiveness	Your Assessment of CAREC's Effectiveness
2.1.4 What do you consider to have been the most important contribution that CAREC has made to the CARCIOM Community in the following areas of work: A) Epidemiology-	
B) Human Resources Development	
C) Laboratory services	
D) Research	
E) Knowledge dissemination to clients	
2.1.5 Are there any areas of its mandate where CAREC, in the last 5 years, has not undertaken activities? If so, Please explain why.	

2.2 Efficiency of CAREC

Below are the major factors related to the efficiency of CAREC. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Efficiency	Your Assessment of CAREC's Efficiency
2.2.1 Have the relative levels of contribution to CAREC from its funding partners changed over the last 5 years? And if so, in what way and why?	
2.2.2 Does CAREC have a financial system to track unit cost of services? If so, can you provide the unit costs for the products and services you provide?	
2.2.3 Has there been any cost-benefit analysis of the various services provided by CAREC? If yes, may we have the results?	

Efficiency	Your Assessment of CAREC's Efficiency
2.2.4 Has CAREC ever conducted studies that compare the costs of the services it provides to those that may be available from other sources e.g. private sectors, universities others? If yes, may we have the results?	
2.2.5 Does CAREC use any benchmarks to understand the efficiency of its work? If so, may we have them?	

2.3 Relevance of CAREC

Below are the major factors related to the relevance of CAREC. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Relevance	Your Assessment of CAREC's Relevance
2.3.1 Does CAREC obtain feedback from its clients or stakeholders in a systematic way? (Polls, Client satisfaction survey etc) If so, may we have a copy?	
2.3.2 Has the respective overall mandate of CAREC changed over the last five year? Why? 2.3.3 If so, has CAREC adapted its products or services to meet these changing circumstances? Please explain.	
2.3.4 Who are CAREC's main competitors in the region?	
2.3.5 Has CAREC acquired new funding or grants in order to provide new services over the last 5 years? If so, please describe.	

2.4 Financial Viability of CAREC

Below are the major factors related to the financial viability of CAREC. Please provide the data to the evaluation team as requested (if available) and indicate the source of the data.

Financial Viability	Your comments on CAREC's Financial Viability
2.4.1 Has CAREC made plans to attract new financial resources (resource mobilization strategy) or even to keep the same level of resources? If so, please provide these plans to the evaluation team.	
2.4.2 If CAREC has fee for service or cost-recovery structures, when was the last time that these structures were reviewed or modified?	
2.4.3 Have there been any changes in demand for services from CAREC's key clients and stakeholders? And if so, has it resulted in additional revenues for CAREC?	
2.4.4 Over the last 5 years, have any of CAREC's funding partners, including Member States failed to meet a financial obligation or commitments? And if so why?	
2.4.5 If there have been such instances what has been the impact on CAREC's budget?	

2.5 Overall Performance Assessment

Please indicate your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know				
2.5.1 CAREC successfully delivers the programs and services it is mandated to do.	1	2	3	4	5
2.5.2 CAREC works with its partners to achieve planned outcomes.	1	2	3	4	5
2.5.3 CAREC provides good value for money to its partners and clients.	1	2	3	4	5
2.5.4 CAREC is seen as relevant to the various Member States of CARICOM	1	2	3	4	5
2.5.5 CARICOM is seen as relevant to its civil society stakeholders	1	2	3	4	5

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know
2.5.6 CAREC is seen as relevant to PAHO	1 2 3 4 5
2.5.7 CAREC is seen as relevant to the private sector	1 2 3 4 5
2.5.8 CAREC is sustainable over the next 5 years.	1 2 3 4 5

Please feel free to provide any comments or additional information on your overall assessment of CAREC's performance:

3. External Context Affecting CAREC

The external environment affects every organization. Social, cultural, economic, demographic factors play an important role in affecting the performance of the five Caribbean Regional Health Institutes. For example, the laws of your country might play a supportive role in your Institute's ability to deliver products.

Identify the 5 most important external factors that are either positively or negatively affecting the performance of CAREC.

External Factors	How do these factors affect CAREC's performance?
1	
2	
3	
4	
5	

4. Capacity

Organizations must develop the skills and abilities to meet their mission, use their resources wisely, and develop methods to mobilize resources in order to continue their work in ways that make sense for the institution and the society. Organizational capacity is used here to describe Strategic Planning Capacities, Operating Structure, Governance Structure, Program Management Capacity, Infrastructure Management, Financial Management, Human Resources Management, Organizational Processes Management and Inter-Organizational Linkages.

4.1 Leadership and Strategic Management

Leadership and strategic management refers to the ability of CAREC leaders to develop a vision for the organization, strategies (an strategic plans) to implement that vision, including adequate resource deployment, and to ensure that these visions and plans will be acted upon by the various members of the organization.

Please describe the major strengths and weaknesses of CAREC’s ability to lead and manage strategically.

Strategic Management	Strengths and Weaknesses

Please assess CAREC’s Strategic Management Capacities by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don’t Know				
4.1.1 CAREC is driven by a clear vision	1	2	3	4	5
4.1.2 CAREC has developed strategies and plans to reach its objectives	1	2	3	4	5
4.1.3 CAREC’s leaders are well respected by in the organization	1	2	3	4	5
4.1.4 CAREC’s has a clear niche in the CARICOM community	1	2	3	4	5
4.1.5 CAREC’s reports its performance to its Board on an ongoing basis	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CAREC’s leadership and strategic management:

4.2 Operating Structure

The operating structure refers to the system of working relationships arrived at to divide and coordinate the tasks of people and groups working toward a common purpose.

Please describe CAREC’s major strengths and weaknesses with respect to the responsibilities, coordination, use of authority and work planning:

OPERATING STRUCTURE	STRENGTHS AND WEAKNESSES

Please assess CAREC’s operating structure by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know				
4.2.1 Roles and responsibilities of CAREC’s staff are clear	1	2	3	4	5
4.2.2 The roles and responsibilities of CAREC’s division are clear	1	2	3	4	5
4.2.3 The existing operational structure supports effective delivery of programs and services	1	2	3	4	5
4.2.4 There is adequate coordination between CAREC’s divisions	1	2	3	4	5
4.2.5 The existing operational structure allows for good workplanning	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CAREC’s operating structure:

4.3 Governance Structure

The governance structure of CAREC refers to structures and resources linking senior management and the organization's stakeholders. In particular, this relates to CAREC's Governing Board, but it could also include Member States, international and regional bodies like CARICOM and PAHO, and others who have a direct role in CAREC's governance.

Please describe the major strengths and weaknesses of CAREC's governance structure:

Governance structure	Strengths and Weaknesses

Please assess CAREC's governance structure by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know
4.3.1 The Governing Board members of CAREC are appropriately selected.	1 2 3 4 5
4.3.2 The Governing Board of CAREC carries out oversight its oversight role effectively (budgeting, finance expenditures, etc.).	1 2 3 4 5
4.3.3 The structure of the Governing Board of CAREC allows CAREC to perform effectively	1 2 3 4 5
4.3.4 The Governing Board of CAREC reviews strategic plans.	1 2 3 4 5
4.3.5 The existing contracts that link CAREC to PAHO continue to be relevant	1 2 3 4 5
4.3.6 The Governing Board of CAREC provides feedback into regional needs for programming.	1 2 3 4 5
4.3.7 The Governing Board of CAREC is carrying out its fiduciary responsibilities.	1 2 3 4 5
4.3.8 The Governing Board of CAREC is linking to external constituencies to ensure relevance.	1 2 3 4 5
4.3.9 The Governing Board of CAREC provides input into strategy.	1 2 3 4 5
4.3.10 The Governing Board of CAREC provides insight to insure sustainability and financial viability.	1 2 3 4 5

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know
4.3.11 The contractual agreement between CAREC and PAHO are beneficial to CAREC.	1 2 3 4 5
4.3.12 CAREC benefits from being a PAHO organization.	1 2 3 4 5

Please feel free to provide any comments or additional information on CAREC's governing structure:

4.4 Program Capacity

Program capacity refers to the degree to which CAREC is utilizing its programming resources, systems, facilities and abilities.

Below is a list of the major programmes carried out by CAREC, as we reviewed your annual reports.

Please assess the strengths and weaknesses of each of these programs and initiatives.

CAREC Programs and Services	Strengths and Weaknesses
General Communicable Disease Surveillance	
Specific Surveillance Initiatives (i.e. injury, drug abuse, etc.)	
Outbreak Investigations and Disaster Response	
Disease Control Program	
Health Statistics	
Training Initiatives (epidemiology)	
Human resources Development	
Laboratory Technical Areas (virology, bacteriology, parasitology, entomology, molecular biology, immunology, serology, safety, etc.)	
Outbreak Investigations	
Support for Surveillance and Control Programs	

CAREC Programs and Services	Strengths and Weaknesses
Reference and Referral Services	
Research Projects	
Training Programs (Laboratory)	

4.5 Resource and Infrastructure Management

Resource and infrastructure management refers to the degree to which CAREC uses its infrastructure, equipment, facilities and technological resources in order to deliver its programs and services.

Please describe CAREC's major strengths and weaknesses in managing its resources and infrastructure:

Resource and Infrastructure Management	Strengths and Weaknesses

Please assess CAREC's resource and infrastructure management by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know				
4.5.1 CAREC maximizes the use of its infrastructure	1	2	3	4	5
4.5.2 CAREC has adequate access to laboratories to carry out its programs	1	2	3	4	5
4.5.3 CAREC's electronic technology (hardware, software, internet access) is adequate	1	2	3	4	5
4.5.4 CAREC has a good library (documentation centre)	1	2	3	4	5
4.5.5 CAREC staff has access to quality scientific equipment to conduct its work	1	2	3	4	5
4.5.6 CAREC's databases are well maintained	1	2	3	4	5
4.5.7 CAREC's technology allows the organization to interface with its stakeholders	1	2	3	4	5

Please feel free to provide any comments or additional information on CAREC's resource and infrastructure management:

4.6 Financial Management

Financial Management involves the planning, implementation and monitoring of the monetary resources of CAREC. Along with human resources, it provides the major inputs upon which CAREC builds its programs and services.

Please describe CAREC's major strengths and weaknesses in managing its financial resources:

Financial Management	Strengths and Weaknesses

Please assess CAREC's ability to manage its financial resources by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know				
4.6.1 CAREC has a good system to plan and manage its budget	1	2	3	4	5
4.6.2 CAREC audits its financial transactions in a timely fashion.	1	2	3	4	5
4.6.3 CAREC has a good system for managing our assets.	1	2	3	4	5
4.6.4 When CAREC obtains an external project, it has good systems for tracking what it spends.	1	2	3	4	5

Please feel free to provide any comments or additional information on CAREC's financial management:

4.7 Human Resources

Human Resources refer to the management processes needed to secure the highest level of competent staff to drive good performance. More precisely, human resources are seen in terms of staff recruitment, staff qualifications, professional development and staff evaluation.

Please describe the strengths and weaknesses of your institute’s ability to manage Human resources:

Human Resources	Strengths and Weaknesses

Please assess CAREC’s ability to manage its human resources by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don’t Know				
4.7.1 CAREC recruits its staff based on their qualifications and competences.	1	2	3	4	5
4.7.2 CAREC is able to attract competent staff.	1	2	3	4	5
4.7.3 CAREC has a transparent human resource management policy.	1	2	3	4	5
4.7.4 CAREC invests in the professional development of its staff.	1	2	3	4	5
4.7.5 CAREC performs constructive staff performance appraisal	1	2	3	4	5
4.7.6 CAREC has a balanced representation of men and women amongst its professional staff	1	2	3	4	5
4.7.7 CAREC’s staff is satisfied with the compensation packages in place.	1	2	3	4	5

Please feel free to provide any comments or additional information on CAREC’s human resource management:

4.8 CAREC’s Organizational Processes (Planning, Communications, Problem-solving, etc.)

Organizational processes refer to CAREC’s capacity to carry out its management functions. The main processes are planning, communicating, decision-making, problem-solving, and providing feedback.

