2018 CLA CASE COMPETITION

COLLABORATE • LEARN • ADAPT

Case Title:

Rapid Management Reviews: Unstick CLA to release human and organizational potential

The beginning of the of the Prezi presentation for the final Solutions Forum of an RMR application. Credit: USAID/Mozambique MMEMS contract, Luis Reves.

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Summary:

Collaboration is great when it works. But, well, life can be awful when things are not going well between USAID and a critical implementing partner. It happens more often than we would wish, and it can be a pain in the neck! The unhealthy behaviors that throw things out of whack are simple: one part perceived mistakes, two parts imperfect communication, five parts in-group thinking on each side --> and before you know it, the CLA posture is a mess. Now, place that painful condition into the personal and bureaucratic Stress Oven -- by not proactively tending to your CLA -- and that pain metastasizes into full mutual mistrust, bad feeling, bad mouthing, and a job that you dread! You can't fix it (ADAPTING) because you don't know what's wrong (LEARNING is blocked) because you've forgotten how to communicate clearly and work together (COLLABORATING.) It's all backwards. You are firmly in the Anti-CLA Zone! You need a CLA pause, reflect, and RESET. You can't see past the pain to look at implementation clearly.

Here, in Maputo, we've begun experimenting with our IPs and our Contracting, Technical, and Program offices to conduct Rapid Management Reviews (RMRs.) A third party (MSI, implementer of the Mission's contract for MEL and CLA, in this case) engages USAID and the IP in a collaborative dialogue about what is wrong, and what can be done to fix the relationship. Usually, each side has all the information it needs for "good CLA," if it just chooses to be frank about problems (they know what is broken) and listen to solutions. That Gorgeous IP that won the solicitation still has the skills and people to transform peoples' lives, and USAID is still a great agency that understand development better than any other. We just need to remember why we got together in the first place. RMRs can get things back on track quickly. If both sides admit there is something wrong (and that each side is at fault), are committed to improving, and there is a sense of urgency to improve implementation, then you can energize efficiency, effectiveness and overall job joy. If those conditions don't exist, try something else from the CLA arsenal.

1. Which subcomponents of the Collaborating, Learning and Adapting Framework are reflected *most* in your case (select up to 5 subcomponents)?

- [ ] Internal Collaboration
- [x] External Collaboration
- [ ] Technical Evidence Base
- [ ] Theories of Change
- [ ] Scenario Planning
- [ ] M&E for Learning
- [x] Pause & Reflect
- [x] Adaptive Management
- [x] Openness
- [ ] Relationships & Networks
- [x] Continuous Learning & Improvement
- [ ] Knowledge Management
- [ ] Institutional Memory
- [ ] Decision-Making
- [ ] Mission Resources
- [ ] CLA in Implementing Mechanisms

2. What is the general context in which the case takes place? What organizational or development challenge(s) prompted you to collaborate, learn, and/or adapt?

All too often at USAID, throughout the Mission, we find excellent IPs at the helm of what are seen as "problem activities." They are perceived as under-performing, as much by a gut feeling as by objective data -- especially where standard monitoring data are not informative, a reality that is much too often the case. It can be hard to be certain what is going on, because USAID/IP relations may already be strained. Communication is hard, results seem elusive, and things seem unreasonably delayed with such "problem activities." Sometimes, we don't even know how we got here. But, it is unpleasant to work, the technical office and the IP have retreated to their separate group-thinking corners, and implementation seems stalled.

CLA is nowhere to be seen. We have a hard time talking to each other. We might call in the Contracts Office, hoping for an arm-twisting quick fix -- which can be elusive. Maybe, it is a cooperative agreement, and USAID's intervention options are limited. Maybe it is a start up, and we wonder if the problem will go away if we just wait.

It starts to seem easier to just avoid the issue and hope it gets better. But, when it doesn't, we need to figure out how to fix it. An evaluation, can help, but it takes a long time, may not be in the plan, and can be costly and a challenge to get the IP on board.

There must be an easier, less expensive, more pleasant way to get things on track quickly....

3. Why did you decide to use a CLA approach? Why was CLA considered helpful for addressing your organizational or development challenge(s)?

We've tried RMRs twice so far, and are considering a third application. The first time, it was very successful. The second time, it failed miserably (but, predictably, and relatively inexpensively.)

In both cases, implementation seemed much below standard. USAID tried meetings with the IPs, internal Technical Office meetings, cross-office meetings, and the AORs/CORs had even received negative portfolio reviews. Things didn't change; the Front Office was not happy. As an extreme measure, we pulled in the Contracts Office in both cases. Still no improvement; possibly further alienation. Both activities were very important to the Mission, capable NGOs/firms had performed well in other contexts, and we had seasoned development professionals at the USAID helm. Why were we operating at less than the sum of our individual parts?

It took some introspection within the Mission to realize that USAID might actually be part of the problem. Then we reached out to the IP and learned that, in one of the cases, they too, also felt they were part of the problem. Now we had something to work with. In the other case, the IP didn't think anything was wrong on their side; virtually all the faults were with USAID. More on that later....

