

PLANNING AND REPORTING GUIDELINES



Introduction

Planning is a responsibility or an obligation, not an option. Therefore, a planning process needs to be well prepared. One of the strategies is by providing the needed guidelines and tools. PMI at various levels throughout Indonesia has diverse capacity, both organizational and human resources capacity. Therefore, a reference that can facilitate PMI personnel in carrying out the planning process properly is needed.

Reporting is the evidence that we are accountable and trustworthy in relation to what we had planned and worked on. A quality report, which contains the information required in a complete and timely fashion, and presented in a form that is easy or interesting to read, is an indicator of the level of professionalism had by PMI personnel. A systematic, interesting, and informative report will be useful to inform various decisions to be taken when managing a program or an organization.

The Planning and Reporting Guideline was developed by PMI NHQ in order to build the capacity, skill, and practice in performing standard planning and reporting in PMI at all levels. Therefore, the board members of PMI NHQ encourage PMI at all levels to adopt the planning and reporting process and mechanisms in accordance with the technical instruction set forth in this guideline.

The Planning and Reporting Guideline was developed based on inputs from various PMI personnel, ranging from PMI NHQ, Chapters, and Branches. Therefore, we would like to express our highest appreciation for all inputs provided in improving this guideline.

The use of this guideline at various levels will ensure that all of the efforts undertaken by PMI nationwide will contribute to the manifestation of PMI's vision, i.e. PMI demonstrates strong character, is professional, self-sustaining, and respected by the communities.

Jakarta, April 2015

Secretary General

Ritola Tasmaya



Instruction on How to Use The Guideline

The Guideline consists of **five** important parts, i.e.:

1. **Introduction**, which describes the development process of Strategic Plan (SP) and Operational Plan (OP), the purpose and benefits, as well as the scope of planning in PMI at all levels.
2. **PMI Planning Documents 2014-2019**, consisting of Flowcharts of the Strategic Plan and Operational Plan along with the background and rationale, Strategic Plan and Operational Plan Matrices, Indicator Registry, and List of Activities to achieve outputs.
3. **Planning Mechanism**, the principles of planning, planning process, planning or annual meeting schedule.
4. **Work Plan Development Process**, consisting of planning formats for all levels along with the filling instructions.
5. **Reporting**, consisting of the purposes and benefits, reporting content and schedule, as well as formats of monthly, quarterly, semester, and annual report.

The guideline has been structured in a way that PMI at various levels can easily practice its contents in the annual work plan development process. Therefore, you need to understand the five parts above well.

Particularly for the second part, i.e. PMI planning documents 2014-2019, you need to examine each statement of strategic objective, outcome, output, as well as indicator and target. By doing so, you will understand the objectives PMI would like to pursue in the next five years and thus reflect them into local PMI's annual work plan .

Whenever possible, follow the developed process and principles and use the formats provided carefully.

If you have any input to enhance this guideline in the future, you may contact the Planning Bureau and the Organizational Development Division of PMI National Headquarters.

We hope you enjoy learning and using this guideline.

Jakarta, March 2015

Guideline Development Tim

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Daftar Singkatan dan Akronim

| | |
|----------|--|
| AABB | American Association Blood Bank |
| AD/ART | <i>Anggaran Dasar dan Anggaran Rumah Tangga/Statute and Bylaws</i> |
| APBD | <i>Anggaran Pendapatan dan Belanja Daerah/Local Budget</i> |
| BNPB | <i>Badan Nasional Penanggulangan Bencana/National Disaster Management Agency</i> |
| BNSP | <i>Badan Nasional Sertifikasi Profesi/National Profession Standardization Agency</i> |
| BOR | Bed Occupancy Rate |
| CA | Cooperation Agreement |
| CBHFA | Community-Based Health and First Aid |
| CEONC | Comprehensive Emergency Obstetric Neonatal Care |
| CTP | Cash Transfer Program |
| CSR | Corporate Social Responsibility |
| DBM | Dead Bodies Management |
| DDS | <i>Donor Darah Sukarela/Voluntary Blood Donor</i> |
| DM | Disaster Management |
| DP2 | <i>Data Penilaian Pegawai/Performance Appraisal Data</i> |
| DPR/DPRD | <i>Dewan Perwakilan Rakyat/Daerah/(Local) Parliament</i> |
| DRR | Disaster Risk Reduction |
| DU | Dapur Umum/Field Kitchen |
| DVI | Disaster Victim Identification |
| EHL | Exploring Humanitarian Law |
| EQA | External Quality Assessment |
| FGD | Focused Group Discussion |
| Forel | <i>Forum Sukarelawan/Volunteer Forum</i> |
| Forpis | Forum Remaja Palang Merah Indonesia/Youth Red Cross Forum |
| Gadar | <i>Gawat Darurat/Emergency</i> |
| GMP | Good Management Practice |
| HRD | Human Resources Development |
| HSS | Health and Social Services |
| ICBRR | Integrated Community-Based Risk Reduction |
| ICRC | International Committee of Red Cross |
| ICT | Information, Communication, and Technology |

| | |
|------------|--|
| IEC | Information, Education, and Communication |
| IEMS | Integrated Emergency Management System |
| IFRC | International Federation of Red Cross |
| IPC | Infection Prevention and Control |
| ITT | Indicator Tracking Table |
| JCI | Joint Commission International |
| Juklak | <i>Petunjuk Pelaksanaan/Implementation Guidelines</i> |
| Juknis | <i>Petunjuk Teknis/Technical Guidelines</i> |
| Jumbara | <i>Jumpa Bakti Gembira/Youth Gathering</i> |
| K3RS | <i>Keselamatan dan Kesehatan Kerja Rumah Sakit/Hospital Occupational Health and Safety</i> |
| KARS | <i>Komisi Akreditasi Rumah Sakit/Hospital Accreditation Committee</i> |
| KGC | Korean Green Cross |
| KSR | <i>Korps Sukarela/Volunteer Corps</i> |
| M&E | Monitoring and Evaluation |
| MoU | Memorandum of Understanding |
| MRI | Magnetic Resonance Imaging |
| Musrenbang | <i>Musyawarah Perencanaan Pembangunan/Development Planning Meeting</i> |
| OEM | Original Equipment Manufacturer |
| OP | Operational Plan |
| PHAST | Participatory Hygiene and Sanitation Transformation |
| PMER | Planning, Monitoring, Evaluation, and Reporting |
| PMI | <i>Palang Merah Indonesia/Indonesian Red Cross</i> |
| PNS | Participating National Society |
| PO | <i>Peraturan Organisasi/Organizational Procedures</i> |
| RCRC | Red Cross and Red Crescent |
| RDMC | Regional Disaster Management Committee |
| RFL | Restoring Family Link |
| RM | Resource Mobilization |
| RPJM | <i>Rencana Pembangunan Jangka Menengah/Medium-Term Development Plan</i> |
| RPP | <i>Rencana Program Pokok/Key Program Plan</i> |
| SAR | Search and Rescue |
| SATGANA | <i>Satuan Penanggulangan Bencana/Disaster Response Unit</i> |

| | |
|---------|---|
| SIMUDDA | <i>Sistem Informasi Manajemen Unit Donor Darah/Blood Donor Unit Management Information System</i> |
| SKP | <i>Satuan Kredit Profesional/Professional Credit Unit</i> |
| SOP | Standard of Procedure |
| SP | Strategic Plan |
| SWOT | Strength, Weakness, Opportunity, and Threat |
| TB | Tuberculosis |
| ToT | Training of Trainer |
| TSR | <i>Tenaga Sukarela/Professional Volunteer</i> |
| TTD | <i>Teknik Transfusi Darah/Blood Transfusion Technique</i> |
| UMP/K | <i>Upah Minimum Provinsi/Kabupaten/Kota/Local Minimum Wage</i> |
| UTD | <i>Unit Transfusi Darah/Blood Transfusion Unit</i> |
| WHO | World Health Organization |
| YRC | Youth Red Cross |

I. INTRODUCTION



1.1. Background

A strategic and synergistic planning is the first step towards becoming a well-functioning National Society of Indonesian Red Cross (PMI). As the saying goes, '**failing to plan is planning to fail**'. Therefore, planning is a critical process to optimize quality services.

