



Monitoring and Evaluation Framework

This document is as approved by the REC Caucasus executive Body (Collegial Trio) and is set out at the end of the document.



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Table of Abbreviations

Abbreviation	Full Term
M&E	Monitoring and Evaluation
AF	Adaptation Fund
SRF	Strategic Results Framework
ESP	Environmental and Social Policy
ESMP	Environmental and Social Management Plan
ESS	Environmental and Social Safeguards
GAP	Gender Action Policy
QPR	Quarterly Project Performance Report
PPR	Annual Project Performance Report
OPG	Operational Policies and Guidelines
GRM	Grievance Redress Mechanism
QA	Quality Assurance
ED	Executive Director

Section 1: Introduction and Purpose of the Institutional M&E Framework

1.1 Background

REC Caucasus (The Regional Environmental Centre for the Caucasus, hereinafter “REC Caucasus”) is implementing a structured and comprehensive approach to strengthen its institutional capacity in climate finance management, program implementation, and results reporting. The institutional Monitoring & Evaluation (M&E) Framework is a cornerstone of REC Caucasus’ continuous improvement, ensuring that activities, policies, and programs are implemented effectively, monitored systematically, and reported transparently in accordance with both international standards and donor requirements.

This Monitoring and Evaluation (M&E) Framework aligns with the core requirements of international climate and development financing institutions and comparable donor mechanisms. It is structured to ensure consistency with the Strategic Results Frameworks, and Gender and Environmental and Social Policies (ESP) commonly mandated by such entities. The Framework also follows established results-reporting standards, whereby the quarterly Project Performance Report (QPR) serves as the basis for the Annual Project Performance Report (PPR), submitted within 60 days of each disbursement anniversary to support donor oversight and adaptive management.

The institutional M&E Framework serves to ensure:

- Systematic monitoring of outputs, outcomes, and overall institutional performance across all programs.
- Compliance with fiduciary, environmental, social, and gender safeguards through regular monitoring, risk screening and documented corrective actions.
- Alignment with donor reporting, including PPR submissions tied to tranche releases (AF OPG ¶¶61-62).
- Integration of adaptive management processes and lessons learned into program adjustments management decision-making and institutional learning cycles.

1.2 Purpose

The purpose of this Institutional M&E Framework is to:

1. Support strategic alignment of REC Caucasus operations with its institutional objectives, in accordance to REC Caucasus Charter, donor accreditation requirements, and donor expectations.
2. Standardize monitoring and reporting processes across all institutional projects and programs to ensure **accuracy, verifiability, and consistency** of data.
3. Facilitate adaptive management by providing timely feedback loops, performance assessment, and evidence-based decision-making.
4. Demonstrate accountability and transparency to stakeholders, project partners and the REC Caucasus governance bodies , including REC Caucasus Board, REC Caucasus Executive Body (Executive Troika), and Executive Director.

5. Ensure compliance with environmental, social, and gender policies, integrating donor core indicators, and project Gender Policy (GP) progress tracking, and donor SRF outcomes.
6. Enable continuous institutional learning, allowing REC Caucasus to adapt programs, strengthen systems, and maintain high-quality performance over time.

1.3 Scope

This Framework applies to:

- All REC Caucasus programs and projects, including partnerships with national and international organizations.
- Institutional processes, policies, and systems that influence program outcomes, fiduciary integrity, safeguards, and gender equality.
- All staff levels, including project teams, Executive Director (ED), M&E Officer), and relevant REC Caucasus governance bodies.

The Framework guides:

- Monitoring outputs and outcomes at both project and institutional levels.
- Compliance assessments with internal policies, donor requirements, and international standards.
- Reporting results internally and externally.
- Resource allocation, risk mitigation, and institutional learning to support continuous improvement.

Section 2: Institutional M&E Objectives

2.1 Overview

The objectives of the REC Caucasus Institutional M&E Framework are derived from:

- Strategic priorities outlined in the REC Caucasus institutional Accreditation Work Plan.
- Donor compliance standards.
- Internal governance and risk management protocols.

The Framework ensures that organizational performance, program outcomes, and institutional reforms are systematically monitored and evaluated, supporting both accountability and adaptive learning.

2.2 Core M&E Objectives

2.2.1 INSTITUTIONAL PERFORMANCE MONITORING

- Track progress against strategic goals, accreditation and reaccreditation benchmarks, and institutional reform targets.