Please describe the strengths and weaknesses of CAREC’s ability to manage these key processes.

Organizational Processes	Strengths and Weaknesses

Please assess CAREC’s ability to manage its organizational processes by indicating your level of agreement with the following statements

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don’t Know				
4.8.1 CAREC’s staff adequately participates in decision-making processes.	1	2	3	4	5
4.8.2 CAREC solves problem in an effective way	1	2	3	4	5
4.8.3 Stakeholders are involved appropriately in the planning and decision-making processes.	1	2	3	4	5
4.8.4 Internal communications mechanisms keep staff informed.	1	2	3	4	5
4.8.5 CAREC’s work processes support innovation.	1	2	3	4	5
4.8.6 Best practices and lessons learned are used to improve the work.	1	2	3	4	5
4.8.7 Evaluation mechanisms exist, and adequately inform the quality of services provided by my institution	1	2	3	4	5

Please feel free to provide any comments or additional information on CAREC’s management of organizational processes:

4.9 Partnerships and Linkages

Linkages refer to the regular contacts that CAREC maintains with other institutions, organizations and groups of strategic importance, which can result in exchange of approaches and resources.

Please describe CAREC's strengths and weaknesses in creating and sustaining partnerships:

Partnerships	Strengths and Weaknesses

Please assess CAREC's ability to create constructive partnerships by indicating your level of agreement with the following statements:

	1 = strongly disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree; 5 = Don't Know				
4.9.1 CAREC has developed mutually beneficial partnerships with international agencies. e.g. PAHO, FAO	1	2	3	4	5
4.9.2 CAREC has developed mutually beneficial partnerships with Caribbean Member States.	1	2	3	4	5
4.9.3 CAREC My institute has developed mutually beneficial partnerships with international donor agencies, like CIDA and DFID.	1	2	3	4	5
4.9.4 CAREC has developed mutually beneficial partnerships with regional or national civil society groups.	1	2	3	4	5
4.9.5 CAREC e has developed mutually beneficial partnerships with the private sector.	1	2	3	4	5
4.9.6 CAREC has developed mutually beneficial partnerships with other Caribbean Regional Health Institutes.	1	2	3	4	5
4.9.7 CAREC has developed mutually beneficial partnerships with other similar health-related organisations of other nations like the CDC, the EPA, the FDA, or the NIH.	1	2	3	4	5
4.9.8 CAREC manages its partnerships effectively.	1	2	3	4	5
4.9.9 CAREC is sought after as a partner because of its distinctiveness.	1	2	3	4	5

Please feel free to provide any comments or additional information on CAREC's management of its partnerships and linkages:

5. Overall Performance Assessment

In your opinion, what are the three major strengths of CAREC?

Key Strength of CAREC	Why

In your opinion, leaving access to financial resources aside, what are the three key challenges that CAREC is facing in the medium and long term?

Key Challenges for CAREC	Why

THANK YOU FOR YOUR COLLABORATION

CFNI Self-Evaluation Questionnaire

1. Your Team

Please identify who, inside or outside CFNI, has been consulted in filling out this self-assessment questionnaire.

2. CFNI's Performance

CFNI's performance is concerned with four broad and over-riding issues: its effectiveness in reaching the goals and objectives as described in its mission and mandate, its efficiency in using resources wisely, its ability to respond to the changing demands of its internal and external stakeholders and its ability to continuously attract adequate resources to ensure the viability of the organization. CFNI's performance in these terms is understood as organizational effectiveness, efficiency, relevance and financial viability.

In this section we would like you to provide us with data on CFNI's performance in terms of effectiveness, efficiency, relevance and financial viability. For each of these four areas, you will be asked to answer specific questions.

2.1 Effectiveness of CFNI

Below are the major factors related to the effectiveness of CFNI. Please provide the data-requested to the evaluation team during its visit to your organization (if the data is available) and indicate the source of the data.

Effectiveness	Your Assessment of CFNI's Effectiveness
2.1.1 Please outline the mandated programs and services of CFNI and specify what activities you undertake in these areas.	
2.1.2 Over the last five years has CFNI undertaken programs and services outside its mandated priority areas of work? What are they?	
2.1.3 Please identify CFNI's major clients (national governments, regional organizations, institutions such as universities, the private sector, the general public, others) and indicate what kind of programs and services you provide to each.	
2.1.4 What do you consider to have been the most important contribution that CFNI has made to the CARCOM Community in the following areas of work: A) Supporting national plans and policies on nutrition?	

Effectiveness	Your Assessment of CFNI's Effectiveness
B) Building the human resources capacities of countries in the area of nutrition?	
C) Promoting and disseminating information related to food and nutrition?	
D) Conducting surveillance and carrying out research in food and nutrition in the Caribbean region?	
2.1.5 Are there any areas of its mandate where CFNI, in the last 5 years, has not undertaken activities? If so, Please explain why.	

2.2 Efficiency of CFNI

Below are the major factors related to the efficiency of CFNI. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Efficiency	Your Assessment of CFNI's Efficiency
2.2.1 Have the relative levels of contribution to CFNI from its funding partners changed over the last 5 years? And if so, in what way and why?	
2.2.2 Does CFNI have a financial system to track unit cost of services? If so, can you provide the unit costs for the products and services you provide?	
2.2.3 Has there been any cost-benefit analysis of the various services provided by CFNI? If yes, may we have the results?	
2.2.4 Has CFNI ever conducted studies that compare the costs of the services it provides to those that may be available from other sources e.g. private sectors, universities others? If yes, may we have the results?	
2.2.5 Does CFNI use any benchmarks to understand the efficiency of its work? If so, may we have them?	

2.3 Relevance of CFNI

Below are the major factors related to the relevance of CFNI. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Relevance	Your Assessment of CFNI's Relevance
2.3.1 Does CFNI obtain feedback from its clients or stakeholders in a systematic way? (Polls, Client satisfaction survey etc) If so, may we have a copy?	
2.3.2 Has the respective overall mandate of CAREC changed over the last five year? Why? 2.3.3 If so, has CAREC adapted its products or services to meet these changing circumstances? Please explain.	
2.3.4 Who are CFNI's main competitors in the region?	
2.3.5 Has CFNI acquired new funding or grants in order to provide new services over the last 5 years? If so, please describe.	

2.4 Financial Viability of CFNI

Below are the major factors related to the financial viability of CFNI. Please provide the data to the evaluation team as requested (if available) and indicate the source of the data.

Financial viability	Your comments on CFNI's Financial Viability
2.4.1 Has CFNI made plans to attract new financial resources (resource mobilization strategy) or even to keep the same level of resources? If so, please provide these plans to the evaluation team.	
2.4.2 If CFNI has fee for service or cost-recovery structures, when was the last time that these structures were reviewed or modified?	
2.4.3 Have there been any changes in demand for services from CFNI's key clients and stakeholders? And if so, has it resulted in additional revenues for CFNI?	
2.4.4 Over the last 5 years, have any of CFNI's funding partners, including Member States failed to meet a financial obligation or commitments? And if so why?	

Financial viability	Your comments on CFNI's Financial Viability
2.4.5 If there have been such instances what has been the impact on CFNI's budget?	

2.5 Overall Performance Assessment

Please indicate your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
2.5.1 CFNI successfully delivers the programs and services it is mandated to do.	1	2	3	4	5
2.5.2 CFNI works with its partners to achieve planned outcomes.	1	2	3	4	5
2.5.3 CFNI provides good value for money to its partners and clients.	1	2	3	4	5
2.5.4 CFNI is seen as relevant to the various Member States of CARICOM	1	2	3	4	5
2.5.5 CARICOM is seen as relevant to its civil society stakeholders	1	2	3	4	5
2.5.6 CFNI is seen as relevant to PAHO	1	2	3	4	5
2.5.7 CFNI is seen as relevant to the private sector	1	2	3	4	5
2.5.8 CFNI is sustainable over the next 5 years.	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CFNI's performance:

3. External Context Affecting CFNI

The external environment affects every organization. Social, cultural, economic, demographic factors play an important role in affecting the performance of the five Caribbean Regional Health Institutes. For example, the laws of your country might play a supportive role in your Institute’s ability to deliver products.

Identify the 5 most important external factors that are either positively or negatively affecting the performance of CFNI.

External Factors	How do these factors affect CFNI’s performance?
1	
2	
3	
4	
5	

4. Capacity

Organizations must develop the skills and abilities to meet their mission, use their resources wisely, and develop methods to mobilize resources in order to continue their work in ways that make sense for the institution and the society. Organizational capacity is used here to describe Strategic Planning Capacities, Operating Structure, Governance Structure, Program Management Capacity, Infrastructure Management, Financial Management, Human Resources Management, Organizational Processes Management and Inter-Organizational Linkages.

4.1 Leadership and Strategic Management

Leadership and strategic management refers to the ability of CFNI leaders to develop a vision for the organization, strategies (an strategic plans) to implement that vision, including adequate resource deployment, and to ensure that these visions and plans will be acted upon by the various members of the organization. .

Please describe the major strengths and weaknesses of CFNI’s ability to lead and manage strategically.

Strategic Management	Strengths and Weaknesses

Please assess CFNI's Strategic Management Capacities by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.1.1 CFNI is driven by a clear vision	1	2	3	4	5
4.1.2 CFNI has developed strategies and plans to reach its objectives	1	2	3	4	5
4.1.3 CFNI's leaders are well respected by in the organization	1	2	3	4	5
4.1.4 CFNI's has a clear niche in the CARICOM community	1	2	3	4	5
4.1.5 CFNI's reports its performance to its Board on an ongoing basis	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CFNI's leadership and strategic management:

4.2 Operating Structure

The operating structure refers to the system of working relationships arrived at to divide and coordinate the tasks of people and groups working toward a common purpose.

Please describe CFNI's major strengths and weaknesses with respect to the responsibilities, coordination, use of authority and work planning

Operating Structure	Strengths and Weaknesses

Please assess CFNI's operating structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.2.1 Roles and responsibilities of CFNI's staff are clear	1	2	3	4	5
4.2.2 The roles and responsibilities of CFNI's division are clear	1	2	3	4	5
4.2.3 The existing operational structure supports effective delivery of programs and services	1	2	3	4	5
4.2.4 There is adequate coordination between CFNI's divisions	1	2	3	4	5
4.2.5 The existing operational structure allows for good workplanning	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CFNI's operating structure:

4.3 Governance Structure

The governance structure of CFNI refers to structures and resources linking senior management and the organization's stakeholders. In particular, this relates to CFNI's Governing Board, but it could also include Member States, international and regional bodies like CARICOM and PAHO, and others who have a direct role in CFNI's governance.