In addition to planning, reporting is also an important part to improve the organization's accountability to the public and relevant stakeholders.

Planning and reporting is essentially **doing what we say and saying what we do**. Therefore, planning and reporting are essential areas to be improved in order to manifest realize PMI that demonstrates strong character, is professional, self-sustaining, and respected by the communities.

This guideline manual is a technical instruction that describes the concepts and basic principles, mechanisms, processes, and tools in performing planning and reporting.

1.2. Strategic Plan (SP)

Strategic Plan is a high-level planning document produced through a planning process to decide where the organization wants to be and why, then choose a variety of strategies to ensure that these objectives can be achieved with the best strategy.

Strategic Plan helps the organization to determine strategies to respond to opportunities and challenges that might arise in the future, while maintaining its coherence and long-term sustainability. A Strategic Plan is usually developed for a period of 5-10 years.

PMI has developed a Strategic Plan for 2014-2019 which consists of vision, mission, and strategic objectives (goal) to be achieved by PMI nationwide. The Strategic Plan has been developed as key policies and programs to be implemented over the next five years by PMI NHQ/Chapter/Branch.

The Strategic Plan drafting process has been initiated since December 2013 by conducting a SWOT analysis (Strength, Weaknesses, Opportunity, Threat).

Then in May-August 2014, the drafting team collected inputs through six regional meetings involving representatives of board members from PMI Chapters/Branches. Finally, the draft of key strategic plan policies was agreed on at PMI XX National Assembly Meeting Congress in December 2014.

PMI Strategic Plan helps all organizational entities to have a good understanding on PMI's capacity and current situation, and then identify ways to address the opportunities and challenges inside and outside the organization. Furthermore, the Strategic Plan guides the organizational direction articulated in the vision and mission statements, and determines how to achieve them through strategic objectives.

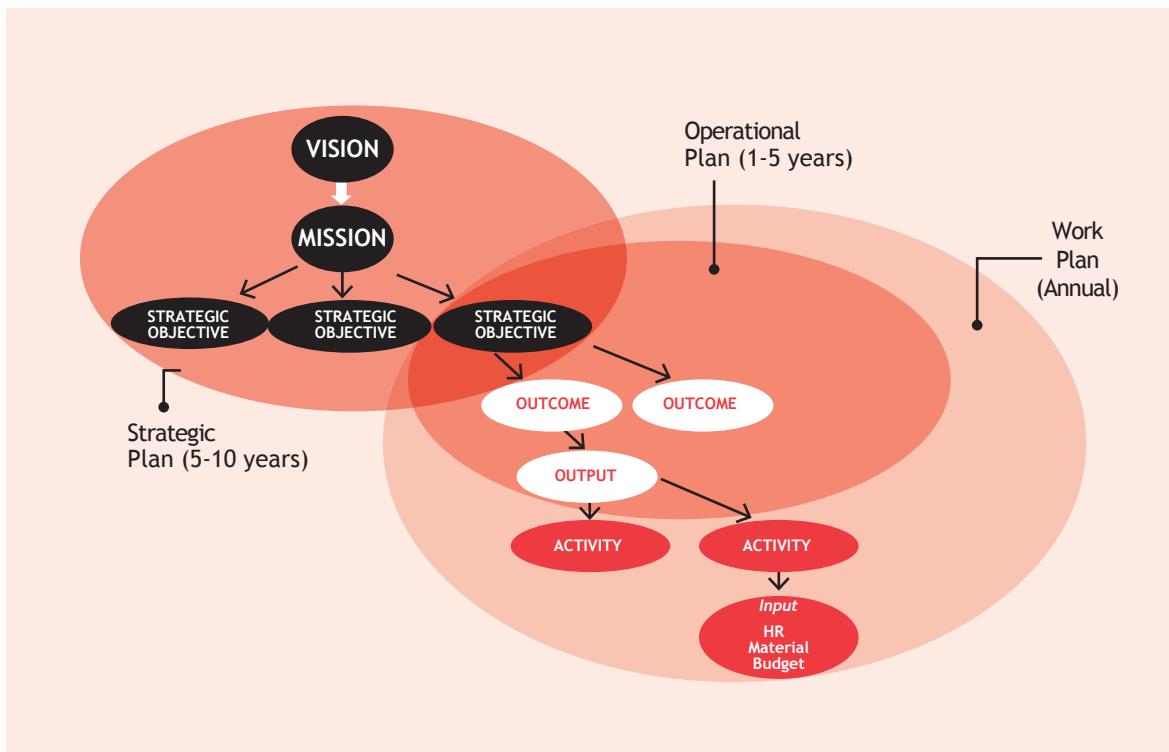
Finally, the Strategic Plan is the main reference for developing the operational plan (annual work plans, programs, or projects), implementing, and evaluating PMI's program performance by the end of 2019.

1.3. Operational Plan (OP)

Based on the endorsed Strategic Plan, PMI Operational Plan 2015-2019 has also been developed through a participatory and consultative process, by involving PMI NHQ/Chapters /Branches, including movement partners (IFRC, PNSs, and ICRC) in January-February 2015. The Operational Plan aims to operationalize the Strategic Plan, through outcomes (intermediate results) and outputs (immediate results) to be achieved through various programs, projects, or activities.

The indicators and achievement targets for 2019 at different levels of objectives (outcomes and outputs) have also been set. The Operational Plan document will then be a reference to develop the annual work plan to ensure all programs implemented are coherent, synergistic, and sustainable.

The following chart illustrates the relationship between Strategic Plan, Operational Plan and Annual Work Plan.



The existence of these two planning documents is an indication that PMI has currently moved one step forward in the planning process. By having clear objectives for various levels, i.e. strategic objectives, outcomes, and outputs, the planning process is expected to be done based on needs and with clear objectives, not solely activity-based.

In addition, the developed indicators are the measurement of the work plan achievements, both annual and long-term (five years) ones. The followings are several important benefits of a quality Strategic Plan and Operational Plan.

- Demonstrating clear **leadership** in providing direction or vision of the organization.
- Stating a vision** that unites and motivates all organizational entities to manifest it.
- Improving the organization **effectiveness** through a decision making made based on a coherent framework, existing capacities and competences, priorities and consensus to maintain ‘*what we want to do*’ and ‘*what should be done*’.

- d. Enhancing **credibility** and confidence in front of the government, donors, and other stakeholders.
- e. Strengthening PMI's position in **negotiating a partnership**, including with Movement Partners so that the supports could be aligned with the strategic plan, not vice versa.
- f. Clarifying the **role of PMI at all levels** in achieving the strategic objectives to manifest the vision of the organization.

Finally, the Planning and Reporting Guideline will help PMI at all levels to develop a logic, realistic, objective-based, measurable, and synergistic planning in between levels. All organizations which have multi levels, basically adopt a two-way planning, i.e. top down and bottom up.

On one hand, '**top down**' wise, the Strategic Plan and Operational Plan developed by PMI NHQ become a reference for planning by PMI Sub-districts, Branches, and Chapters.

On the other hand , '**bottom up**' wise, by submitting work plan from PMI Sub-district to PMI Branch, from PMI Branch to PMI Chapter and so on from PMI Chapter to PMI NHQ, the work plan between different levels can be more synergistic, coherent, and accommodative.

1.4. Legal Foundation

- a. PMI Statute resulted from the 2014 XX National Assembly Article 32 paragraph 6 section C, Article 33 paragraph 7 section C.
- b. Strategic Plan and Operational Plan 2014-2019.

1.5. General Definition

Planning is a planning mechanism starting from PMI Sub-district, PMI Branch, PMI Chapter to PMI NHQ. Planning in this guideline refers to the plan prepared by PMI Sub-districts, PMI Branches, PMI Chapters and PMI NHQ in reference to PMI Strategic Plan and Operational Plan 2014-2019.