- Monitor implementation of policies, SOPs, financial controls, procurement processes, and anti-fraud/whistleblower systems by consolidating findings from compliance assessments, internal control reviews and audit reports.
- Ensure Executive Director and management oversight responsibilities are operationalized effectively by reviewing documented management decisions and follow up on identified risks, audit findings or performance assessments.
- Integrate donor requirements, including the submission of PPRs and quarterly tracking tied to disbursement tranche release.

2.2.2 PROJECT AND PROGRAM MONITORING

- Systematically monitor outputs and outcomes for all REC Caucasus projects and programs using approved results framework, indicators, targets as defined by project M&E plan.
- Measure performance against workplans, budgets, and institutional objectives.
- Integrate donor standards including fiduciary compliance, ESMS adherence, gender-responsive indicators, and donor core outcomes.
- Document and report monitoring results through annexes to the PPR including: Results Tracker spreadsheet, project ESMP/ESP progress log, and project GP updates on sex-disaggregated indicators (AF Results-Tracker Guidance, 2019; ESP §30-35; Gender Policy §18-19).

2.2.3 POLICY AND PROCEDURAL COMPLIANCE

- Assess adherence to internal policies, donor requirements, and international best practices.
- Monitor safeguards, gender mainstreaming, and grievance redress mechanisms.
- Identify gaps and recommend corrective actions to maintain compliance and reduce institutional risk.

2.2.4 RESULTS-BASED MANAGEMENT AND ADAPTIVE LEARNING

- Promote evidence-based decision-making; use findings from monitoring to inform implementation and strategic planning.
- Track lessons learned, risks, and opportunities to strengthen institutional performance.
- Incorporate adaptive management principles: monitoring → evaluation → reflection → decision-making → implementation → follow-up.

2.2.5 DATA QUALITY, DISAGGREGATION, AND TRANSPARENCY

- Ensure accurate, timely, complete, and verifiable data by implementing validation checks and regular reviews.
- Use sex- disaggregated indicators to track gender equity outcomes.

- Maintain transparency in reporting by publishing M&E results, key data sets and PPRs, in alignment with the Donor Open Information Policy (2013) and donor standards.

2.2.6 CAPACITY BUILDING AND KNOWLEDGE MANAGEMENT

- Track delivery and participation in the trainings, workshops, mentorship programs,
- Assess application of acquired skills and institutionalization of knowledge management practices through periodic reviews.
- Retain lessons learned and evidence to support ongoing compliance and institutional memory.

2.3 Alignment with Accreditation and Donor Standards

The Framework aligns with:

- **Fiduciary Standards** – Internal controls, audits, risk management.
- **Project/Program Management Capacity** – Results-based planning, reporting, and adaptive learning.
- **Environmental and Social Safeguards (ESS)** – ESMS implementation, grievance mechanisms, safeguards compliance.
- **Gender Equity, Transparency, and Accountability** – Gender-responsive indicators, inclusion metrics, and reporting on project GAP progress.

By embedding these standards, REC Caucasus ensures that performance is measurable, transparent, and compliant with donor requirements, while strengthening internal governance and accreditation readiness.

Section 3: Institutional M&E Structure and Governance

3.1 Overview

Effective monitoring and evaluation require a clear organizational structure with well-defined roles, responsibilities, and reporting lines. At REC Caucasus, the Institutional M&E Framework is embedded into the governance and operational architecture to ensure accountability, transparency, and compliance with donor standards and accreditation requirements.

This structure integrates donor-specific requirements, including:

- **PPR submission timelines** linked to disbursement tranche release;
- Alignment with Donor core outcomes for each project pathway;
- Incorporation of project ESMP/GP compliance in governance reporting;
- Ensuring data quality, transparency, and accessibility.

The M&E governance structure establishes oversight, coordination, and operational management functions for all institutional and project-level M&E activities.

3.2 Roles and Responsibilities

3.2.1 REC CAUCASUS EXECUTIVE DIRECTOR (ED)

- Provides strategic oversight for all institutional and project-level M&E activities.
- Approves M&E policies, frameworks, and amendments.
- Ensures that M&E outputs inform decision-making, resource allocation, and adaptive management actions.
- Reviews consolidated quarterly and annual reports prior to submission to the donors.

