Strategic Review of the Bureau for Crisis Prevention and Recovery

Final Report
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Prepared for:

BUREAU FOR CRISIS PREVENTION AND RECOVERY

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Executive Summary

In a time of increased need and a rapidly changing array of crisis prevention and recovery options, the new leadership of UNDP and BCPR is looking to ensure even higher levels of performance and strong partnerships within and outside the UN system. It is in this context that the BCPR senior leadership team commissioned a strategic review to take stock of where BCPR can improve its performance against its critically important mission: to advance peace and development by strengthening capacities to prevent and recover from crisis.

During 2006-2007 BCPR engaged in an extensive change process that led to a new strategy and organizational structure. Important changes have occurred as a consequence of the last review process, some of which have contributed to creating a more rational organizational structure with stronger competencies, clearer roles and responsibilities, and interventions which are more client-oriented and focused. However, a number of internal and external factors have impeded overall progress against the recommendations of this earlier review and there are many critical areas of performance yet to be addressed.

In general, the findings and conclusions of the current review indicate that BCPR's work is highly relevant and important to achievement of UNDP's overall mission. BCPR's work is widely welcomed, and provides significant value-added to field operations. However, this review found significant opportunities for improvement in six critical areas:

- Strategy and Impact
- Leadership and Management
- Organization Structure and Processes
- People and Competencies
- Funding Partnerships and Financial Sustainability
- Monitoring and Impact

BCPR must implement a comprehensive and well coordinated programme in order to achieve these needed improvements in a timely manner. The review outlines fourteen recommendations and associated implementation priorities for BCPR to pursue in meeting this objective.

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1. Introduction

Background

The Bureau for Crisis Prevention and Recovery (BCPR or the Bureau), created in 2001, is the Crisis Prevention and Recovery (CPR) and Disaster Risk Reduction (DRR) practice lead for UNDP and a key provider of technical and operational support to UNDP country offices in the CPR field.

Since its establishment as a bureau, BCPR has grown significantly in response to the growing demand on UNDP and, more broadly, on the UN system for improved support to preventing and responding to crises. The recent report of the Secretary-General on Peacebuilding in the Immediate Aftermath of Conflict (June 2009) is the latest of a series of calls for greater effectiveness of the UN system in a global environment characterized by important challenges to peace, justice and security, and to the capacities of countries to cope with disaster. At a time of increased competition over space and resources for CPR work, of uncertain funding scenarios, and of greater complexity of field operations, the new leadership of UNDP and BCPR need to ensure high performance levels, strong partnerships within and outside the UN system, and that a clear articulation of policy and operational added value exists so as to best contribute to moving the CPR and DRR agenda forward.

The contribution of BCPR to shaping CPR policies and field practice, its capacity to ensure, along with key partners, effective, timely and flexible support to UN senior leadership in crisis contexts, and its contribution to strengthening CPR capacities across UNDP, in particular in support to country offices and in response to requests of national governments, needs to be reviewed regularly.

It is in this context that the BCPR senior leadership team commissioned a strategic review to take stock of where BCPR can improve its performance against its critically important mission: to advance peace and development by strengthening capacities to prevent and recover from crisis.

Objectives of the Strategic Review

Taking account of the context outlined above, the main objective of the strategic review is to assess how the Bureau is performing against its strategic goals, and to develop and implement, recommendations that fundamentally improve its performance against mission. The Terms of Reference for this strategic review are provided in Annex 1 to this Report.

There was a change management process (2006-2007) which preceded this review, which contributed to creating BCPR's current structure and systems. This review takes progress against the recommendations of that earlier process as the starting point for its analysis, and as a basis on which to build any further improvement.

Although the focus of this review is on BCPR and its performance, the review team is aware of the need to locate its findings and recommendations within the context of the broader UN environment and also within the vision of a more coordinated UN effort regarding CPR to which UNDP/BCPR directly contributes.

Scope and methodology

Between September and December 2009 a multi-disciplinary review team[1] assessed BCPR's strategy, organization, processes and performance across multiple critical dimensions: leadership, structure, processes, people, infrastructure, and competencies. The analysis that followed the assessment informed the development of a set of specific and actionable recommendations, and an implementation roadmap.

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[1] The review team combines expertise in three general areas of competency: (i) organization and business process design and alignment; (ii) analytical, strategic planning, and programming expertise on crisis prevention, recovery and risk reduction; and (iii) institutional knowledge of UNDP business processes and the UN and related structures.

The change roadmap, for use by the BCPR leadership team, includes: a strategic framework for the required transformation, recommended initiatives, working groups, client/stakeholder strategies, and assessments of critical gaps that must be addressed in order to achieve the desired end-state vision.

The consulting team employed an outside-in approach that considers BCPR within the broader context of external developments, changing donor requirements, and new global perspectives regarding crisis prevention and recovery. In addition to extensive interviews with staff from UNDP/BCPR and other UN agencies in Geneva and New York, the consulting team also conducted in-depth, in-person visits to three Regional Centers (Bangkok, Bratislava, and Johannesburg) and six country operations (Colombia, DRC, Indonesia, Kenya, Sudan, and Thailand). In addition the consultants examined country operations in Africa and Asia[2] through in-person and phone interviews, and in-depth review of related documents. The team also conducted extensive interviews with other multilateral (World Bank, European Union) and regional organizations, NGO's, and think-tanks. Donor interviews were conducted in New York, Geneva, Brussels, London, and The Hague and in the field, including multiple representatives from the following donor countries: Austria, Canada, Netherlands, Norway, Sweden, United Kingdom, and the United States.

The consultants also conducted an extensive review and analyses of relevant documents and other materials. This included the 2006 BCPR change management process (note: the following section reports on progress made against the recommendations of this earlier process), other reviews and evaluations commissioned by BCPR,[3] and the most recent UN policy documents regarding how to harmonize UN CPR efforts.

An Advisory Board, comprised of external stakeholders (donors, UNDP country and region staff, country government ministers and senior BCPR staff), was established to provide strategic guidance to the review. The Advisory Board met twice in plenary session during the course of the review, and its members provided specific guidance regarding the final report.

Annex 2 to this report provides further detail on the methodology used, including interview questionnaires and the conceptual framework employed, a list of all the interviews conducted, an overview of documents reviewed, and a list of the Advisory Board members.

Structure of this report

This report is organized as follows. Following this introduction (Section 1), a brief section (Section 2) summarizes progress made against the recommendations of the 2006 BCPR change management process with an assessment of where the review recommendations have contributed to improvements in BCPR performance, as well as, areas where additional or new work is required. This sets the starting point for the next and largest section (Section 3) on Findings and Recommendations, which is organized around six subsections:

- Strategy and impact
- Leadership and management
- Organization structure and processes
- People and competencies
- Funding partnerships and financial sustainability
- Monitoring and impact

For each of these areas a brief description of the issues, a summary of the findings and a set of recommendations are outlined.

The final section (Section 4) of the report summarizes the review team's recommendations and lays out suggested priorities for implementation.

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[2] The consultants conducted interviews with UNDP/BCPR staff, other UN staff, local government officials, funders and others in Thailand, Indonesia, Somalia, Kenya, Sudan, and DR Congo.
[3] These included recent reviews of early recovery, disaster risk reduction, and conflict prevention.

2. Progress Since the Last Change Management Process

During 2006-2007 BCPR engaged in an extensive change process that led to a new strategy and organizational structure. Both the strategy and the structure were developed by an internal team composed of staff representing various units and functions in the organization, under the guidance of a Core Change Management Team, and the support of an external consulting team.[4]

The process considered all elements of BCPR's operations, including human resources, staff training and capacity development, financial systems, internal communication and management systems, donor resource mobilization and external relations, technology, and physical location. The relationship with Country Offices was also considered.

Important changes have occurred as a consequence of the last review process, some of which have contributed to creating a more rational organizational structure with stronger competencies, clearer roles and responsibilities, and interventions which are more client-oriented and focused. However, a number of internal and external factors have impeded overall progress against the recommendations of the earlier review. These factors include:

- The fact that some of the recommendations were only partially implemented, and that resources were not systematically aligned to the new setting;
- The increased bureaucratization of UNDP and BCPR processes and the increased requirement for more inter-agency work;
- The fact that cultural and behavioral changes that must accompany organizational restructuring requires time, and continuous adjustments;
- The exponential growth of demand for CPR assistance, including those demands emerging as a consequence of severe natural disasters, and increasingly complex and costly peace building operations; and
- The vacancy over several months in the leadership of BCPR during early 2009.

The previous review highlighted the following Findings and Recommendations.

The 2006 Review – Major Findings and Recommendations

The previous review found the following main structural and organizational weaknesses:
- Lack of effective coordination across BCPR units around a common overall strategic vision, as opposed to, separate conflict and natural disaster agendas
- Insufficient communication and collaboration among staff and units in different locations, particularly HQ teams in NY and Geneva
- Lack of an integrated service offering from BCPR to country offices with different units and individual staff trying to serve country office needs separately
- Internal business processes were poorly articulated, and not widely and commonly understood by BCPR staff who were unable then to effectively manage client expectations
- Inefficient distribution and use of administrative and management support resources that were spread out across the organization and lacked coherent management

Three main changes were recommended:
  i. Primary organizational orientation should be around functional clusters rather than geographic or subject matter expertise
  ii. Focus on delivering integrated services and support to country offices, and providing them a single, coherent entry point to BCPR
  iii. Improved coordination of operational and administrative functions within a single common services structure that can maintain standards across BCPR

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[4] The previous review was supported by Dalberg Global Development Advisers.

The key changes recommended by the 2006 review involved the creation of the following:

- A technical team with two sub-teams (conflict and disaster, both with a prevention and a recovery element);
- An operational cluster responsible for aligning and monitoring work-plans against strategic goals (with operational and administrative functions);
- A programme cluster, with a system of country focal points, to serve as an entry point for UNDP regional centers and country offices; and
- A policy and strategy team, responsible for servicing the entire Bureau and ensuring alignment with UNDP corporate priorities. The critical functions of external relations (including UN harmonization), M&E, and gender mainstreaming fell under this team.

These changes were to be accompanied by the review of business processes, the realignment of incentives for effective matrix management and teamwork, and flexibility needed to adjust the structure to UNDP's approach to regionalization.

It is worth noting that the previous review did not make any specific recommendation on BCPR positioning within UNDP and the rest of the UN system (including the PBC, PBSO, DPKO, etc.), other than acknowledging the process of UNDP regionalization. Also, the review either pre-dated or did not consider some significant changes that had been taken to help with the coordination and harmonization architecture of the UN for CPR, including the set up of the Peacebuilding architecture, the roll out of the humanitarian inter-agency cluster system, and the recently developed mechanisms for increased support to the Resident Coordinator's system (e.g. DOCO and related funds). Also, the review predated the recent global crisis and the programmatic and financial implications for the UN system and for BCPR, which this strategic review did consider.

Progress against the recommendations

Several of the findings of the 2006 review are still relevant. Although improvements have been made in a number of key areas, other desired improvements are still pending. The following summarizes the implementation of the recommendations and the impact this has had on BCPR performance:

- Instead of four functional clusters, three were created: a technical cluster: Technical Advisory Service Cluster (TASC), a cluster focused on strategy and policy: Central Strategy and Policy Cluster (CSPC), and a cluster combining operational and programme functions: Programme and Operations Support Cluster (POSC). The suggested division into two main technical sub-teams in TASC under a strong, unified technical team also was not fully implemented as recommended ; in addition to the conflict and the disaster reduction teams, a third sub-team - Early Recovery -, was subsequently created, in response to UNDP assuming the lead of the Early Recovery Cluster at the request of the Inter-Agency Standing Committee;

- While the rationale and the process for combining some aspects of operations and programmes in one cluster is only partially clear, the creation of the three functional clusters seems to have contributed to a better definition of roles and responsibilities within BCPR. It has improved the policy focus and concentrated strategic planning functions under one team, it has strengthened the technical expertise in key areas, it has regrouped operational aspects, and it has provided, through the country focal point system a clearer process for engagement with countries, among others;

- The new structure, however, has not yet enabled an optimal alignment of BCPR resources around clearly articulated objectives and strategies for the mainstreaming of CPR within UNDP and the rest of the UN, and for providing the optimal support required for Country Offices and field operations. The increased focus on strategic planning, with greater emphasis on joint planning, and the improvement of some business processes, all of which are laudable achievements, have not enabled or resulted in intra and inter-team collaboration on a full and consistently effective basis. Problems of coordination and harmonization of operations still arise, in some instances, in the delivery of support to Country Offices.

- The sub-division of TASC into three teams (Conflict Prevention and Recovery Team (CFT), Disaster Risk Reduction and Recovery Team (DRT), and Early Recovery Team (ERT)) has helped attract solid technical expertise and resources, produced quality policy work and Country Office support, as well as innovative practice development. It has also helped underscore the critical role that UNDP can play in bridging the humanitarian and development communities (e.g. through the Early Recovery work) and has helped strengthen the linkages with the rest of the UN CPR work (e.g. through the considerable expertise within Conflict Prevention Team and in the Disaster Reduction Team).

- The changes regarding the technical teams have substantially transformed some of the previous technical units (e.g. Disaster), have consolidated several service lines under one team (Conflict), and have introduced brand new approaches (Early Recovery). The reallocation of the Disaster Reduction Unit, for instance, into other teams (POSC and Early Recovery) has made disaster risk reduction a Bureau-wide function, rather than just a team function. This has certainly contributed to a strengthened overall BCPR contribution in this area. However, the process of consolidation of the new Disaster team (under TASC) has necessitated significant rebuilding efforts. The consolidation of conflict related service lines under one team is an important step towards more coherence, but one that requires significant team building efforts to be fully effective in execution. Finally, the Early Recovery Team, in addition to setting itself up as a team, had to dedicate significant initial efforts to develop core policies and operational guidance, while assuming important inter-agency coordination responsibilities.

- These changes, however, have still not fully enabled a clear framework for coordinated preventive and recovery interventions, with some fragmentation of responses remaining.[5] Also, establishing efficient communication systems, and effective mechanisms for cross-team collaboration are challenges that are still being tackled.

- The creation of POSC, which combines programme and operational support responsibilities (the 2006 review had recommended two separate teams), and a system of country focal points are consistent with the previous review's recommendation for providing effective and coordinated country support. While the clustering under one team of such functions as programme support and financial management has the potential for improving BCPR capacities and accountability, combining operations (and administration) and programmes (development and coordination of country support) does not necessarily lead to better and more field-oriented interventions, particularly if cross team mechanisms have not been optimized.

- The designation of country focal points within POSC, intended to create a single entry point for country demands and to enable the coordination of service throughout the whole of BCPR, and between BCPR and the UNDP project approval system around individual countries, is consistent with the review recommendation, and with practice of other similar organizations.

- Critical functions of the country focal point system, that are effectively contributing to more effective country support, include: (a) coordinating BCPR technical, programmatic and financial support at the country level; (b) ensuring programmatic coherence of CPR interventions; (c) ensuring compliance to corporate programme and operations policies and procedures; (d) coordination with Regional bureaus; (e) coordination and representation with other UN agencies; (f) substantive and financial monitoring of project performance. When it is effectively utilized, this system and the use of country focused meetings, can significantly improve BCPR coordinated support.

- CSPC, in line with the previous review's recommendations, is developing the potential to become an effective policy, strategy, and corporate compliance unit, and is taking on board the increasingly important function of liaising effectively with the rest of the UN CPR architecture and with external partners. To achieve optimal levels of CSPC effectiveness, however, would require a further, and clearer, division of labor with TASC - a key recommendation of the current review-

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5 This is evidenced, among others, by the number of projects and separate teams' missions in countries, which often do not appear as being framed and designed to be consistent with a clear, integrated country level prevention and/or recovery strategy.

and a better alignment of the financial management and strategic planning functions, which are split under POSC and CSPC. Also, while the previous review argued for a substantial increase of resources for such critical functions as M&E, this is yet to materialize with M& E capacity remaining chronically under-sourced.

- Significant steps have been taken to improve business processes and operational capacities, with focus on accelerating the speed of programme related decisions and funding approval (e.g. fast track procedures), and on creating surge capacities and expert rosters' systems, among others. As this report will indicate, while progress in this area has contributed to more timely and effective BCPR interventions, ensuring adherence to existing business processes, and improving the effectiveness of such mechanisms like the surge capacity, and a roster system of expert capabilities, require significant investment.

- Finally, the 2006 review recommended, consistent with feedback provided from yearly staff surveys, the need for improving management practices across the Bureau. Extensive training, mentoring, induction, and learning initiatives were started, primarily focused on senior management, but also improve technical as well as other capabilities of BCPR staff overall. Bearing in mind, that high staff turn-over is both a reality and a constraint, for BCPR, this report will highlight the need to both build on, and augment these earlier efforts.

The following section explores to what extent the changes implemented have contributed to improved performance, as part of a broader review of BCPR's current performance.

3. Findings and Recommendations

This section summarizes the findings and recommendations of this review, and is organized around six critical areas affecting organizational performance: 1) strategy and focus, 2) leadership and management, 3) organization structure and process, 4) people and competencies, 5) funding partnerships and financial sustainability, and 6) monitoring and impact. Each subsection has three components:

- a brief description of the area of organization performance under consideration;
- a summary of the findings regarding BCPR's performance in this area; and
- a set of recommendations for BCPR to improve performance.

In general, our findings, and the feedback from the large majority of those interviewed, indicate that BCPR's work is highly relevant and important to achievement of UNDP's overall mission. BCPR's work is widely welcomed, and provides significant value-added to field operations. And there is a growing need for BCPR's work. More than 40 countries were affected by high levels of violent conflict and armed violence in 2008. In 2008 alone there was a death toll from disasters of over 235,000 people with damage from disasters causing financial losses in excess of USD 181 billion[6]. The Bureau's core contribution to helping address these problems – a mix of skilled/experienced technical support and quick/flexible disbursement of funds – remains highly important to, and welcomed by, country-level partners. The policy and practice contributions that have flowed from the Bureau's work on-the-ground have also helped secure BCPR's position as a leading actor in the CPR field.

However, consistent with the spirit of continuous improvement, the current BCPR leadership seeks to improve further BCPR performance against its mission, and looks to this review to help provide specific guidance regarding how to achieve even higher levels of performance. Therefore, the recommendations in this section, rather than emphasizing or expanding on what BCPR does well, intentionally focus on the aspects of BCPR performance that could be improved.

This review is cognizant of the fact that BCPR operates within different contexts, and, therefore, must design the support it provides to be flexible, responsive, and tailored to the needs of vastly different environments. The three main situations within which BCPR needs to position itself and its work are:

- BCPR as a part of UNDP with a responsibility for mainstreaming CPR capacities across the organization, in direct support of field operations
- UNDP/BCPR as a part of the UN system, in particular the CPR architecture, with responsibilities for contributing to overall UN CPR effectiveness, and to build relationships with other critical actors (e.g. the broader humanitarian community, the World Bank, the European Commission, NGOs, foundations and think tanks, etc.)
- UNDP/BCPR in the context of a changing global agenda on peace, justice, security and development, with new, and emerging, challenges and actors

Another important consideration relates to the fact that, although some aspects of CPR, and therefore BCPR's work can be predicted and thus can be planned for (e.g. slow-onset or post-crisis situations), others situations are much less predictable, and require quick and opportunistic responses and interventions. Effective work in each of these three major situations contains aspects that are not under BCPR's direct control. However, BCPR needs to develop adequate strategies and responses to ensure that its added value is clear and that its contribution is relevant, effective, and aligned with a vision of a more harmonized and more effectively executed UN CPR support resulting in better and timelier CPR outcomes in the field.