If we refer to PMI Statute and Bylaw Article 33, paragraph 7, section C that states “endorsing the Key Program Plan (RPP) in relevant Branch’s working area for 5 (five) years period based on PMI Chapters’ Program Plan also the Key Policies and Strategic Plan endorsed by PMI National and Provincial Assembly Meetings”, the form of RPP referred to is the strategic objectives in the Strategic Plan which are detailed out in PMI Operational Plan.

The planning focuses on eight PMI **Key Program Plans (RPP)** based on the strategic objectives set in the strategic plan, either for local, regional, or national levels, i.e.:

1. Penguatan dan pengembangan organisasi.
2. Peningkatan kapasitas SDM dan sarana prasarana.
3. Peningkatan kualitas dan efektivitas pelayanan darurat.
4. Peningkatan ketahanan masyarakat dan pelayanan kesehatan rujukan.
5. Peningkatan pelayanan donor darah.
6. Pengembangan sumber daya melalui kemitraan strategis.
7. Peningkatan akuntabilitas dan reputasi organisasi.
8. Penyebarluasan nilai-nilai kemanusiaan.

1.6. Purpose and Benefit

- a. PMI at all levels, have a time/schedule reference and mechanisms to implement planning in order to better align with the organizational capacity, community needs and local government priorities; and synergy between different levels of PMI, starting from the Sub-district, Branch, Chapter, to NHQ.
- b. PMI at all levels, have uniform planning formats, both in terms of form and term or nomenclature used so that they are easier to understand and compiled by PMI one level above and nationwide.
- c. PMI at all levels, can use the planning document as a reference when conducting monitoring and evaluation activities in order to improve the organizational performance and accountability.

1.7. Scope of Planning

Table 1. Scope of Planning

| PMI Level | Scope of Work Plan |
|--------------------|--|
| National Level | <i>To formulate and endorse</i> policies related to vision, mission, strategic objectives, implementation guideline, national and international partnerships, also tiered coaching functions. |
| Chapter Level | <i>To describe</i> the policies endorsed at the national level into a form of implementation guideline based on the needs, capacities, and priorities of PMI Chapter, Branch, and Sub-district; in the area, organizational development, also tiered coaching functions. |
| Branch Level | <i>To plan and implement</i> PMI work plan at the community or beneficiaries level based on the needs, capacities and priorities of PMI Branch and Sub-district in reference to the policies and program guidelines provided by PMI Chapter/NHQ. |
| Sub-district Level | <i>To plan and implement</i> PMI work plan at the community or beneficiaries level based on the needs, capacities and priorities of PMI Sub-district in reference to the policies and program guidelines provided by the PMI Chapter/NHQ |

A Strategic Plan provides directions to the overall organization by defining vision and mission as well as relevant strategic objectives to achieve them.

An Operational plan determines how the objectives outlined in the Strategic Plan will be achieved at the field implementation.

II. PMI PLANNING DOCUMENTS 2014-2019



PMI Planning Documents 2014-2019

The content of the Strategic Plan and the Operational Plan will be visualized in two forms, i.e. flowcharts and matrices (tbls).

The Strategic Plan and Operational Plan are presented in flowcharts to help the audience understand the logical relations between outputs, outcomes, strategic objectives, missions, and vision of PMI. In addition, the audience will understand the level of sufficiency in each objective at a lower level in order to manifest the objective at a higher level.

Meanwhile the Strategic Plan and Operational Plan presented in matrices are documents that include a detailed description of outcome and output indicators as well as each of its targets. These matrices will be used in preparing PMI's annual work plan at all levels in accordance with the guidelines provided in the next section.

Definition of Key Terms in the Planning Document Matrices

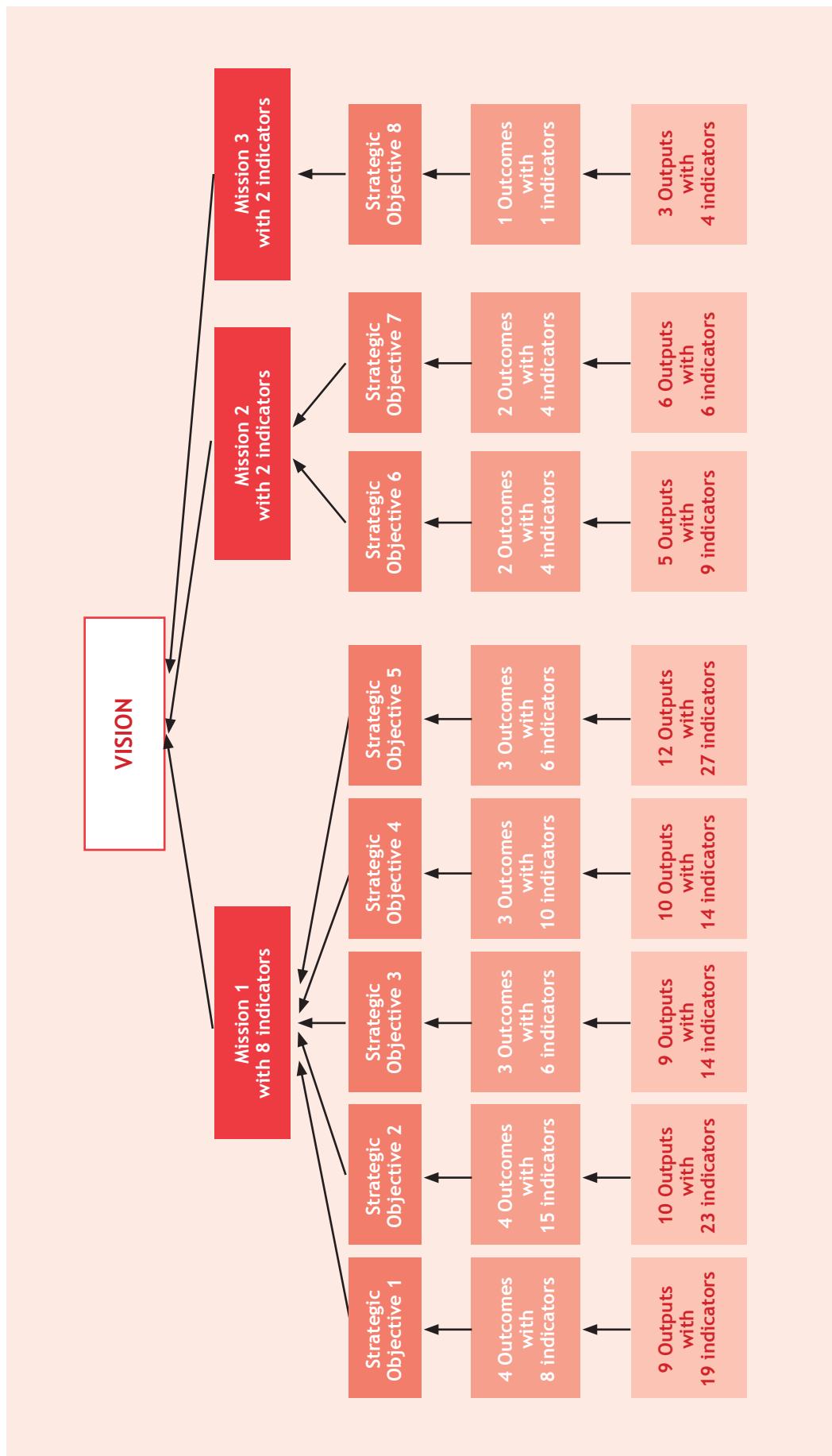
- ✓ **Strategic Objective** is a simple and clear statement that describes the long-term results to be achieved by a work plan.
- ✓ **Outcome** is the intermediate result that has to be achieved in order to meet the Strategic Objective.
- ✓ **Output** is a tangible product (goods and services) or immediate result of the activities carried out.
- ✓ **Indicator** is a measurement unit to determine whether there is any progress or achievement of the intended objectives or results.

Indicator is just one of the measurement tools to assess performance. There are many ways to measure achievement of an objective, but not all of them need to be included into the work plan. Each indicator has a consequence of data collection responsibilities.