3.2.2 REC CAUCASUS MONITORING AND EVALUATION OFFICE

- Coordinates daily M&E activities, data collection, verification, and reporting.
- Maintains the central monitoring dashboard and institutional performance tracker.
- Ensures compliance with internal policies, donor requirements, and donor accreditation standards.
- Supports preparation of PPRs, ensuring annexes include **Results Tracker, project ESMP progress, and project GAP progress**.
- Maintains and updates the Result Tracker with clear indicators, baselines, targets, and progress against expected outcomes.
- Tracks outputs, outcomes, and milestones.
- Conducts **data quality checks**, analytical reviews, and prepares progress briefs.
- Conducts periodic evaluations (e.g. mid-term, annual, endline) to assess effectiveness, efficiency and impact of REC Caucasus projects.
- Provides feedback for adaptive management and course correction. Utilizes feedback from project beneficiaries, stakeholders and partners to improve project design and implementation.

3.2.3 PROJECT TEAMS

- Implement project-level M&E plans aligned with institutional frameworks.
- Collect output, outcome, and process data, including **sex- and age-disaggregated indicators** for gender reporting.
- Ensure project ESMP and GP, and grievance redress mechanisms (GRM) compliance.
- Submit reports to RPG for consolidation and verification.

3.2.4 INTERNAL AUDIT AND QUALITY ASSURANCE (QA) TEAM

- Provides independent oversight of M&E processes.

- Conducts audits of data accuracy, policy compliance, and donor reporting requirements.
- Reports findings to ED and RPG; monitors implementation of corrective actions.

3.2.5 EXTERNAL ADVISORS / CONSULTANTS

- Provide technical guidance on M&E design, and compliance.
 - Support training, coaching, and capacity-building on results-based management and adaptive learning.
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3.3 Reporting Lines

- **Project Teams** → **M&E OFFICER** → **Secretariat** → **Executive Director**
 - **M&E OFFICER** consolidates project and institutional performance metrics, including gender and safeguards compliance.
 - Internal Audit reports directly to **M&E OFFICER** to provide independent oversight.
 - Quarterly reports are submitted to donors and relevant external stakeholders.
 - **Adaptive management loop:** reporting informs corrective actions and workflow adjustments.
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3.4 Governance Principles

1. **Accountability:** Defined responsibilities for all M&E functions.
2. **Transparency:** Open access to verified performance data for governance and donor oversight.
3. **Adaptivity:** M&E results feed into strategic and operational decision-making.
4. **Integration:** M&E is embedded into all institutional processes, including GP compliance.
5. **Donor Alignment:** Ensures compliance with all donor policies, including PPR submission, project ESMP and GAP tracking, and Results Tracker integration.

Section 4: M&E Processes and Methodologies

4.1 Overview

This section defines core processes and methodologies for monitoring, evaluating, and reporting REC Caucasus' institutional performance, project/program outcomes, and compliance with fiduciary, environmental, social, and gender standards.

All processes are aligned with donor requirements, including:

- **Annual PPR submission** within 60 days of disbursement anniversary.
 - **Results Tracker annexes** including project ESMP, GP, and donor SRF outcomes.
 - Application of donor six-point performance rating scale for internal evaluations.
 - Data quality rating (A-D) and external evaluator access logging.
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4.2 Key M&E Processes

Where certain M&E steps are not relevant or feasible for a specific project, REC Caucasus may exercise flexibility to apply these requirements in whole or in part, as appropriate.

4.2.1 PLANNING AND BASELINE ASSESSMENT

- **Baseline Development:** Establish institutional and project-level benchmarks, including output, outcome, and other core indicators.
- **Data Disaggregation:** Collect sex-disaggregated data to support gender and social inclusion reporting.
- **M&E Plan Finalization:** Ensure alignment with Accreditation Work Plan, and donor reporting requirements.

4.2.2 DATA COLLECTION

- **Institutional Data:** Collect information on policy implementation, SOP approvals, audit results, and capacity-building activities.
- **Project Data:** Collect outputs, outcomes, financial and technical reports; verify against source documents.
- **Data Management/Tools:** Use standardized templates to store the data and integrated dashboards for real-time reporting.

4.2.3 DATA VALIDATION AND QUALITY ASSURANCE

- Implement QA checkpoints at draft, pre-approval, and final review stages.
- Cross-reference all data with donor Results Tracker, project ESMP, and GAP reports.
- Use **traffic-light system (green/yellow/red)** to flag performance issues and corrective actions.