Please describe the major strengths and weaknesses of CFNI's governance structure:

Governance structure	Strengths and Weaknesses

Please assess CFNI's governance structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.3.1 The Governing Board members of CFNI are appropriately selected.	1	2	3	4	5
4.3.2 The Governing Board of CFNI carries out oversight its oversight role effectively (budgeting, finance expenditures, etc.).	1	2	3	4	5
4.3.3 The structure of the Governing Board of CFNI allows CFNI to perform effectively	1	2	3	4	5
4.3.4 The Governing Board of CFNI e reviews strategic plans.	1	2	3	4	5
4.3.5 The existing contracts that link CFNI to PAHO continue to be relevant	1	2	3	4	5
4.3.6 The Governing Board of CFNI provides feedback into regional needs for programming.	1	2	3	4	5
4.3.7 The Governing Board of CFNI is carrying out its fiduciary responsibilities.	1	2	3	4	5
4.3.8 The Governing Board of CFNI is linking to external constituencies to ensure relevance.	1	2	3	4	5
4.3.9 The Governing Board of CFNI provides input into strategy.	1	2	3	4	5
4.3.10 The Governing Board of CFNI provides insight to insure sustainability and financial viability.	1	2	3	4	5
4.3.11 The contractual agreement between CFNI and PAHO are beneficial to CFNI.	1	2	3	4	5
4.3.12 CFNI benefits from being a PAHO organization.	1	2	3	4	5

Please feel free to provide any comments or additional information on CFNI's governing structure:

4.4 Program Capacity

Program capacity refers to the degree to which CFNI is utilizing its programming resources, systems, facilities and abilities.

Below is a list of the major programmes carried out by CFNI, as we reviewed your annual reports.

Please assess the strengths and weaknesses of each of these programs and initiatives.

CFNI Programs and Services	Strengths and Weaknesses
Planning and Policy Formulation	
Surveillance and Research	
Human Resources Development	
Promotion and Dissemination of information on Food and nutrition	

4.5 Resource and Infrastructure Management

Resource and infrastructure management refers to the degree to which CFNI uses its infrastructure, equipment, facilities and technological resources in order to deliver its programs and services.

Please describe CFNI's major strengths and weaknesses in managing its resources and infrastructure:

Resource and Infrastructure Management	Strengths and Weaknesses

Please assess CFNI's resource and infrastructure management by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.5.1 CFNI maximizes the use of its infrastructure	1	2	3	4	5
4.5.2 CFNI has adequate access to laboratories to carry out its programs	1	2	3	4	5
4.5.3 CFNI's electronic technology (hardware, software, internet access) is adequate	1	2	3	4	5
4.5.4 CFNI has a good library (documentation centre)	1		3	4	5
4.5.5 CFNI staff has access to quality scientific equipment to conduct its work	1	2	3	4	5
4.5.6 CFNI's databases are well maintained	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.5.7 CFNI's technology allows the organization to interface with its stakeholders	1	2	3	4	5

Please feel free to provide any comments or additional information on CFNI's resource and infrastructure management:

4.6 Financial Management

Financial Management involves the planning, implementation and monitoring of the monetary resources of CFNI. Along with human resources, it provides the major inputs upon which CFNI builds its programs and services.

Please describe CFNI's major strengths and weaknesses in managing its financial resources:

Financial Management	Strengths and Weaknesses

Please assess CFNI's ability to manage its financial resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.6.1 CFNI has a good system to plan and manage its budget	1	2	3	4	5
4.6.2 CFNI audits its financial transactions in a timely fashion.	1	2	3	4	5
4.6.3 CFNI has a good system for managing our assets.	1	2	3	4	5
4.6.4 When CFNI obtains an external project, it has good systems for tracking what it spends.	1	2	3	4	5

Please feel free to provide any comments or additional information on CFNI's financial management:

4.7 Human Resources

Human Resources refer to the management processes needed to secure the highest level of competent staff to drive good performance. More precisely, human resources are seen in terms of staff recruitment, staff qualifications, professional development and staff evaluation.

Please describe the strengths and weaknesses of your institute's ability to manage Human resources:

Human Resources	Strengths and weaknesses

Please assess CFNI's ability to manage its human resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.7.1 CFNI recruits its staff based on their qualifications and competences.	1	2	3	4	5
4.7.2 CFNI is able to attract competent staff.	1	2	3	4	5
4.7.3 CFNI has a transparent human resource management policy.	1	2	3	4	5
4.7.4 CFNI invests in the professional development of its staff.	1	2	3	4	5
4.7.5 CFNI performs constructive staff performance appraisal	1	2	3	4	5
4.7.6 CFNI has a balanced representation of men and women amongst its professional staff	1	2	3	4	5
4.7.7 CFNI's staff is satisfied with the compensation packages in place.	1	2	3	4	5

Please feel free to provide any comments or additional information on CFNI's human resource management:

4.8 CFNI's Organizational Processes (Planning, Communications, Problem-solving, etc.)

Organizational processes refer to CFNI's capacity to carry out its management functions. The main processes are planning, communicating, decision-making, problem-solving, and providing feedback.

Please describe the strengths and weaknesses of CFNI's ability to manage these key processes.

Organizational Processes	Strengths and Weaknesses

Please assess CFNI's ability to manage its organizational processes by indicating your level of agreement with the following statements

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know
4.8.1 CFNI's staff adequately participates in decision-making processes.	1 2 3 4 5
4.8.2 CFNI solves problem in an effective way	1 2 3 4 5
4.8.3 Stakeholders are involved appropriately in the planning and decision-making processes.	1 2 3 4 5
4.8.4 Internal communications mechanisms keep staff informed.	1 2 3 4 5
4.8.5 CFNI's work processes support innovation.	1 2 3 4 5
4.8.6 Best practices and lessons learned are used to improve the work.	1 2 3 4 5
4.8.7 Evaluation mechanisms exist, and adequately inform the quality of services provided by my institution	1 2 3 4 5

Please feel free to provide any comments or additional information on CFNI's management of organizational processes:

4.9 Partnerships and Linkages

Linkages refer to the regular contacts that CFNI maintains with other institutions, organizations and groups of strategic importance, which can result in exchange of approaches and resources.

Please describe CFNI's strengths and weaknesses in creating and sustaining partnerships:

Partnerships	Strengths and Weaknesses

Please assess CFNI's ability to create constructive partnerships by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.9.1 CFNI has developed mutually beneficial partnerships with international agencies. e.g. PAHO, FAO	1	2	3	4	5
4.9.2 CFNI has developed mutually beneficial partnerships with Caribbean Member States.	1	2	3	4	5
4.9.3 CFNI My institute has developed mutually beneficial partnerships with international donor agencies, like CIDA and DFID.	1	2	3	4	5
4.9.4 CFNI has developed mutually beneficial partnerships with regional or national civil society groups.	1	2	3	4	5
4.9.5 CFNI e has developed mutually beneficial partnerships with the private sector.	1	2	3	4	5
4.9.6 CFNI has developed mutually beneficial partnerships with other Caribbean Regional Health Institutes.	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know
4.9.7 CFNI has developed mutually beneficial partnerships with other similar health-related organisations of other nations like the CDC, the EPA, the FDA, or the NIH.	1 2 3 4 5
4.9.8 CFNI manages its partnerships effectively.	1 2 3 4 5
4.9.10 CFNI is sought after as a partner because of its distinctiveness.	1 2 3 4 5

Please feel free to provide any comments or additional information on CFNI's management of its partnerships and linkages:

5. Overall Performance Assessment

In your opinion, what are the three major strengths of CFNI?

KEY STRENGTHS OF CFNI	WHY

In your opinion, leaving access to financial resources aside, what are the three key challenges that CFNI is facing in the medium and long term?

KEY CHALLENGES FOR CFNI	WHY

THANK YOU FOR YOUR COLLABORATION

CEHI Self-Evaluation Questionnaire

1. Your Team

Please identify who, inside or outside CEHI, has been consulted in filling out this self-assessment questionnaire.

2. CEHI's Performance

CEHI's performance is concerned with four broad and over-riding issues: its effectiveness in reaching the goals and objectives as described in its mission and mandate, its efficiency in using resources wisely, its ability to respond to the changing demands of its internal and external stakeholders and its ability to continuously attract adequate resources to ensure the viability of the organization. CEHI's performance in these terms is understood as organizational effectiveness, efficiency, relevance and financial viability.

In this section we would like you to provide us with data on CEHI's performance in terms of effectiveness, efficiency, relevance and financial viability. For each of these four areas, you will be asked to answer specific questions.

2.1 Effectiveness of CEHI

Below are the major factors related to the effectiveness of CEHI. Please provide the data-requested to the evaluation team during its visit to your organization (if the data is available) and indicate the source of the data.

Effectiveness	Your Assessment of CEHI's Effectiveness
2.1.1 Please outline the mandated programs and services of CEHI and specify what activities you undertake in these areas.	
2.1.2 Over the last five years has CEHI undertaken programs and services outside its mandated priority areas of work? What are they?	
2.1.3 Please identify CEHI's major clients (national governments, regional organizations, institutions such as universities, the private sector, the general public, others) and indicate what kind of programs and services you provide to each.	
2.1.4 What do you consider to have been the most important contribution that CEHI has made to the CARCOM Community in the following areas of work: A) Technical Services (Research, Engineering, etc.)	

Effectiveness	Your Assessment of CEHI's Effectiveness
B) Information Services / Marketing and Communications (awareness, intelligence and information, etc.)	
C) Programme Development (Environmental Health, Climate Change, Biomedical Waste Management, etc.)	
2.1.5 Are there any areas of its mandate where CEHI, in the last 5 years, has not undertaken activities? If so, Please explain why.	

2.2 Efficiency of CEHI

Below are the major factors related to the efficiency of CEHI. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Efficiency	Your Assessment of CEHI's Efficiency
2.2.1 Have the relative levels of contribution to CEHI from its funding partners changed over the last 5 years? And if so, in what way and why?	
2.2.2 Does CEHI have a financial system to track unit cost of services? If so, can you provide the unit costs for the products and services you provide?	
2.2.3 Has there been any cost-benefit analysis of the various services provided by CEHI? If yes, may we have the results?	
2.2.4 Has CEHI ever conducted studies that compare the costs of the services it provides to those that may be available from other sources e.g. private sectors, universities others? If yes, may we have the results?	
2.2.5 Does CEHI use any benchmarks to understand the efficiency of its work? If so, may we have them?	

2.3 Relevance of CEHI

Below are the major factors related to the relevance of CEHI. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Relevance	Your Assessment of CEHI's Relevance
2.3.1 Does CEHI obtain feedback from its clients or stakeholders in a systematic way? (Polls, Client satisfaction survey etc) If so, may we have a copy?	
2.3.2 Has the respective overall mandate of CAREC changed over the last five year? Why? 2.3.3 If so, has CAREC adapted its products or services to meet these changing circumstances? Please explain.	
2.3.4 Who are CEHI's main competitors in the region?	
2.3.5 Has CEHI acquired new funding or grants in order to provide new services over the last 5 years? If so, please describe.	

2.4 Financial Viability of CEHI

Below are the major factors related to the financial viability of CEHI. Please provide the data to the evaluation team as requested (if available) and indicate the source of the data.

Financial Viability	Your comments on CEHI's Financial Viability
2.4.1 Has CEHI made plans to attract new financial resources (resource mobilization strategy) or even to keep the same level of resources? If so, please provide these plans to the evaluation team.	
2.4.2 If CEHI has fee for service or cost-recovery structures, when was the last time that these structures were reviewed or modified?	
2.4.3 Have there been any changes in demand for services from CEHI's key clients and stakeholders? And if so, has it resulted in additional revenues for CEHI?	
2.4.4 Over the last 5 years, have any of CEHI's funding partners, including Member States failed to meet a financial obligation or commitments? And if so why?	

Financial Viability	Your comments on CEHI's Financial Viability
2.4.5 If there have been such instances what has been the impact on CEHI's budget?	