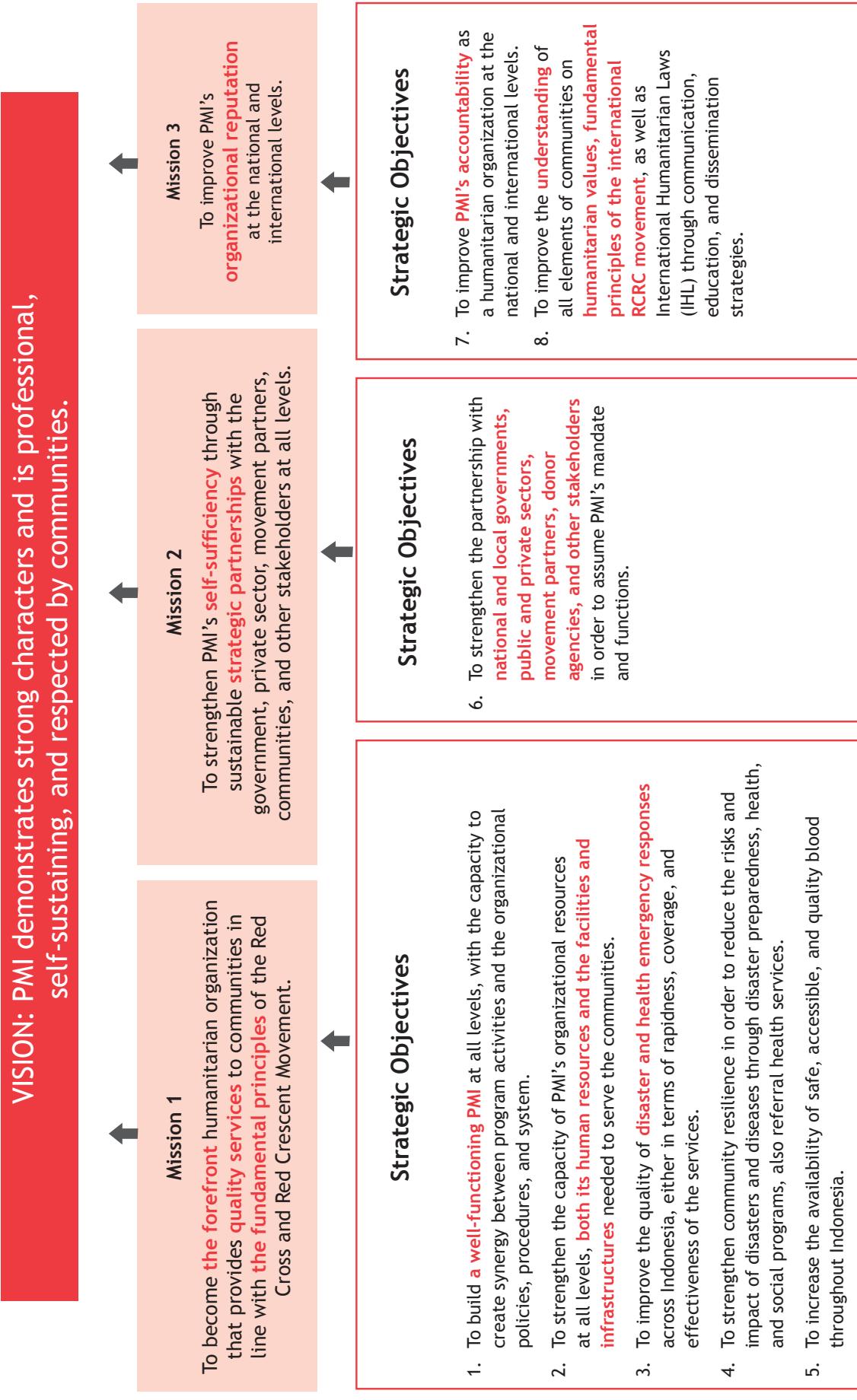
Therefore, not all of the things listed in the output/outcome statements need to be measured. The selected indicators are the ones that measure the most important parts in indicating a successful achievement of objectives and can easily be measured.

- ✓ **Target** is the quantity or percentage to be achieved for each indicator, determined in accordance with the needs and capacities.

2.1. Flowchart of PMI Strategic Plan and Operational Plan 2014-2019



Strategic Plan and Operational Plan in flowcharts along with description on statement background



Strategic Plan Description

Vision:

- ✓ Strong Character, works in line with the International RCRC Fundamental Principles, Code of Conduct, both in managing its organization and its services.
- ✓ Professional, works based on universally accepted standards and norms and focuses on the most vulnerable groups.
- ✓ Self-sustaining, relies on existing organizational resources.
- ✓ Respected by communities, recognized and supported by public at large.

Mission 1:

Recently, there have been many more organizations working on humanitarian issues, either at local, national, or international levels. Since 2008, the Government has even established a National and Local Disaster Management Agencies (BNPB and BPBD). PMI, which has been established since 1945 and the only Red Cross movement mandated by the Government of Indonesia, should strengthen its capacities to become the foremost humanitarian organization in Indonesia amidst growing humanitarian players in the country and globally.

This first mission could only be manifested if the organizational function could be optimized, supported with adequate human resources, infrastructures and equipment, high quality services in emergency response, in community development, health referral service, as well as specific Red Cross services, i.e. Blood Donor.

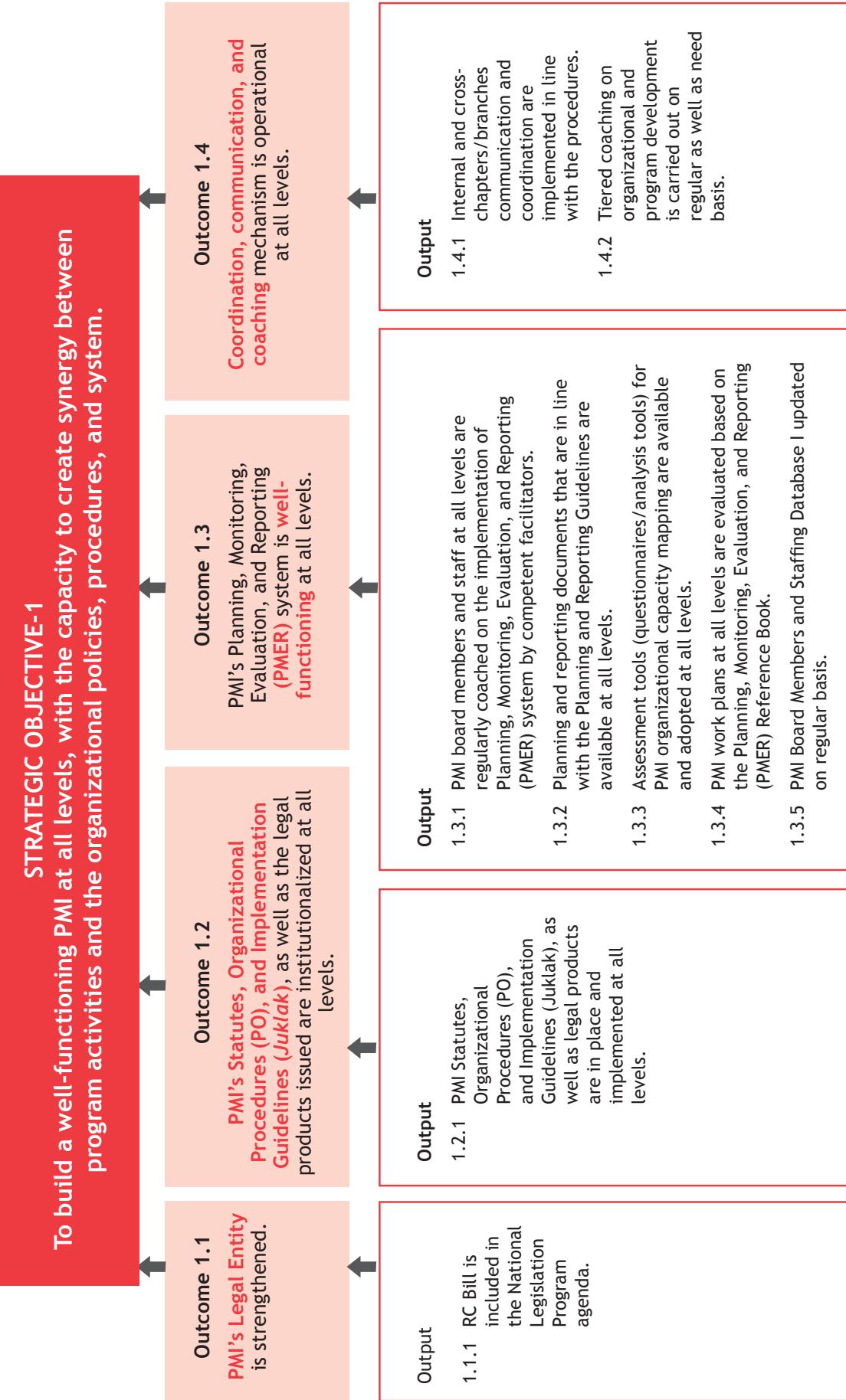
This first mission is an attempt to manifest the term ‘Strong Character and Professional’ within PMI’s vision statement above.

