Contractor evaluation report

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Your name	Leah Ambwaya
Date of your visit	April 29, 2009
Email for org	spencer@cfwshops.org
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Country	Kenya
Organization visited	CFWshops, Child and Family Wellness Shops
Project Visited	975: Support CFWshops in Kenya and Save Lives
5.1.1. Networks and collaboration with other NGOs	Good
5.2.1. Project strategy was developed with beneficiaries' feedback	Poor
5.2.2. Project activities designed to achieve intended outcomes	Good
5.2.3. Project delivering results	Excellent
5.2.4. Project can be scaled up or replicated	Good
5.3.1. Staff manage project with an outcomes mindset	Good
5.3.2. Staff learned from mistakes and transform their project	Good
5.3.3. Project activities and outcomes are monitored through beneficiaries' feedback	Excellent
5.4.1. Organization tracks expenditures well	Excellent
5.4.3. Leverage: association with GlobalGiving increased the project's ability to attract other outside funding	Average
5.4.5. how close will project be to financially self-supporting when complete?	Good
5.4.5. Environmentally sustainable project (resource conservation)	Excellent
5.5.1. Community supports project with donations or gifts in kind (>50% community match = excellent)	Poor
Percentage of requested budget received by project at time of evaluation:	50-75%
Percentage of overall budget provided by community served:	0-25%
Percentage of overall budget from non-community non-globalgiving sources:	50-75%
Project leader's estimated overall progress towards stated outcomes on GG website:	75-90%
5.1. Collaboration List partnerships involved with this project. Reason for each interaction?	USAID- Implementation of HIV/AIDS Prevention project. GLOBAL FUND-Supported for Malaria Project. LOCAL AUTHORITIES-They are licensed at a subside cost.
5.2. Governance Your overall impression of the staff, its management style, and culture. How do beneficiaries provide direction?	*The staff are proffesional and dedicated to their work. *The management strives to be all inclusive and involves thier staff in all major decisions through constant consultations and meetings. *Beneficiaries give regular feedback through regular meetings and reports.
5.3. Short term outputs = long term outcomes? List immediate results. Explain what the outcome(s) may be and how the organization knows it is making progress towards these outcomes.	*There is increased number of visits to the franchise clinics and shops. *There is an increase in the number of clinics joining the network. *There is reduced morbidity of certain illness like malaria simple diarhoea and vomiting amongst children. *There is increased awareness on various illness and diseases in the communities being served.
	The organisation is able to evaluate progress made through monthly progress report from the field, surveys and feedback from franchaisees and increased willingness of the government to work with CFW clinics.
5.4. Value Have results been delivered (or services rendered) to the community in a meaningful and cost-effective way?	*Yes.We gathered that office overheads are at abare minimum of about 10% of the total budget. *We also learnt that one of the core values of the organisation is that the funding recieved goes the farthest to provide services to the franchaisees who in turn serve the community effectively.
5.5. Learning (Do insights from project implementation result in adaptation or focusing of particular activities? Are donors and beneficiaries able to appreciate the thinking behind the project?)	*The Mission of CFW is to serve the underserved rural communities in this regard there is a continous revew of existing strategies based on the results and feedback from the field.

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5.6. Expenditure narrative Provide a narrative summary of how disbursements from GlobalGiving were spent.	*We realised that the kenya office was not in a position how much money comes from global giving or other donors. This was the prerogative of the mother organisation in the USA that has the mandate of fundraising. However as the funds get down to the kenya office they are used to support the existing clinics and shops, purchase of drugs and medical supplies eg Mosquito nets and sanitary pads opening up of new clinics, training of existing franchaisees to provide improved and quality service to the communities.
5.7. Beneficiary roles How do the people served propagate this service to others or give back to the community?	*They spread word of mouth nad refer new patients to the shiops and clinics . *They also pay for sick relatives seeking treatment in the CFW clinics.
5.8. How is this project supported by the community?(labor, gifts-in-kind, leaders promote it, etc.)	*The ministry of health support the activities by invoving them in projects like Malaria and Anti-polio campaigns. *Local authorities most of the time give them concessions on license fees. *Government at local levels promote and support their work. *Sometimes relatives meet the bills for patients who are unable to pay.
5.9. How will project continue when funding is complete? How will the focus change in the next iteration of this project?	*They continue to work towards seeking partnerships with the private sector in kenya,invoving the communities in sensitisation to be able to understand basic actions that can be taken to reduce common illnesses like malaria by keeping the environment clean and typhoid by drinking clean boiled/treated water,use of mosquito nets,washing hands after using toilets or before eating. However health needs in underserved communities coupled with poverty are endless therefore there is need to always seek funding for provision of services.
Checklist for additional deliverable items. Check if completed.	✓ visitor postcard (narrative of your visit sent to donors)✓ technology capacity (separate form)
Paste the URL for the NNDP map associated with this organization (http://www.nndb.com/)	
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