2.5 Overall Performance Assessment

Please indicate your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
2.5.1 CEHI successfully delivers the programs and services it is mandated to do.	1	2	3	4	5
2.5.2 CEHI works with its partners to achieve planned outcomes.	1	2	3	4	5
2.5.3 CEHI provides good value for money to its partners and clients.	1	2	3	4	5
2.5.4 CEHI is seen as relevant to the various Member States of CARICOM	1	2	3	4	5
2.5.5 CARICOM is seen as relevant to its civil society stakeholders	1	2	3	4	5
2.5.6 CEHI is seen as relevant to PAHO	1	2	3	4	5
2.5.7 CEHI is seen as relevant to the private sector	1	2	3	4	5
2.5.8 CEHI is sustainable over the next 5 years.	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CEHI's performance:

3. External Context Affecting CEHI

The external environment affects every organization. Social, cultural, economic, demographic factors play an important role in affecting the performance of the five Caribbean Regional Health Institutes. For example, the laws of your country might play a supportive role in your Institute’s ability to deliver products.

Identify the 5 most important external factors that are either positively or negatively affecting the performance of CEHI.

External Factors	How do these factors affect CEHI’s performance?
1	
2	
3	
4	
5	

4. Capacity

Organizations must develop the skills and abilities to meet their mission, use their resources wisely, and develop methods to mobilize resources in order to continue their work in ways that make sense for the institution and the society. Organizational capacity is used here to describe Strategic Planning Capacities, Operating Structure, Governance Structure, Program Management Capacity, Infrastructure Management, Financial Management, Human Resources Management, Organizational Processes Management and Inter-Organizational Linkages.

4.1 Leadership and Strategic Management

Leadership and strategic management refers to the ability of CEHI leaders to develop a vision for the organization, strategies (an strategic plans) to implement that vision, including adequate resource deployment, and to ensure that these visions and plans will be acted upon by the various members of the organization.

Please describe the major strengths and weaknesses of CEHI’s ability to lead and manage strategically.

Strategic Management	Strengths and Weaknesses

Please assess CEHI's Strategic Management Capacities by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.1.1 CEHI is driven by a clear vision	1	2	3	4	5
4.1.2 CEHI has developed strategies and plans to reach its objectives	1	2	3	4	5
4.1.3 CEHI's leaders are well respected by in the organization	1	2	3	4	5
4.1.4 CEHI's has a clear niche in the CARICOM community	1	2	3	4	5
4.1.5 CEHI's reports its performance to its Board on an ongoing basis	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CEHI's leadership and strategic management:

4.2 Operating Structure

The operating structure refers to the system of working relationships arrived at to divide and coordinate the tasks of people and groups working toward a common purpose.

Please describe CEHI's major strengths and weaknesses with respect to the responsibilities, coordination, use of authority and work planning

Operating Structure	Strengths and Weaknesses

Please assess CEHI's operating structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.2.1 Roles and responsibilities of CEHI's staff are clear	1	2	3	4	5
4.2.2 The roles and responsibilities of CEHI's division are clear	1	2	3	4	5
4.2.3 The existing operational structure supports effective delivery of programs and services	1	2	3	4	5
4.2.4 There is adequate coordination between CEHI's divisions	1	2	3	4	5
4.2.5 The existing operational structure allows for good workplanning	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CEHI's operating structure:

4.3 Governance Structure

The governance structure of CEHI refers to structures and resources linking senior management and the organization's stakeholders. In particular, this relates to CEHI's Governing Board, but it could also include Member States, international and regional bodies like CARICOM and PAHO, and others who have a direct role in CEHI's governance.

Please describe the major strengths and weaknesses of CEHI's governance structure:

Governance structure	Strengths and Weaknesses

Please assess CEHI's governance structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.3.1 The Governing Board members of CEHI are appropriately selected.	1	2	3	4	5
4.3.2 The Governing Board of CEHI carries out oversight its oversight role effectively (budgeting, finance expenditures, etc.).	1	2	3	4	5
4.3.3 The structure of the Governing Board of CEHI allows CEHI to perform effectively	1	2	3	4	5
4.3.4 The Governing Board of CEHI e reviews strategic plans.	1	2	3	4	5
4.3.5 The existing contracts that link CEHI to PAHO continue to be relevant	1	2	3	4	5
4.3.6 The Governing Board of CEHI provides feedback into regional needs for programming.	1	2	3	4	5
4.3.7 The Governing Board of CEHI is carrying out its fiduciary responsibilities.	1	2	3	4	5
4.3.8 The Governing Board of CEHI is linking to external constituencies to ensure relevance.	1	2	3	4	5
4.3.9 The Governing Board of CEHI provides input into strategy.	1	2	3	4	5
4.3.10 The Governing Board of CEHI provides insight to insure sustainability and financial viability.	1	2	3	4	5

Please feel free to provide any comments or additional information on CEHI's governing structure:

4.4 Program Capacity

Program capacity refers to the degree to which CEHI is utilizing its programming resources, systems, facilities and abilities.

Below is a list of the major programmes carried out by CEHI, as we reviewed your annual reports.

Please assess the strengths and weaknesses of each of these programs and initiatives.

CEHI Programs and Services	Strengths and Weaknesses
Research	
Engineering and other Technical Services	
Laboratory Services	
Provision of Environmental Health and Intelligence Information	
Promotion awareness of environmental health issues	
Promotion and marketing	
Ad hoc activities in communications	
Environmental Health Improvement Projects	
Integrated Watershed and Coastal Areas Management in Caribbean SIDS	
Risk Management in Environmental Health	
Climate Change and Health	
Biomedical Waste Management Project	

4.5 Resource and Infrastructure Management

Resource and infrastructure management refers to the degree to which CEHI uses its infrastructure, equipment, facilities and technological resources in order to deliver its programs and services..

Please describe CEHI's major strengths and weaknesses in managing its resources and infrastructure:

Resource and Infrastructure Management	Strengths and Weaknesses

Please assess CEHI's resource and infrastructure management by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.5.1 CEHI maximizes the use of its infrastructure	1	2	3	4	5
4.5.2 CEHI has adequate access to laboratories to carry out its programs	1	2	3	4	5
4.5.3 CEHI's electronic technology (hardware, software, internet access) is adequate	1	2	3	4	5
4.5.4 CEHI has a good library (documentation centre)	1	2	3	4	5
4.5.5 CEHI staff has access to quality scientific equipment to conduct its work	1	2	3	4	5
4.5.6 CEHI's databases are well maintained	1	2	3	4	5
4.5.7 CEHI's technology allows the organization to interface with its stakeholders	1	2	3	4	5

Please feel free to provide any comments or additional information on CEHI's resource and infrastructure management:

4.6 Financial Management

Financial Management involves the planning, implementation and monitoring of the monetary resources of CEHI. Along with human resources, it provides the major inputs upon which CEHI builds its programs and services.

Please describe CEHI's major strengths and weaknesses in managing its financial resources:

Financial Management	Strengths and Weaknesses

Please assess CEHI’s ability to manage its financial resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.6.1 CEHI has a good system to plan and manage its budget	1	2	3	4	5
4.6.2 CEHI audits its financial transactions in a timely fashion.	1	2	3	4	5
4.6.3 CEHI has a good system for managing our assets.	1	2	3	4	5
4.6.4 When CEHI obtains an external project, it has good systems for tracking what it spends.	1	2	3	4	5

Please feel free to provide any comments or additional information on CEHI’s financial management:

4.7 Human Resources

Human Resources refer to the management processes needed to secure the highest level of competent staff to drive good performance. More precisely, human resources are seen in terms of staff recruitment, staff qualifications, professional development and staff evaluation.

Please describe the strengths and weaknesses of your institute’s ability to manage Human resources:

Human Resources	Strengths and Weaknesses

Please assess CEHI's ability to manage its human resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.7.1 CEHI recruits its staff based on their qualifications and competences.	1	2	3	4	5
4.7.2 CEHI is able to attract competent staff.	1	2	3	4	5
4.7.3 CEHI has a transparent human resource management policy.	1	2	3	4	5
4.7.4 CEHI invests in the professional development of its staff.	1	2	3	4	5
4.7.5 CEHI performs constructive staff performance appraisal	1	2	3	4	5
4.7.6 CEHI has a balanced representation of men and women amongst its professional staff	1	2	3	4	5
4.7.7 CEHI's staff is satisfied with the compensation packages in place.	1	2	3	4	5

Please feel free to provide any comments or additional information on CEHI's human resource management:

4.8 CEHI's Organizational Processes (Planning, Communications, Problem-solving, etc.)

Organizational processes refer to CEHI's capacity to carry out its management functions. The main processes are planning, communicating, decision-making, problem-solving, and providing feedback.

Please describe the strengths and weaknesses of CEHI's ability to manage these key processes.

Organizational Processes	Strengths and Weaknesses

Please assess CEHI's ability to manage its organizational processes by indicating your level of agreement with the following statements

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.8.1 CEHI's staff adequately participates in decision-making processes.	1	2	3	4	5
4.8.2 CEHI solves problem in an effective way	1	2	3	4	5
4.8.3 Stakeholders are involved appropriately in the planning and decision-making processes.	1	2	3	4	5
4.8.4 Internal communications mechanisms keep staff informed.	1	2	3	4	5
4.8.5 CEHI's work processes support innovation.	1	2	3	4	5
4.8.6 Best practices and lessons learned are used to improve the work.	1	2	3	4	5
4.8.7 Evaluation mechanisms exist, and adequately inform the quality of services provided by my institution	1	2	3	4	5

Please feel free to provide any comments or additional information on CEHI's management of organizational processes:

4.9 Partnerships and Linkages

Linkages refer to the regular contacts that CEHI maintains with other institutions, organizations and groups of strategic importance, which can result in exchange of approaches and resources.

Please describe CEHI's strengths and weaknesses in creating and sustaining partnerships:

Partnerships	Strengths and Weaknesses

Please assess CEHI's ability to create constructive partnerships by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.9.1 CEHI has developed mutually beneficial partnerships with international agencies. e.g. PAHO, FAO	1	2	3	4	5
4.9.2 CEHI has developed mutually beneficial partnerships with Caribbean Member States.	1	2	3	4	5
4.9.3 CEHI My institute has developed mutually beneficial partnerships with international donor agencies, like CIDA and DFID.	1	2	3	4	5
4.9.4 CEHI has developed mutually beneficial partnerships with regional or national civil society groups.	1	2	3	4	5
4.9.5 CEHI e has developed mutually beneficial partnerships with the private sector.	1	2	3	4	5
4.9.6 CEHI has developed mutually beneficial partnerships with other Caribbean Regional Health Institutes.	1	2	3	4	5
4.9.7 CEHI has developed mutually beneficial partnerships with other similar health-related organisations of other nations like the CDC, the EPA, the FDA, or the NIH.	1	2	3	4	5
4.9.8 CEHI manages its partnerships effectively.	1	2	3	4	5
4.9.9 CEHI is sought after as a partner because of its distinctiveness.	1	2	3	4	5

Please feel free to provide any comments or additional information on CEHI's management of its partnerships and linkages:



5. Overall Performance Assessment

In your opinion, what are the three major strengths of CEHI?

KEY STRENGTHS OF CEHI	WHY

In your opinion, leaving access to financial resources aside, what are the three key challenges that CEHI is facing in the medium and long term?

KEY CHALLENGES FOR CEHI	WHY

THANK YOU FOR YOUR COLLABORATION

CHRC Self-Evaluation Questionnaire

1. Your Team

Please identify who, inside or outside CHRC, has been consulted in filling out this self-assessment questionnaire.

2. CHRC's Performance

CHRC's performance is concerned with four broad and over-riding issues: its effectiveness in reaching the goals and objectives as described in its mission and mandate, its efficiency in using resources wisely, its ability to respond to the changing demands of its internal and external stakeholders and its ability to continuously attract adequate resources to ensure the viability of the organization. CHRC's performance in these terms is understood as organizational effectiveness, efficiency, relevance and financial viability.