4.2.4 ANALYSIS AND INTERPRETATION

- Analyze trends against baselines, targets, and donor core indicators.
- Apply adaptive management methodologies to adjust institutional or project-level processes.

- Generate risk assessments and recommendations for ED, M&E OFFICER.

4.2.5 REPORTING

- **Internal:** a midterm internal evaluation based on the findings of project-level mid-term evaluations consolidated to produce a comprehensive overall assessment.
- **External:** Donor reports include verified outputs, gender and safeguards compliance, fiduciary integrity, and adaptive management updates.

4.2.6 LEARNING AND ADAPTIVE MANAGEMENT

- Lessons learned documented and integrated into policy updates, SOPs, and dashboards.
- Adaptive management loop ensures timely interventions in response to emerging risks, gaps, or opportunities.

4.3 Indicators and Verification

Institutional Indicators:

- Number of policies/SOPs operationalized.
- Capacity-building activities conducted.
- Internal audit recommendations implemented.
- Donor-aligned indicators linked to SRF core outcomes.

Project Indicators:

- Outputs and outcomes achieved vs targets.
- Compliance with ESMS, GRM, and GAP.
- Stakeholder participation and inclusive metrics.

Verification Methods:

- Document reviews, audits, site visits, stakeholder consultations.
 - Version-controlled tracking of all reports, annexes, and supporting evidence.
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4.4 Internal Tools and Scorecards

Tool	Purpose	Key Features
Project Scorecard	Track project-level planning, recruitment, M&E implementation, reporting, partnerships	Color-coded performance rating; recommendations for corrective action; Donor SRF and project GAP integration
Institutional Dashboard	Centralize institutional/project indicators	Compliance tracking, gender tagging, project ESMP coverage, risk monitoring, adaptive management support

Section 5: Data Management, Verification, and Quality Assurance (QA)

5.1 Overview

Effective M&E relies on robust data management, verification, and QA processes. REC Caucasus ensures that all institutional and project-level data are accurate, transparent, reliable, accessible, and auditable. This supports evidence-based decision-making, donor compliance, and accreditation requirements.

All data management systems and QA processes align with **donor policies**:

- **PPR annex requirements** including Results Tracker, project ESMP, GP;
- **Data quality rating (A-D)** and **external evaluator access** columns;
- **Seven-year record HQ office** and **30-day fraud notification**.

5.2 Data Management

5.2.1 PROJECT BASED DATA SYSTEMS

System	Purpose	Features / Donor Alignment
M&E Dashboard	Consolidates institutional/project indicators	Tracks Accreditation Work Plan objectives, SOP approvals, color-coded milestone monitoring (green/yellow/red)
Document Repository	Stores policies, SOPs, reports, annexes	Version-controlled; secure access with tiered permissions; supports auditability; 5-year retention

5.2.2 DATA ENTRY AND MAINTENANCE

- Use standardized templates for institutional and project reporting.
- Verify entries against source documents (financial, HR, policy approvals).

- Tag gender, social inclusion, and safeguards indicators systematically.

5.3 Data Verification

5.3.1 VERIFICATION PROTOCOLS

- Validate each data point through:
 - Policy approvals via ED or collegial sign-off.
 - Project outputs via technical/financial reports and site inspections.
 - Stakeholder feedback through surveys, focus groups, consultations.
- Flag and identify discrepancies before reporting.

5.3.2 INTERNAL AUDITS

- Second line of defense for fiduciary, ESMS, and GP compliance.
- Sample project outputs, financials, and safeguard adherence.
- Document findings and ensure corrective action within agreed timelines.

5.4 Quality Assurance (QA)

5.4.1 QA CHECKPOINTS

- **Document Review:** Draft policies, SOPs, and reports reviewed iteratively by technical teams M&E Officer and Subject-matter experts.
- **Pre-Submission QA:** Validate documents for completeness, compliance, and coherence with Donor requirements.

5.4.2 QA TOOLS

Tool	Purpose
Scorecards / Checklists	Evaluate document/report quality, compliance, deadlines, and submission readiness
Version Control	Track document iterations, edits, approvals
Audit Trails	Log corrections, feedback, approvals for accountability

5.5 Data Security and Confidentiality

- Access control via secure logins and permission levels.