Mission 2:

Independence is one of the seven Fundamental Principles of RCRC, including PMI. PMI realizes that strategic partnership is essential to carry out its mandate. At the same time, however, PMI has to be independent in a way that it should not be following or intervened by the interest of certain groups or political affiliations. In partnering with different stakeholders, PMI should position itself as a competent and equal partner, not an inferior neither superior one.

Mission 3:

The organizational reputation should be established and maintained seriously because with good reputation, PMI will grow fast. If measured based on the geographical coverage and number of population served, PMI is the fifth biggest National Society in the world. Therefore, an international reputation should also be strengthened.



Description

Strategic Objective 1

PMI is considered well-functioning if it is capable to provide relevant services for vulnerable communities all over the country through its voluntary network, and this is only possible if the work plan along with the organizational policies, procedures, and system are effectively implemented.

Outcome 1.1.

The existing **legal entity of PMI**, i.e. the Presidential Decree No 25/1950 and the Presidential Decree No 246/1963, is considered necessary to be strengthened with a Red Cross Law in order to strengthen PMI's function and capacities all over Indonesia in performing the mandate assigned by the Government. The process of proposing the Red Cross Bill to be enacted as a Law has been started since 10 years ago, and it is expected to be concluded during the board tenure of 2014 - 2019. To do so, the Red Cross Bill should be put into the parliament's legislative agenda beforehand.

Outcome 1.2.

Policies in the form of **organizational regulation and guidance** such as statute and bylaws, Organizational Procedures, and Technical Guidelines are required not only as a document but to be institutionalized and applied on daily basis in PMI's operation at all levels. For example, an institutionalized statute and bylaws means that their contents have been understood by all entities within the organization, not only understanding the sentences, but also the implication of each passage for PMI at all levels and applying them responsibly.

Organizational Procedures (PO) are derived from the statute and bylaws that regulate key and specific areas, such as Organizational Procedures on Board Members, Office Management, Services, Human Resources, Financial Management, Asset and Logistic Management, Staffing, Planning and Reporting, Partnership and Branding.

Implementation Guidelines (Juklak) are documents that detail out techniques of managing or implementing programs or specific activities as well as general provisions to serve as guidance for implementers. For example, Technical Guidelines on Financial Management, including techniques and formats for budgeting, cash request and utilization, as well as reporting. Or, Technical Guidelines on Planning and Reporting, which regulates work plan development process and reporting mechanisms from Branches, Chapters, and NHQ; by using specified formats within specified timeline.

Legal Products are legally-binding documents, both internally and externally. Internally, PMI needs to standardize the legal products derived from statute and bylaws, both in format and substance, which are applied between or at all levels of PMI. Externally, it includes legal products between organizations, such as Memorandum of Understanding (MoU) and Cooperation Agreement.

PMI has had several MoUs either with the government or private sectors at national levels. Unfortunately however, these documents have little impact to PMI at the Chapters and Branches. As a result, the MoUs were merely documents and have no implication to PMI at all levels. Therefore, it requires a pro-active approach from PMI Board Members at all levels to establish communication and coordination so that the existing MoUs can be followed up and have positive benefits for PMI and its partners.

All of those documents should be filed and updated, and then disseminated for implementation and monitoring and evaluation.

Outcome 1.3.

Planning, Monitoring, Evaluation, and Reporting (PMER) system is a system that regulates PMI's organizational governance, management, and work plan. The PMER system is well-functioning if the four elements are implemented in line with the PMI Planning and Reporting Guidelines. For example, the annual work plan is developed in reference to PMI Strategic Plan and Operational Plan 2014 - 2019, conducted through the right process, i.e. through SWOT, needs, and objective analysis in participatory manner, and endorsed through an Annual Meeting on the specified timeline.

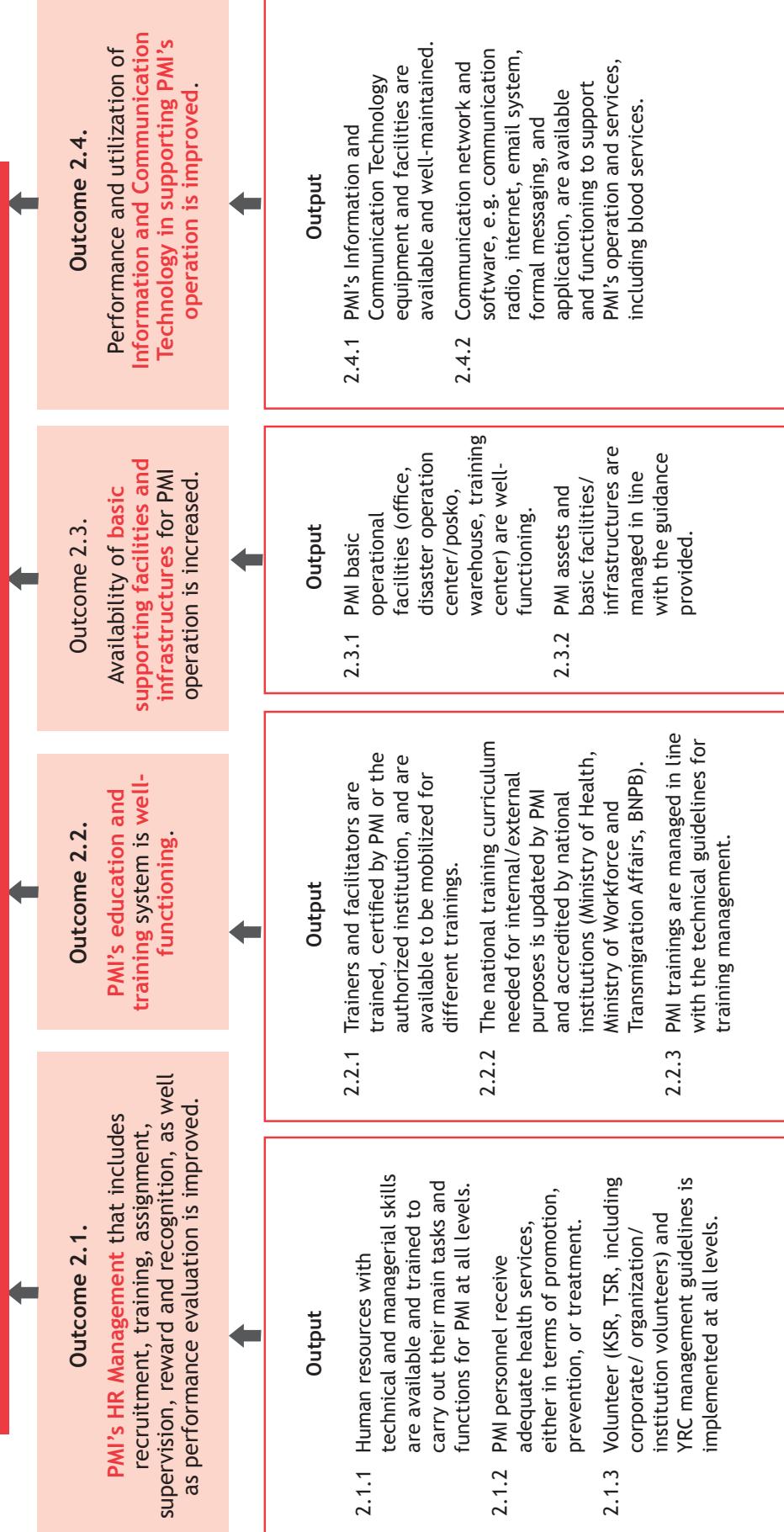
The PMER System could be implemented if the human resources capacity, both PMER knowledge and skills, is strengthened through training and coaching. The availability of planning and reporting documents is part of PMER system implementation. The result of Organizational Capacity Assessment is beneficial to understand the organization's capacity (SWOT) and can be used as a basis for planning. Board member database is important information, which is useful for organizational management as well as communication/coordination.