In this section we would like you to provide us with data on CHRC's performance in terms of effectiveness, efficiency, relevance and financial viability. For each of these four areas, you will be asked to answer specific questions.

2.1 Effectiveness of CHRC

Below are the major factors related to the effectiveness of CHRC. Please provide the data-requested to the evaluation team during its visit to your organization (if the data is available) and indicate the source of the data.

Effectiveness	Your assessment of CHRC's Effectiveness
2.1.1 Please outline the mandated programs and services of CHRC and specify what activities you undertake in these areas.	
2.1.2 Over the last five years has CHRC undertaken programs and services outside its mandated priority areas of work? What are they?	
2.1.3 Please identify CHRC's major clients (national governments, regional organizations, institutions such as universities, the private sector, the general public, others) and indicate what kind of programs and services you provide to each.	
2.1.4 What do you consider to have been the most important contribution that CHRC has made to the CARICOM Community in the following areas of work: A) Promotion of health-related research in the Caribbean?	

Effectiveness	Your assessment of CHRC's Effectiveness
B) Coordination of health-related research in the Caribbean?	
C) Provision of advice on matters relating to health research?	
D) Training in health research methodology	
E) Dissemination of new knowledge to clients?	
2.1.5 Given its mandate, has CHRC developed an inventory of health research in the CARICOM community?	
2.1.6 Are there any areas of its mandate where CHRC, in the last 5 years, has not undertaken activities? If so, Please explain why.	

2.2 Efficiency of CHRC

Below are the major factors related to the efficiency of CHRC. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Efficiency	Your assessment of CHRC's Efficiency
2.2.1 Have the relative levels of contribution to CHRC from its funding partners changed over the last 5 years? And if so, in what way and why?	
2.2.2 Does CHRC have a financial system to track unit cost of services? If so, can you provide the unit costs for the products and services you provide?	
2.2.3 Has there been any cost-benefit analysis of the various services provided by CHRC? If yes, may we have the results?	
2.2.4 Has CHRC ever conducted studies that compare the costs of the services it provides to those that may be available from other sources e.g. private sectors, universities others? If yes, may we have the results?	

Efficiency	Your assessment of CHRC's Efficiency
2.2.5 Does CHRC use any benchmarks to understand the efficiency of its work? If so, may we have them?	

2.3 Relevance of CHRC

Below are the major factors related to the relevance of CHRC. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Relevance	Your assessment of CHRC's Relevance
2.3.1 Does CHRC obtain feedback from its clients or stakeholders in a systematic way? (Polls, Client satisfaction survey etc) If so, may we have a copy?	
2.3.2 Has the respective overall mandate of CAREC changed over the last five year? Why? 2.3.3 If so, has CAREC adapted its products or services to meet these changing circumstances? Please explain.	
2.3.4 Who are CHRC's main competitors in the region?	
2.3.5 Has CHRC acquired new funding or grants in order to provide new services over the last 5 years? If so, please describe.	

2.4 Financial Viability of CHRC

Below are the major factors related to the financial viability of CHRC. Please provide the data to the evaluation team as requested (if available) and indicate the source of the data.

Financial Viability	Your comments on CHRC's Financial Viability
2.4.1 Has CHRC made plans to attract new financial resources (resource mobilization strategy) or even to keep the same level of resources? If so, please provide these plans to the evaluation team.	
2.4.2 If CHRC has fee for service or cost-recovery structures, when was the last time that these structures were reviewed or modified?	

Financial Viability	Your comments on CHRC's Financial Viability
2.4.3 Have there been any changes in demand for services from CHRC's key clients and stakeholders? And if so, has it resulted in additional revenues for CHRC?	
2.4.4 Over the last 5 years, have any of CHRC's funding partners, including Member States failed to meet a financial obligation or commitments? And if so why?	
2.4.5 If there have been such instances what has been the impact on CHRC's budget?	

2.5 Overall Performance Assessment

Please indicate your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
2.5.1 CHRC successfully delivers the programs and services it is mandated to do.	1	2	3	4	5
2.5.2 CHRC works with its partners to achieve planned outcomes.	1	2	3	4	5
2.5.3 CHRC provides good value for money to its partners and clients.	1	2	3	4	5
2.5.4 CHRC is seen as relevant to the various Member States of CARICOM	1	2	3	4	5
2.5.5 CARICOM is seen as relevant to its civil society stakeholders	1	2	3	4	5
2.5.6 CHRC is seen as relevant to PAHO	1	2	3	4	5
2.5.7 CHRC is seen as relevant to the private sector	1	2	3	4	5
2.5.8 CHRC is sustainable over the next 5 years.	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CHRC's performance:

3. External Context Affecting CHRC

The external environment affects every organization. Social, cultural, economic, demographic factors play an important role in affecting the performance of the five Caribbean Regional Health Institutes. For example, the laws of your country might play a supportive role in your Institute's ability to deliver products.

Identify the 5 most important external factors that are either positively or negatively affecting the performance of CHRC.

External Factors	How do these factors affect CHRC's performance?
1	
2	
3	
4	
5	

4. Capacity

Organizations must develop the skills and abilities to meet their mission, use their resources wisely, and develop methods to mobilize resources in order to continue their work in ways that make sense for the institution and the society. Organizational capacity is used here to describe Strategic Planning Capacities, Operating Structure, Governance Structure, Program Management Capacity, Infrastructure Management, Financial Management, Human Resources Management, Organizational Processes Management and Inter-Organizational Linkages.

4.1 Leadership and Strategic Management

Leadership and strategic management refers to the ability of CHRC leaders to develop a vision for the organization, strategies (an strategic plans) to implement that vision, including adequate resource deployment, and to ensure that these visions and plans will be acted upon by the various members of the organization.

Please describe the major strengths and weaknesses of CHRC's ability to lead and manage strategically.

Strategic Management	Strengths and Weaknesses

Please assess CHRC's Strategic Management Capacities by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.1.1 CHRC is driven by a clear vision	1	2	3	4	5
4.1.2 CHRC has developed strategies and plans to reach its objectives	1	2	3	4	5
4.1.3 CHRC's leaders are well respected by in the organization	1	2	3	4	5
4.1.4 CHRC's has a clear niche in the CARICOM community	1	2	3	4	5
4.1.5 CHRC's reports its performance to its Board on an ongoing basis	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CHRC's leadership and strategic management:

4.2 Operating Structure

The operating structure refers to the system of working relationships arrived at to divide and coordinate the tasks of people and groups working toward a common purpose.

Please describe CHRC's major strengths and weaknesses with respect to the responsibilities, coordination, use of authority and work planning:

Operating Structure	Strengths and Weaknesses

Please assess CHRC's operating structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.2.1 Roles and responsibilities of CHRC's staff are clear	1	2	3	4	5
4.2.2 The roles and responsibilities of CHRC's division are clear	1	2	3	4	5
4.2.3 The existing operational structure supports effective delivery of programs and services	1	2	3	4	5
4.2.4 There is adequate coordination between CHRC's divisions	1	2	3	4	5
4.2.5 The existing operational structure allows for good workplanning	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CHRC's operating structure:

4.3 Governance Structure

The governance structure of CHRC refers to structures and resources linking senior management and the organization's stakeholders. In particular, this relates to CHRC's Governing Board, but it could also include Member States, international and regional bodies like CARICOM and PAHO, and others who have a direct role in CHRC's governance.

Please describe the major strengths and weaknesses of CHRC's governance structure:

Governance structure	Strengths and Weaknesses

Please assess CHRC's governance structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.3.1 The Governing Board members of CHRC are appropriately selected.	1	2	3	4	5
4.3.2 The Governing Board of CHRC carries out oversight its oversight role effectively (budgeting, finance expenditures, etc.).	1	2	3	4	5
4.3.3 The structure of the Governing Board of CHRC allows CHRC to perform effectively	1	2	3	4	5
4.3.4 The Governing Board of CHRC e reviews strategic plans.	1	2	3	4	5
4.3.5 The existing contracts that link CHRC to PAHO continue to be relevant	1	2	3	4	5
4.3.6 The Governing Board of CHRC provides feedback into regional needs for programming.	1	2	3	4	5
4.3.7 The Governing Board of CHRC is carrying out its fiduciary responsibilities.	1	2	3	4	5
4.3.8 The Governing Board of CHRC is linking to external constituencies to ensure relevance.	1	2	3	4	5
4.3.9 The Governing Board of CHRC provides input into strategy.	1	2	3	4	5
4.3.10 The Governing Board of CHRC provides insight to insure sustainability and financial viability.	1	2	3	4	5

Please feel free to provide any comments or additional information on CHRC's governing structure:

4.4 Program Capacity

Program capacity refers to the degree to which CHRC is utilizing its programming resources, systems, facilities and abilities.

Below is a list of the major programmes carried out by CHRC, as we reviewed your annual reports.

Please assess the strengths and weaknesses of each of these programs and initiatives.

CHRC Programs and services	Strengths and Weaknesses
Supporting Research	
Coordinating Research in the region	
Disseminating the results of research in the region	
Providing advice on health research related matters	
Training in health research methodology	

4.5 Resource and Infrastructure Management

Resource and infrastructure management refers to the degree to which CHRC uses its infrastructure, equipment, facilities and technological resources in order to deliver its programs and services.

Please describe CHRC's major strengths and weaknesses in managing its resources and infrastructure:

Resource and Infrastructure Management	Strengths and Weaknesses

Please assess CHRC's resource and infrastructure management by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.5.1 CHRC maximizes the use of its infrastructure	1	2	3	4	5
4.5.2 CHRC has adequate access to laboratories to carry out its programs	1	2	3	4	5
4.5.3 CHRC's electronic technology (hardware, software, internet access) is adequate	1	2	3	4	5
4.5.4 CHRC has a good library (documentation centre)	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.5.5 CHRC staff has access to quality scientific equipment to conduct its work	1	2	3	4	5
4.5.6 CHRC's databases are well maintained	1	2	3	4	5
4.5.7 CHRC's technology allows the organization to interface with its stakeholders	1	2	3	4	5

Please feel free to provide any comments or additional information on CHRC's resource and infrastructure management:

4.6 Financial Management

Financial Management involves the planning, implementation and monitoring of the monetary resources of CHRC. Along with human resources, it provides the major inputs upon which CHRC builds its programs and services.

Please describe CHRC's major strengths and weaknesses in managing its financial resources:

Financial Management	Strengths and Weaknesses

Please assess CHRC's ability to manage its financial resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.6.1 CHRC has a good system to plan and manage its budget	1	2	3	4	5
4.6.2 CHRC audits its financial transactions in a timely fashion.	1	2	3	4	5
4.6.3 CHRC has a good system for managing our assets.	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.6.4 When CHRC obtains an external project, it has good systems for tracking what it spends.	1	2	3	4	5

Please feel free to provide any comments or additional information on CHRC's financial management:

4.7 Human Resources

Human Resources refer to the management processes needed to secure the highest level of competent staff to drive good performance. More precisely, human resources are seen in terms of staff recruitment, staff qualifications, professional development and staff evaluation.

Please describe the strengths and weaknesses of your institute's ability to manage Human resources:

Human Resources	Strengths and Weaknesses

Please assess CHRC's ability to manage its human resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.7.1 CHRC recruits its staff based on their qualifications and competences.	1	2	3	4	5
4.7.2 CHRC is able to attract competent staff.	1	2	3	4	5
4.7.3 CHRC has a transparent human resource management policy.	1	2	3	4	5
4.7.4 CHRC invests in the professional development of its staff.	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.7.5 CHRC performs constructive staff performance appraisal	1	2	3	4	5
4.7.6 CHRC has a balanced representation of men and women amongst its professional staff	1	2	3	4	5
4.7.7 CHRC's staff is satisfied with the compensation packages in place.	1	2	3	4	5

Please feel free to provide any comments or additional information on CHRC's human resource management:

4.8 CHRC's Organizational Processes (Planning, Communications, Problem-solving, etc.)

Organizational processes refer to CHRC's capacity to carry out its management functions. The main processes are planning, communicating, decision-making, problem-solving, and providing feedback.