- Encrypt sensitive data (financial, personnel, stakeholder).
- Maintain seven-year retention for all donor-relevant data.

5.6 Feedback and Continuous Improvement

- QA findings feed into adaptive management and policy updates.
- Lessons learned incorporated into SOPs, dashboards, and reporting templates.
- Periodic reviews ensure systems remain fit-for-purpose, compliant, and aligned with donor standards.

Section 6: M&E Reporting and Communication

6.1 Overview

REC Caucasus' reporting system ensures transparency, accountability, and donor compliance. Reports communicate progress, results, risks, and lessons learned, incorporating donor-specific requirements:

- **Annual Project Performance Report (PPR)** within 60 days of disbursement anniversary.
- Inclusion of **Results Tracker, project ESMP, and GP annexes**.
- Compliance with donor six-point performance rating and delay notification thresholds.
- When applicable, public disclosure in line with donor's Open Information Policy (2013) and REC Caucasus's Transparency Policy.

6.2 Reporting Objectives

1. Communicate progress on Accreditation Work Plan objectives, including policies, SOPs .
2. Provide transparent, accurate, timely information to internal stakeholders and external donors.
3. Ensure gender, ESMS, and fiduciary compliance is reported.
4. Facilitate adaptive learning by highlighting lessons, corrective measures, and next steps.

6.3 Reporting Framework

6.3.1 REPORTING CYCLES AS REQUESTED BY A DONOR

Cycle	Audience	Contents	Donor Alignment
Midterm Internal Consolidated Reports (For Donor Funded Projects)	ED, MESC	Findings of project-level mid-term evaluations will be consolidated to produce a comprehensive overall assessment. Accreditation Work Plan outputs, policy adoption, ESMS/GAP updates	PPR annex preparation
Annual Project Performance Reports (PPR) / Interim Donor Report (For Donor Funded Projects)	donors	Outputs, outcomes, adaptive management, gender/ESMS compliance	Required PPR submission; annex Results Tracker, ESMP, GP
Terminal Evaluation (For Donor Funded Projects)	donors, internal stakeholders	Institutional development, lessons learned, recommendations	Independent evaluation;

6.3.2 REPORT CONTENT AND STRUCTURE

1. Title Page: Report title, project, period, version control.
2. Executive Summary: Achievements, challenges, corrective actions.
3. Introduction: Context, objectives, policies referenced.
4. Progress toward Objectives: Outputs/outcomes, ESMS/GP integration, evidence.
5. Risk and Issue Management: Delays, corrective actions.
6. Next Steps and Work Plan: Upcoming activities, responsibilities.
7. Annexes: Policies, SOPs, dashboards, Results Tracker, gender-disaggregated data.

6.3.3 FEEDBACK MECHANISMS

- Internal review by project M&E focal points.
- Adaptive learning: lessons incorporated into SOPs, dashboards, workplans.

6.3.4 COMMUNICATION STRATEGY

- Dissemination via secure email, or web repository.
- Executive summaries for internal and external engagement.

- Critical updates shared in coordination meetings.

Section 7: Institutional Learning and Adaptive Management

7.1 Overview

Learning and adaptive management ensure REC Caucasus responds to challenges, improves processes, and maintains compliance donor standards. Through Knowledge Capture & Management, REC C will systematically use the knowledge gained from projects/programs and from its unique decision making structure and operations to A) enhance capacity and knowledge to improve the design and increasing the effectiveness of future adaptation projects/programmes.

7.2 Objectives

1. Strengthen REC C's organizational capacity to respond to strengthen resilience to emerging challenges.
2. Improve policies, SOPs and gender-responsive practices.
3. Foster evidence-based decision-making.
4. Enhance institutional memory and knowledge sharing.

7.3 Learning Mechanisms

7.3.1 KNOWLEDGE CAPTURE

- Centralized repositories for policies, SOPs, providing guiding materials, audit reports, evaluation findings.
- Version control for all institutional documents.
- Thematic logs for fiduciary management, and gender.

7.3.2 REFLECTION AND ANALYSIS

- Internal audits to identify procedural gaps and improvement opportunities.
- Synthesized feedback from M&E OFFICER, project staff, and donors.

7.3.3 KNOWLEDGE SHARING

- Workshops, and mentorship programs.
- Dissemination through dashboards, reports, and newsletters.
- Public disclosure of lessons, where allowed under Open Information Policy (2013).