The Mission's institutional contractor had an untested idea about how to address such situations (this thing called an "RMR," suited for a wide range of cases where USAID and the IP had become misaligned.) So, we tried it -- nothing else had worked, it was quick, low-cost, and intuitively seemed like it might work.

In the first RMR application, our circumstances met the criteria described in Section 7, below, so we pursued the RMR with confidence. In the second case, the situation did not align with the criteria, but we decided to try it anyway. It was a new tool, and we were not certain if the posited limitations actually applied. (Spoiler Alert: they did!)

4. Tell us the story of how you used a collaborating, learning and/or adapting approach to address the organizational or development challenge described in Question 2.

To get at the almost physcial pain felt by professionals stuck in dysfunctional implementation, we will continue with the "pain in the neck" metaphor of a person deciding to finally address her nagging neck pain...
1. IDENTIFICATION OF ISSUES – COMMUNICATING THE SYMPTOMS. The first step is to listen to complaints from those requesting the RMR, without trying to solve issues at the onset. This helps to scope out the work. Complaints are often symptoms of deeper issues. The three activities nominated for RMRs were introduced as "they can't seem to get started", "everything is handed in late," or "they don't respect us," or "nothing is getting done." Symptoms report on perceptions. But, reality may differ in some cases, and the root cause may arise from a different part of the body than where the pain is felt. The pain the neck may actually originate in faulty hip alignment transfered up the organism. What appears to be bad performance, may actually result from inadequate communication. In any event, symptoms are critical data points, both in medicine and for the RMR.

2. PRELIMINARY ANALYSIS – BEGINNING TO MATCH SYMPTOMS WITH DISEASE. The external RMR team sorts this information to align it with basic objective data gathered from the activity (activity data, observation, outside perspectives), seeking common threads. It is particularly useful to use focus on specific performance-related complaints and trace their root causes. In our successful case, we looked at a flawed MEL plan and a dysfunctional reporting process. A picture begins to emerge of the source of the symptom as the RMR team synthesizes the data, a process of connecting many diverse information dots. The team determines if the complaints/symptoms can be grouped in meta-problems and forms potential hypotheses of what may be the root causes of the symptoms presented -- that is or goal. This is most effectively done with an RMR team containing diverse perspectives. In our successful case, the root causes tracked back to poor communication, faulty metrics, and lack of information sharing. In our unsuccessful case, the IP did not recognize the existence of any problems, so consensus was beyon

3. • VALIDATING ROOT CAUSES AND MOVING TOWARDS A REMEDY – MOVING FROM DIAGNOSIS TO PRESCRIPTION. Building on a series of such discussions -- separately with strategically-selected staff from the IP and USAID -- sets of "problem chains" emerge that ring true with stakeholders, that advance from root causes to observed problems in implementation that are agreed upon by all parties – although the specific perspective can differ between USAID and its IP. Information is gathered, triangulated, and analyzed as available – in some cases in the same discussion session – for hypothesis development that will fuel the conversation with the next individual or group interview. If the hypothesis is validated on both sides, then it can be treated as valid information for purposes of the RMR. The RMR team returns to top management of both sides to obtain agreement on these core issues, and even brainstorm viable solutions. In some cases, this can happen in joint meetings of leadership of the IP and USAID. In other cases, the RMR team may need to gain parallel agreement through separate meetings with leadership of each side. The point is to have substantial agreement on root causes, and some potential solutions, before the final step. In the successful case, it took approximately five meetings with the IP and three with USAID. In our unsuccessful case we had many more meetings with both sides, before realizing consensus was not feasible.
4. • DEVELOPING A JOINT ACTION PLAN – THE REHABILITATION PLAN. The final step is for both sides to come together in a Solutions Forum to agree on a plan to address the most important root causes of problems. The plan assigns "repairing tasks" to specific individuals to be completed on time, with mechanisms for both sides to observe whether the original problems have gone away. This is the physical therapy for our patient with the painful back in the analogy. Ideally, the plan would identify a process to rectify any challenges that may emerge in executing the Action Plan – as these could reflect meta-problems re-asserting themselves – and fine tuning implementation approaches to eliminate the blockages. This is monitoring the patient's return to health, and her commitment to healthy practices to support a strong back.
5. FINALIZING THE PROCESS. Results of the analysis were recorded on a brief presentation at the Solutions Forum, with a Word document recording the basic Solutions Action Plan from flip charts at the forum. It was a focused and operational way forward, aimed at tangible results: an improved and finalized MEL Plan; communication and meeting protocols. We achieved a commitment to improvement and a measurable shift in management that helped to push activities back on track. Our friend is without neck pain; but she must still take care of herself.

5. Organizational Effectiveness: How has collaborating, learning and adapting affected your team and/or organization? If it's too early to tell, what effects do you expect to see in the future?

In the case where the circumstances did not align with the feasibility criteria for an RMR, we were not able to reach consensus that implementation problems even existed -- much less how to address them. In that case, we terminated the RMR process before its completion, after spending relatively little time and money. Unfortunately, the original perceived implementation problems persist, as well as the Anti-CLA environment and lack of synergies.