Please describe the strengths and weaknesses of CHRC's ability to manage these key processes.

Organizational Processes	Strengths and Weaknesses

Please assess CHRC's ability to manage its organizational processes by indicating your level of agreement with the following statements

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.8.1 CHRC's staff adequately participates in decision-making processes.	1	2	3	4	5
4.8.2 CHRC solves problem in an effective way	1	2	3	4	5
4.8.3 Stakeholders are involved appropriately in the planning and decision-making processes.	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.8.4 Internal communications mechanisms keep staff informed.	1	2	3	4	5
4.8.5 CHRC's work processes support innovation.	1	2	3	4	5
4.8.6 Best practices and lessons learned are used to improve the work.	1	2	3	4	5
4.8.7 Evaluation mechanisms exist, and adequately inform the quality of services provided by my institution	1	2	3	4	5

Please feel free to provide any comments or additional information on CHRC's management of organizational processes:

4.9 Partnerships and Linkages

Linkages refer to the regular contacts that CHRC maintains with other institutions, organizations and groups of strategic importance, which can result in exchange of approaches and resources.

Please describe CHRC's strengths and weaknesses in creating and sustaining partnerships:

Partnerships	Strengths and Weaknesses

Please assess CHRC's ability to create constructive partnerships by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.9.1 CHRC has developed mutually beneficial partnerships with international agencies. e.g. PAHO, FAO	1	2	3	4	5
4.9.2 CHRC has developed mutually beneficial partnerships with Caribbean Member States.	1	2	3	4	5
4.9.3 CHRC My institute has developed mutually beneficial partnerships with international donor agencies, like CIDA and DFID.	1	2	3	4	5
4.9.4 CHRC has developed mutually beneficial partnerships with regional or national civil society groups.	1	2	3	4	5
4.9.5 CHRC e has developed mutually beneficial partnerships with the private sector.	1	2	3	4	5
4.9.6 CHRC has developed mutually beneficial partnerships with other Caribbean Regional Health Institutes.	1	2	3	4	5
4.9.7 CHRC has developed mutually beneficial partnerships with other similar health-related organisations of other nations like the CDC, the EPA, the FDA, or the NIH.	1	2	3	4	5
4.9.8 CHRC manages its partnerships effectively.	1	2	3	4	5
4.9.9 CHRC is sought after as a partner because of its distinctiveness.	1	2	3	4	5

Please feel free to provide any comments or additional information on CHRC's management of its partnerships and linkages:



5. Overall Performance Assessment

In your opinion, what are the three major strengths of CHRC?

KEY STRENGTH OF CHRC	WHY

In your opinion, leaving access to financial resources aside, what are the three key challenges that CHRC is facing in the medium and long term?

KEY CHALLENGES FOR CHRC	WHY

THANK YOU FOR YOUR COLLABORATION

CRDTL Self-Evaluation Questionnaire

1. Your Team

Please identify who, inside or outside CRDTL, has been consulted in filling out this self-assessment questionnaire.

2. CRDTL's Performance

CRDTL's performance is concerned with four broad and over-riding issues: its effectiveness in reaching the goals and objectives as described in its mission and mandate, its efficiency in using resources wisely, its ability to respond to the changing demands of its internal and external stakeholders and its ability to continuously attract adequate resources to ensure the viability of the organization. CRDTL's performance in these terms is understood as organizational effectiveness, efficiency, relevance and financial viability.

In this section we would like you to provide us with data on CRDTL's performance in terms of effectiveness, efficiency, relevance and financial viability. For each of these four areas, you will be asked to answer specific questions.

2.1 Effectiveness of CRDTL

Below are the major factors related to the effectiveness of CRDTL. Please provide the data-requested to the evaluation team during its visit to your organization (if the data is available) and indicate the source of the data.

Effectiveness	Your assessment of CRDTL's Effectiveness
2.1.1 Please outline the mandated programs and services of CRDTL and specify what activities you undertake in these areas.	
2.1.2 Over the last five years has CRDTL undertaken programs and services outside its mandated priority areas of work? What are they?	
2.1.3 Please identify CRDTL's major clients (national governments, regional organizations, institutions such as universities, the private sector, the general public, others) and indicate what kind of programs and services you provide to each.	
2.1.4 What do you consider to have been the most important contribution that CRDTL has made to the CARCOM Community in the following area of work:	

Effectiveness	Your assessment of CRDTL's Effectiveness
A) Performing quality control analyses of drugs marketed in the region? B) Dissemination of new knowledge to clients.	

2.2 Efficiency of CRDTL

Below are the major factors related to the efficiency of CRDTL. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Efficiency	Your assessment of CRDTL's Efficiency
2.2.1 Have the relative levels of contribution to CRDTL from its funding partners changed over the last 5 years? And if so, in what way and why?	
2.2.2 Does CRDTL have a financial system to track unit cost of services? If so, can you provide the unit costs for the products and services you provide?	
2.2.3 Has there been any cost-benefit analysis of the various services provided by CRDTL? If yes, may we have the results?	
2.2.4 Has CRDTL ever conducted studies that compare the costs of the services it provides to those that may be available from other sources e.g. private sectors, universities others? If yes, may we have the results?	
2.2.5 Does CRDTL use any benchmarks to understand the efficiency of its work? If so, may we have them?	

2.3 Relevance of CRDTL

Below are the major factors related to the relevance of CRDTL. Please provide the data to the evaluation team as requested (if available), and indicate the source of the data.

Relevance	Your assessment of CRDTL's Relevance
2.3.1 Does CRDTL obtain feedback from its clients or stakeholders in a systematic way? (Polls, Client satisfaction survey etc) If so, may we have a copy?	
2.3.2 Has the respective overall mandate of CAREC changed over the last five year? Why?	

Relevance	Your assessment of CRDTL's Relevance
2.3.3 If so, has CAREC adapted its products or services to meet these changing circumstances? Please explain.	
2.3.4 Who are CRDTL's main competitors in the region?	
2.3.5 Has CRDTL acquired new funding or grants in order to provide new services over the last 5 years? If so, please describe.	

2.4 Financial Viability of CRDTL

Below are the major factors related to the financial viability of CRDTL. Please provide the data to the evaluation team as requested (if available) and indicate the source of the data.

Financial Viability	Your comments on CRDTL's Financial Viability
2.4.1 Has CRDTL made plans to attract new financial resources (resource mobilization strategy) or even to keep the same level of resources? If so, please provide these plans to the evaluation team.	
2.4.2 If CRDTL has fee for service or cost-recovery structures, when was the last time that these structures were reviewed or modified?	
2.4.3 Have there been any changes in demand for services from CRDTL's key clients and stakeholders? And if so, has it resulted in additional revenues for CRDTL?	
2.4.4 Over the last 5 years, have any of CRDTL's funding partners, including Member States failed to meet a financial obligation or commitments? And if so why?	
2.4.5 If there have been such instances what has been the impact on CRDTL's budget?	

2.5 Overall Performance Assessment

Please indicate your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
2.5.1 CRDTL successfully delivers the programs and services it is mandated to do.	1	2	3	4	5
2.5.2 CRDTL works with its partners to achieve planned outcomes.	1	2	3	4	5
2.5.3 CRDTL provides good value for money to its partners and clients.	1	2	3	4	5
2.5.4 CRDTL is seen as relevant to the various Member States of CARICOM	1	2	3	4	5
2.5.5 CARICOM is seen as relevant to its civil society stakeholders	1	2	3	4	5
2.5.6 CRDTL is seen as relevant to PAHO	1	2	3	4	5
2.5.7 CRDTL is seen as relevant to the private sector	1	2	3	4	5
2.5.8 CRDTL is sustainable over the next 5 years.	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CRDTL's performance:

3. External Context Affecting CRDTL

The external environment affects every organization. Social, cultural, economic, demographic factors play an important role in affecting the performance of the five Caribbean Regional Health Institutes. For example, the laws of your country might play a supportive role in your Institute's ability to deliver products.

Identify the 5 most important external factors that are either positively or negatively affecting the performance of CRDTL. .

EXTERNAL FACTORS	HOW DO THESE FACTORS AFFECT CRDTL'S PERFORMANCE?
1	
2	
3	
4	
5	

4. Capacity

Organizations must develop the skills and abilities to meet their mission, use their resources wisely, and develop methods to mobilize resources in order to continue their work in ways that make sense for the institution and the society. Organizational capacity is used here to describe Strategic Planning Capacities, Operating Structure, Governance Structure, Program Management Capacity, Infrastructure Management, Financial Management, Human Resources Management, Organizational Processes Management and Inter-Organizational Linkages.

4.1 Leadership and Strategic Management

Leadership and strategic management refers to the ability of CRDTL leaders to develop a vision for the organization, strategies (an strategic plans) to implement that vision, including adequate resource deployment, and to ensure that these visions and plans will be acted upon by the various members of the organization. .

Please describe the major strengths and weaknesses of CRDTL's ability to lead and manage strategically.

Strategic Management	Strengths and Weaknesses

Please assess CRDTL's Strategic Management Capacities by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know
4.1.1 CRDTL is driven by a clear vision	1 2 3 4 5
4.1.2 CRDTL has developed strategies and plans to reach its objectives	1 2 3 4 5
4.1.3 CRDTL's leaders are well respected by in the organization	1 2 3 4 5
4.1.4 CRDTL's has a clear niche in the CARICOM community	1 2 3 4 5
4.1.5 CRDTL's reports its performance to its Board on an ongoing basis	1 2 3 4 5

Please feel free to provide any comments or additional information on your overall assessment of CRDTL's leadership and strategic management:

4.2 Operating Structure

The operating structure refers to the system of working relationships arrived at to divide and coordinate the tasks of people and groups working toward a common purpose.

Please describe CRDTL's major strengths and weaknesses with respect to the responsibilities, coordination, use of authority and work planning

Operating Structure	Strengths and Weaknesses

Please assess CRDTL's operating structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.2.1 Roles and responsibilities of CRDTL's staff are clear	1	2	3	4	5
4.2.2 The roles and responsibilities of CRDTL's division are clear	1	2	3	4	5
4.2.3 The existing operational structure supports effective delivery of programs and services	1	2	3	4	5
4.2.4 There is adequate coordination between CRDTL's divisions	1	2	3	4	5
4.2.5 The existing operational structure allows for good workplanning	1	2	3	4	5

Please feel free to provide any comments or additional information on your overall assessment of CRDTL's operating structure:

4.3 Governance Structure

The governance structure of CRDTL refers to structures and resources linking senior management and the organization's stakeholders. In particular, this relates to CRDTL's Governing Board, but it could also include Member States, international and regional bodies like CARICOM and PAHO, and others who have a direct role in CRDTL's governance.