7.4 Adaptive Management Process

Step	Process	Donor Alignment
Data Collection	Data for organizational-level indicators shall be collected and consolidated under the oversight of RECC's M&E Officer. Project-level indicators shall be monitored and reported in accordance with donor requirements and tailored to the specific context of each project. The M&E Officer, in close coordination with RECC project managers and relevant financial staff, shall develop appropriate data collection tools, including those required for the measurement of financial performance indicators.	
Monitoring	Collect data via dashboards	Data quality rated A-D; PPR inputs
Evaluation	Assess outcomes vs targets, gender, ESMS, fiduciary benchmarks	Six-point rating applied
Reflection	Conduct lessons-learned sessions	Adaptive measures documented
Decision-Making	ED and M&E OFFICER integrate recommendations	Inform workplans, policies, SOPs
Implementation	Adopt changes systematically	Version-controlled documentation
Follow-Up	Track effectiveness of adjustments	Reported in the annual PPR

7.5 Integration with M&E System

- Adaptive management feeds directly into central dashboards.
- Learning outcomes tagged to gender and ESMS indicators for inclusive program improvement.

7.6 Institutional Knowledge Management

- Secure repository accessible to authorized staff.
- Standardized templates for reporting, reflection, corrective action logs.

- Staff capacity development ensures consistent knowledge capture and application.

7.7 Key Principles

1. Proactivity: Identify and address issues early.
2. Evidence-Based: Decisions grounded in verified data.
3. Inclusivity: Engage all relevant departments and project teams.
4. Transparency: Document and share lessons while maintaining confidentiality.
5. Continuous Improvement: Institutionalize learning in policies, SOPs, and workflows.

Section 8: Evaluation and Learning

8.1 Purpose and Scope

Evaluation at REC Caucasus is an integral part of the Monitoring, Evaluation, and Learning (MEL) system and serves to ensure accountability, enhance evidence-based decision-making, and promote continuous improvement across the RECC portfolio.

Evaluations complement RECC's results-based monitoring system and Strategic Results Framework by:

- Assessing progress toward intended outcomes and impacts.
- Identifying lessons for adaptive management and future design.
- Strengthening institutional accountability and transparency; and
- Contributing to knowledge-sharing with the selected donor and the broader climate adaptation community.

Evaluation practice follows the **United Nations Evaluation Group (UNEG, 2016)** definition — emphasizing systematic, impartial, and evidence-based assessment of relevance, effectiveness, efficiency, sustainability, and impact.

8.2 Types of Evaluations

During the project evaluation, REC Caucasus will ensure a coherent, tiered evaluation structure encompassing baseline data collection, mid-term reviews, and final evaluations.

(a) Baseline Data Report

Each Implementing Entity (IE) must prepare a **Baseline Data Report** based on primary or verified secondary data, consistent with the selected donor's *Results Framework and Baseline Guidance*.

- **Purpose:** Establish initial conditions for targets and indicators.
- **Timing:** Must be submitted no later than with the first Annual Project Performance Report (PPR).

- **Responsibility:** Prepared by the Executing Entity with oversight from RECC's M&E Officer.

(b) Mid-Term Review (MTR)

A **Mid-Term Review** is mandatory for projects or programmes with a planned duration of four years or longer. At least 1 % of total donor grant shall be reserved for the mid-term review and independent terminal evaluation.

- **Purpose:** Formative evaluation assessing progress, performance, risks, and contextual relevance; identifies adjustments for remaining implementation period.
- **Timing:** Conducted at the midpoint of implementation; the MTR Report must be submitted to REC Caucasus and the donor organization Secretariat within six months of that point.
- **Independence:** May be conducted independently, semi-independently, or self-conducted under REC Caucasus supervision, ensuring impartiality and methodological rigor.
- **Management Response:** Within six months of receiving the MTR report, the Implementing Entity must submit a **Management Response** detailing actions taken or planned in response to MTR findings and lessons.
- **Follow-up:** MTR recommendations must be tracked through the project's adaptive management plan and reflected in subsequent PPRs.

(c) Final Evaluation

All RECC-supported projects must undergo a **Final (Terminal) Evaluation** near completion.