Outcome 1.4.

PMI comprises of NHQ, 33 Chapters dan approximately 450 Branches. All of them have to work together in a coordinated and synergistic approach. Therefore, it is important to set up a coordination and communication mechanism. A well-planned, systematic, and regular coaching is also highly needed to facilitate PMI development and to strengthen the unity of the organization nationwide. Such coaching has to be performed by the board members to other board members at a lower level; or by staff to other staff at a lower level. A well-planned and guided coaching needs to be developed based on the existing needs and condition of the targeted PMI.

STRATEGIC OBJECTIVE-2

To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructure needed to serve the communities.



Description

Strategic Objective 2

The resources discussed here are limited to human, facilities and infrastructures as an integral part of the organization. Meanwhile for funding, in general it comes from the outside and is acquired through different partnership strategies, and therefore is included under Strategic Objective 6. The availability of competent human resources as well as adequate basic infrastructures and equipment is essential to manifest PMI's Vision and Missions.

Outcome 2.1

Human Resource is the most valuable asset of an organization. A big organization is developed by highly committed and professional human resources. Therefore, human resources management should be conducted effectively and comprehensively, starting from recruitment until the end of mission. Human resources capacity development in technical and management skills should be conducted on a regular and sustainable manner through trainings and coaching. PMI is also responsible for the welfare of its human resources by providing different forms of compensation, i.e. health services or insurance, to improve the performance of the board members, staff, and volunteers.

Outcome 2.2

PMI normally conducts **training and coaching** for its human resources independently, even the training center is directed for its human resource development while at the same time serving its partners and communities. With that, PMI must have a well-functioned training and education system in which it has accredited curriculums, certified trainers/facilitators, standard training management procedures, and need-based training implementation.

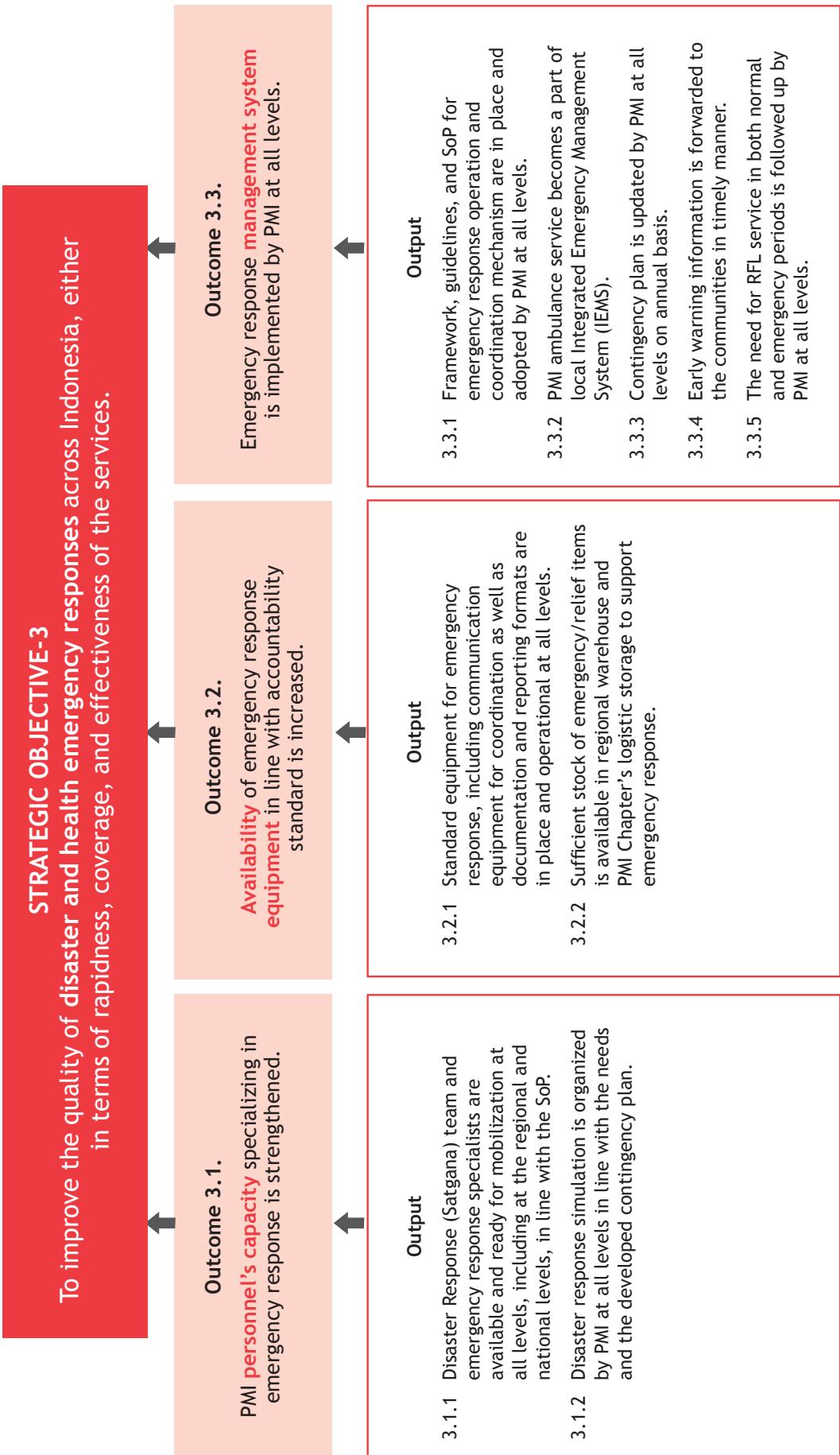
Outcome 2.3

Basic facilities and infrastructure such as office, disaster operation center (posko), training center, and other assets should be managed in line with the approved guideline, starting from inventory, maintenance, and documentation or reporting.

Outcome 2.4

Nowadays, **Information and Communication Technology (ICT)** can help an organization to grow fast through quick and accurate decision making and action. PMI services are mostly needed in critical or emergency times, and quite often related to human's life safety. Besides, PMI's services include a wide range of needs, community contexts (urban/rural) all over Indonesia.

As such, a well-functioning ICT is needed to anticipate the gap in time, distance, and access. In implementing its work plan, PMI needs an effective, modern, and massive approach so as to enable significant changes. Therefore, technology application (hardware or software) in educating, empowering, and engaging community members becomes very strategic.



Description

Strategic Objective 3

Indonesia is a disaster prone country. Therefore, PMI's capacity to respond to disasters and health crisis in an effective, efficient manner with massive coverage, as well as with high quality needs to be further strengthened, especially on personnel, supporting facilities, and response management system.

Outcome 3.1

PMI's emergency response personnel, both the ones organized in the Disaster Response Unit (Satgana) and personnel with specialized skills in disaster response/health crisis, have to be adequately available and ready to be mobilized when needed. Emergency simulation should be scheduled on regular basis to maintain the preparedness capacity of those response personnel, in line with the contingency plan and SoP.

Outcome 3.2

Disaster response is a high risk service. Therefore, PMI personnel should be equipped with supporting gears for disaster response/health crisis, such as individual protection gears, base camp tools, and tactical equipment (operational vehicles, transport means, watsan equipment, field hospital equipment, evacuation tools), including communication and documentation (recording) equipment. All of them are needed to improve the quality of emergency response operation and organizational accountability. Finally, logistic should certainly be made available in adequate types or quantity, in regional or provincial warehouses, to be distributed based on needs.