This review also recognizes that other issues have serious implications on BCPR strategic positioning and ways of working, which call for more effectively maximizing or leveraging existing resources and capacities, and effectively executed partnership frameworks and approaches. The present uncertainty related to funding streams underscores the need for effective strategic positioning, and partnering, as well as the need to show tangible results in the field in order to demonstrate that donor contributions to BCPR are worthwhile investments in achieving impact against the critical components of BCPR's mission.

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[6] UNDP website, "Crisis Prevention and Recovery - Conflict Prevention", http://www.undp.org/cpr/we_do/conflict_prevention.shtml

3.1 Strategy and Focus

Current Status

To ensure a clear articulation of its mandate[7] and in response to an evaluation of UNDP assistance to conflict-affected countries in 2006-2007, BCPR developed a Strategy for 2007-2011. The Strategy[8] highlights five areas: it i) *emphasizes depth* through greater focus on key countries; ii) *focuses on outcomes* in the prevention and recovery area; iii) *emphasizes policy development and best practice; iv) promotes gender equality in crisis situations; v) recognizes the importance of partners* within and beyond the UN system. BCPR's Strategy for 2007-2011 was subsequently subsumed into a UNDP Strategy for 2008-2011, in which CPR becomes one of UNDP's four strategic outcomes. The UNDP Strategy outlines a greater delineation between conflict and disaster related support required in the field.

Nine outcomes were identified to ensure greater focus and more policy and programme integration:

> **BCPR Strategy 2007-2011 Key Outcomes**
>
> *Prevention Outcomes*
>
> 1. Common awareness and understanding of crises among key stakeholders
> 2. Emerging crisis managed through inclusive dialogue
> 3. National capacities to manage crisis risks strengthened
> 4. Crisis risk reduction integrated into development planning
>
> *Recovery Outcomes*
>
> 5. Community and personal security restored
> 6. Gender equality and women's empowerment advanced in peace processes
> 7. Basic governance functions re-established
> 8. Economic revival is catalysed
> 9. Social cohesion is nurtured

The May 2009 Hope Agenda[9] further sets out BCPR core values, commitments, and approaches to ensure effective support to communities and countries in crisis. The Agenda outlines seven strategic commitments, which further frame BCPR work, making it current and forward looking at the same time. These are: i) Support to Resident Coordinators to help the UN deliver "as one" and to enhance coherence across the system; ii) Recognize the economic merits of investing in prevention; iii) Bridging the funding gap for early recovery; iv) Emphasize peacebuilding; v) Scale up disaster risk reduction programmes; vi) Women empowerment and participation; and vii) Champion the UN's values.

BCPR has made implementation progress regarding a number of areas of its 2007-2011 Strategy, and its follow up commitments.[10] Notable milestones include:

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[7] As part of UNDP, BCPR is charged with implementing UNDP's mandate to operate in "special development situations" where disasters and violent conflicts have undermined the human, social, physical, and institutional capital that sustains development. It does so by supporting efforts to reduce the impact of natural disasters, prevent armed conflicts, and assist in recovery from crises. The Bureau's role is also to consolidate UNDP's knowledge and experience in the field, bridge humanitarian response and development work on behalf of UNDP, and advocate for conflict sensitivity in development activities.

[8] Executive Board of the United Nations Development Programme and of the United Nations Population Fund (2007) "Management response to the evaluation of UNDP assistance to conflict-affected countries". DP/2007/4/Rev.1, 12 April 2007.

[9] The Hope Agenda for Countries in Crisis, BCPR, May 2009.

[10] It is important to note that BCPR effectiveness in supporting UNDP CPR agenda depends also on BCPR capacity to build strong collaboration with the Regional Bureaus, in the context of UNDP regionalization, with the Bureau for the Development of Policy, the repository of UNDP substantive knowledge and policy work, and with other management and operational Bureaus (e.g. Bureau for Partnership, Bureau of Management, Evaluation Office, etc.).

- The development of a tiered system of support based on local demand, needs assessment, UNDP Country Office capacity, and BCPR's capacity to deliver services.[11] This has also involved the development of Strategic Partnership Frameworks (SPFs) with Regional Bureaus and key countries aimed at basing support on strategy and making that support more predictable;

- The development of fast track procedures with the aim of accelerating project approval, staff deployment, and release of funding;

- The development and management of the SURGE Initiative in 2007, with the aim of improving UNDP's immediate response in crisis situations through strengthening country office operational capacities;

- The development and roll-out of Early Recovery policies and guidelines, the related increase of UNDP capacities to respond to immediate post-crisis situations and to start filling the critical humanitarian and development gap;

- More effective interaction with the humanitarian community, through the active participation in the inter-agency humanitarian cluster system;

- Significant policy and programme achievements and contributions to the development and roll-out of international standards and conventions in the areas of rule of law, small arms control and cluster munitions, state and peacebuilding, and disaster risk reduction, among others; and

- A range of successful, collaborative interventions in key countries[12] – often in partnership with DPKO, DPA and the Framework Team, among others – and that involved work in pre-conflict, actual conflict, and post-conflict settings.

As part of the broader UN system,[13] BCPR has developed stronger partnerships and clearer collaborative frameworks including: supporting UN senior leadership in country; joint strategy and planning; fund raising and management; and developing and consolidating good practices for the deployment of critical capacities to the field.

BCPR has engaged actively with recently created mechanisms for enhanced UN coordination and harmonization, as later sections discuss. UNDP and BCPR collaboration with the World Bank[14] also has been strengthened significantly during the past few years (e.g. work on Post Conflict and Post Disaster Needs Assessments – PCNAs and PDNAs – and alignment of planning processes and operations in some post-crisis contexts.

With respect to the external context and changing CPR challenges, an increasing number of emerging agendas may be relevant for repositioning BCPR capacities and ensuring BCPR is equipped to anticipate and respond effectively to future CPR trends.[15] These emerging agendas include: climate change, including climate change impacts on crisis; conflict prevention, including management/prevention of criminalized conflict and armed violence; peacebuilding, state-building and post-crisis governance, (particularly in relation to broader justice and security agendas); and recovery.

BCPR is already engaged in most of these areas through both its policy and practice, and in some instances, it is contributing to shaping the international agenda (armed violence and the Geneva Declaration) as well as, exploring innovations and cutting edge issues (e.g. state and peacebuilding

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[11] Tier 1 countries will be countries where several thematic or substantive elements of CPR programming will be supported in a strategic, coherent and coordinated fashion; Tier 2 countries will be where BCPR works proactively on some targeted prevention and/or recovery issues, and where there are on-going projects that require monitoring and follow-up support; and Tier 3 countries will be where BCPR receives and considers unsolicited proposals, and/or countries on the CPR watch list.

[12] For example, there have been successful collaborative efforts in Ecuador (NBZ), Fiji, Ghana, and Nepal.

[13] BCPR, with other parts of the UN, has to ensure better coordination and harmonization of interventions, with specific focus on improving prevention and recovery work, ensuring smooth transitions from humanitarian aid to development, and enhancing effectiveness of support to complex field operations that require the involvement of several UN actors.

[14] Given the World Bank's increasing engagement with the state fragility and state and peace building agenda and the availability of funding, through the recently created World Bank State and Peace Building Fund, there are now increased prospects for effective partnerships with the World Bank in the areas of : [need to name the area/areas)

[15] As discussed later, BCPR needs to balance this broad array of potential action agendas against the need to prioritize and focus resources accordingly.

through OECD/DAC, community security). The level of engagement, however, needs to be increased and become more systematic, strategic, reality-based, and responsive to identified country needs. In order for BCPR's engagement to be even more effective, improved prioritization, enhanced strategic planning and timely alignment of resources to emerging challenges will be required.

Exhibit 3: Emerging Agendas

Consultations with key interlocutors as part of the Strategic Review "flagged" four emerging agendas where BCPR could add value. These are briefly described below.

The Impact of climate change on crisis: There is now broad agreement that significant climate changes are occurring that will be felt through 2100 and beyond.[1] Although the broad impact of climate change can be forecasted, there are limitations to understanding likely sub-regional impacts – particularly in countries where data reliability is poor, and collection on climate change is not systematic. Broad security-related impacts that are likely to be seen have been documented extensively – but projections at sub-national levels and the formulation of operational preventive strategies remain limited. Key trends related to climate change that require attention are: the steeply rising number of disasters and economic losses globally; the rise in demand for DRR but especially prevention; growing international efforts to promote a more systemic and comprehensive disaster reduction agenda and support system e.g. through the ISDR; the rise of climate change to the top of the international agenda, accompanied by a growing recognition of risk management as a key vehicle for both disaster reduction and climate change adaptation

Criminalized conflict and armed violence: In simplistic terms, criminalized conflict refers to situations where the greed and grievance drivers of violence co-exist and reinforce each other, and where the political economy of violence perpetuates and entrenches conflict. Beyond criminalized conflict are situations of significant criminalized violence – termed - by the OECD/DAC among others - as "armed violence" situations, where armed violence is defined as "the use or threatened use of weapons to inflict injury, death, or psychosocial harm which undermines development"[1] and characterized by the widespread availability of small arms. Although armed violence is recognized as an emerging threat, most research on the topic remains descriptive and analytical at a "big picture" level – but provides few pointers on how to deal with these situations in practice.

State-building and the security agenda: The OECD/DAC defines state-building as "action to develop the capacity, institutions and legitimacy of the state in relation to an effective political process for negotiating the mutual demands between state and societal groups."[1] In current literature emphasis is placed on the notion that building peaceful states and societies needs to be *central* to donor responses in conflict-affected and fragile states. Attention to security in state-building work has focused on state survival - as well as, addressing armed violence situations, functioning security institutions, and civilian control over the military. Currently in the periphery of this work, but emerging more pointedly from several country experiences, is the need to address radicalization and its links to extremism and terrorism. The number of conflict situations where terrorism is used as a weapon of war is growing – partly due to asymmetries in power, as well as to deliberate strategies by extremist groups. This poses an important challenge to organizations such as BCPR – and to the conflict prevention community more broadly -- specifically regarding whether or not to address this phenomenon.

Peacebuilding and post-conflict recovery: Post-conflict societies face a range of challenges: importantly among them: economic recovery and reducing the risk of a recurring conflict. Whereas aid and reforms are often critical contributors to economic recovery, risk reduction is far trickier. Indeed, research shows that nearly half of all civil wars follow from post-conflict relapses.[1] Risk reduction of recurring conflict has proved elusive. "Ad hoc-ism" in responses, limited consideration of sustainability in responses, and "stove-piped" measures are some of the programmatic reasons why this failure occurs. Beyond these are a range of contradictory political and security agendas that undermine current efforts. Although not a new issue, it is one that requires urgent attention.

Key Findings

The Review Team finds that BCPR high-level mission is clear and well aligned with UNDP and UN CPR priorities. It also finds, however, that continuous efforts are required to translate the mission into concrete CPR outcomes on the ground. The review recognizes that this means more successful mainstreaming of CPR across UNDP and more effective BCPR, as UNDP CPR leader, contribution to improved joint UN interventions in the field.

In order for this to happen the Review Team finds that a number of inter-dependent steps are required. These include: strengthened analytical capacity and a more rigorous and systematic exercise of prioritization (e.g. country and thematic); streamlined strategic planning processes that align capacities and resources to identified priorities and ensure a better coordinated effort with the rest of UNDP and with the UN system; an assessment and re-definition of BCPR comparative advantages in the evolving CPR environment and re-orientation of resources to address CPR trends; and selected strategic partnerships that maximize BCPR comparative advantages in the context of the evolving CPR environment.

Mission relevance

BCPR's high-level mission is clear and well aligned with UNDP and UN strategic priorities. The specific focus on three key areas of conflict prevention, disaster risk reduction and post-crisis recovery, which is also clearly articulated in the BCPR Hope Agenda, is appropriate, and responds to the increasing demands emerging from both within and outside of the UN system, including demands from regional organizations and donors, and from national governments. BCPR's CPR mission and its work help fill an important policy and practice gap within UNDP, and help implement broader UN commitments regarding CPR.

However, Interviews and field visits suggest that BCPR's mission and key policy areas, although clear at the high level, are not always coherently and strategically articulated at the programmatic level and/or aligned with UNCT country strategies (UNDAFs), and UNDP country programming instruments (CPAPs). Special attention also needs to be given to coherence with the Integrated Strategic Frameworks (ISFs) now being developed in all UN mission countries.[16] Several comments during field visits highlighted that *"BCPR mission and projects are good, but it is difficult to see how they contribute to changing the bigger picture, how they contribute to addressing the core causes of conflict, or how they help strengthen local capacities for crisis management."* The nine BCPR strategic outcomes for prevention and recovery are all important but, by themselves, do not provide a comprehensive approach to CPR, particularly if internal and external strategic planning processes (for instance Strategic Partnership Frameworks or Integrated Mission Frameworks) do not fully provide a comprehensive policy and programmatic framework and/or clear prioritization.

That said, the review's findings suggest that, while coherence in strategy is often possible in "predictable" CPR settings, and in improving many BCPR supported operations, disjointed activities often result as BCPR seeks to respond to "unpredictable" CPR situations, where immediate action is required to address gaps and complement other initiatives.

While aware of these limitations, the review team believes that improved CPR work requires a clear articulation of the high level mission into actionable, coherent, and strategic country level interventions, whenever possible, if sustained impact and change are to be achieved.

Prioritization

As mentioned above, during the time that has passed since the last BCPR review there has been increased emphasis on prioritization and strategic planning, including increased cooperation with UNDP Regional Bureaus, and other UN actors. In some instances, this has led to more strategic and effective support. A system for ranking countries has been introduced and has led to the identification of Tier I, II

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[16] The purpose of an ISF is to: (i) bring together the UN Mission and the UNCT's combined mandates and resources around an overarching framework of agreed peace consolidation priorities; (ii) prioritize and sequence agreed elements; (iii) facilitate an appropriate shift in priorities and/or resources; and (iv) allow for regular stocktaking by senior managers. An ISF is meant to remain at the strategic level.

and II countries and, to some extent, to the reallocation of resources (staff time, technical, financial) accordingly. (See footnote 11 above.) However, as highlighted by BCPR staff in New York, Geneva and most of the field locations visited, prioritization and targeting criteria – particularly at the country-level – are not consistently understood and/or uniformly applied. In addition, when priorities *are* identified, planning processes do not always align interventions, capacities, and funding to these priorities or to country demands. This was a consistent finding across the full range of interviewees, countries visited, and documents examined.

In conclusion, it still remains unclear how priorities and needs for CPR countries are identified, discussed, and agreed (within BCPR and across UNDP, in particular with Regional Bureaus), and how BCPR and its strategic plans are aligned to respond. In particular:

- Criteria to determine priority countries remain unclear – particularly at top level. The big picture decision-making regarding what countries (and which regions within countries) and what issues to prioritize is not systematic, and needs to be supported by a better evidence base.
- The processes to identify key interventions in priority countries need to be further sharpened – both for "unpredictable", and "predictable", CPR situations.[17] At present, single decisions and actions, sometimes do not seem to be guided primarily by country requests, despite the existence of a broader strategic agreement. This results in missions and interventions that appear, in some circumstances, to be driven by BCPR individual/team initiative, a classic "supply-driven" approach to intervention.
- The process for screening country demands, and how they are processed by BCPR, particularly in the decision-making related to funding sometimes seems to not follow consistent allocation logic. In addition, the basis for explaining and justifying why some countries get higher funding levels, while other countries receive lower levels of funding also need to be made clearer, more transparent and better rationalized.

While the review team recognizes the constraints of using rigid prioritization criteria given BCPR's often evolving operating environment,[18] in particular the need for BCPR to remain responsive to country demands and engage effectively in crisis response, it also believes that progress in this area is needed to ensure a good allocation and use of resources and to be able to produce results on the ground, especially in a context of limited resources availability and increased demands for impact. This will require an assessment and revision of existing prioritization criteria (e.g. effectiveness and impact) and an agreement on and commitment to use.

The review team also recognizes that agreeing on priority countries and themes is not sufficient to ensure focus and effectiveness. Evidence-based, outcome oriented strategies need to guide coherence and performance in CPR interventions. For instance, to the extent that Regional Bureaus or Country Offices take the lead in the preparation of such strategies, BCPR should focus on ensuring appropriate integration of CPR outcomes through execution of those strategies (see following section).

Strategic planning

BCPR is involved in an increasing number of headquarters level and country focused strategic planning processes. These include: i) UNDP corporate plans; ii) UNDP regional and country plans (e.g. with Regional Bureaus, country level planning processes); iii) Bureau specific internal processes (e.g. yearly strategic planning); iv) country focused strategic planning (e.g. Strategic Partnership Frameworks); v) and processes related to UN harmonization in particular at country level (UNDAFs, Integrated Strategic Frameworks). Some of these processes support the mainstreaming of CPR across UNDP, some aim to improve the focus and predictability of BCPR country support, and others aim to enhance the effectiveness of the UN CPR system and outcomes on the ground. This section and the related

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[17] In the context of BCPR policy and programme work, predictable situations include: contexts where consistent and predictable crisis trends can be observed over a period of time, and therefore, for which preventive approaches and/or medium terms strategies can be designed. Unpredictable contexts are those that cannot be anticipated, and which normally require fast and flexible responses.

[18] The team also recognizes that BCPR might have to negotiate these criteria within UNDP and with other key partners.

recommendation focus specifically on the planning processes aimed to promote coherence and effectiveness of BCPR and joint UN support to country operations and CPR outcomes on the one hand, and to accelerate CPR mainstreaming across UNDP on the other.

The key processes explored by the Review Team include the Strategic Partnerships with the Regional Bureaus, UNDP Country Programme Documents and Action Plans (CPAP), UNDAFs, Strategic Partnerships Frameworks, and Integrated Strategic Frameworks. Some of these processes are, to a large extent, beyond BCPR control and are difficult to assess in terms of BCPR capacities to ensure effective integration of CPR outcomes (e.g. Regional Bureaus strategies, CPAP, UNDAFs). Some are still in an early stage of development and, therefore, only a preliminary assessment of their usefulness and complementarity with other processes is possible. Others are more directly under BCPR control, but depend to a great extent on the capacities and commitment of country offices and on the availability of over-stretched BCPR capacities (SPFs).