- **Purpose:** Summative evaluation assessing overall effectiveness, efficiency, impact, sustainability, gender outcomes, and contribution to national adaptation priorities.
- **Responsibility:** Commissioned by a selected donor and conducted by an independent evaluator or firm to ensure objectivity.
- **Timing:** Completed within six months after project closure and submitted to the donor Secretariat.
- **Utilization:** Findings and lessons will inform RECC's portfolio reviews, future project designs, and institutional learning products.

(d) Real-Time Evaluation (RTE)

In cases of rapidly changing environmental or socio-political contexts (e.g., climate shocks, disasters, pandemics), RECC may undertake **Real-Time Evaluations**.

- **Purpose:** Generate immediate feedback to inform course corrections during implementation.
- **Optional:** Encouraged but non-mandatory; must be budgeted at the project design stage if anticipated.

- **Approach:** May be conducted internally or by external experts, with findings directly integrated into adaptive management decisions.

8.3 Evaluation Governance and Quality Assurance

RECC applies a “whole-of-institution” approach to evaluation, integrating evaluation findings into decision-making, risk management, and strategic learning.

- The **M&E Officer** oversees evaluation quality, methodology, and adherence to Fund and UNEG standards.
- The **Executive Director** ensures institutional accountability for implementation of evaluation recommendations.
- Evaluation reports are subject to **peer review and quality assurance** under RECC’s Internal Audit and M&E Officer before submission to the donor agency.
- All evaluations must comply with RECC’s **Environmental and Social Management System (ESMS), Gender Policy**, and data integrity protocols.

8.4 Learning and Knowledge Integration

Evaluation findings will be systematically captured and translated into actionable learning for adaptive management and institutional improvement.

- Evaluation lessons will feed into the Donor’s **Annual Portfolio Review**, and **Policy Updates**.
- RECC will maintain a **Knowledge Repository** of evaluation reports and learning briefs accessible to project teams, partners, and donors.
- Lessons learned from evaluations will also inform capacity-building activities and the design of new climate resilience programmes.

8.5 Reporting and Disclosure

All evaluation reports (Baseline, MTR, Final, RTE) shall be:

- Published on the RECC website and shared with the donor agency within stipulated timelines.
- Accompanied by a **management response** and **action tracking table**.
- Summarized in Annual Project Performance Reports (PPRs).
- Archived in the institutional M&E database for long-term access and institutional memory.

Annexes

Annex 1: Institutional M&E Indicator Matrix Template

Indicator ID	Indicator Name	Level (Institution / Project)	Donor Core Indicator / SRF Outcome	Baseline	Target	Frequency	Data Source / Verification	Responsible Staff	Project ESMP / GAP Tag	Gender-Disaggregated?
INS-01	Policy Implementation Rate	Institution	Donor SRF Outcome 1	0%	100%	Annual	Policy logs, approvals, Secretariat dashboard	Programmes and Projects Management	ESMP-1	N/A
INS-02	Staff Capacity Development	Institution	Donor SRF Outcome 2	0 trainings	12 trainings/year	Quarterly	Training attendance, logs	HR	GAP-1	Y
PROJ-01	Output Achievement	Project	Donor Core Indicator 1	0%	100%	Quarterly	Project reports, site inspections	Project Team	ESMP-2	N/A
PROJ-02	Stakeholder Engagement	Project	Donor SRF Outcome 3	0%	90% coverage	Quarterly	Stakeholder consultation reports	Project Team	GAP-2	Y
PROJ-03	Gender-Responsive Outcomes	Project	Donor Core Indicator 2	0%	80%	Quarterly	Surveys, focus groups,	Gender Mainstreaming Expert	GAP-3	Y

Notes:

- The institutional M&E matrix can be applied flexibly, with RECC tracking either comprehensive institutional indicators or project-level KPIs as most appropriate for each context.
- All institutional indicators cover **all REC Caucasus branch offices in Armenia and in Azerbaijan.**
- Verification sources include **documented evidence** and **audit reports.**
- Gender and project ESMP/GAP tags are explicitly referenced to donor guidelines.
- The information entered in the table is provided as an example and is for demonstration purposes only.