Outcome 3.3

Emergency response management entails personnel and equipment mobilization system, activation of contingency plan to become operational or action plan, information system from operation sites to decision making authority, which is conducted in line with the applicable PMI's SoP. A good response management should meet accountability standards (e.g. SPHERE, Code of Conduct, and Disaster Relief Principles and Procedures).

An effective emergency response management starts from well-functioning early warning systems. PMI, which operates between the institution providing the early warning information and the communities in disaster affected areas, needs to establish strong and systematic network with both parties in order to receive and disseminate the early warning information.

PMI Branches' ambulance services should become part of local hospital referral system coordinated in the local Integrated Emergency Management System so that they can provide timely and standard services to optimally benefit the communities and the organization.

STRATEGIC OBJECTIVE-4

To strengthen community resilience in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services.

Outcome 4.1.

PMI's capacity to manage **community-based** disaster preparedness and health **programs** is strengthened.

Outcome 4.2.

PMI's capacity to **provide social services** to the communities is increased.

Outcome 4.3.

PMI Hospitals' services and capacity are improved.

Output

4.1.1 Guidelines/SoP documents on community-based disaster preparedness and health programs are available, updated, and applied by PMI.

Output

4.2.1 Guidelines/SoP documents and supporting materials/ tools for social services (e.g. IEC materials, modeling equipment, M&E tools) are available, updated, and applied in PMI.

Output

4.3.1 Information on hospital standard services (patient services, patient safety, services to people contracted with TB, HIV/AIDS and CEONC) based on KARS (Hospital Accreditation Commission) or JCI (Joint Commission International) standards is disseminated to all hospitals' employees in order to guide them in performing their roles and responsibilities.

4.3.2 Medical and non-medical personnel at the hospital are working in line with the hospital standard for personnel competence (education qualification, credential competence, clinical authority, audit competence).

4.3.3 Hospital quality and patient safety improvement programs are implemented through Infection Prevention and Control (IPC) program, Hospital Occupational Health and Safety and (K3RS) program, as well as Hospital Patient Safety program.

4.3.4 Adequate general and specialized/sub-specialized medical services, including flagship service for lifestyle needs, are available.

4.3.5 Education, training and development, as well as performance evaluation for hospital's supporting staff are well-conducted.

Description

Strategic Objective 4

During the last decade, the Red Cross and Red Crescent Movement all over the world have shifted from response-driven organizations to preventive-oriented ones. This was done through different development and empowerment programs in reducing disaster risks and impact in the future.

Outcome 4.1

The transition from a response organization to one with more development focus should be supported with capacity building in community-based program management, both in disaster preparedness and health sector. Through this approach, PMI needs to strengthen the communities' capacity to utilize their own resources (human resources, equipment, natural/environment resources, social system and norms) to develop community members (individual or communal) who are resilient to the impacts of disaster/health crisis. Therefore, guidelines/SoP and adequate supporting facilities are needed to help PMI staff/volunteers/facilitators who are working for and with the communities.

Outcome 4.2

PMI social services focus not only on meeting the common needs of vulnerable communities but also on facilitating those vulnerable communities to access public services, and empowering those groups through psychological support. PMI thus needs to have guidelines/SoP and adequate facilities to help PMI staff/volunteers/facilitators who are working for and with the vulnerable groups.

Outcome 4.3

PMI Hospitals' service and capacity should be strengthened, including its grade, standard service, medical and non-medical personnel's competence, quality of health services (general, specialized, and flagship services), as well as standard of safety and comfort for the patients. PMI Bogor Hospital, which is one of the most well-equipped PMI hospital, will be a reference for improving other PMI hospitals in other provinces.



Description

Strategic Objective 5

Blood sometimes becomes an urgent need to save people's life. PMI is the only humanitarian organization that has the mandate from the Government of Indonesia to support blood availability in the country. In fact, PMI is known as an organization working on blood donation, and blood is indeed still one of PMI strategic program priorities throughout Indonesia. Therefore, the capacity of all PMI Blood Transfusion Units (UTD), including its personnel, at all levels need to be strengthened in order to ensure the provision of safe, quality and accessible blood.

Outcome 5.1

UTD's capacity varies across provinces/districts; with some have had very good capacity while some others are still below the standard. PMI UTD should be operated in line with the policies, procedures, and guidelines related to the Good Manufacturing Practice (GMP) to ensure that its product is meeting the standard set. In the last 5-10 years, there were several issues arisen related to UTD management in several provinces, including the lack of harmony with local PMI offices. As such, the management system of UTD should be implemented based on the standard and supported with coordination, communication and coaching mechanisms at different levels of UTD, as well as with other stakeholders.

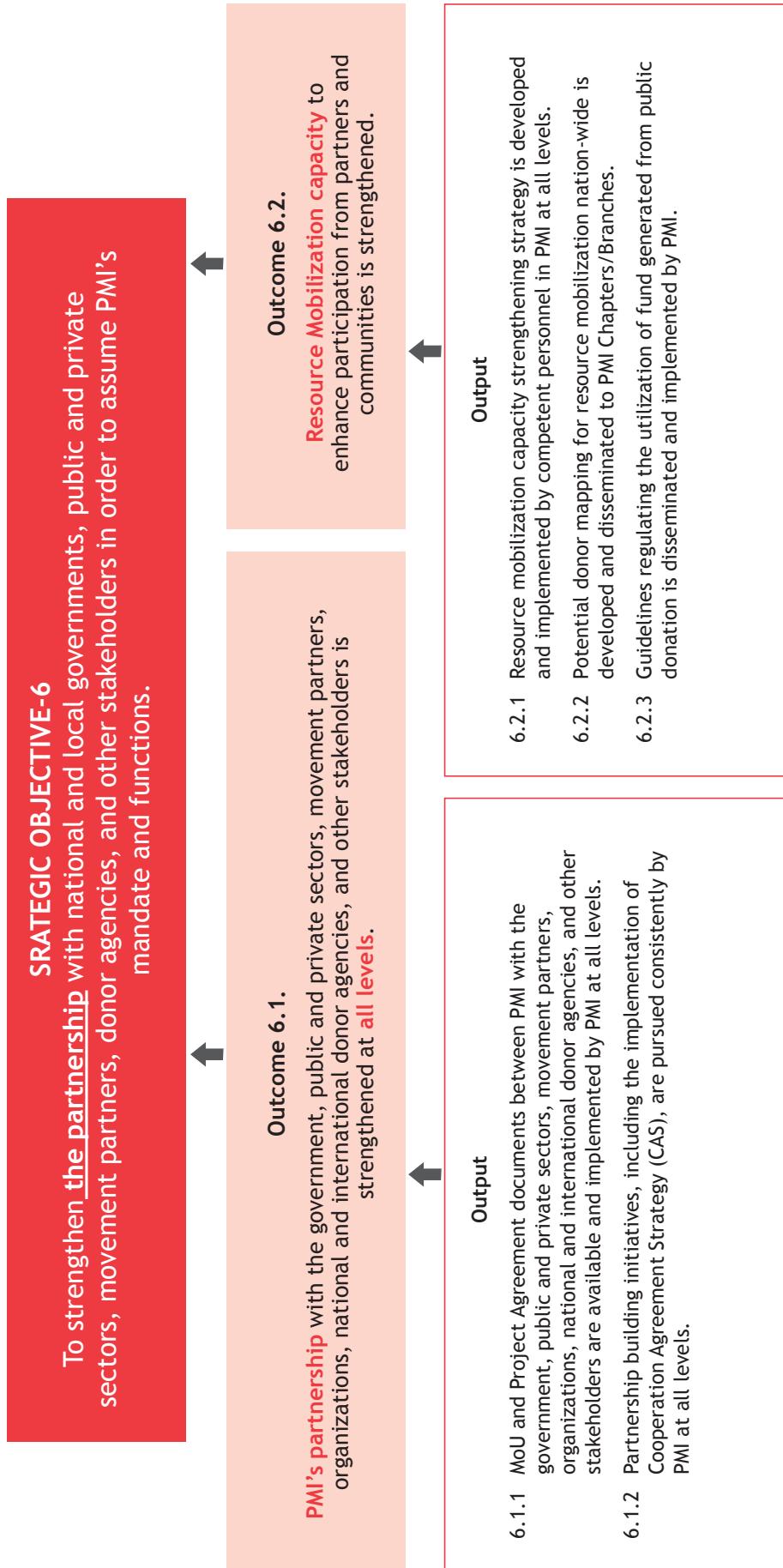
Outcome 5.2

To apply GMP, trained personnel and standard infrastructures, facilities, and equipment have to be adequately available either in quantity, timeliness, and quality. A well-functioning Information System is vital to support UTD services. With a well-functioning Blood Donor Unit Management Information System (SIMUDDA), UTD will be able to deliver its work plan in a professional manner starting from planning, implementation, and reporting.