The Review finds that all of the above are complex and, in most instances, lengthy exercises, which require substantive investments of BCPR and other organizations' resources, a fine balance of technical inputs and influencing efforts, and in-country presence. Furthermore, in addition to the need to engage in different countries at the same time, at times several of these processes are on going over a brief period of time in a single country. The review also noted that the introduction of new joint planning tools, like SPFs between BCPR and country offices and ISFs in mission countries, has not led to the mainstreaming or elimination of existing ones, and that established joint planning frameworks have not systematically taken full advantage of available CPR expertise, including from BCPR (e.g. UNDAFs).

This suggests the need for BCPR to: i) assess and identify which planning processes and tools are "essential" for enhanced CPR country level capacity, effectiveness, and outcomes and therefore require the Bureau priority involvement, and which ones require a lighter touch; ii) what kind of engagement is required by these processes; iii) where planning process and tools are complementary and where they are overlapping; iv) which processes can be streamlined or eliminated, and where the involvement of BCPR can be reduced. The review findings also suggest the need to assess whether the resource/time intensity associated with some of these processes and the finalization and use of the tools is appropriate to BCPR operating environment, both in a prevention and recovery and in crisis situations (where the need for speed, flexibility, and agility is great).

Strategic Partnership Frameworks: Among the mentioned processes and tools, Strategic Partnership Frameworks deserve particular attention in that they were set up specifically to improve BCPR effectiveness and predictability of country support through better planning and alignment of technical and financial resources to existing country plans and CPR needs and outcomes. SPFs thus have the potential to contribute both to the mainstreaming of CPR capacities in country offices, and to improve BCPR direct support. Most SPFs are relatively new and feed-back on their effectiveness and on whether they are "strategic" or rather operational tools is mixed. A review of available documentation and comments from several BCPR staff and concerned country offices, however, suggest that they are a step in the right direction. On the one hand SPFs appear as having increased predictability and consistency of BCPR support, a critical concern of country offices. On the other hand, they have, in some instances, brought BCPR engagement to a higher level, including by operationalizing CPR commitments outlined in other country strategies (e.g. CPAP or UNDAFs). Factors that are likely to reduce their relevance and effectiveness include the length of the process (e.g. up to 9 months, more in some instances, to design a SPF), the intensity of the engagement required to finalize a SPF, the lack of prioritization resulting from the exercise, and the non-alignment of resources allocated to the real country needs.

Evidence on whether SPFs contribute to mainstream and increase CPR capacities in country offices and/or feed into standard planning tools, and how they complement harmonized UN planning processes at country level is scarce.

Considerations related to the evolving UN harmonization agenda suggest that whereas SPFs could possibly remain relevant for BCPR and the concerned country office, particularly in the context of longer term prevention and recovery efforts, they should mainly be pursued in the following two situations: i) where existing joint UN planning processes and tools, in particular UNDAFs (and ISFs), are unlikely to

integrate CPR concerns (or to integrate them at an adequate strategic and operational level); ii) where the country and the UNDP country office context suggests the need for a highly predicable BCPR engagement.

The following tables show the status of existing SPFs and a summary of internally generated lessons learned on SPFs in Sudan and Somalia, the first ones to be developed.

Region	Country	SPF Status	Amount	Duration	Expenditures
Africa	Uganda	Final Stages	$9.5 M	2010 -2012	N/A
	DRC	Approved August 09	$ 24 M	2009 -2012	$6.6 M
	Sierra Leone	Final Stages	$20 M	2010 -2012	N/A
Arab States	Sudan	Approved, June 07	$ 17 M	2007-2009	$ 9.8 M
	Sudan (Phase II)	Final Stages	*TBD*	2010-2011	N/A
	Somalia	Approved, June 07	$ 8.6	2007-2009	$5.1 M
	Somalia (Phase II)	Under development	*TBD*	2010-2011	N/A
	PAPP	Approved Sep. 09	$ 9 M	2009-2012	$1.9M
Asia	Nepal	Approved, Oct. 2009	$ 14.7 M	2009-2012	$ 400k
	Sri Lanka	Approved, July 2008	$ 20 M	2008-2010	$2.3 M
	PNG	Approved, Dec. 2008	$ 5 M	2008-2012	$0.5 M
LAC	Colombia	Approved Sep. 09	$ 7.8 M	2009-2012	$ 140 k
	Haiti	Final Stages	*TBD*	2010-2012	N/A
ECIS	Tajikistan	Final Stages	$ 5 M	2009-2012	$ 300k

Table: Status of existing Strategic Partnership Frameworks

Table: Strategic Partnership Frameworks - Lessons from Somalia and Sudan

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SPF: LESSONS FROM SOMALIA AND SUDAN

SPFs ADVANTAGES

1   SPFs **enhanced the coherence, effectiveness, and efficiency of CPR programming** at the country level.
2   They provided **predictable technical assistance and funding** and helped to **leverage additional resources**. This enabled **strategic engagement and relationships with Government, donors** and other partners.
3   SPF support enabled **building sustainable CPR capacities** and **mainstreaming CPR** in the COs.
4   SPF support was instrumental for **establishing stronger local presence**, and **enhancing the operational capacity** of the CO to deliver CPR programmes.
5   (Sudan) SPF support and technical assistance helped shaping and **influencing the new Country Programme Document (CPD) and Action Plan (CPAP)**, in which CPR priorities figure strongly.
6   (Somalia) SPF provided **predictable and catalytic seed-funding** for the CO.

AREAS REQUIRING ENHANCEMENT

1   The **CO's responsibility** for monitoring & evaluation, collating lessons & experiences, their obligations towards resource mobilization, and timely reporting on BCPR-funded projects, were not clearly articulated.
2   **Management arrangements, monitoring, and reporting** were not always respected**.**
3   **SPFs became more of an operational document**, driven by the pressure to deliver as originally formulated.
4   Little added-value of the SPF **in speeding-up the funding approval and allocation process**.
5   COs found it counter-productive that despite BCPR technical involvement in developing projects, **additional and/or contradictory comments were received during the pre-BPAC** technical clearance process.
6   COs noted a **tendency for all teams to insist on "their area"** to be covered in all project documents.
7   (Somalia) The design of the **SPF did not adequately take into account the CO operational capacities** and ability to deliver CPR programmes.
8   The **SPF did not result in significant inter-linkages and operational synergies** between the different CPR programmes in the field.
9   SPFs did not enable **COs to systematically incorporate gender issues** across the country programme.

Strategic Partnerships with Regional Bureaus: Strategic partnerships with Regional Bureaus have the potential to increase UNDP alignment and to harmonize and maximize the allocation and use of resources in support to country offices in crisis contexts. They also present a good opportunity to enhance the mainstreaming of CPR concerns across UNDP. Here again, a key issue is to determine whether such partnerships (and the related planning processes) are (a) strategic, e.g. set high level objectives for country support and collaboration and can demonstrate a clear "added value" or (b) operational. Whereas the case for the first is strong, attempts to operationalize such agreements overlap with and overburden existing country level planning processes, particularly given the heavy and at times difficult process involved in the negotiation of joint efforts.

Involvement in country level planning processes: The case for BCPR more active and more effective engagement with country level strategic planning processes, UNDP specific processes and in the context of UN harmonization, is strong. Currently, involvement in CPAP on the one hand and in UNDAFs and in ISFs on the other has not been consistent and it is difficult to assess to what extent it has contributed to the mainstreaming of CPR at country level and to the integration of CPR objectives in planning tools and of related outcomes.

The Review findings suggest that in order to increase CPR mainstreaming across UNDP, specifically at country level, and to improve the effectiveness of UN Country Teams efforts on CPR, the Bureau needs to engage more effectively (e.g. allocate the right amount and level of resources and expertise) with country level processes, in particular UNDAFs and ISFs.

Whereas existing BCPR capacities and limited in-country presence are an obvious constraint, more focus and prioritization (see previous section) should be applied also in decisions on where and which processes to engage and how to harmonize other existing planning process and tools to existing country level ones (e.g. SPFs could focus on the operationalization of the higher level, strategic UNDAF and ISF goals).

To conclude, this analysis suggests the need to:

- Assess and, as appropriate, streamline country level planning processes and apply a selective approach to where such strategies as Strategic Partnership Frameworks should be developed. This will include, for instance, avoid initiating Strategic Partnership Frameworks where effective engagement with country level processes, in particular UNDAFs, suggests that CPR outcomes (and BCPR contribution) are adequately articulated.

- Avoid redundant processes and allocate increasing resources to joint UN planning tools in crisis contexts, in particular Integrated Strategic Partnerships, and promote the integration of CPR objectives and outcomes in UNDAFs.

- Articulate a clear strategy and capacity to leverage and influence, where and as possible, existing planning processes, in particular partnerships with Regional Bureaus and UNDP country programme processes, and UN and other key partners joint planning efforts (e.g. CCA-UNDAF, and ISFs in mission countries, and Common Assistance Frameworks developed by UN, World Bank and donors).

Analysis and knowledge generation

For BCPR to be more focused, more strategic, as suggested earlier, and better prepared to address existing and emerging CPR trends (see later sections) a consistent availability of high quality analysis and knowledge (a dedicated analytical function and knowledge generation and sharing system), and a mechanism that ensures that the analysis and knowledge produced inform the decision-making process are critical (e.g. including key decisions on where BCPR added value is in the changing CPR context, what BCPR should and should not do, and how it should position itself in the context of UNDP and broader UN operations). This, despite the strong analytical capacity and expertise across the organization, currently seems to be missing. Also, the current roles and responsibilities of POSC, TASC, and CSPC, or the way they are fulfilled, has not yet consistently provided effective opportunities for aligning policy and country priorities to strategies and technical interventions, and to resources (e.g. POSC country planning process has so far been delinked from TASC planning, analytical capacities are

currently spread across CSPC and TASC, and knowledge management in POSC, Country Review meetings are not institutionalized, etc.). Overstretched staff and lack of key capacities (e.g. there is only one M&E advisor in CSPC) and, in some instances, flaws in business processes and systems, also negatively affect planning effectiveness.

This area requires urgent attention if BCPR is to improve significantly its impact in countries, and capitalize on the progress achieved in the past few years, and increase competencies in its three functional areas and address new opportunities for more integrated UN country operations.

Positioning in the evolving CPR environment

Ensuring that BCPR remains a relevant actor in an increasingly crowded CPR context will require a clear articulation of BCPR comparative advantages and of its added value (e.g. in promoting CPR mainstreaming across UNDP, in contributing to more harmonized and effective UN CPR work on the ground, and its specific areas of expertise and capacities), and a clear view of what strategic partnerships are necessary to maximize BCPR work and impact.

While BCPR's added value as the CPR practice leader of UNDP is unquestionable, its role and positioning within UNDP itself, within the broader UN, and in the context of an evolving vision for CPR work requires greater clarity, and a clearer and stronger joint UNDP/BCPR CPR alignment and message.

On the one hand, BCPR needs to better align its core policies and capacities with the core agenda of the rest of UNDP, in particular with the Bureau for Policy Development around governance, climate change, poverty, and gender areas, and with Regional Bureaus around targeted country support. This will require stronger partnerships, better capacities and resources alignment for collaboration both at the policy level, and in a joint effort to translate policies into effective support to Country Offices (as mentioned earlier). It will also require a clear assessment and articulation by BCPR of the specific added value that its CPR policy, technical and operation expertise and capacity can contribute to the individual UNDP practice areas.

On the other hand, new emphasis on UN coordination and harmonization and on the commitment to more effective support to senior leadership in country, in particular Resident Coordinators, has led to the creation or strengthening of mechanisms for joint decision-making, planning, shared funding, and operations, all of which have implications for BCPR's mission and ways of working, and also put pressure on the Bureau to show its added value in an increasingly crowded system.[19]

The previous and current BCPR leadership have invested in inter-agency collaboration by establishing, among others, strong relationships, in some instances formalized through MOUs,[20] with key UN partners and by promoting BCPR participation in key decision-making forums. BCPR now needs to ensure that it clearly articulates, in a vision and strategy for resources alignment, what it can contribute to the improved effectiveness of UN CPR response through a more harmonized system, and better define what kind of internal UN and external partnerships are essential in this context.

Partnership and collaboration with the Development Operations Coordination Office (DOCO), for instance, is becoming increasingly important for BCPR to ensure that, as UNDP CPR lead, it is involved in and contributes effectively to more harmonized UN processes, in particular to better coordinated field support (through the RC system) and harmonized funding mechanisms. In the context of an evolving role for DOCO in crisis contexts and of a stronger partnership between the Office and the Bureau, BCPR needs to ensure its critical role as UNDP CPR policy, technical, and operational bureau with extensive country presence is clear, as much as DOCO role as a coordination office needs to be clear, accepted, and supported. There are two areas where close collaboration between BCPR and DOCO is required are where BCPR needs to ensure active engagement: (1) the Director-level deployment Steering Committee, co-chaired by both,[21]

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[19] Some of the mechanisms were set up in response to the SG Report on peacebuilding in the immediate aftermath of conflict. Some created earlier (PBC, PBO, inter-agency cluster system) are now consolidating.
[20] An MOU with DPKO is already finalized; one with DPA is in the process.
[21] With relevant agency and department representatives on a case-by-case basis and the concerned RCs and RC Offices, the Steering Committee is mandated to review country-specific longer-term deployment plans and staffing requirements.

and (2) the Country Coordination Fund.[22]   As DOCO will continue to be reviewed, and its potential role for strengthening UN coordination and effectiveness in crisis contexts will increase, it is important for BCPR to continue to articulate clearly the added value it brings to the table, as earlier outlined.

In addition to improved internal UNDP collaboration and to continued coordination with DOCO, BCPR needs to continue to build policy oriented and operational partnerships with key UN departments and bodies, and with other key players. BCPR currently engages in a variety of coordination, harmonization and partnership meetings, in New York, Geneva and in the field, with a significant commitment of resources, and, in some instances unclear outcomes.

Given the amount of time and resources invested in building some of these partnerships, it will be important for BCPR to start assessing their added value in terms of their contribution to BCPR capacity to support to COs, enhance CPR response on the ground, and improve UN CPR harmonization. An assessment of existing partnerships was not within the scope of this review, and seems premature, given that most of them are fairly recent or "work in progress" and that evidence on their effectiveness is rather anecdotal, or otherwise unavailable. However, based on the review team's understanding of the evolving CPR environment and agenda and on interviews with BCPR staff and UN partners, the review identified as critical UN partners that require increasing level of engagement the Peace Building Commission and Peace Building Support Office, DPKO, and DPA. The World Bank, with the newly created State and Peace Building Fund is establishing itself as an important player in CPR and an increasingly relevant partner for BCPR. The European Commission remains an important donor with significant policy and funding leverage and operations in key crisis contexts. Engagement with humanitarian agencies, including through the interagency cluster system, requires careful assessment.

On the operational side, and focusing on countries, in particular in UN mission countries, BCPR's capacity to ensure it contributes effectively to a better coordinated and harmonized UN response, by providing the right capacities, at the right level, and the right time is critical. The need for BCPR involvement in the key strategic country level processes has been highlighted earlier. This must be accompanied by decisions that are, delicate at times, concerning required action for the fast and effective deployment of required technical and financial resources where they are most needed (e.g. increased support to the RC system, versus increased support to existing COs initiatives). The significant achievements in rolling out the early recovery policy and ensuring fast presence on the ground, the timely disaster risk reduction work particularly in Asia, and the high level expertise provided by BCPR in several conflict related areas show BCPR capacities and its added value.

Other elements of a BCPR "value-added package," which BCPR needs to better articulate, include its outreach through the UNDP network;[23] its capacity to work at the policy, operational, and programme level; to bridge preventive and responsive work; BCPR's access to technical and financial resources; and its relatively (and increasingly) fast and flexible response mechanisms (e.g. fast track initiative, surge capacity).

Peacebuilding: In regard to specific policy and technical areas, BCPR has demonstrated strong, and in some instances, unique, policy and technical expertise and capacity, including programmatic and operational capacity in some of the key sectors identified as priority for peacebuilding by the UN system and its partners as highlighted in the Secretary-General's Report on Peacebuilding in the Immediate Aftermath of a Conflict (June 2009). The table below summarizes some key BCPR/UNDP advantages.

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[22] This fund is managed by DOCO for the deployment of core capacities to the RC office in 20 priority crisis and post-crisis countries.
[23] This includes UNDP geographical reach, the presence of country multi-disciplinary country teams, the time horizon of UNDP presence in country, and the strong relationship with the host country and a range of government and non-government actors in country. These features are common with very few UN agencies, UNICEF being perhaps the only one with similar outreach and capacities (although in a more limited field).

Table: BCPR expertise and added value in key peacebuilding sectors

Key peacebuilding sectors	BCPR expertise and added value
Support to basic safety and security, including mine action, protection of civilians, disarmament, demobilization and reintegration, strengthening the rule of law and initiation of security sector reform	BCPR has dedicated and highly competent technical teams who combine a mix of policy and practical experience and have demonstrated capacity to lead, innovate, and build strong partnerships in most of these areas, at the same time as implementing country level initiatives. This include the highly effective lead in the process of design and agreement of international conventions, innovative work on community security, on armed violence reduction, the rolling out of the Rule of Law Policy and related country support, and the significant support to DDR, an area that has seen consistent and extensive UNDP involvement. BCPR efforts have been highly influential in informing and shaping international agendas (through OECD-DAC, among Others). Key partnerships BCPR was able to consolidate in this area include with DPKO and the various branches of the humanitarian community.
Support to political processes, including electoral processes, promoting inclusive dialogue and reconciliation, and developing conflict-management capacity at national and sub national levels	BCPR expertise and added value in this area, on the one hand, needs to be explored in the context of improved mainstreaming of CPR within the core areas of UNDP intervention, in particular governance and capacity building and on its capacity to leverage UNDP country presence (impact still unclear). On the other hand, BCPR has been leading within and outside of UNDP on initiatives focused on promoting social cohesion, local level inclusive dialogue and reconciliation, including through support to civil society in the context of fragile political transitions. This appears as being a critical area where BCPR added value could be further developed BCPR policy work on state building (or support to governance in transitional contexts) has been highly influential in shaping international agendas, including through the OECD DAC. The Bureau's high quality expertise and practical experience in this area suggest that BCPR added value is to be maximized and should be supported at the corporate level, also in view of ensuring the capacity to translate existing policies into operations on the ground. Key partnerships that are being consolidating in this area include internal agreements with the Bureau for the development of Policy and DPA.
Support to the provision of basic services, such as water and sanitation, health and primary education, and support to the safe and sustainable return and reintegration of internally displaced persons and refugees	These are traditional areas of UNDP work. BCPR lead on early recovery, has contributed on enhancing UNDP and UN capacity of response in the immediate post-crisis context (in the case of BCPR work, both in post-conflict and post-disaster). BCPR is directly involved in critical areas for recovery such as livelihoods and reintegration of IDPs. By contributing technical inputs into post conflict and post-disaster needs assessments and follow up operational frameworks, BCPR also contributes to informed UN interventions, beyond its direct involvement.