Please describe the major strengths and weaknesses of CRDTL's governance structure:

Governance structure	Strengths and Weaknesses

Please assess CRDTL's governance structure by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.3.1 The Governing Board members of CRDTL are appropriately selected.	1	2	3	4	5
4.3.2 The Governing Board of CRDTL carries out oversight its oversight role effectively (budgeting, finance expenditures, etc.).	1	2	3	4	5
4.3.3 The structure of the Governing Board of CRDTL allows CRDTL to perform effectively	1	2	3	4	5
4.3.4 The Governing Board of CRDTL e reviews strategic plans.	1	2	3	4	5
4.3.5 The existing contracts that link CRDTL to PAHO continue to be relevant	1	2	3	4	5
4.3.6 The Governing Board of CRDTL provides feedback into regional needs for programming.	1	2	3	4	5

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.3.7 The Governing Board of CRDTL is carrying out its fiduciary responsibilities.	1	2	3	4	5
4.3.8 The Governing Board of CRDTL is linking to external constituencies to ensure relevance.	1	2	3	4	5
4.3.9 The Governing Board of CRDTL provides input into strategy.	1	2	3	4	5
4.3.10 The Governing Board of CRDTL provides insight to insure sustainability and financial viability.	1	2	3	4	5

Please feel free to provide any comments or additional information on CRDTL's governing structure:

4.4 Program Capacity

Program capacity refers to the degree to which CRDTL is utilizing its programming resources, systems, facilities and abilities. Below is a list of the major programmes carried out by CRDTL, as we reviewed your annual reports.

Please assess the strengths and weaknesses of each of these programs and initiatives.

CRDTL Programs and Services	Strengths and Weaknesses
Performing quality control analyses of drugs marketed in the region?	

4.5 Resource and Infrastructure Management

Resource and infrastructure management refers to the degree to which CRDTL uses its infrastructure, equipment, facilities and technological resources in order to deliver its programs and services.

Please describe CRDTL's major strengths and weaknesses in managing its resources and infrastructure:

Resource and Infrastructure Management	Strengths and Weaknesses

Please assess CRDTL's resource and infrastructure management by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.5.1 CRDTL maximizes the use of its infrastructure	1	2	3	4	5
4.5.2 CRDTL has adequate access to laboratories to carry out its programs	1	2	3	4	5
4.5.3 CRDTL's electronic technology (hardware, software, internet access) is adequate	1	2	3	4	5
4.5.4 CRDTL has a good library (documentation centre)	1	2	3	4	5
4.5.5 CRDTL staff has access to quality scientific equipment to conduct its work	1	2	3	4	5
4.5.6 CRDTL's databases are well maintained	1	2	3	4	5
4.5.7 CRDTL's technology allows the organization to interface with its stakeholders	1	2	3	4	5

Please feel free to provide any comments or additional information on CRDTL's resource and infrastructure management:

4.6 Financial Management

Financial Management involves the planning, implementation and monitoring of the monetary resources of CRDTL. Along with human resources, it provides the major inputs upon which CRDTL builds its programs and services.

Please describe CRDTL’s major strengths and weaknesses in managing its financial resources:

Financial Management	Strengths and Weaknesses

Please assess CRDTL’s ability to manage its financial resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don’t Know				
4.6.1 CRDTL has a good system to plan and manage its budget	1	2	3	4	5
4.6.2 CRDTL audits its financial transactions in a timely fashion.	1	2	3	4	5
4.6.3 CRDTL has a good system for managing our assets.	1	2	3	4	5
4.6.4 When CRDTL obtains an external project, it has good systems for tracking what it spends.	1	2	3	4	5

Please feel free to provide any comments or additional information on CRDTL’s financial management:

4.7 Human Resources

Human Resources refer to the management processes needed to secure the highest level of competent staff to drive good performance. More precisely, human resources are seen in terms of staff recruitment, staff qualifications, professional development and staff evaluation.

Please describe the strengths and weaknesses of your institute’s ability to manage Human resources:

Human Resources	Strengths and Weaknesses

Please assess CRDTL’s ability to manage its human resources by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don’t Know				
4.7.1 CRDTL recruits its staff based on their qualifications and competences.	1	2	3	4	5
4.7.2 CRDTL is able to attract competent staff.	1	2	3	4	5
4.7.3 CRDTL has a transparent human resource management policy.	1	2	3	4	5
4.7.4 CRDTL invests in the professional development of its staff.	1	2	3	4	5
4.7.5 CRDTL performs constructive staff performance appraisal	1	2	3	4	5
4.7.6 CRDTL has a balanced representation of men and women amongst its professional staff	1	2	3	4	5
4.7.7 CRDTL’s staff is satisfied with the compensation packages in place.	1	2	3	4	5

Please feel free to provide any comments or additional information on CRDTL’s human resource management:

4.8 CRDTL’s Organizational Processes (Planning, Communications, Problem-solving, etc.)

Organizational processes refer to CRDTL’s capacity to carry out its management functions. The main processes are planning, communicating, decision-making, problem-solving, and providing feedback.

Please describe the strengths and weaknesses of CRDTL’s ability to manage these key processes.

Organizational Processes	Strengths and Weaknesses

Please assess CRDTL’s ability to manage its organizational processes by indicating your level of agreement with the following statements

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don’t Know				
4.8.1 CRDTL’s staff adequately participates in decision-making processes.	1	2	3	4	5
4.8.2 CRDTL solves problem in an effective way	1	2	3	4	5
4.8.3 Stakeholders are involved appropriately in the planning and decision-making processes.	1	2	3	4	5
4.8.4 Internal communications mechanisms keep staff informed.	1	2	3	4	5
4.8.5 CRDTL’s work processes support innovation.	1	2	3	4	5
4.8.6 Best practices and lessons learned are used to improve the work.	1	2	3	4	5
4.8.7 Evaluation mechanisms exist, and adequately inform the quality of services provided by my institution	1	2	3	4	5

Please feel free to provide any comments or additional information on CRDTL’s management of organizational processes:

4.9 Partnerships and Linkages

Linkages refer to the regular contacts that CRDTL maintains with other institutions, organizations and groups of strategic importance, which can result in exchange of approaches and resources.

Please describe CRDTL's strengths and weaknesses in creating and sustaining partnerships:

Partnerships	Strengths and Weaknesses

Please assess CRDTL's ability to create constructive partnerships by indicating your level of agreement with the following statements:

	1 = STRONGLY DISAGREE; 2 = DISAGREE; 3 = AGREE; 4 = Strongly Agree; 5 = Don't Know				
4.9.1 CRDTL has developed mutually beneficial partnerships with international agencies. E.g. PAHO, FAO	1	2	3	4	5
4.9.2 CRDTL has developed mutually beneficial partnerships with Caribbean Member States.	1	2	3	4	5
4.9.3 CRDTL My institute has developed mutually beneficial partnerships with international donor agencies, like CIDA and DFID.	1	2	3	4	5
4.9.4 CRDTL has developed mutually beneficial partnerships with regional or national civil society groups.	1	2	3	4	5
4.9.5 CRDTL e has developed mutually beneficial partnerships with the private sector.	1	2	3	4	5
4.9.6 CRDTL has developed mutually beneficial partnerships with other Caribbean Regional Health Institutes.	1	2	3	4	5
4.9.7 CRDTL has developed mutually beneficial partnerships with other similar health-related organisations of other nations like the CDC, the EPA, the FDA, or the NIH.	1	2	3	4	5
4.9.8 CRDTL manages its partnerships effectively.	1	2	3	4	5
4.9.9 CRDTL is sought after as a partner because of its distinctiveness.	1	2	3	4	5

Please feel free to provide any comments or additional information on CRDTL's management of its partnerships and linkages:

5. Overall Performance Assessment

In your opinion, what are the three major strengths of CRDTL?

KEY STRENGTH OF CRDTL	WHY

In your opinion, leaving access to financial resources aside, what are the three key challenges that CRDTL is facing in the medium and long term?

KEY CHALLENGES FOR CRDTL	WHY

THANK YOU FOR YOUR COLLABORATION

RHI Profile Sheet

Name:

Name of person completing this profile sheet:

Main location:

Phone

Date:

PROFILE AREA	COMMENTS
Legal framework and mandate	Relevant legal document, charters / acts / regulations, that provide the legal framework (Please provide)
History	A short description giving major milestones
Mandate and specific functional responsibilities	This could come from the annual report, charter, planning or strategy documents, etc. Has the mandate changed over the last five years? If so, in what ways? And why?
Products and services you provide to your clients – or work done to fulfill your mandate	E.g. Lab testing, research reports, food/drug analysis, scientific/technical advice, training programmes, information services, etc. Please identify who are your clients, and their relative importance in terms of services received. (e.g. 80% to governments, 20% to others)
Governance and Oversight	How is you Board constituted and how are its members appointed? What groups formally review your performance? E.g. your Board What do they use to assess performance? How frequently is it done? Are there informal mechanisms of performance review?
Are there advisory groups other than the Board that assist or advise your Institute?	Names of the group and its membership
Latest Organizational Chart (this should be developed with senior staff if not available)	Please attach and date when done (if relevant)
Staffing	Please provide a list of staff, their positions and how long they have been with the organization
Is there a Strategic Plan? A business plan? Other planning documents?	Explain process used to engage stakeholders in the writing of the plan. Explain how or if used. (Please attach)
Laboratory and Scientific Equipment	List major supplies and equipment required to perform regular activities List types of laboratories used Identify subcontractors used and purpose

PROFILE AREA	COMMENTS
Library and information access facilities	Describe the nature of your library/reference facilities and whether its collections can be accessed on-line Identify offsite library/reference facilities used
Information Technology	List the types of information technology systems that your institute uses Describe any networks it may possess
Describe major programmes	List programme areas and for each programme provide a short explanation (Please attach)
Budget information	Provide budgets for the last three years and actual disbursements
Sources of funding: <ul style="list-style-type: none"> • CARICOM or other Caribbean regional bodies • PAHO • Caribbean Governments • Donors • Revenues from clients • Sale of assets • Others (please specify) 	Please specify funding from each group over the past three years. Please specify non-cash funding, if any, such as in-kind contributions or trade of staffing, equipment, etc. If possible, describe the timing of the funding disbursements, (regular basis, periodic, sporadic, project specific)
List your major stakeholders and partners	Identify who are your main clients and/or beneficiaries As well, identify regional/national organizations and bodies you partner and any international partners/donors or clients you may have
Linkages	Identify the formal partnerships and linkages that your institute maintains, indicating 1) the country, 2) the institution, 3) the nature of the joint activities and 4) date established Please include the relationships with the private sector and with various elements of civil society of the region as well as with similar national bodies of other countries

Please list and/or attach key organizational documents

- Formal mandate/charter of each RHI
- Last 3-4 years of Annual Reports
- Last 3-4 years of detailed budgets if not in the annual reports
- Last 3-4 years of strategic, operational plans and/or workplans (if applicable)
- List of members of their governing councils, governing committees
- Any special reports/presentations made to these governing councils by the RHIs
- Any special reports made by the RHI to other regional fora such as CARICOM, CDB, COHSOD, PAHO (CPC), OECS
- Minutes of the annual meetings, and other meetings of said governing councils for the last 3-4 years
- Any audit reports, internal or external evaluations done over the last 3-4 years
- Current staff list with duties (if possible)

EVALUATION OF THE REGIONAL HEALTH INSTITUTES (RHI) CAREC-CFNI-CHRC-CEHI-CRDTL QUESTIONNAIRE FOR CARICOM MEMBER STATES

The CARICOM Secretariat has mandated Universalialia Management, a Canadian-based organization, to carry-out the Evaluation of the Caribbean Regional Health Institutes (RHIs) (the Caribbean Epidemiology Centre (CAREC), the Caribbean Food and Nutrition Institute (CFNI), the Caribbean Health Research Centre (CHRC), the Caribbean Environmental Health Institute (CEHI) and the Caribbean Regional Drug Testing Laboratory (CRDTL)). The purpose of the evaluation is to review the performance of each of the five RHIs as well as to assess the extent to which the network of RHIs respond to the health needs of the Caribbean region.

As a key stakeholder of the RHIs, your input in this evaluation is crucial and we are asking your collaboration in filling out this questionnaire.