In the case where the feasibility criteria existed, we had excellent success: the MEL Plan is now seen as useful to all, USAID and the IP are aligned with respect to performance, implementation is seen as more successful, communication is improved, and there is much more pleasure and productivity in the IP/USAID relationship. These results were achieved without changing a single staff person on either side (often we fantasize that life would be different if we could just "get rid of" him or her...)

USAID and the IP are collaborating again, learning again, and adapting implementation to improve impact on the lives of Mozambicans who most need support.

6. Development Results: How has using a CLA approach contributed to your development outcomes? What evidence can you provide? If it's too early to tell, what effects do you expect to see in the future?

At this point, we are certain that implementation is smoother, more effective and much more pleasant in the successful case. The monitoring system is working to the satisfaction of both parties, joint planning is productive, and perceptions of the activity in the Mission have transformed to the extent that it was selected as the first USAID/Government of Mozambique joint site visit. It is too soon to see if overall impact will be enhanced by this dynamic, but it seems certain to be more on track than without effective CLA.

The following comments from USAID staff intimately involved in the process reflect observations on the successful and also the unsuccessful applications, noting the value in each experience:

Technical Office perspective: “The RMR was able to provide informed and insightful analysis of bottlenecks and areas of improvement as well as (most importantly) concrete recommendations on how to improve project management. As a result of their assistance and the subsequent implementation of their recommendations, the project substantially improved its progress towards targets and the PMP has been much improved.”

Contracting Officer perspective: “As a contracting officer, ensuring that our partners perform is essential. The RMR tool has been a fast and affordable tool the Mission can use to examine an activity and determine what is keeping the activity from succeeding. While the RMR has been successful, it is also limited. For example, most recently, in the review of an activity, the RMR could not be completed as the enabling conditions, such as agreement of both parties on the problems of the activity, were not present. This revelation gave us a glimpse of the serious management gaps of the activity that could only be resolved by engaging the senior management of the partner.”
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7. What factors affected the success or shortcomings of your collaborating, learning and adapting approach? What were the main enablers or obstacles?

The RMR is based on the belief that the information needed, and ability to understand root problems and solutions, is “hiding in plain sight” in the minds of USAID and IPs working daily on an activity. It uses an engaged third party experienced in evaluation, facilitation, and practical implementation challenges to help stakeholders identify problems and create solutions through a transparent and systematic process that taps that endogenous system wisdom. The process is intense, and requires a degree of introspection that is not always feasible. In general, the following preconditions are required for success:

• Mutual respect for the organizations and individuals on each side;
• Recognition that results of the activity to-date have been less than the sum of its parts;
• A sense of urgency, from all parties, that something must be done; and
• Agreement to commit several short blocks of time of key staff and to prioritize the RMR to complete it rapidly.

The RMR process must remain sensitive to the hierarchy and political nature of the organizations, as well as the need for all to be committed to the solution for changes to be effective. It is a very human process: Where the above conditions don't hold, it will fail. Where successful, we benefited from having talented development professionals on both sides who cared more about improving Mozambican lives than personal or institutional egos. It helped to have a third party experienced in facilitation, team building, and a wide range of development contexts to help us get to root problems and solutions quickly. Finally, it was useful to have the Contracts, Technical, Program and Front Offices aligned behind the innovative effort and ready to consider what emerged.

Although RMRs have the potential to be very useful, those considering them should realize that standards for data validity differ from a typical performance evaluation as does the form of reporting. These features greatly accelerate the process and may enhance ownership of the recommendations. But, expectations must be aligned.

8. Based on your experience and lessons learned, what advice would you share with colleagues about using a collaborating, learning and adapting approach?

We here in Maputo are convinced that transformational development requires effective CLA. Don't assume that "you are doing CLA," or that since at one time things were going well, CLA is still effectively operating now in the Mission or with respect to a specific activity. An RMR maybe be called for as serious symptoms emerge: when, for example, USAID or an IP become aware of persistent performance gaps or anti-synergies among partners, USAID/IP discord, faulty design (possibly due situational changes from the time of conception to procurement), or internal/external political challenges that appear to be constricting implementation. Using the medical analogy above: it is time address that acute or chronic back problem! It has probably been there for a while, but neither side wants to suffer any longer.

USAID or an IP should not wait until the problem spreads throughout the activity. The intent is to identify such challenges (which, in retrospect, may have been present since activity start-up), quickly to reduce wastage, restore synergies and promote impact by helping USAID and IPs rearrange people, systems, strategy, relationships or process for greater effectiveness. The goal is simply to get things back on track to everyone’s betterment.

If you witness a "problem activity," consider that what you perceive may be more of a CLA problem than a lack of competence or poor design. Foster a bit of IP/USAID conversation to see if this tool might work. If the USAID/IP dynamic is as described in Item 7, above: don't get stuck in the Procrastination Oven -- push the CLA reset button.

It is low cost, low risk, potentially high return. It is so much better to work productively in a positive CLA environment. You will be glad you tried this.