Support to restoring core government functions, in particular basic public administration and public finance, at the national and sub national levels	Same comments as for support to political processes: a clear area where UNDP/BCPR have added value and should better harmonize, coordinate and concentrate resources; a clear role for BCPR as UNDP CPR lead in providing technical and programmatic inputs.
Support to economic revitalization, including employment generation and livelihoods (in agriculture and public works) particularly for youth and demobilized former combatants, as well as rehabilitation of basic infrastructure	UNDP/BCPR has been mandated by the Inter-Agency Standing Committee to lead on early recovery, under which these areas currently fall. The setting up of an early recovery team and the rolling out of an early recovery policy, and the establishment of partnership with the International Labor Organization, also aim to BCPR role and increased involvement in this sector. To what extent BCPR has comparative advantages/added value on such issues as economic revitalization and livelihood is unclear, as it is unclear to what extent it can integrate recovery activities under its conflict prevention and disaster risk reduction technical areas (a recommendation of this review).

Climate Change: As the leading global organization in the fight against poverty, UNDP is responding on the front lines of climate change – focusing on priority adaptation and mitigation issues. The main focal point for these efforts is the Climate Change Team within the Environment and Energy Group in BDP. However, climate change issues interact with both disaster risk reduction and conflict prevention dimensions of BCPR's work and BCPR needs to develop a clear and comprehensive approach that allows BCPR to have a coordinated high level of impact in the CPR aspects of climate change.

While a comprehensive approach is being put in place, the DRT has proposed an effort to mainstream climate risk management within BCPR. The proposed framework builds on the intersections of conflict and disaster issues with climate change adaptation and mitigation; three areas of interaction have been identified:

- Climate risk management (the intersection of climate change adaptation and disaster reduction)
- Environment risk management (the intersection of mitigation and disaster reduction)
- Climate related security issues (the intersection of conflict and climate change adaptation and mitigation initiatives)

In addition, there may be climate change issues that intersect with integrated conflict and disaster CPR efforts.

The Review Team agrees that the above framework provides a good point of departure for developing a comprehensive and integrated CPR approach to climate change issues. This needs to be a priority activity across that involves all aspects of BCPR.

Alignment with emerging trends

BCPR policy areas and practice must be continuously re-assessed and up-dated to ensure alignment with a changing global environment, and to the increasing complexity of challenges in some client countries.

While BCPR is not required to be a policy lead in each and every CPR related area. However, being able to have an up-to-date understanding of key trends, of BCPR's potential added value, and of its need for repositioning within the internal UN and external CPR environment is important.

The review findings suggest the following areas where BCPR needs to ensure it combines the latest thinking with an effective capacity to translate the thinking and the policies into country-level strategies and interventions:

- *Crisis prevention as an integrated offering* - Although responding to crises is a critical function of BCPR, current responses sometimes do not appear to be coherent and strategic. Several relevant policies and interventions in countries (e.g. rule of law, armed violence reduction, etc.) often do not collectively add up and comprise a clear integrated strategy, and a clear articulation of BCPR's contribution to the crisis prevention agenda.
- *Peacebuilding, including critical governance interventions in the context of transitional and post-crisis governance contexts[24]* - Policies and current practice, although aligned with current international good practice, has not, so far, translated into concrete strategies and operations that are adapted and/or grounded in the reality of crisis country contexts. Weak alignment with UNDP capacities in related areas (governance) further affect BCPR's capacity to have an impact through country operations.
- *Recovery – from the earliest onset of crisis.* Although the Early Recovery Team has spearheaded an impressive range of policy initiatives and activities, and has contributed to enhancing UNDP's capacity to be present in crisis contexts, the area of recovery remains under-served – both in the conflict and disaster fields. UNDP, through its role in the UNDG/ECHA working group on transitions, has an important role to play in supporting the system's work in recovery and transitions. As an operational development agency UNDP also has a key role to play in supporting longer term recovery processes in specific areas of recovery programming, e.g. economic revitalization and livelihoods. Critical support to key recovery activities, however, and effective transition/take over from humanitarian actors in the aftermath of a crisis, are not yet happening to the extent it should and can not only be left to the early recovery phase of the intervention. Conceptually, and in practice, this area requires attention and continued strategic development.
- *Disaster risk reduction.* Much important and well-received work has been carried out by the DRR team – including the deployment to COs of Disaster Risk Advisors. Climate change challenges and trends have been highlighted on page twelve (e.g. exhibit 3.1. on Emerging Agendas). Developing adequate responses to such challenges will require making climate risk management a bureau priority, with strong linkages to other UNDP practices (e.g. Energy and Environment) as well as other DRR and climate partners. With specific regard to support to country offices, a need exists to place more emphasis on three key areas: (a) practical guidelines on how to mainstream DRR at a country level – beyond frameworks and into concrete steps; (b) practical guidelines on risk analysis – how to do it at a CO level; and (c) more work on preparedness for operationalizing the PDNA.
- *Rethinking of the gender mainstreaming approach.* Despite recent emphasis on developing policies and strategies, the lack of evidence of progress on the agenda in some areas suggests the need for a re-thinking of the gender mainstreaming approach within BCPR, including core gender policies (e.g. the Eight Point Agenda). This does not necessarily means that BCPR should try to lead on gender work in CPR (as other agencies might be better positioned to do this), but the Bureau needs to have a clear articulation of what it can do and how to contribute (Exhibit 2.1 attached summarizes the study findings on gender policies and strategies)
- *Other Emerging trends.* There is a set of emerging challenges (e.g. criminalization of conflict, state building and security, climate change-conflict/disaster interface) seen in a range of countries that are not adequately addressed by BCPR. In part, this is due to structural issues (already established teams in key areas – with limited "space" for new teams to be created), as well as insufficient investment in "forward gazing" by BCPR, including partnering with think tanks, thought leaders in academia and others.

Recommendations

The first three recommendations regarding strategy and focus, discussed below, are highly interdependent. They get to the core of what defines BCPR: (i) how it prioritizes what support is provided

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[24] This is in the definition of OECD/DAC, agreed to by all of its members, including major donors, and associated experts, and is the State and Peace Building Agenda, the shaping of which BCPR's contribution has been critical.

in which countries; (ii) how it develops and implements comprehensive country plans, and (iii) how it adds value that builds on BCPR's comparative advantage and well defined linkages with broader UN, as well as, partner actions in the field.

Recommendation No. 1

As a group the BCPR leadership team should, as appropriate, define, refine and consistently apply **criteria for prioritization** of country involvement and targeted areas of expertise.[25] BCPR should develop a system for country prioritization that includes two distinct types of criteria.

Key criteria related to the country context and the likelihood and/or severity of the risk, or of the consequences of a crisis:
  * Combination of natural and man-made hazards, history and likelihood of future conflict and/or relapse into conflict, and climate change-induced high level of stress;
  * Frequency, intensity, and complexity of the natural and/or man-made hazards;
  * Levels of human insecurity (protection and human rights, poverty, food security, vulnerability, basic services);
  * Governance environment; and
  * Local capacity levels (economic, institutional, and infrastructural).

The second set of country-oriented criteria relates to UNDP/BCPR and UN capacity and comparative advantages in contributing to significant change on the ground:
  * Capacity level (human, financial resources) of UNDP Country Offices;
  * Presence of a UN mission;
  * Presence of other major players and funding sources;
  * Existence of critical gaps in international response (e.g. based on issues and capacity gap analysis);
  * BCPR strategic role and demonstrated added value (expertise, funding, strategy facilitation).

In addition, BCPR should develop a system for expertise prioritization that incorporates the following criteria:
  * Identified needs (based on such exercises as peace and conflict analysis, PCNA, PDNA, etc.);
  * Resource-availability and funding (including technical resources through surge capacity);
  * Country office demand and requests from national counterparts;
  * BCPR ability to add value through its technical capabilities (e.g. technical expertise, skill-sets) and develop capacity;
  * BCPR comparative advantage (e.g. capacity to provide multi-disciplinary teams and preventive and recovery assistance);
  * Offers/engagements from other partners; and
  * Value added and complementarities.

Recommendation No. 2

The leadership team needs to implement a **comprehensive approach to planning and driving strategic focus** that provides improved alignment of resources against identified needs and priorities within and outside UNDP/BCPR. This type of improved approach would have to ensure improvements in two areas: (i) strengthen BCPR predictability and accountability, where possible; and (ii) increase the capacity for quick action, flexibility, and responsiveness to emerging needs. Improvements at various levels and in the following areas are necessary:

  a) Strengthened analytical capacity in order to be able to:
     * Produce/contribute to comprehensive CPR country analysis at regular intervals;[26]

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[25] It is acknowledged that any such criteria needs to be negotiated within UNDP and the rest of the UN system, and will have to take account of the prioritization decided by the Director-level "Deployment Steering Committee," among others UN leadership groups.

- Understand and anticipate emerging CPR trends, and re-align vision and strategic outcomes as required and appropriate ;
- Identify, "capture" and provide applicable lessons learned and best practices from both internal (e.g. BCPR and other UNDP Bureaus) and external (e.g. NGO's, analytical and research institutes and academia).

This could happen through the creation of a working group coordinated by CSPC with membership from other teams, or a cross-Bureau unit to include country focal points to ensure availability of country level relevant information, and, standing agreements with leading analytical and research institutes specialized, and organization with relevant experience and insights in the CPR field.

b) A mechanism to bring together analysis, knowledge, and decision-making to allow strategic focus, inform strategic plans, and ensure capacity to respond in a fast and flexible manner as needed.[27] This system will:
- Facilitate a common strategic position on CPR issues needing BCPR support and enable senior leadership decisions, prioritization, and effective strategic planning processes;
- Ensure an optimal alignment of BCPR technical and financial resources against identified needs and priorities (key staff deployment, technical expertise requirements, financial planning and forecasting, etc.);
- Ensure a capacity to develop a comprehensive strategic perspective focused on a desired "bigger picture" orientation and focus as opposed to specific objectives and interventions;
- Produce and provide views and advice on CPR issues to the rest of UNDP, and in the context of inter-agency mechanisms, to a range of other partners.

c) Improved mechanism for cross-UNDP and cross-Bureau collaboration and consultation during strategic planning exercises (through the use of task forces or ongoing planning between units and teams) to:
- Ensure alignment of priorities, capacities, resources;
- Integrate lessons learned and best practices from the field as well as latest advances regarding critical CPR issues

d) Better selected capacities and resources for joint planning within UNDP, and with the rest of the UN system (not only and necessarily technical capacities, but critical skills, and right level of engagement) to:
- Ensure effective involvement in HQ level strategic process;
- Involvement and contribution to UNDP country level processes (e.g. CPD, CPAP), and UN joint planning efforts (e.g. UNDAF, ISFs).[28]

e) Working in collaboration with the rest of UNDP, ensure the integration of risk management considerations into strategic plans, and programmes, particularly for operations in highly unpredictable environments, to allow more risk taking.[29]

f) Streamlined, simplified, and improved planning processes and the elimination of overlapping processes. This process will need to be considered by BCPR and on a case-by-case basis; taking

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[26] While BCPR will have to continue to contribute to analytical efforts with UNDP (with Regional Bureaus, for instance) and UN partners (with DPKO and DPA for instance), it is critical for BCPR to strengthen its own analytical capacity to be able to contribute to such exercise and to ensure it continues to be a relevant player in the CPR field.

[27] This is in line with, but broader than, the ideas contained in the UNDP/BCPR concept note on CPR Country Reviews. It should make best use of existing mechanisms such as the UN Early Warning capacity and Emergency Directors' meetings.

[28] The review team is aware that BCPR participation in some of these processes depends on a request from the leading agency or country office, but as CPR practice lead for UNDP, BCPR has a responsibility to build up its capacity to effectively participate in such processes and "market" its services and added value in this context. The review findings suggest that BCPR involvement in such processes is in high demand, with decreasing interest there were adequate capacities were not provided.

[29] This should be a shared responsibility of UNDP, and of BCPR as the CPR practice lead.

account of the country context and operational environment (mission or non-mission country, emergency, post-emergency, need for predictable plans or fast response strategies, etc.).

Actions required include:

- Selectively identify where SPFs can bring added value. Where SPFs are developed, ensure that the process to design them is fast and responsive to the local context, and that the technical, operation, and financial resources aligned to their implementation are adequate and aligned to the country office needs. In such operating environments as mission countries, where ISFs will become the norm, there is need to assess the development of an SPF (perhaps as a targeted response mechanism to align BCPR support to a wider UN process), but the emphasis needs to be placed on ensuring that tools add significant value not merely add extra work. Similarly, in countries with very limited capacities, or where country planning processes clearly outline CPR priorities, roles and responsibilities, BCPR might consider other ways to provide necessary support;

- Ensure that the introduction of a strategic plan (e.g. SPFs, or alignment with UNDAFs, etc) is preceded by an agreement on a system to reduce unnecessary programme and projects process approval burden;

- Ensure strategic planning documents, including SPFs, country programmes, UNDAFs etc. (those where BCPR was able to contribute significantly) integrate CPR related M&E elements.

Recommendation No. 3

BCPR needs to further develop its strategy for effective alignment with, and contribution to, the **evolving UN CPR architecture**. The strategy should include:

a) An analysis and articulation of the added value BCPR can bring to the various UN coordination and harmonization mechanisms and a vision for BCPR's evolving role in the evolving CPR context. This should include a clear and consistent joint UNDP/BCPR message regarding CPR's role within UNDP and in its interaction with key UN partners. This should be articulated around: BCPR's access to UNDP-wide resources, regional and country networks, and ranges of programmes; through UNDP, BCPR's capacity to link up with national counterparts; BCPR's capacity to mobilize technical and financial resources (e.g. through surge capacity, and seed or catalytic funding); BCPR's mandate and in- house capacity to work on both conflict and natural disaster, and to invest at the earliest stages of recovery to ensure effective transitions from humanitarian efforts to nationally led processes; BCPR's contribution to the development and coordination of the early recovery architecture; and its capacity to act faster and in a more flexible manner than other agencies and departments (e.g. fast track procedures).

b) Selected partnership agreements with key UN partners, and the World Bank, with a clear definition of scope and objectives, operational modalities, roles and responsibilities, and an alignment of resources, in HQ and in the field, to contribute effectively, and at the right level.[30] The investment in partnership building should depend on:
   - Their expected contribution to improved joint strategies, effective support to senior UN country leadership, and delivery of effective joint field support;
   - The maximization of allocation and use of technical and financial resources; and
   - The cost effectiveness of the partnership building process (e.g. time, staff, and resources invested are in justifiable proportion to the expected advantages on the ground)

Under CSPC's leadership, clear roles and responsibilities for partnership building should be assigned within BCPR.

Priority partnerships include those that will enable more coherent and effective delivery of CPR support to the field, maximize leverage of technical and financial resources, that will fill current important gaps in the delivery of CPR support, and that will create opportunities for improved joint

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[30] As mentioned in the findings, the review recognizes that some of these partnerships have already been established.

funding strategies. These include partnerships with DOCO, DPA, DPKO, PBSO, and the World Bank.

Partnerships specifically aligned around funding mechanisms (e.g. Peacebuilding Fund, WB State and Peace Building Trust Fund, INCAF Task Team on Financing in OECD/DAC, the EU Instrument for Stability) are examined in the section on financial sustainability.

c) A re-alignment of resources and strengthening of the mechanisms[31] in support of harmonizing UN field operations (e.g. RC system, joint missions, etc.) and to fulfill subsequent commitments. This involves a careful assessment of the type, level, and amount of resources required (e.g. senior staff versus junior, strategic planning skills versus specific technical expertise, secondment of expertise versus hiring of new in-house staff)

Recommendation No. 4

BCPR needs to strengthen its capacity to understand and anticipate **emerging or evolving CPR trends** and to re-align its vision and strategic outcomes, as appropriate. Key areas for strengthened CPR focus include:

a) Crisis prevention.[32] Improved performance in this area will require a mix of additional technical capacities within the technical teams, a re-allocation of resources from other areas, an effective use of UNDP country resources, and of partnerships across the UN system. Specific actions that BCPR should undertake include:

- Design a coherent package of what crisis prevention services BCPR can offer that articulates under one integrated platform the already on-going work on conflict prevention (e.g. peace building, rule of law, armed violence reduction and community security), and disaster risk reduction;

- Enhance focus on and strengthening capacities in critical dimensions of conflict prevention:
  - *Generating conflict analysis - improving* capacities and resources to conduct or facilitate systematic conflict analysis, and understand and anticipate, complex political crises in priority countries ,and other countries at risk, as possible;
  - *Support peace and development strategies -* Step up capacity and consistently provide support to country offices to develop country level peace and development strategies;
  - *Joint programmes using a conflict lens; develop/implement conflict prevention programmes through UNDP mechanisms, and helping ensure that all UNDP/UN programmes are conflict sensitive. "*Step up" efforts to ensure UNDP regular programmes incorporate the conflict prevention lens, and are conflict sensitive, and re-focus the already on-going initiatives aimed at addressing structural factors of conflict by integrating a specific conflict prevention focus (e.g. poverty, inequality, poor governance);

- Enhance BCPR's disaster risk reduction effectiveness through:
  - Increased focus on building comprehensive, multi-stakeholder, multi-year DRR programs in high risk countries working through Resident Coordinators to assemble the necessary partnerships with UN agencies, International Finance Institutions, the Red Cross/Crescent movement, NGOs and governments;
  - Ensuring that there is sufficient capacity within BCPR and UNDP for DRR, including within the DRT but also in POSC and in country offices in high risk countries.

- Improve mechanisms for CFT and DRT collaboration regarding understanding, anticipating, and designing responses to complex crisis caused by the interface of climate change induced stress and conflict; and

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[31] E.g. surge capacity, coordination, fast resources and funds release, etc.
[32] This includes structural and operational prevention. This recommendation is informed by the preliminary finding of the Conflict Prevention Review, commissioned by the CFT and conducted by Diana Chigas and Peter Woodrow.

- Engage more effectively with UN crisis prevention systems (e.g. emergency director meetings, early warning systems).

b) <u>Peacebuilding</u>. Clearly articulate BCPR strategy and added-value in contributing to peacebuilding efforts through improved support to UNDP country offices, and through an effective use of, and contribution to, the UN and international CPR system, and alignment of resources, including through BCPR's early recovery work. This will require, among others:

- Operationalizing existing policies (e.g. post-crisis state building) into concrete actions in support to country offices (e.g. deployment of adequate technical capacities and resources);
- Strengthening capacities to work on transitional and post crisis governance, including through stronger and better aligned collaboration with the rest of UNDP governance capacity (BDP, regional bureaus, regional centers);
- Clearer articulation of BCPR added value to work on such critical areas as governance of security sector issues, stabilization, including through stronger partnerships and better alignment with other key UN and non-UN actors (e.g. DPKO, DPA, EC and the World Bank.)
- Strong partnership with the PBSO and PBC with clearly articulated roles for BCPR and its expected contribution;
- Stronger support, in collaboration with DOCO and through the deployment of additional critical capacities, to the RC system;
- Improved "seizure" of opportunities offered by early recovery work and their peacebuilding and stabilization potential.

c) <u>Climate Change</u>. BCPR needs to launch an effort to finalize a framework for the Bureau's work as it relates to broader climate change efforts. Such a well articulated, agreed-to framework will have several critical benefits:

- In the absence of such a framework, individual teams will react to climate change issues in an ad hoc basis, which may lead to significant inefficiencies, confusion in the field, a lack of synergies with principal climate change initiatives in other parts of the UN system, and lost opportunities;
- A well designed, integrated framework will reduce potential friction with other important actors in the climate change arena;
- An agreed-to, comprehensive approach will allow more effective allocation of CPR resources to priority climate change initiatives.