Please take note that you have the choice of filling out the questionnaire either through the Web or through paper and pencil. Be assured that your responses will remain confidential. Only aggregated data will be reported in the main report. Do not hesitate to add additional pages to the questionnaire if needed.

If you decide to fill out the questionnaire through paper and pencil, please return it fully filled by fax to Ms. Anne-Véronique Bouthillier at 1-514-485-3210. We hope to receive your questionnaire by May 15th 2004. Feel free to contact Dr. Marie-Hélène Adrien, the Team leader of the evaluation, should you have any question regarding the evaluation. She can be reached at mhadrien@universalialia.com

Thank you for your collaboration!

1. Background

1.1 Which of the CARICOM Member States do you represent?

Countries:

- | | |
|--|--|
| <input type="checkbox"/> Antigua/Barbuda | <input type="checkbox"/> Jamaica |
| <input type="checkbox"/> The Bahamas | <input type="checkbox"/> Montserrat |
| <input type="checkbox"/> Barbados | <input type="checkbox"/> St Kitts and Nevis |
| <input type="checkbox"/> Belize | <input type="checkbox"/> Saint Lucia |
| <input type="checkbox"/> Dominica | <input type="checkbox"/> St Vincent and the Grenadines |
| <input type="checkbox"/> Grenada | <input type="checkbox"/> Suriname |
| <input type="checkbox"/> Guyana | <input type="checkbox"/> Trinidad and Tobago |
| <input type="checkbox"/> Haiti | |

1.2 Is your organization from:

- The Public Sector
- The private sector
- Civil Society
- University
- Other

2. Your Assessment of the Caribbean Epidemiology Centre (CAREC)

The mission of CAREC is to improve the health status of the Caribbean people by advancing the capability of member countries in Epidemiology, Laboratory Technology and Related Public Health disciplines through Technical cooperation, Service, Training, Research and a well-trained motivated staff. CAREC offers services in:

- Health and Disease Surveillance
- Health Situation Analysis and Trend Assessment
- Laboratory Services
- Education and Training
- Research

Please indicate your level of agreement with the following statements:

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
2.1 CAREC delivers services that it is mandated to do	1	2	3	4	5
2.2 My country sees tangible benefits of CAREC's programs and services.	1	2	3	4	5
2.3 My country's financial contributions to CAREC are worth the investment	1	2	3	4	5
2.4 CAREC delivers quality programs and services	1	2	3	4	5
2.5 The services and programs that CAREC offers are unique	1	2	3	4	5
2.6 CAREC's programs and services are relevant to my country	1	2	3	4	5
2.7 CAREC responds adequately to the epidemiology needs of the region	1	2	3	4	5
2.8 CAREC is well managed	1	2	3	4	5

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
2.9 My country see tangible benefits from its investments in CAREC	1	2	3	4	5
2.10 My organization collaborates well with CAREC	1	2	3	4	5
2.11 CAREC is a sustainable organization	1	2	3	4	5
2.12 CAREC has qualified staff	1	2	3	4	5

What changes, if any, would you wish to see in CAREC for the future?

3. Your Assessment of the Caribbean Food and Nutrition Institute (CFNI)

The mission of CFNI is to cooperate technically with member countries to strengthen their ability to analyze, manage and prevent the key nutritional problems and to enhance the quality of life of the people through promotion of good nutrition and healthy lifestyles behaviors. CFNI offers the following programs and services:

- Supporting national plans and policies on nutrition
- Building the human resources capacities in the area of nutrition
- Promoting and disseminating information related to food and nutrition
- Conducting surveillance and carrying out research in food and nutrition

Please indicate your level of agreement with the following statements:

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
3.1 CFNI delivers services that it is mandated to do	1	2	3	4	5
3.2 My country sees tangible benefits of CFNI's programs and services.	1	2	3	4	5
3.3 The financial contributions that my country makes to CFNI are worth the investment	1	2	3	4	5

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
3.4 CFNI delivers quality programs and services	1	2	3	4	5
3.5 The services and programs that CFNI offers are unique	1	2	3	4	5
3.6 CFNI's programs and services are relevant to my country	1	2	3	4	5
3.7 CFNI responds adequately to the epidemiology needs of the region	1	2	3	4	5
3.8 CFNI is well managed	1	2	3	4	5
3.9 My country see tangible benefits from its investments in CFNI	1	2	3	4	5
3.10 My organization collaborates well with CFNI	1	2	3	4	5
3.11 CFNI is a sustainable organization	1	2	3	4	5
3.12 CFNI has qualified staff	1	2	3	4	5

What changes, if any, would you wish to see in CFNI for the future?

4. Your Assessment of the Caribbean Environmental Health Institute (CEHI)

The mission of CEHI is to provide Environmental Health Leadership to Member States in order to improve and support policy development decisions that are consistent with the goals and targets of the Caribbean Cooperation in Health (CCHI) Initiative and in collaboration with national regional and international organizations. CEHI provides services in the following areas:

- Integrated watershed and Coastal Area Management (WCAM)
- Waste Management Program
- Chemical management program
- Climate change program
- Cleaner Production and Eco-Efficiency program
- Technical and Advisory Services

- Consultation and conference on environmental matters
- Capacity Building in environmental health
- Environmental health outreach for the region (Through information, website, mass media outputs, etc.)

Please indicate your level of agreement with the following statements:

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
4.1 CEHI delivers services that it is mandated to do	1	2	3	4	5
4.2 My country sees tangible benefits of CEHI's programs and services.	1	2	3	4	5
4.3 The financial contributions that my country makes to CEHI are worth the investment	1	2	3	4	5
4.4 CEHI delivers quality programs and services	1	2	3	4	5
4.5 The services and programs that CEHI offers are unique	1	2	3	4	5
4.6 CEHI's programs and services are relevant to my country	1	2	3	4	5
4.7 CEHI responds adequately to the epidemiology needs of the region	1	2	3	4	5
4.8 CEHI is well managed	1	2	3	4	5
4.9 My country see tangible benefits from its investments in CEHI	1	2	3	4	5
4.10 My organization collaborates well with CEHI	1	2	3	4	5
4.11 CEHI is a sustainable organization	1	2	3	4	5
4.12 CEHI has qualified staff	1	2	3	4	5

What changes, if any, would you wish to see in CEHI for the future?

5. Your Assessment of the Caribbean Research and Drug Testing Laboratory (CRDTL)

The mission of the CRDTL is to provide the governments of the Region with efficient, well-equipped institutions to perform quality control analyses of drugs marketed in the region, whether imported or manufactured locally

Please indicate your level of agreement with the following statements:

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
5.1 CRDTL delivers services that it is mandated to do	1	2	3	4	5
5.2 My country sees tangible benefits of CRDTL's programs and services.	1	2	3	4	5
5.3 The financial contributions that my country makes to CRDTL are worth the investment	1	2	3	4	5
5.4 CRDTL delivers quality programs and services	1	2	3	4	5
5.5 The services and programs that CRDTL offers are unique	1	2	3	4	5
5.6 CRDTL's programs and services are relevant to my country	1	2	3	4	5
5.7 CRDTL responds adequately to the epidemiology needs of the region	1	2	3	4	5
5.8 CRDTL is well managed	1	2	3	4	5
5.9 My country see tangible benefits from its investments in CRDTL	1	2	3	4	5
5.10 My organization collaborates well with CRDTL	1	2	3	4	5
5.11 CRDTL is a sustainable organization	1	2	3	4	5
5.12 CRDTL has qualified staff	1	2	3	4	5

What changes, if any, would you wish to see in CRDTL for the future?

6. Your Assessment of the Caribbean Health Research Centre (CHRC)

The mission of CHRC is to lead the coordination and the promotion of health research in the Caribbean Region and to provide advice, through the Ministers of Health to participating governments on matters related to health research, including the needs and the priorities of the Region. CHRC provides the following services:

- Leadership in promotion of health-related research in the region
- Coordination of health-related research in the region
- Provision of advice through the Conference of Ministers responsible for Health on matters relating to health research?

Please indicate your level of agreement with the following statements:

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
6.1 CHRC delivers services that it is mandated to do	1	2	3	4	5
6.2 My country sees tangible benefits of CHRC's programs and services.	1	2	3	4	5
6.3 The financial contributions that my country makes to CHRC are worth the investment	1	2	3	4	5
6.4 CHRC delivers quality programs and services	1	2	3	4	5
6.5 The services and programs that CHRC offers are unique	1	2	3	4	5
6.6 CHRC's programs and services are relevant to my country	1	2	3	4	5
6.7 CHRC responds adequately to the epidemiology needs of the region	1	2	3	4	5
6.8 CHRC is well managed	1	2	3	4	5
6.9 My country see tangible benefits from its investments in CHRC	1	2	3	4	5

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
6.10 My organization collaborates well with CHRC	1	2	3	4	5
6.11 CHRC is a sustainable organization	1	2	3	4	5
6.12 CHRC has qualified staff	1	2	3	4	5

What changes, if any, would you wish to see in CHRC for the future?

7. Is the Network of RHI Supporting the Health Needs of the Region?

The Minister's of Health along with the CARICOM Secretariat have a regional responsibility to coordinate the network of RHIs. The network consists of the five Regional Institutes mentioned above. In this section we would like you to assess the network as a whole. Is it adequately coordinated and managed? Should it change? If so, How?

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
7.1 The network of RHI is well coordinated	1	2	3	4	5
7.2 The network is adequately managed.	1	2	3	4	5
7.3 There is a clear mandate for the network of RHIs (5).	1	2	3	4	5
7.4 There is a clear strategy that guides the network of RHIs.	1	2	3	4	5
7.5 The present governance structure to oversee the RHIs is adequate	1	2	3	4	5
7.6 The regional RHI network provides value for money	1	2	3	4	5
7.7 The network of RHIs provides an adequate level of service to the region.	1	2	3	4	5

	1=STRONGLY DISAGREE; 2=DISAGREE, 3=AGREE, 4=STRONGLY AGREE, 5=DO NOT KNOW				
7.8 The network of RHIs address the priorities of the CCH 2	1	2	3	4	5
7.9 There are no major overlaps among the mandates of the RHIs	1	2	3	4	5
7.10 My country is satisfied with the services received by the RHIs	1	2	3	4	5
7.11 The RHI network focuses on the priority health needs of the regions	1	2	3	4	5
7.12 The RHIs focus on the priority health needs of my country	1	2	3	4	5
7.13 The regional RHIs provide adequate services to my country	1	2	3	4	5
7.14 My Ministry collaborates well with CHRC	1	2	3	4	5
7.15 The RHI have had positive impacts on the health situation of the region	1	2	3	4	5

What changes, if any, would you wish to see in the RHI network?

What are the three strengths of the regional network?

What are the three weaknesses of the regional network?

Thank you for your cooperation.

Appendix III Report Outline

1. Introduction

- Purpose of the evaluation
- Methodology
- Limitations
- Presentation of the report

2. The Health Context in the Caribbean

- Key issues, trends and priorities identified by the region
- Role of the RHI and the rationale for a regional network
- Role of CARICOM Secretariat

3. The Performance of the RHI

This section will provide a summary of the detailed Performance Appendices developed for each RHP

3.1 CAREC⁸

3.2 CFNI

3.3 CEHI

3.4 CRDTL

3.5 CHRC

4. CARICOM's Capacities in Monitoring the RHI

5. Issues in the Network

- Ongoing rationale
- Relevance to the countries and to the region
- Efficiency
- Financial viability
- Key factors affecting performance

6. Options and Potential Scenarios for the Future

- Options
- Risks and implications
- Feasibility of implication

7. Recommendations

⁸ With respect to CAREC and CFNI a special section will deal with the review of their contractual arrangement with PAHO.