Annex 2: Results-Tracker Template (Project Level)

Project Name	Activity / Output	Indicator	Baseline	Target	Actual	Status (Green/Yellow/Red)	Data Source	Responsible Staff	Notes / Corrective Actions	Donor Core Indicator / SRF Outcome
Example Project	Training Workshop	# of staff trained	0	20	15	Yellow	Attendance sheets	Project Lead	Schedule make-up session	Donor Core 1 / SRF 2
Example Project	Policy Adoption	Policies implemented	0	5	3	Yellow	Approval logs		Expedite approvals	Donor SRF Outcome 1

Donor Compliance Embedded:

- Status column supports **adaptive management** feedback loops (AF Evaluation Policy §28-30).
- Each tracker must be annexed to **Quarterly / Annual PPR** reports (AF OPG ¶65).
- The information entered in the table is provided as an example and is for demonstration purposes only.

Annex 3: Data Quality & Verification Log Template

Data Point	Indicator	Source	Data Collector	Verification Method	Quality Rating (A-D)	External Evaluator Check (Y/N)	Remarks / Corrective Action
PROJ-01-01	Output Achievement	Project report	Project Team	Audit, document review	A	Y	Verified
INS-02-03	Staff Training	Attendance log	HR	Cross-check	B	N	Minor discrepancy corrected

Donor Compliance Embedded:

- Includes **data quality rating** and **external evaluator access** per Donor Evaluation Policy.
- Ensures traceability for **mid-term and terminal evaluations**.
- The information entered in the table is provided as an example and is for demonstration purposes only.

Annex 4: M&E Reporting Schedule (Specific to AF Projects)

Report Type	Level	Frequency	Submission Deadline	Responsible Staff	Recipients	Donor Compliance Reference
Quarterly Consolidated Report	Institution / Project	Quarterly	As per project plan	M&E OFFICER / Programmes and Projects Management	ED / MESC / Donors	AF Results-Tracker Guidance
Annual Project Performance Report / PPR	Institution / Project	Annually	Within 60 days of disbursement anniversary	M&E OFFICER / Programmes and Projects Management	Donor / Board	AF PPR Guidance 2020
Mid-Term Review	Institution / Project	Mid-Term	As per project plan	M&E OFFICER / External Evaluator	ED / Donor	AF Evaluation Policy
Terminal Evaluation	Institution / Project	End of Project	60 days after closure	External Evaluator	ED / Donor	AF Evaluation Policy §46

Annex 5: Internal Audit and QA Checklist (Specific to AF Projects)

Audit Area	Criteria	Evidence Required	Responsible Staff	Frequency	Donor Reference
Financial Management	Internal controls functional	Audit reports	Internal Audit	Quarterly	AF OPG ¶¶70-71
Gender Integration	Sex-disaggregated reporting	Training logs, surveys	Gender Mainstreaming Officer / M&E OFFICER	Quarterly	AF GP §15-19
Environmental & Social Safeguards	ESMS compliance	Logs, inspection reports	ESMS Focal Point/ Programmes and Projects Management	Quarterly	AF ESP §30-35
Policy Implementation	Policies operationalized	Approval logs, SOPs	M&E OFFICER / Programmes and Projects Management	Annual	Donor Core Indicator / SRF Outcome
Data Quality	Verification completed	QA logs, audit findings	Internal Audit	Quarterly	AF Evaluation Policy §28-30

Annex 6: Adaptive Management and Learning Log Template

Observation / Finding	Source	Related Indicator	Recommendation	Action Taken	Responsible Staff	Follow-Up Date	Donor Reference
Low participation in training	Workshop feedback	INS-02	Reschedule sessions & additional outreach	Sessions rescheduled	M&E OFFICER / HR	1 month	AF GP §15-19; Evaluation Policy §28-30
Delayed policy approvals	Secretariat log	INS-01	Expedite governance approval workflow	Updated SOP for approvals	ED / Secretariat	2 weeks	AF OPG ¶¶65-66
Incomplete GRM submissions	GRM log	PROJ-02	Improve reporting and staff capacity	Staff trained on GRM	M&E OFFICER / GSITF	Next quarter	AF ESP §30-35; GAP §18-19

Notes:

- Integrates **learning cycles** with adaptive management process.
- Linked to **dashboards, scorecards, and PPR annexes** for transparency and donor compliance.
- The information entered in the table is provided as an example and is for demonstration purposes only.



This document was reviewed, adopted, and approved on [date] by the REC Caucasus Executive Body (Collegial Trio) in accordance with the organization's internal governance procedures, and shall enter into force as of the date of approval.

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