The general framework suggested by DRT provides a good starting point (see climate change discussion on page 20 above). The initial framework suggests the BCPR should analyze the CPR intersection with climate change from three perspectives: a) country level programming, b) knowledge management and policy development and c) communications/advocacy in global forums. The effort to finalize this framework needs to involve all aspects of BCPR to ensure a truly integrated, comprehensive and clear set of CPR initiatives around climate change. This effort also needs to clearly delineate the role of BCPR in a way that is accepted and supported by critical lead actors in climate change adaptation and mitigation.

d) <u>Gender</u>. Improving progress on gender in a CPR context will require:

- Better prioritization of the gender agenda and expected outcomes, e.g. identify, on the basis of the 8 point agenda and in alignment with increased focus on emerging agendas, 3 or 4 top priorities for BCPR gender work;
- Better alignment of capacities and resources for gender work against BCPR priority countries, and within each country increased prioritization;
- Clearer articulation of gender objectives and outcomes in country level strategic plans and M&E

- Ensuring an improved BCPR analytical capacity that includes improved resources (or access to) for gender analysis at HQ level and for the provision of such capacity at country level;
- Stipulating agreements within the UN system and establishing new partnerships with specialized gender-focused organizations to support gender/CPR work in areas and situations where BCPR does not have comparative advantages;
- Ensure that BCPR staff from grade P4 and higher have clear responsibilities and accountability for gender outcomes;[33]
- Complementing general gender experience (e.g. what is required of a gender adviser) with surge capacity and experts rosters regarding specific gender expertise, in particular expertise, relevant to BCPR service lines ,and related to the use of gender specific tools (e.g. gender budgeting, gender sensitive M&E systems, etc.).

e) <u>Recovery.</u> This review recommends a re-thinking of BCPR approach to recovery/early recovery work, which includes an increased focus on understanding what critical actions are necessary to ensure UNDP/BCPR capacity to support Regional Bureaus, country offices, and UN senior leadership in country on critical recovery activities, a clearer and more active role on recovery of the Conflict Prevention and Disaster Risk Reduction teams (see section 3), and a reallocation of capacities currently regrouped under the early recovery team across the Bureau. Therefore, although a clear need for more effective recovery work is here highlighted, the specific focus, areas and mechanisms will need to be further explored as a decision in taken in regard to the new structure and/or capacity to work on recovery.

To be able to take appropriate action regarding the recommendations above requires BCPR to develop the following: stronger analytical capacities; improved capacity to ensure longer and/or stronger presence in country (through deployed advisors, secondments, etc.); a diversified set of skills (strategic planning, stronger coordination skills, along with technical competencies); and an increased focus on key partnerships. These issues are addressed by other recommendations made elsewhere in this report.

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[33] The review team is aware that this will only make a difference to the extent that senior leadership in country, in particular the RC system, has similar responsibilities and accountability arrangements.

3.2 Leadership, Management and Culture

Ensuring that leadership, management style, and an organization's culture are well aligned with its vision, strategy and focus is critically important to enable highest levels of performance The best organization structure designs and processes will not maximize performance without the support of superior leadership, strong management, and a positive, collaborative culture.

Research has shown that those organizations that are most successful in achieving high levels of performance against mission are those that combine certain critical characteristics:

- performance against mission drives team performance objectives,
- a culture of joint and team cross-organizational accountability for performance; shared work ethic and social support,
- high levels of involvement and support from senior leaders, especially in a time of transition, and
- frequent and clear communication across, and within, all levels of the organization

Key Findings

Senior Leadership Team Cohesion

BCPR has clearly contributed to taking the CPR agenda forward, and to making UNDP a relevant player in the CPR field. Strong leadership and competent management have played an important role in achieving progress in these areas. However, there are currently areas of activity and management processes which are not receiving the necessary amounts of time and attention. Individually, the senior leadership team members are driving important initiatives but, collectively, there is a lack of a truly unified and highly effective leadership team. One of the negative impacts is that timeliness and effectiveness of senior executive decision-making has, at times, been compromised.

The very nature of BCPR work places extraordinary demands on senior managers' time. As a result, in the absence of resources to support timely and informed decision-making and management action, some leadership activities are not been afforded enough attention. These include:

- Developing a shared sense of BCPR's strategic priorities among the senior leadership team, and throughout the organization;
- Clearly and effectively communicating a shared Vision for BCPR, its evolving priorities, and performance;
- Participating in effective leadership interactions with other parts of UNDP, as well as other UN agencies and strategic partners;
- Providing oversight on a systematic basis and solving high-priority performance issues that require senior executive level intervention; and
- Providing sufficient attention to recruitment, retention and development of appropriately talented, skilled and experienced resources.

The lack of a Chief of Staff function - and the missing leverage and focus a Chief of Staff could provide- further exacerbates the problem the demands on senior executive time devoted to these activities, and contributes to the constraints on senior leadership time that is available to be devoted to these activities.

While there is some coordination across top management, collectively more is required if they are to function as a strong and unified team. A unified team at the top of UNDP and BCPR is essential for the organization to operate in a more effective, horizontally-integrated and coordinated fashion and diminish the "disconnects" and ineffectiveness caused by organizational "silos".

Management Style

There have been several knock-on effects from leadership changes at the top-level – that have been particularly felt at the staff level. On the positive side, there is much hope that the new leadership will reinvigorate BCPR, re-position the Bureau effectively in a changing environment and better position

BCPR to support increasing demands from Country Offices. There is also positive appreciation for the "hands-on" and "no-nonsense" attitude of the new leadership. However, there is also a set of very important challenges, some identified as early as 2006, that continue to exist and affect staff morale.

Management confusion – There are situations where there is a lack of clarity on who is responsible for what (and whom), and also instances where there inappropriate efforts by some to guide the work of others, or attempts to manage the work of other clusters. A key challenge here is also duplication of efforts – particularly in relation to POSC functions and country coordination. The "one-interface" idea is undermined by the multiple interfaces that exist with Country Offices.

- *Functional clarity* – Partly due to the incompletely implemented change management processes since the last review, as well as the change in leadership – the defined functions and designed complimentarily of CSPC, TASC, and POSC are not fully implemented and "turf issues" are once again, emerging as a major concern.

- *Unclear commitments* – Questions have been raised, both within and outside BCPR, regarding commitments to key technical areas – particularly Early Recovery. While it is appropriate to wait until the findings of the Strategic Review's are considered and acted upon, messaging has been viewed by some as ambiguous and interpreted, to a certain extent, as undermining of current approaches.

- *Staff engagement* – Whereas staff engagement by top leadership in New York appears to be working well, in Geneva it appears to need bolstering. There is a need for the new Director to engage with Geneva staff on a more systematic, consistent manner – through staff meetings, etc. when the new Director is in that office. Greater systematic engagement should prove a positive step to improve staff morale.

- *Professional relationships and collegiality* – Several junior and more senior BCPR staff have indicated a change in tone in some communications and interactions across teams of BCPR. Some have identified that staff within teams have adopted a more abrupt communication style. This is particularly visible in some email exchanges that cut across teams and clusters. While it can potentially be interpreted as consistent with a "get the business done" approach, in certain cases it is perceived as rude and as out of place in a multicultural organization.

Breaking "New Ground"

BCPR straddles two worlds - development and humanitarian, and touches upon a third: political through engagement in developmental support of what often are inherently political processes. As such, by definition, it is a Bureau that occupies necessary, yet contentious ground between well established turfs. The diplomatic balancing act this requires from the top leadership team is challenging – but has, to a large extent, been successfully executed to date as evidenced by the Bureau's growth, impact and profile.

Needless to say, different BCPR initiatives – particularly when they were, or are, relatively new (such as Early Recovery, Rule of Law, to mention only two) sometime generate strong "push-back" from other parts UNDP, or the UN system as a whole. This push-back is to be expected and requires significant time, negotiation, and willingness by BCPR leadership to address any real concerns and demonstrate the value of the initiative to country needs. The approach often taken has been one of deploying "ground-breakers" – high energy and strong individuals to push initiatives through.

Much has been learned by the Bureau on this front but few of these lessons are codified. As a result, those breaking new ground often do not benefit from the experience of others and thereby better avoid false starts and overcome likely pockets of resistance. This leads to a range of inefficiencies, but more importantly, can undermine BCPR's ability to position itself effectively in new areas.

Recommendations:

Extensive research has shown that all high-performing leadership teams share the following characteristics:

- Small size, at most 15 members
- Complementary skills
- Shared common purpose
- Clear, jointly held team performance goals
- Explicit, agreed-to joint decision-making and working approach
- Mutual, joint accountability

Recommendation No. 5

To better implement this leadership team model with these characteristics, BCPR needs to establish a strong, **unified CPR leadership team**:

- BCPR top leadership needs to work cohesively as a team – as well as show leadership in individual and collective behavior, and the values it advances. A set of shared operating principles on how the leadership team works together needs to be developed.
- Unless there are explicit decisions taken by the Director or until decisions are taken on the recommendations of the Strategic Review, adherence is needed to the functions/roles/responsibilities for CSPC, TASC, and POSC as outlined in the previous change management process.
- The BCPR Director should engage more systematically with all staff through more regular individual staff meetings and engagements
- All BCPR staff (managers and team members) need to ensure the use of a positive tone in all communications with each other. Agreement and adherence to basic communication etiquette is needed with communication that is more consistently diplomatic and positive in its tone.
- Reestablish the role of a deputy as leader of 'Programme Content and Deployment' that would oversee TASC, POSC, CSPC, and field support operations, ensuring greater coordination of resources and alignment of strategic and day-to-day initiatives
- Establish leadership teams, and supporting working groups with clear roles and responsibilities (see Section 3.3 for additional detail)
- Agree to well articulated joint performance goals that the members of a team will be jointly accountable for, and evaluated against
- Employ a Chief of Staff to ensure leadership and teaming processes are timely, supported by relevant information, and consistently tracked
- Define and roll out an explicit executive decision-making approach, especially regarding areas that require quick, timely decision-making
- Improve communications at all levels – frequency, content, regular feedback

Additional time, attention and resources are likely to be needed, particularly given the geographic distance between offices, for communication and social bonding to achieve greater team cohesion and a mutually supportive culture.

Recommendation No. 6

The leadership team needs to introduce an **increased focus on management skills** of BCPR staff

- Emphasize management skills as an important "standard" for the Bureau
- Reinitiate, energize, and improve management training provided to staff
- Establish a team culture that rewards joint efforts in effectively deploying technical support and improves mainstreaming of CPR in the field

All BCPR management should continue to update skills through training in gender- and diversity-sensitive management skills. In general, BCPR should place far greater emphasis on recruiting top-management with strong managerial skills – particularly individuals able to manage cross-cutting issues and teams.

Recommendation No. 7

BCPR leadership should articulate where it is prepared to break new ground – and allocate the necessary resources and support for deployed "**ground breakers" to implement the agenda**.   CSPC, the Directorate, and TASC should review past lessons regarding how to "break new ground" and create basic guidelines regarding how it can be done most efficiently and effectively. Such guidelines should include (i) approaches to developing a robust conceptual and institutional argument for engagement in a given area, (ii) a rationale for the strategic positioning of UNDP/BCPR in that area, and (iii) suggested oversight and tracking mechanisms to ensure false starts are quickly identified and addressed.

3.3 Organization Structure and Process

Current status

As mentioned in the initial section regarding progress since the last management review,[34] the new structure and processes have contributed to significant improvements in BCPR technical and operational capacity and a much clearer set of roles and responsibilities for such functions as strategic planning and operational support. This seems to have facilitated not only improved work processes within BCPR, but also clearer channels for external collaborations within UNDP and with the rest of the UN system, as well as the humanitarian community. Efforts to facilitate access by, and improve responsiveness to, country offices, by creating country focal points, among others, have increased to a great extent the coordination of BCPR interventions, as well as helped facilitate cross-UNDP collaboration. The increased focus on early recovery has also led to needed improvements in cross-agency collaboration and linkages to humanitarian post-crises efforts, establishment of clear guidelines and policies, and a timelier and better provision of recovery support to countries in critical areas such as livelihoods and reintegration of IDPs.

Key Findings

Although the general structure introduced as a result of the 2006/2007 review is still valid, some significant adjustments to the structure and supporting processes are required to help address some current deficiencies:

- Intra- and inter-cluster collaboration – Despite a significant amount of coordination, a persistent imbalance and lack of alignment continues to persist among POSC, CSPC, and TASC. This appears to foster disjointed efforts with, at times, individual agendas, rather than a comprehensive Bureau agenda, resulting in limitations on the Bureau's capacity to operate effectively;

- Optimal deployment for country support - the capacity to provide, through the current structure and processes, adequate support to critical country level partners (e.g. RCs/RRs and the rest of the senior UNCT and UNDP leadership, in Country Offices, and through them, national counterparts) is not optimized; more could be done with available staff resources, with more consistent and higher standards of performance, and with improved compliance with existing mechanisms and processes;

- Process Improvement – There are two fundamental ways in which BCPR's core work processes (e.g. leadership decision-making, integrated rapid response capability, funds allocation, etc.) directly impact BCPR's performance and results in the field:

  1. How *quickly* and *responsively* are these processes in actual practice?
  2. How *effectively* are they performed?

  BCPR has reviewed and laid out some key business processes, and when followed and applied competently, these have led to higher performance. But as discussed in Section 3.5 below, some current business processes have slowed and do not allow the quick, flexible, and tailored response that is required, or do not ensure optimal alignment of resources to identified needs.

  In addition, as discussed in section 3.4, the review found that BCPR has: no consistent, widely used system in place to ensure that internal best practices or lessons learned by BCPR or other UNDP field teams are effectively captured and disseminated; or a system that ensures that these internal or external (from analogous or comparable organizations, institutes, academia, etc.) best practices or highest-impact approaches and methods are applied in an appropriate manner in situations where they could improve performance, impact and results. As a result, there are best practices or high impact approaches that could substantially improve performance and results in the field that are not being applied on a widespread basis by BCPR personnel as they execute BCPR's key processes in field.

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[34] That section outlined the current status of BCPR structure and process, and therefore, will not be repeated here. This section will focus on what is not working in an optimal way and therefore requires change and improvement.

- Some key functions are currently missing – As outlined in the previous section, the absence of critical functions such as a Deputy overseeing both TASC and POSC, and a Chief of Staff position, has a negative impact on certain aspects of the Bureau performance, including its capacity for internal and external coordination and alignment.

Effectiveness of BCPR Clusters and Teams

While the roles and responsibilities of the three functional clusters (POSC, CSPC, and TASC) are fairly clear on paper, their working dynamics remain less than optimal and impede the Bureau from attaining a higher level of performance. The policy, technical expertise, planning, and partnership development functions currently cut across TASC (ER, DRT, CFT), POSC (country focal points, regional technical advisors), and CSPC (gender, capacity-building, etc.) – with expertise in each of these groups – as well as across other parts of UNDP (Regional Bureaus, BDP, et. al.). This continues to generate some confusion, mixed messages, and occasional "turf battles".

Other key issues further complicate collaboration and organization effectiveness under the current structure:

- The <u>coherence and alignment</u> of the three technical teams within TASC: While there is some coordination across TASC, in large part each team is focused on its scope of technical issues and the majority of staff and management time and attention is focused on each team's respective agenda. There are relatively few genuine and effective partnership efforts across teams. Although recovery sits in both the Disaster and Conflict teams, and clearly overlaps with the Early Recovery team, there is little active collaboration, engagement and true partnership regarding this and other areas of overlap. There is also a lack of appropriate operational incentives to facilitate collaboration across TASC teams (ERT, DRT, and CFT).

- The positioning of the <u>Early Recovery Team and its various roles</u>: The Early Recovery Team has assumed various roles related to early recovery: cluster leadership, interagency coordination, immediate response and assessment, policy formulation and substantive support activities. The Team has made much progress in establishing each of these roles but it is now time to examine whether these should all continue to be grouped together, or if their continued development and strengthening would be substantially improved by placing roles in different parts of the organization.

- The <u>sub-team setting in the Technical Teams</u>: The sub-team is problematic (e.g. in CFT, several specialized teams, less than required resources in conflict prevention, at times overly theoretical approaches to post-conflict peace and state building, and, in some instance, a lack of a coherent support package). Under the current sub-team structure approach, there is limited focus on addressing emerging programmatic areas from a comprehensive perspective – largely due to a "silo" mentality that reduces cooperation between practice areas, and that does not give much room to develop ideas/programmes that cut across silos. There is a lack of appropriate operational incentives to facilitate collaboration across teams.

Each of these aspects for improving team effectiveness is discussed below.

Coherence and Alignment of Teams: The review identified several existing issues that prevent the structure rolled out three years ago from having maximum impact:

- There is a need for greater coordination between the technical teams in TASC and POSC as relates to various aspects of effective country deployment. TASC is responsible for the development of technical capabilities, while POSC is responsible for deployment of these into the field and streamlining these capabilities into the broader UNDP. The development and deployment of capabilities is currently disjointed; TASC and POSC need to better reinforce their respective roles. More active managerial coordination is required across the two clusters.

- There is a lack of clarity in how policy related roles and responsibilities are best coordinated between TASC and CSPC. While in theory corporate policy and partnerships fall under the role of CSPC, and technical policy work under TASC, currently both teams engage with policy making

and implementation at various levels and with various partners, in New York and Geneva, and with key partners within UNDP, the rest of the UN, the broader humanitarian system, and with other partners. This happens without much coordination, and a mechanism for ensuring the two policy functions are mutually reinforcing is missing.

- The positioning of recovery support services across the Technical sub-teams is not well articulated and requires more attention. As recommended in the previous review, both CFT and DRT have post -crisis recovery as a part of the technical capabilities they are responsible for developing against country needs. Their relative roles and overlap on the recovery front have never been well articulated and agreed. Many of those interviewed, both within and outside of, BCPR expressed the view that recovery as a whole does not receive adequate attention. In addition, the introduction of a team focused on early recovery has further complicated the positioning of recovery services within BCPR.

Early Recovery: In 2005, a UN review of the global humanitarian system recommended that gaps in providing protection and assistance to those affected by crises be addressed by aligning capabilities under the direction of respective lead organizations. In response to this suggestion, the UN Interagency Standing Committee established nine clusters, consisting of groupings of UN agencies, NGO's, and other international organizations, with a view to improving coordination and effectiveness of services provided by the network in response to humanitarian crises. As one of the clusters resulting from this initiative, the Early Recovery Cluster was established, and UNDP asked to lead the cluster. Within UNDP, BCPR was asked to lead this effort.

To address this need, in early 2007 Early Recovery was established as a third technical team within TASC, in addition to Conflict (CFT) and Disaster (DRT). While the 2006 review had not recommended a third team, the establishment of an Early Recovery Team (ERT) was seen as an important means for focusing resources and attention on this critical initiative. The Early Recovery Team has accomplished much in a relatively short timeframe. It has:

- Addressed initial resistance from some humanitarian organizations, and established itself as a strong leader of the Cluster Working Group on Early Recovery (CWGER); helped establish UNDP as an active player in the cluster system
- Assembled staff and successfully deployed them against required cluster leadership, coordination and substantive programmatic work
- In cooperation with the UNDG-ECHA Working Group on Transition, took the lead role in developing and communicating a comprehensive guidance note on Early Recovery (April 2008)
- Developed a UNDP policy on Early Recovery (August 2008) which lays out UNDP roles and responsibilities in early recovery, at country and global levels, and sets out the measures UNDP should employ to translate policy into effective actions on the ground.
- Formulated and implemented an immediate response capability designed to quickly deploy early recovery support to the HC/RC and country staff (advisor and an early recovery coordinator), including well articulated assessment frameworks.

The stakeholders interviewed as part of this review are quick to highlight the above accomplishments. There is general agreement within and outside of UNDP regarding the importance and need for greater focus and attention to the early phases of recovery. There is also agreement that UNDP should play a lead role in various aspects of Early Recovery and cluster leadership. However, the vast majority are also quick to add that the current positioning of Early Recovery within UNDP is problematic. The principal issues raised can be summarized as follows:

- There is concern by many, held with varying levels of intensity, that the Early Recovery function in BCPR has not appropriately differentiated between the coordination, immediate response and deployment of advisors, and more substantive programmatic support roles
- There is a perception by several other agencies that UNDP is driving the ER agenda primarily for its own programmatic and funding benefit; while this is not the case, the integration of all roles in one team leads to suspicion and some lack of trust
- The provision of immediate response within BCPR is now split in two, between the Early Recovery Team (ERT) and the Rapid Response Support Team (RRST). Both teams have done

very good work in developing rapid response and deployments procedures. While there have been attempts at clarifying the respective roles for each of these teams, there is still some confusion, and a lack of fully effective coordination and collaboration.

- There is concern by many that the lack of flexibility to date in adjusting the Early Recovery model may lead to a missed opportunity to increase UNDP's overall recovery support capabilities. The ERT leadership has articulated a very thoughtful piece on how to "fill the recovery gap." The Bureau's ability to rally support around the broader transition and recovery initiatives, as well as other important areas of new country support (e.g., the impacts of climate change on crisis), may not receive adequate focus if time and resources continue to focus on defending the current ER model exactly as originally established.

Whether issues are real or perceived the feedback from a wide array of stakeholders interviewed during this review strongly suggest some changes need to be made to avoid continued distractions focused on and arising from the collection of activities in ERT.

<u>Sub-team settings</u> <u>and pressures</u> – Sub-teams within each of the TASC teams (cross-cutting working teams) are doing some highly innovative and ground-breaking work. While there is a willingness to collaborate across teams, most efforts are focused on sub-team activities. There is an implicit assumption that promotion and growth in BCPR will be best supported by establishing a clearly successful, new technical practice area. While the organization wants to support these initiatives when they are consistent with BCPR strategic priorities, there is a danger that not enough time and attention is placed on working across sub-teams.

Tackling silo mentalities requires an understanding of incentive structures and external "pulls" on those operating in each practice area:

- Practice areas funded externally in CFT (such as DDR, ROL) have a bigger incentive to deliver on their own – as they may see themselves as reporting to donors, as much as to BCPR. Those practice areas that are funded substantially by BCPR core funds (governance, armed violence/small arms) may have more incentives to cooperate – since they have no direct reporting to donors.
- Interagency mechanisms are important for several current CFT practices – and are led by different ones (e.g. Framework Team and CP team link; DDR Inter-agency Working Group). These mechanisms draw on team resources, and at times also weaken the link back to other relevant TASC practices when initiatives touch on one or another practice's expertise.

In terms of the Task Teams, experience shows that the more effective ones have functional co-chairing arrangements, clear time allocations of people from different practices, and management insistence on inclusion and participation in RCAs. However, there is probably value in institutionalising the "Task Team" concept by merging some of the practices (in CFT in particular) into larger units or into task teams that cut across various functional areas of the organization.

<u>Optimal Deployment for Country Support</u>

As CPR needs evolve at country level, there is a need to be flexible in the support model used as well as the seniority level and type of skills and capacities needed by TASC teams to perform effectively. There is also a need for flexibility in staff allocation and increased empowerment; and an optimal allocation of staff resources across HQ, regional and country locations.

The current organizational structure, the allocation, availability and capacities of staff, the effectiveness of existing mechanisms for coordination of country support and the systems for delivering such support, and the consequent significant variation in how effectively support is provided to the various clients suggest significant potential for improvement.[35] Specifically, the following items reflect weaknesses in the current "business model":

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[35] This review recognizes that such process as UNDP regionalization and the consequent re-deployment of staff to regional centers, decisions that BCPR can only partly influence, have an impact on the effectiveness of BCPR, and that therefore such considerations will have to be factored into the recommendations

- Different models are probably required to respond to different needs and realities (for example, the Asia context different from Africa and Latin America) but currently these are not specifically identified and differentiated. There is evidence to suggest that there is variation in the value added provided by different regional CPR teams to Country Offices – with the Bangkok Centre, and Bratislava, for example, ranking as high performers. This could mean that some POSC teams in regional centers could be better leveraged as part of a Geneva or New York team.   This is no reflection on the caliber of the advisors and specialists in Regional Center locations, but rather one of the circumstances they find themselves in, somewhat isolated from other technical and programmatic support capacities.
- There is a perception by some that BCPR has dual HQs (New York and Geneva). While this is, in fact, not the case, the perception leads to some confusion and coordinating issues with partners and others.
- There is no system-wide approach to operations, that helps consistently ensure that the right staff, at the right level (e.g. senior, junior), with the right capacities (e.g. strategic planning, coordination, general CPR, specific technical expertise), consistently using the highest impact, best practice approaches and methods are deployed in the right place to do the right thing at the right time. This takes on even additional added importance, in the context of more effectively integrated and coordinated UN operations and the increased emphasis on providing more high level, high-impact quality support to UN senior leadership in country;
- There are no common, consistent systems, linked to strategic planning processes and regional/country priorities, to make appropriate funding and resource deployment decisions;
- There is a strong need to ensure that existing mechanisms that were created to ensure coordination and accountability of country support, including country focal points, country team meetings, and systems to manage mission planning, work effectively;
- The means to provide country support, which currently takes place primarily through team missions, or in some instances through joint cross-bureau missions, also need to be carefully examined, and their quality and effectiveness greatly improved;
- Despite recent efforts, there is still a continued need to ensure more effective availability of technical and other expertise through experts rosters and their improved utilization and management, as mentioned in the Early Recovery discussion above;
- The inclusion of administrative office support (e.g., travel, procurement, financial bookkeeping, etc.) with POSC's program support and rapid deployment roles does not appear optimal; Administrative and financial analysis support is under-resourced and requires urgent strengthening.
- There is a need for greater awareness throughout BCPR that organizational effectiveness, and effective CPR work, does not depend only on BCPR itself, but also on how its staff can influence other organizations and influence such decisions as the selection and training of RC/HC, and of Country Directors/RRs in crisis prone countries.

Process Improvement

In regard to business processes, BCPR has developed and rolled out various important processes and procedures consistent with its mission and strategic objectives. However, some of these processes have not become well established and in some cases different parts of the organization have rolled out processes in an inconsistent manner. The review team believes BCPR should focus on improving the following key processes:

- Leadership decision-making and ensuring "big picture" perspective
- Integrated rapid response capability
- Supporting the development of CPR programme/project proposals
- Project appraisal and funds allocation
- Work planning and budgeting
- Consolidated and consistently deployed fast track procedures
- Knowledge management and access

Leadership Decision-making and the "big picture" perspective: As mentioned earlier, BCPR leadership decision-making processes are not clear, and do not appear to facilitate consistent BCPR strategic positioning in regard to CPR, country operations, or UN joint processes. The absence of consistent data and senior level advice to the directorate affects the strategic level decision-making process and negatively impacts BCPR overall performance. Decision-making processes appear to those within BCPR as not being fully transparent, inclusive and responsive, and the linkages between high-level decision-making and team and country level work seem to be somewhat weak. BCPR leadership has visibly strengthened relationships and collaboration within UNDP, with key UN partners, and is reaching out to key donors for advice and guidance. However, there is a need for BCPR's thought leadership to be more extensively directed at both internal and external stakeholders to ensure transparency, effectiveness, visibility, and impact.

Also, while much emphasis within BCPR is placed on technical teams with specific expertise, and on processes to determine specific technical interventions, too little emphasis is placed on having a strong "big picture" problem-solving capacity, which is what is often required to understand conflict and complex interdisciplinary problems and challenges - natural disasters are merely one example. Currently, and due to the lack of an inclusive mechanism for vertical and horizontal feed-back, technical teams may at times promote their specific expertise, and define relatively narrow expertise-based solutions to situations that require a more holistic approach.

Integrated immediate response capability: Currently, responsibility for immediate response to country needs is split between the Rapid Response Support Team (RSST) in POSC and the Early Recovery team in TASC.

- In 2006, as a consequence of discussion at a Global ResRep meeting, UNDP formally recognized the need for the organization to be more structured in its approach, organized and efficient in responding to crisis situations. BCPR was subsequently asked to develop such a mechanism, and set up the SURGE project to do so, with three objectives in mind: (i) to establish a deployment mechanism so staff with appropriate profiles can be quickly redeployed to a crisis country office, (ii) to develop and establish standard operating procedures for UNDP immediate crisis response, and (iii) to establish a depository for institutional knowledge on immediate crisis response. The SURGE project team delivered a staff deployment mechanism and published standard operating procedures but these were not fully applied in practice

- In 2008, a decision was made to merge the SURGE practice into the Early Recovery arena, while maintaining the rapid staff deployment process under POSC leadership. ER established assessment frameworks and took on the role of focal point for rapid response deployment. Since then, ER has moved quickly to establish a process for quickly deploying ER advisors and ER cluster coordinators into immediate post crisis settings. When these deployments have been coordinated with POSC and other TASC staff (e.g., various disaster response situations in Asia during the summer of 2009), the deployments have worked very well; however, in some other cases, multiple deployments were made without effective coordination, causing substantial confusion and loss of credibility in the field.

The split of immediate response between POSC and ERT is not sufficiently well defined to ensure consistently strong interventions. Work needs to be undertaken to align these efforts to leverage the very good work that has been done by both groups.

Supporting the development of CPR programme/project proposals; BCPR has supported the successful development of CPR programmes across a broad array of countries and topic areas. However, a review of the large geographical and programmatic scope of the support provided by the Bureau suggests two critical issues:

- Currently there is a tendency for excessive consultation, where many individuals end up 'chipping in' and providing input, potentially overwhelming country offices who are unable to readily sort through the various points of contact and input;

- The pressure on BCPR to define these programmes/projects across broad geographic and thematic scopes of work is significantly adding to the Bureau's workload and straining its

capacity. The processes needed to focus the right resources on the priority issues are not in place nor applied consistently across the Bureau.

Project appraisal and funds allocations: In its interviews with country offices and others in the field, the review team was presented with many examples of long delays in getting programmes and projects defined, funded and launched. There are many steps in this process: first a strategy needs to be approved; then a consistent programme approved; and then a project approved and funded, with the potential for broader review and assessments adding further to the multiple decision points. The timely and effective execution of this process is further complicated by the lack of significant decision-making delegation, especially when funding approval is involved, which required HQ sign offs that can sometimes cause lengthy delays.

Work planning and budgeting: Work planning and budgeting need to be better aligned so that staff can have a better sense of available budgets when they develop detailed initiatives as part of the planning process. There is a need for the process to be more iterative. In addition, there is a belief among some in the Bureau that there is not enough resolution in dividing available budget among the teams.

Knowledge generation and management: BCPR contribution to the development of some key practice areas and policies, and its contribution to specific knowledge generation processes are recognized and valued (e.g. some conflict related fields, DRR). Knowledge management became a priority for BCPR in 2006, with the development of a business process for "Developing Policies and Tools for the CPR Practice and Providing Knowledge Management Services" in 2007 – and creation of a Knowledge Management Group. The process provides a categorization of three types of knowledge products: (a) binding (policy/decisions and practice notes); (b) advisory (research, guidance, and evaluations); and (c) informative (lessons learned, case studies, and mission reports).

Several challenges are associated with knowledge management in BCPR:

- There is a lack of clarity in roles between the Practice Leader (TASC) and the Practice Manager (CSPC)
- There is a fairly extensive range of technical papers, frameworks, etc. being produced and available within UNDP/BCPR but these resources are not always consistent with country needs.
- In many cases, templates and frameworks needed in the field are not readily available to those generally unfamiliar with CPR and can often take too long to find.
- Several IT-platforms are now in existence (CPRPNet, TeamWorks, Workspace, Sharepoint, and the intranet) – and this partly creates confusion regarding where to best access what material.
- Functional capabilities for knowledge management (including communications and IT) are outside the knowledge management team – which in turn can limit its efficiency.

Recommendations

Building on the recent changes, and with the aim of consolidating positive achievements, the review team recommends that the leadership team considers the following priority adjustments to help ensure that BCPR's structure; business processes, and teams' role and responsibilities enable improved performance. The structure implications of these adjustments are reflected in the exhibit ___ below.

Recommendation No. 8

Effectiveness of Teams: Building on the structure recommendations made in the 2006 review, the Review Team suggests the following adjustments:

- To better ensure the critical coherence and alignment of TASC and POSC activities, the team proposes both report to a common focal point, e.g. a deputy responsible for program development and deployment (see recommended structure outline in Exhibit on page 40). This Deputy will also have 'dotted line' oversight over CSPC to ensure an effective interface with TASC and POSC
- To facilitate coordination and to avoid duplication and 'turf' issues, ensure that technical experts deployed in CSPC and POSC have a "dotted line" reporting relationship to relevant TASC teams

- BCPR should uncouple the various roles currently combined in the Early Recovery Team
  - Place the cluster leadership and general ER coordination role in CSPC. CSPC is already the focal point for coordination with external entities. The role of coordination will be viewed as more objective in this part of the UNDP/BCPR structure.
  - Consolidate the mechanisms to provide rapid deployment into POSC. Combine the excellent work done by ERT and RRST and ensure clear linkage to CSPC and TASC on the content of assessment and advisory roles in order to continue to strengthen appropriate rosters, to provide quick deployment, and to best leverage the excellent assessment frameworks rolled out by ER.
  - Continue to drive early recovery programmatic support in critical areas such as livelihoods within TASC as part of a broader effort that focuses more resources and attention on the broader recovery agenda. Like other areas in TASC, continue to drive technical perspectives on early recovery and link with POSC and CSPC.
- Maintain current Conflict and Disaster teams, including responsibilities for relevant recovery activities, but consolidate the number of smaller CFT teams into larger ones. An appropriate formula for this should be discussed within CFT – but might potentially look like: (a) conflict prevention and peacebuilding (including conflict prevention, armed violence and state-building, gender); (b) rule of law, justice and security (including ROL, DDR, Mine Action, and Small arms, gender); and (c) post-conflict recovery team (including socioeconomic recovery, IDPs, reintegration, capacity-development, gender). Include responsibilities for relevant recovery activities in both DRT and CFT.

  Ensure adequate resources in place to support BCPR's role in Disaster Risk Reduction and Climate Risk Management, to include strengthened capacity in New York and Geneva, greater ability to link with regional organizations and exploration of joint CPR posts with BDP and other partners.
- It is anticipated that working groups would be set up on a temporary basis to address emerging issues that may require special attention and a multidisciplinary perspectives. Working groups could be established to (a) provide a focal point for improving ability across BCPR and UNDP to support the broader recovery needs, (b) provide a focal point for addressing emerging needs in the intersection of climate change and crisis, or other broad, emerging CPR issues that relate to BCPR and UNDP's future opportunities to add value in partnership with other agencies.

Recommendation No. 9

Optimal Deployment for Country Support: The following adjustments are suggested to BCPR's operating model

- Improve efficiency and effectiveness of current mechanisms for coordination of country support:
  - *Country focal points* - Ensure that improved coordination through country focal point system is accompanied by improved coordination and alignment of technical support. The country focal point within POSC is the channel of communication to and from Country Offices, and with the rest of UNDP (Regional Bureaus and Regional Centers) and with UN partners. This person has to represent the country interests of the different technical teams, coordinate inputs and bring together their work. Therefore to also ensure clarity and adherence to the distinct roles of country focal points within POSC and within TASC (whose role is to coordinate country issues within the technical team);
  - *Country Team meetings* - Systematize the use of Country Team Meetings as a mechanism to bring critical information and all the various interests and inputs together. Regular meetings should be held for priority countries;
  - *Mission quality and planning* – Given that missions are a key mean of delivering country support, ensuring that they are well planned, bring quality support and focus, and that they are well coordinated is critical. More attention should be paid to mission preparation, in particular, ensuring that clear TORs are developed well in advance and that clear expected outcomes for missions are well articulated. In regard to mission planning, the

use of the internet based Travel Management System should be made mandatory. Team leaders and supervisors should have clear responsibility for ensuring optimal use of staff deployment through missions.

- Ensure continued priority is given to allocation of BCPR resources in country, as appropriate, or in central locations to provide an appropriate balance of field presence and benefits of scale. In the context of UNDP regionalization, and within the decision-making capacities of BCPR, minimize the number of CPR resources assigned to Regional Centers. Maintain the strong and effective presence in Asia and Bratislava (strong current performance; important having resources in same time zones and allowing quicker deployment from Asian center). Reduce the number of POSC advisors and staff in the two Africa center locations; keep one or at most two focal point resources in each location and consolidate the remaining capacity in Geneva or New York, depending on scale and ease of deployment considerations.
- Clarify that only NY constitutes BCPR's Headquarters, as is, in fact, the case. The BCPR Geneva presence should remain strong, but should not be perceived to be a "HQ" organization, as is currently perceived by some. Geneva remains a focal point for TASC and technical presence and coordination with humanitarian and other agencies.
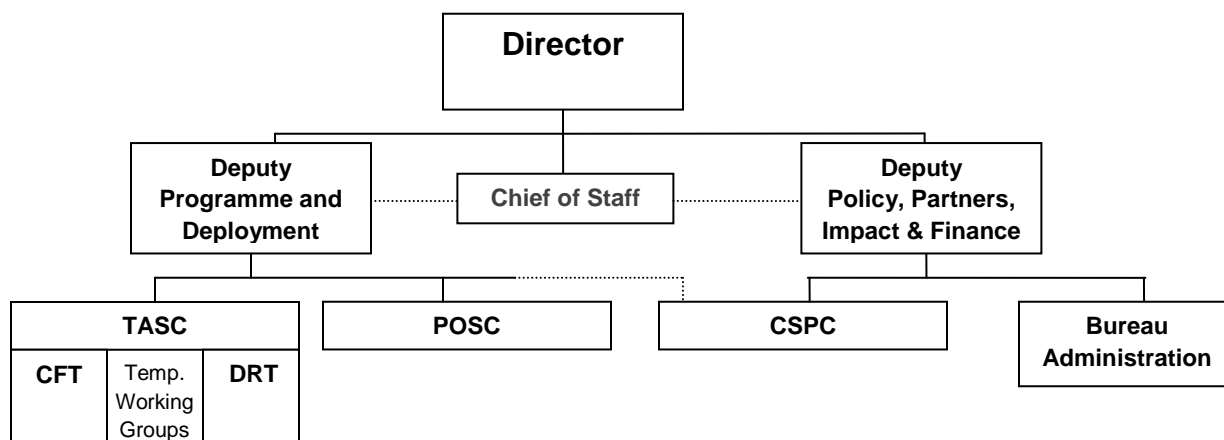
In addition, BCPR should re-align team structures, capacities and roles with a view to promote more effective and coherent policy, as well as better aligned planning, operational and technical services. As mentioned above, the general recommendations of the previous review, establishing POSC, CSPC and TASC (CFT and DRT) are still highly relevant and worth pursuing. However, slight adjustments are in order. In reviewing a range of alternatives, the review team relied on the following criteria:

- Contribution to cross-team collaboration and impact; helps overcome "silo" orientation
- Flexible, can quickly adapt to new trends and changing field requirements
- Allows optimal alignment of funding and resources
- Helps continue to improve UNDP's work on transition and address any confusion and misunderstandings around Early Recovery
- Minimizes unnecessary human resource friction and other implementation risks
- Helps integrate strategic thinking, planning and technical expertise, is focused on impact

Under any alternative, the following structural characteristics would be pursued:

- Separation of the Early Recovery coordination role and CWGER leadership role from early recovery substantive support efforts;
- Greater focus on recovery, including a coordinated approach to filling all current and future gaps in substantive capabilities required
- Better balance of roles and responsibilities among TASC, POSC and CSPC;
- Clarity in roles and responsibilities for policy work, distinguishing between corporate policies (e.g. alignment with BDP and UN CPR policy environment) under CSPC, and technical policies .(conflict, recovery, DRR) under TASC, and establishing effective mechanisms for cross-linkages between the two strands of policy work;
- Clearer definition of POSC responsibilities for harmonizing country support (including providing an effective one-stop-shop system), separate from "back office" financial analysis, procurement and other "back office" capacities;
- Redeployment of some resources within POSC to support financial analysis, procurement, etc. (possibly eliminating two or three Regional Center positions and creating "back office" positions in NY)
- Consolidation of surge and rapid response capabilities within POSC
- A more effective strategy for cross-cutting work, in particular gender, which needs to be better aligned to Bureau and country level priorities

The review team proposes the following adjusted organization structure:

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Notes on proposed structure:

- The Deputy in charge of "Programme and Deployment" would ensure close and effective collaboration among technical teams, special initiatives, and country, and region, oriented programmatic support from POSC
- In TASC, CFT and DRT would continue to include both prevention and recovery focus
- High-level, working groups would be focused on several technical priorities, including: (i) continuing relevant development and provision (coordinated with POSC) of early recovery substantive role, (ii) working with DRT and CFT to fill other recovery gaps, (iii) providing technical coordination focal point for driving BCPR role on 'climate change and crisis', and possibly other important agendas, as they emerge
- POSC would shed Bureau administrative support roles, would focus on country programs, including a consolidated surge and rapid deployment capability, and a more effective "one-interface" approach
- Bureau administration and support team would focus on financial analysis, procurement, HR and other "staff" functions
- CSPC would focus on overall policy and planning drawing on inputs from TASC, provide a focal point for interagency relationships, oversee monitoring and evaluation team (better linked to planning and with more resources) and coordinate with Chief of Staff on communications
- The Chief of Staff who would support the Director and help ensure that individuals in the leadership roles listed above are focused on the right decision processes, at the right time, with the needed information in hand

Recommendation No. 10

Streamlined Processes

The structure proposed above, or any alternative structure, will have limited impact on performance against mission unless the key processes that support the organization are not well defined, understood and applied consistently throughout the organization. In the early stages of BCPR, reliance on ad hoc processes and improvisation generally served it well as BCPR initially established itself as a quick, responsive, and flexible organization. In response to needed improvements, BCPR developed and introduced required operating procedures and designed important core processes, such as immediate response capability. However, processes were never fully rolled out and consistently implemented and there is both come overlap and confusion across current operating policies and procedures. BCPR needs to eliminate these areas of confusion, fundamentally streamline key processes and ensure that they are being consistently applied.

3.4 People and Competencies

BCPR has some very talented staff, and many of its people are well regarded both within and outside of UNDP, the broader UN, and beyond – and in many cases they deliver outstanding performance. However, there are important gaps in Human Resource strategies that need to be addressed for BCPR to optimize its ability to recruit, retain and develop the outstanding talent and skills required to achieve the highest levels of impact and results against BCPR's mission. In addition, while many BCPR's leaders are technically quite strong, management skills need further improvement to support organizational effectiveness.

BCPR services are in high and increasing demand. The mix of technical and financial resources and the technical competencies of staff are considered positive assets by country partners. However, the level of satisfaction with BCPR services varies significantly and the extent to which BCPR responds effectively to demands generated or needs assessed at a country level is mixed. Overall, the greater focus on "crisis response" rather than "prevention" seems to make BCPR work less relevant for an increasing number of countries – and overall, prevention is an under-resourced part of the Bureau's mission. Fragmented, mission-based, and often short-term delivery of support produces initiatives that often do not collectively add up to the holistic, big picture change that is required in countries to achieve and sustain long term improvements.   Faster, more flexible, more comprehensive and, as needed, longer-term support at the right level is a priority for BCPR to have more impact.

Key Findings:

Attraction, Retention and Development of Talent and Skills

For BCPR to achieve high performance against its mission – it is essential that people with outstanding skills be deployed in the right combinations and apply, on a timely basis, the highest impact, best practice approaches and methods, to solve or prevent the complex problems that BCPR and the UN address. Key challenges include:

- Inconsistent mentoring of junior employees by more experienced managers. Some leaders and managers do an outstanding job mentoring junior employees – which is critical to developing the skills and experience needed in both the "next generation" of BCPR leaders, as well as required sets of skills throughout the organization. But as mentioned in some interviews, other leaders and managers do a less effective job at mentoring, or pay less attention to it.
- Lack of a readily available and managed data base (i.e. experts roster) that enables easy and timely access to individuals throughout the UNDP with needed skills and experience, and to deploy these individuals on teams that, as a whole, possess the right integrated and combined sets of skills
- Insufficient focus on individual technical skills upgrading and experience development as related to mission and strategic objectives; limited use of short-term assignments to develop required skills needed by the organization; constraints on the ability to grow individual skills through promotion and rotation
- Not enough time available and devoted by leaders to look for, and develop, talent.
- Traditionally narrow sourcing of talent and individuals with needed skills and experience which is largely dependent on formal UN Job postings or "word of mouth" within BCPR and the UN.
- Contract uncertainties can inhibit the access to and effective deployment of highly competent advisors, e.g., recruitment of National Disaster Reduction Advisors currently constrained by contract uncertainties.

In terms of staff development, the following issues require attention:

- There is limited training of BCPR staff by external experts in best practices or "highest impact" leading edge technical approaches and methods on a regular and consistent basis.

- There is no consistent system in place to ensure that internal "best practices" developed or "lessons learned" by BCPR or other UNDP field teams are effectively captured and disseminated; or that ensures that these internal or external (from analogous or comparable organizations, or institutes/academia, etc.) lessons learned or best practices or highest impact approaches and methods are applied in an appropriate manner in situations where they could improve performance, impact and results.

Human resource development strategies have not been put in place to maximize performance against mission and a well designed and effectively structured system for developing required skills and competencies is only partially in place. These gaps present a major constraint to maximizing the potential impact and results of BCPR and other UNDP personnel.

Management and leadership skills

Many BCPR leaders and staff are technically very strong and well respected by colleagues inside and outside the UN. However, many of our interviews suggest that some BCPR managers are relatively weak when it comes to effective management and leadership skills. In 2008/2009 BCPR made significant investments in leadership development. Senior leaders/management went through a 360 degree feedback process which enabled them to identify their strengths and areas that needed further improvement. In addition they were provided with executive coaching. In 2007, the Bureau also conducted, for all staff, Belbin profiles to identify individual preferences in order to maximize teamwork. Although there has been some previous training in management and team skills, more is needed to improve teamwork and effective team management. In addition, with resources spread throughout the world, coordination and alignment of CPR management resources is a particular challenge that needs focused, ongoing attention. Team effectiveness is often shortchanged by lack of strong, effective communication and disciplined application of effective team management approaches, as well as, development and application of consistent, effective team leadership skills.

Recommendations:

Recommendation No. 11

As stated earlier, for BCPR to achieve high performance against its mission it is essential that people with outstanding skills applies best practice, highest impact methods and approaches be effectively integrated and deployed in the right combinations to deliver support to countries and improve impact in CPR areas. To achieve that within in the limits and constraints of the UN system – BCPR needs to implement a fundamentally changed, more strategic, and proactive **HR strategy**, to include:

- Recruiting staff who are competent, committed and willing to contribute
- Better balance of senior and junior-level experience in teams deployed to the field
- Right set of capacities, skills, staff, approaches and methods in right places, empowered at the right level, based on strategic objectives and country needs (e.g. more Peace and Development advisers and DRR advisers in priority countries)
- Improved attraction, development and retention of key staff with needed skills
- Organizational enablers introduced to make people work together more effectively
- Better means to address underperformance issues
- An expanded and improved system to quickly and effectively access and deploy contractors in critical support areas such as peacebuilding, disaster risk reduction, and gender.

This changed HR strategy and system would have five basic interrelated components: (1) a "talent mindset", (2) a superior employee value proposition, (3) a high performing recruiting capability, including access to a contractor talent pool, (4) the ability to spot and grow talent with required skills and experience, and (5) the ability to implement differentiated growth paths. See the Exhibit below for more details on these components.

<div align="center">Exhibit</div>

HR Strategy Components

A Talent Mindset: Senior leadership should make attracting talent and maximizing the strength of the internal talent and skill pool a top priority. Leaders should constantly be "on the lookout" for needed skills and talent, not just when there is a vacancy. In addition to the UN, BCPR leaders have relationships with a wide variety of institutions, e.g., academic institutions, "think tanks", regional organizations, etc. Leaders often attend conferences on topics related to BCPR's work that can be used to help identify and recruit needed talent. BCPR senior leaders should drive responsibility for strengthening the skill pool throughout the organization e.g., increased responsibility should be placed on experienced managers and leaders for mentoring junior staff in HQ, offices and in the field.   Training in effective mentoring should be provided to all managers. And mentoring and developing junior personnel should not just be a "listed" item in manager's evaluation forms, but made an explicit focus of all managers' actual evaluations. Talent management needs to be reflected in the performance management of leaders to ensure accountability. The development of upcoming leaders- comprising the "2nd and 3rd" levels of leadership should be an ongoing focus of BCPR's Senior Leadership. In addition, Human Resources Development should be featured in the "Key Results" area of performance evaluations for BCPR leaders and managers.

A Superior Employee Value Proposition: A superior employee value proposition is one that differentiates an organization in the eyes of top performers within and outside the organization, and helps attract and retain those top performers.   BCPR has staff that are competent, committed and contributing. Leadership should continuously help staff find "meaning" in their everyday work so that staff are willing to give their discretionary energy to promote the mission and agenda of BCPR. Key elements of a superior employee value proposition include: a mix of challenge, connection, professional growth, respect, satisfaction and opportunity. BCPR is well positioned on the challenge and connection front. But limitations on available higher level posts can constrain growth possibilities. One solution may involve reassignments within the Bureau to enable staff to develop broader expertise, and further creation and use of temporary posts. In addition, a database/roster of BCPR personnel including their skills, experience, and development objectives should be developed and a senior HR officer, working closely with top BCPR leadership, should be assigned to actively manage the roster with an eye to help both quickly identify and deploy personnel with the right sets of skills and experience based on field/country needs, but also with an eye to helping identify projects of increasing challenge and opportunity, including rotating assignments to help grow and develop individual skills and experience and overall organizational capabilities in line with BCPR strategic objectives.   In addition, increased, effective training in management skills, team leadership, and team skills should be introduced and delivered on an appropriate, regular basis (and also be an explicit focus, not just a "listed item" in performance evaluations). Effective teams and teamwork does not just happen automatically because a group is labeled a "team". Instead, effective teams are developed by jointly achieving performance objectives together, and through consistent application of the fundamental disciplines needed to develop effective teams. The performance of teams throughout BCPR is "uneven". In the 2009 BCPR employee survey, "impact on results" was identified as the # 1 BCPR employee priority. Significantly increased focus on focus on impact, results, and the development of jointly held team performance objectives will not only help improve employee "connection" and satisfaction, but will help team cohesion and effectiveness. And increased focus on team leadership, management, and team skills will also help improve satisfaction and team effectiveness.

A high-performing recruiting capability: To start, it is important to develop a comprehensive and agreed-on view on the talent pool requirements based on the strategic objectives of the organization. It is also important that the leadership team, working closely with a senior HR officer, develops a consistent view and on the types of skills and abilities required to succeed at BCPR. Consistent with this, a strong and visible UNDP/BCPR brand must be established as a draw for talent.   Recruiting success should be regularly measured and be an explicit focus in leadership evaluations. Recruiting tactics should be reviewed in management meetings, and adjusted as required, with continuous reevaluation of recruiting successes and failures.

Grow talent and required skills and experience: Successful employee development comes from high-impact job experiences that squarely address an individual's priority professional development needs. Development and active management of an employee roster/database will help achieve this goal. Supplemental training will be required in a number of areas - technical, management, team leadership, best practices, etc.   The ability to provide effective "on the job" mentoring also needs to be improved. Effective knowledge transfer methods entail: 1) introducing and explaining appropriate frameworks/approaches to country personnel; 2) "joint problem solving" and application of these framework/approaches with country personnel to solve problems; and 3) quality control by BCPR/experts to ensure effective application of these frameworks/approaches. Improving BCPR's knowledge transfer capability requires training BCPR personnel in these knowledge transfer methods, as well as, making knowledge transfer an explicit part of a greater proportion of funding packages and desired project outcomes. Training is a key element of developing a great staff but must also be seen as truly useful in building desired competencies on both the part of the employee and BCPR.   Interviewees stated that promotions in BCPR were often primarily based on "technical" competency - rather than performance or management/team leadership skills. Leadership should continually communicate the desired employee value proposition, and ensure that the activities of the organization are consistent with that proposition, developing required skills and capabilities, and achieving impact.

The BCPR Human Resources Strategy should place emphasis on management skills and experience, alongside technical know-how for management recruited to head TASC and TASC teams, as well as management, policy/programme and coordination skills for CSPC and POSC.

BCPR top leadership should go through an advanced management training course at the beginning of their tenure, with additional training at regular, appropriate intervals. Further details on top leadership skills and process requirements are provided above in the section on leadership and organization. The availability of executive coaching support should be increased to support not only the current leaders but the future leaders of BCPR as well, and to complement what is learned in the class room leadership development programme.

3.5 Funding Partnerships and Financial Sustainability

BCPR funding has grown significantly over the last years – particularly through increased core UNDP funding, and the generous contributions by several governments.

Funding has grown in line with BCPR's contribution to the overall UN CPR architecture – as well as the important support it provides UNDP Country Offices through: (i) the capacity to deploy a mix of technical and financial resources and services; and (ii) the capacity to provide relevant, quick and flexible responses.

Along with ongoing TRAC 3, Category IV allocation, the recent doubling of the Biennial Support Budget funding to BCPR improves the ability of Bureau to maintain its core operations in the future. However, a large portion of operations funding is still dependent on additional donor support. The uncertainty around year-to-year funding levels requires BCPR to be lean and able to quickly adapt to potentially very different funding scenarios.

In order to continue its important work – and fulfill UNDP's CPR mandate, it is necessary to look creatively at fundraising, consider different operational modalities against different funding scenarios, and increase internal efficiency - significant work has already been done in this regard.

Key Findings:

Donor relationships

Overall, most donors interviewed see BCPR as a high-performing UNDP Bureau and value its work. Engagement with the current and past Bureau leadership is appreciated and to a large extent (although with some exceptions), there is satisfaction with the deployment of earmarked funding. The Review found that donors are largely willing to continue to their support BCPR operations if further progress can be made in key areas:

- UNDP and BCPR have to strengthen their capacity to assess outcomes and demonstrate impact in countries receiving BCPR support.

- The long-term financial viability of BCPR needs to be more deeply rooted within the UNDP financial structure, particularly through greater commitment of UNDP core funds to the Bureau.

- Progress that has been made by BCPR in helping to build CPR capacity in the rest of the UN system needs to be maintained and accelerated.

- Greater emphasis needs to be placed on further improving coordination with partners such as the World Bank to minimize overlap and best leverage comparative advantages, thereby maximizing impact across agencies.

The review team found that it is important that donors continue to support BCPR and its funding windows (the thematic trust fund) including through non-earmarked funds. This will be necessary in the short and medium terms as UNDP and its executives explore mechanisms to increase support for the CPR agenda, including through core contributions.

Overall, according to OECD/DAC statistics, funding from its members for "conflict, peace, and security" activities globally has grown significantly since 2004 (see Table below).

Year	2004	2005	2006	2007	2008
USD (millions)	812.72	1593.44	1728.35	2456.41	3031.05

From http://stats.oecd.org/qwids/#?x=1&y=6&f=3:59,4:1,5:4,2:1,7:1&q=3:59+4:1+5:4+2:1+7:1+1:2+6:2003,2004,2005,2006,2007,2008

UNDP's and BCPR's recent funding for CPR have not grown at the same rate (see Table below combining relevant TRAC III and CPR Thematic Trust Fund Expenditures)

Year	2004	2005	2006	2007	2008
USD (millions)	153.10	239.40	172.03	123.01	136.18

CPR Thematic Trust Fund closing balances at year end have remained relatively constant.

Year	2004	2005	2006	2007	2008
USD (millions)	138.14	180.29	146.84	165.58	147.40

There is increased evidence that suggests that available funding will dip significantly during, and beyond 2011 as a consequence of the global economic crisis. Already ODA allocations have been significantly decreased in Ireland and Italy and, for countries that align ODA to GDP; further decreases are likely to be seen, with probable knock-on effects on funding for disaster and conflict prevention work.

Additional impacts on future donor funding may also follow from changes in major donor policies and elections in donor countries.

There are, however, certain key thematic areas where funding appears to be relatively untapped: climate change and security-related issues. There is a need here for BCPR to access funding through its existing programmes and activities (e.g. climate risk management, DDR, small arms, state-building and post-crisis governance, justice and community security and armed violence), as well as by aligning itself with future trends around these funding areas. While the large majority of this funding will not be accessible to BCPR, the relatively small percentages that *are* accessible will add up to significant additional funds for BCPR to use in support of the evolving CPR agenda.

Financial efficiency

The cost of BCPR operations have increased with substantial costs associated with new Early Recovery and Regional Center deployments, without cost reductions in other areas of BCPR operations. While there is an opportunity to reposition some posts and make some adjustments, *there are no major cost inefficiencies* that have been identified. However, there are areas where resources are not having as significant an impact as they could, e.g., POSC staff in some Regional Centers, whose redeployment could substantially improve impact against mission.

A critical issue identified by the Review is the absence of financial tools in BCPR to identify funding and performance challenges – particularly associated with earmarked funding – until these have become real problems. This affects BCPR's credibility vis-à-vis donors, but more importantly impacts programming and performance on ground.

As a consequence of its rapid growth, BCPR is not as quick and flexible as it used to be – largely because of increasing bureaucratization, and because systems in place (e.g. decision-making, strategic planning, programme development processes) are not always as effective, efficient or responsive as they should be. Several processes have slowed over the years (e.g. mission deployment, programme design and approval, funds disbursement, follow up support) with significant consequences for effectiveness at country level. These "transactional costs" have important financial implications (staff time lost, etc.) and need to be directly addressed to achieve greater efficiency and responsiveness.

Funding effectiveness

Currently BCPR is mostly providing "seed funding" to help "jump start" needed CPR initiatives in the field. Many interviews have indicated that BCPR should also consider providing larger amounts of funding to a smaller number of higher-priority, longer term projects. The hypothesis is that this would tend to have a greater and more consistent impact, including improving the likelihood of more effective capacity development.

BCPR has a realistic sense of what resources are required to support the achievement of CPR outcomes in the future. While the deployment of these resources may vary from the current allocation (e.g. more focused on fewer high-priority initiatives), the general levels of funding and operational cost requirements are reasonably well understood.

Going forward, BCPR can leverage current personnel and general operating expenses to have a substantially larger impact on outcomes and capacity development. As discussed above, there are some current duplicative processes and structures which, when fully addressed, could free up needed funds for investment in the new, priority areas which currently are not adequately funded.

Nonetheless, BCPR needs to be prepared to make adjustments commensurate with potentially large variations in donor and corporate funding that may occur in the future.

Recommendations*:*

There are several recommendations made in the sections above that will **improve financial efficiency and funding effectiveness** (e.g. aligning funding to strategic priorities). In addition to these, BCPR should also consider the following recommendations:

Recommendation No. 12

In order to <u>strengthen donor relationships and manage future funding trends</u>:

- BCPR should invest more heavily in the establishment of effective M&E systems as outlined in section 3.6 below, and extend these to other parts on UNDP, as appropriate.

- The Bureau should intensify its dialog with the Administrator and Board to increase core UNDP allocation funding in support of the CPR agenda beyond current levels. This is critical if UNDP is to continue its important work in the CPR field, and retain its value-add in strengthening the CPR architecture within the UN system.

- BCPR should intensify its efforts (as outlined in the Strategy and Focus section) to coordinate with and lead, as appropriate, the rest of the UN system, including the humanitarian community, and influence and/or contribute to other partners' efforts.

- BCPR should position itself as helping "lead the way" regarding key CPR issues that have strong justice and security, and climate-change implications – as these poles are less likely to be affected significantly by reductions in available donor funding. This will involve deploying key programmes and activities (e.g. climate risk management, DDR, small arms, state-building and post-crisis governance, community security and armed violence) to engage with key donors – and developing/adapting programmes to capitalize on future funding opportunities.

- BCPR should explore alternative and non-traditional funding sources – and urgently develop/implement an aggressive fund-raising strategy. That strategy should be oriented towards consolidating relationships with traditional donors, fostering relationships with new donors within legal frameworks (e.g. the Gates Foundation), aligning itself to emerging CPR trends, and exploring alternative approaches to fund-raising (e.g. Unicef's Change for Good programme with British Airways). An important second tier for such a fundraising strategy would be to support Country Offices access Trust Funds at country-level – as well as carry on the important work done for Country Offices by the CPR Team in the UNDP Brussels Office.

Recommendation No. 13

For the purpose of strengthening <u>financial efficiency and funding effectiveness</u>:

- Develop complementary financial management tools that enable the Bureau to identify "funding and performance problem areas" before they become issues – particularly when it comes to ear-marked funding.

- Review and streamline business processes that slow down BCPR's ability to: (i) deploy appropriate expertise; and (ii) allocate and disburse funds rapidly after pre-allocation decisions have been made. This can be done by creating a joint TASC/POSC working team to provide actionable recommendations for improving current BCPR business processes.

- Reduce "transaction costs" and internal "servicing" associated with deploying missions and making timely & effective decisions regarding country support. These transaction and servicing costs include a culture of "over-consultation" rooted in technical turf battles (see recommendation above on consolidating all technical expertise within TASC – by deploying TASC experts to CSPC and POSC while maintaining "dotted-line" management in TASC), non-adherence to the "one interface" principle, and inadequate management attention to POSC drawing on relevant TASC expertise when needed. These transaction costs also have important financial implications.

- BCPR must reestablish itself as a lean, responsive, and highly adaptable organization in order to improve financial sustainability under various scenarios. This means establishing agreed-to funding scenarios including: baseline, best case, and worst case - and lay out fundraising strategies and operational modalities against each scenario. This process needs to involve the definition of a BCPR core baseline (what is needed in terms of resources and staffing to deliver a good standard of CPR services) and clearly thought-through "growth directions" where funding is deployed as, and when, available.

3.6 Monitoring and Evaluating Impact

To maximize performance against mission, the core institutional skill that BCPR (and UNDP) must effectively execute is the timely and effective deployment of the right people with the right sets of skills, who apply the highest impact methods and approaches, to solve and prevent complex, interdisciplinary problems on a sustained basis. In the field, BCPR will maximize its measurable impact and results effectively, responsively, and efficiently executing that core institutional skill, and having the right Monitoring and Evaluation system in place so that can BCPR and its stakeholders can readily track its results and impact.

Findings

- The review team observed several major challenges and "gaps" that stand in the way of establishing an effective and direct linkage between the effective deployments of BCPR required core institutional skills (defined immediately above) and the achievement of high performance impact and results that are tracked and measured in the field. There is no comprehensive system in place that identifies, captures, codifies, trains and ensures ready access to, and effective application of "lesson learned" (internally or externally) throughout BCPR and UNDP

- Several interviews cited the problem of frameworks and approaches that were "too theoretical". The problem may be that some of the approaches lack the essential "next steps" that make them practical and easy to apply in the field - e.g. defined steps, or algorithms to ensure effective application, identification of key success factors for application, frameworks that identify where these approaches are, and are not appropriate, and illustrations of effective applications. In addition, during the interviews there were numerous reports of personnel being deployed who were too policy oriented, or not possessing the right experience to be able to set an appropriate baseline for effective monitoring and evaluation

- There is no consistent effort to access external experts knowledgeable in "leading edge" high impact approaches and best practices, or in methods from other disciplines that BCPR personnel may not familiar with, but which could have a significant positive effect on impact and results achieved

- There is inadequate and inconsistent monitoring of programs and of what teams actually do in the field to ensure that (external and internal) best practices and "lessons learned" are applied on a widespread, consistent, appropriate basis.

These challenges and "gaps" have a direct, negative impact on BCPR's and UNDP's potential impact and results achieved in the field.

There are specific methods available that could achieve almost immediate ("near-term"), tangible results and further improve focus on impact and results that are not currently being utilized. Many of the interviewees felt very positively about how quickly and effectively BCPR responds to crises and catastrophes. It should be noted however, that there are methods available that could further improve BCPR's orientation towards impact and results, and produce the achievement of almost immediate, tangible, measurable and meaningful impact and results against BCPR's mission. One of these is methods is called the "Breakthrough Approach". Breakthrough assembles teams deployed in the field; identifies performance challenges against mission that the teams feel are "urgent and compelling"; guides teams in the development of precise "crystal-clear" goals against these challenges that can be achieved in the near term and that the teams will be held accountable for; provides guidance regarding related performance methods and work planning so that teams can achieve these goals: and then institutes structured accountability reviews that help ensure that goals are actually achieved. Breakthrough has been applied in virtually every type of industry in the private sector, and throughout the public sector with a 90% or greater success rate (i.e. achievement of performance goals). It has also been applied, for example, in World Bank sponsored projects and achieved tangible, measurable impact and performance improvement results within 120 days in the agricultural sector in Latin America, and in fighting HIV/AIDS

in Africa. BCPR has started to put more emphasis on assessing the direct and indirect impact and outcomes associated with its work.

A number of studies and evaluations[36] recently carried out at the initiative of various teams including team specific M&E initiatives;[37] help indicate a range of potential areas of demonstrated (documentable impact and results), which are currently in the process of being documented more fully.

Successful prevention of potentially violent tensions	Prevention of spread of violent conflict, or negotiation of peace agreement	Prevention of recurrence of violent conflict
Key highlights: Potential elections-related instability successfully prevented, with BCPR assistance, in Ghana in 2004 and 2008; Guyana in 2006; Lesotho, Mauritania, and Gambia in 2007; and Maldives and Bangladesh in 2008	Key highlights: Mass inter-group violence in parts of Kenya (2008) and Nigeria (2006-7) prevented from spreading to adjoining areas; Support to processes to reach peace agreements in Kenya, Zimbabwe, and Cyprus (still ongoing) discreetly and successfully provided	Key highlights: Successful political transition in Sierra Leone in August 2007; Establishment of viable platforms in Nepal, Bosnia-Herzegovina, and the Comoros for sustained assistance to national and local dialogue processes, and for the constitution-making process in the case of Nepal

Such efforts, however, need to be more systematic, and better integrated into significantly improved systems and capacities of the part of UNDP and BCPR to monitor, on an ongoing basis, outcomes and impact, rather than to inputs and projects.

UNDP and BCPR have started to improve their ability to incorporate impact and monitoring considerations in their planning and management activities. However, although relevant tools have been developed, their deployment has been mixed, and their application has not been systematic, consistent or widespread. M&E capacities in HQ and in countries are not adequate, and resources are not sufficient for the needed "step-up" up in capacity. BCPR primary dependence on UNDP systems, capacities, and M&E approaches, also complicate the task of improving its own capacity to measure and demonstrate impact.

BCPR's focus on projects as outputs, varied interpretations of outcomes, and a lack of clarity regarding how to measure BCPR's indirect role, specific contributions, and added value within a given context,[38] had contributed to a tendency to focus on activities rather than outcomes or tangible results.

Several BCPR staff and partners, including donors, have indicated that how UNDP and BCPR measures progress or impact against mission, for instance against its capacity building mandate, is unclear. They have also suggested that M&E frameworks that have been developed and promoted (e.g. UNDP performance based monitoring) are not adequate for fast changing, complex CPR environments. Also, the critical lack of key information including baselines and analysis of a situation, on which BCPR interventions aim to have an impact, makes the measurement of result and impact even more difficult. . Ultimately, most seem to agree that evidence of impact is weakly demonstrated when it is - at all.

Another key weakness in BCPR monitoring capacities, relates to the capacity to monitor country contexts, where it operates. BCPR, in fact, currently does not have a system for on-going monitoring of key countries with a view to assessing risk for the outbreak, escalation, or resurgence of violence and conflict.

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[36] Recent evaluations include reviews of early recovery, disaster risk reduction and conflict prevention
[37] For example, the Rule of Law program is currently involved in a thorough evaluation of impact of past and current resource investments.
[38] It is important to note that the combination of relevant and timely technical expertise and flexible funding are key organizational enablers of BCPR impact. Critical in this mix are the people (BCPR staff, consultants drawn from managed rosters, etc.) and the creative deployment of funding (catalytic funding, bridge funding, process survival and support funding, under-served area support funding, etc). In practice, this means that much of BCPR's continued value added rests in ensuring effective TASC teams, a functional POSC – and effective working and coordination processes between the two. Therefore solid collaboration between the two teams, and with the strategic planning functions of CSPC, is critical to develop an appropriate monitoring system that can capture impact of BCPR work with the required specificity and detail.

Currently, when a crisis breaks out, teams work hard to get on top of developments – particularly through Country Offices. However, proactive risk assessment – using the range of tools available (e.g. early warning methods, etc.) – is not part and parcel of BCPR's daily work. This, in part, explains why crisis prevention is not sufficiently addressed. Putting in place such a mechanism is not necessarily a huge or complex exercise given that BCPR has access to dedicated Peace and Development Advisors (PDAs) in key countries. It will require, though, some thinking regarding how to develop and put in place a system that feeds into overall M&E, is not too labor-intensive for PDAs or for BCPR HQ staff, and that helps inform crisis prevention.

Additional focus on monitoring capacities for impact and outcomes, but also to help better anticipate BCPR positioning consistent with ensuring impact, is, therefore, necessary, and it should be acknowledged that BCPR has taken positive steps in this direction. UNDP and BCPR are making work planning more results and outcomes focused and are conducting reviews of required tools to support this effort.

The new tools rolled out by UNDP in an attempt to increase focus on assessing impact include:

- Balanced Scorecard
- Executive Snap Shot
- Program and Operating Procedures (POP) – on-line access to corporate rules, procedures and general M&E guidance

However, these tools have not yet been put effectively into practice. While there has been time allocated to developing these tools, there has not been enough time allocated to making them operational; for example, there has been limited training, workshops, communications, regarding their application, etc. Consequently the tools are not generally used and, where used, they are not being deployed consistently. Instead of being consistently applied, use of these new tools by individuals appears to be based on (i) whether the individual happens to be aware of the tool, (ii) how IT savvy the individual is, and (iii) how much the individual is "results and impact oriented".

The lack of M&E resources throughout the organization, and in specific, in regard to CPR, and the absence of a dedicated capacity in the UNDP Evaluation Office suggest that much more needs to be done in this field. While long-term investments are certainly required, in the near and medium term, there is a need for additional M&E resources to support various priorities:

- Ensure that the tool kit is adequate and that there is increased and consistent application throughout the system

- Conduct targeted analysis to support near term assessments of impact using "elbow grease" until a full system is operational (this may be critical in addressing some of the donor inquiries about the impact of their investments, e.g., the support of the Netherlands for the Rule of Law program).

- Support additional development and/or refinement of tools, as appropriate

It is worth noting that currently UNDP and BCPR managers are not consistently rated on quality and timeliness of outcomes, a situation that needs to be fixed if progress is to be achieved in this area. Although scarce, there are examples of successful efforts to monitor and measure impact that exist within the UN system, with UNICEF the most cited case.

A clear strategy to step up M&E systems and capacities in HQs and in countries, and increased effort to monitor and demonstrate the impact of its work are critical for BCPR to improve its strategic planning processes, its performance, its effectiveness, and to demonstrate its added value. These are all necessary steps to be able to effectively negotiate funding arrangements with donors.

Recommendations

Recommendation No. 14

BCPR needs to establish a "stop-gap"; resource-heavy **M&E approach** in the near term while developing a more efficient long-term system. BCPR should:

- Meet near-term impact measurement requirements by assigning more resources to assemble data against a clear framework for assessing relevance, impact and efficiency
- Summarize available baseline information across CPR projects, and develop and communicate a common approach going forward; build on the tools already available (described in Section 2)
- Work with the rest of UNDP to establish a comprehensive system for assessing CPR impact and effectiveness at the field level; test in 2010, and roll out in 2011
- Ensure M&E system and strategic planning processes, are intimately connected
- Ensure analyses, baselines, benchmarks and indicators (built up against the change theory) are embedded into country support strategies/agreements

The outline of a near-term M&E approach is summarized in Annex 3;[39] the outline of a longer-term M&E system is also provided in Annex 3.[40]

The Bureau needs to implement a comprehensive approach and system that identifies internal and external best practices and experts; captures and codifies, in a user-friendly, accessible and practical manner, these practices; provides consistent and regular training in their application; and institutes ongoing oversight and focus within performance evaluations to ensure accountability and effective application. The Bureau should institutionalize the use and application of methods similar to the "Breakthrough" approach (see Annex 3) to further augment BCPR's focus on impact and results, and accelerate the achievement, on an ongoing basis, of measurable, meaningful improvement in impact and results achieved in the field.

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[39] An approach consistent with this is being rolled out for the Rule of Law practice funded by the Netherlands. This can provide a good pilot, and based on what is learned from this and other ongoing efforts at measuring impact and capacity development, a robust near-term methodology can be refined and applied more broadly in other priority areas.

[40] The eventual design of this long-term system will be informed by the results of the pilots conducted in 2010.

4. Implementation Priorities

The recommendations presented in Section 3 suggest several implementation priorities, as summarized in the Exhibit below.

Exhibit
Summary of Recommendations and Implementation Priorities

Area of Performance	Recommendations	Implementation Priorities
Strategy and Impact	1. Collectively develop and implement criteria for prioritization 2. Implement a comprehensive approach to planning and driving strategic focus 3. Optimize BCPR value added in evolving UN CPR architecture 4. Improve capacity to understand and anticipate emerging CPR trends	a) Launch two working groups comprised of senior managers across BCPR to detail/implement recommendations • Prioritization & Integrated Planning • CPR Trends and Optimizing Future BCPR Value Added b) Establish clear alignment with other CPR actors
Leadership and Management	5. Establish means for BCPR top leadership to work more cohesively as a team • A deputy position to oversee TASC and POSC operations • A Chief of Staff to ensure leadership processes are timely, supported by relevant information, and tracked. 6. Introduce an increased focus on management skills of BCPR staff 7. Allocate the necessary resources and support for "ground breakers"	c) Agree on a set of operating principles for senior leadership team d) Re-energize and improve management training and mentoring provided to staff e) Define and launch transition to new leadership/Chief of Staff management model f) Establish a comprehensive communication plan targeted to major internal and external stakeholder
Structure and Processes	8. Improve joint effectiveness of Bureau's clusters and teams 9. Adjust organization model and structure to strengthen the general approach suggested in the 2006 review 10. Streamline, redesign and roll out adjustments to improve timeliness/responsiveness and effectiveness of selected key processes	g) Establish a "transition leadership team" to guide the final design and roll out of the new structure and processes • Representation from across Bureau • Special working group on ER transition • Additional working groups focused on improving timeliness, responsiveness and effectiveness of selected processes
People and Competencies	11. implement a fundamentally changed, more strategic, and proactive HR strategy	h) Assemble a HR strategy task force, agree on implementation plan and launch
Partnership and Financial Viability	12. Establish funding strategies that provide an optimal balance between longer term sustainable funding and near term gaps 13. Strengthen financial and operational efficiency and funding effectiveness	i) Assemble a cross functional financial viability working group to finalize funding scenarios, agree on strategies and improved funds tracking approach j) Consolidate existing efforts in partner coordination and complimentarity; with active senior leadership involvement
Monitoring and Evaluating Impact	14. Establish a "stop-gap", resource-heavy M&E approach in the near term while developing a more efficient long term system	k) Launch a cross functional working group to develop and implement near-term and longer-term M&E approaches