Outcome 5.3

The availability of safe, quality, and accessible blood highly depends on the voluntary blood donor. The attempt to promote Blood Donor Volunteer should be conducted on a regular basis with a massive and proactive approach by visiting potential blood donor sources. This effort should be done intensively in order to attract new blood donors, while retaining blood donor volunteers who have donated their blood on regular basis.

On the other hand, the availability of safe, quality, and accessible blood should be further increased through centralization of blood processing, blood screening, and cross-matching test. In order to reduce dependency on supplies from overseas as well as to improve the effectiveness and efficiency of blood products production, PMI NHQ will continue its attempt to construct a factory to produce blood bag, reagent, and plasma fractionation in order to meet the needs of PMI UTD all over Indonesia. Researches in blood service development should also be conducted by UTD National and Provinces in order to improve innovation and quality of its services.



Description

Strategic Objective 6

PMI has been able to remain active and productive for 70 years. This was possible with supports from different stakeholders. Without their supports, PMI will have limitations in performing its roles. Partnership is the term that needs to be further developed and maintained, both at national and international levels.

Outcome 6.1

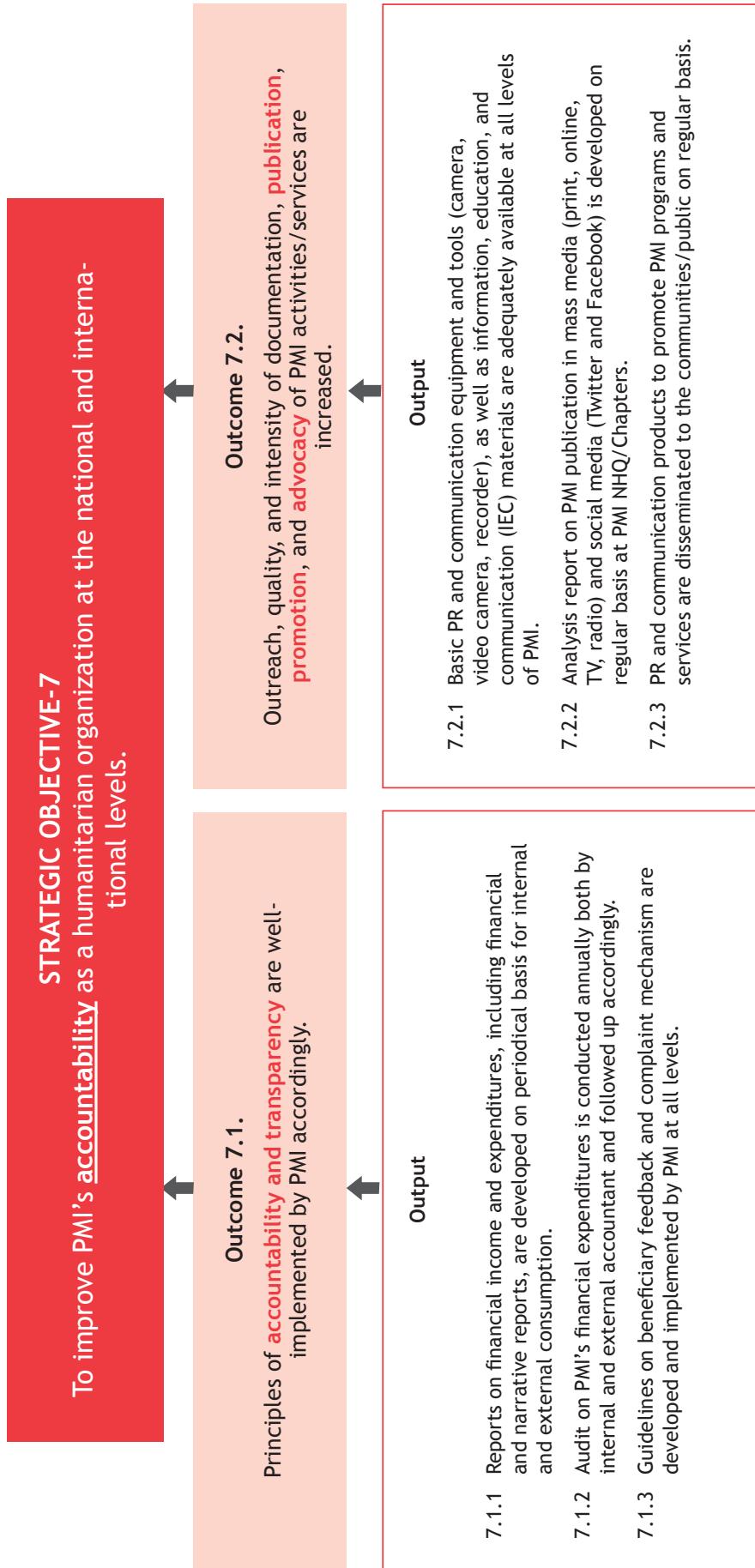
The partnership between PMI and the Government, public sector, corporate sector, movement partners, organizations, national and international donors, as well as other stakeholders is formally endorsed with an MoU or Cooperation Agreement. This is to ensure consistent legal protection for the partnership implementation at the target Chapters and Branches. There have actually been several MoUs initiated by PMI NHQ, however they were not implemented and did not have any significance as they were not followed up with communication and coordination at Chapter/Branch levels. PMI board members at all levels need to proactively present PMI as a potential partner for stakeholders through effective communication and coordination.

Outcome 6.2

A healthy organization is an organization with a diverse source of funding or no dependency to one or several sources only. PMI needs fund to maintain its operation and provide services. Therefore, PMI at all levels have to proactively seek income for the organization. There are many activities that could bring income to PMI such as public fundraising, business unit development, service provision, and proposal submission. Nearly 80% of PMI Branches however received most of their funding from the government.

Lately, public fundraising such as Bulan Dana (Donation Month) has been facing different challenges as the communities were facing economic challenges. PMI fundraising strategies need to evolve as the world is changing. It requires specific Resource Mobilization strategies that are strategic, relevant, in line with the organization's fundamental principles, and effective. These could only be achieved if the personnel managing the unit have specific competences in Resource Mobilization. This seems to be an area often neglected or not receiving serious attention. Therefore, it is not surprising that PMI's performance is very limited, and few of them even only have their signboards.

After receiving the fund, the mechanism to utilize the fund raised, especially for funding raised nationwide (e.g. fund collected from a partnership with private sector or donor), should be discussed and agreed collectively in order to optimize PMI's development and services throughout Indonesia.



Description

Strategic Objective 7

Accountability is an ethical concept too broad to be defined. However, in short, accountability is the responsibility to them who has a partnership with an organization which will determine the continuity of that partnership. Accountability is closely related with reputation. To become a forefront humanitarian organization, PMI should put forward transparency and accountability principles, either in the organization, resources, or service/program management.

Outcome 7.1

The demand for accountability and transparency has been increasing nowadays, especially for humanitarian organization like PMI, which depends on public fund. The effort to strengthen PMI accountability could be pursued through different methods. For example: publishing financial report that provides information on income and expenditures of funding from public/community, both for internal and external party; conducting regular annual audit, either by internal or external auditors; seeking opinion, feedback, and criticisms from the people served. Through those strategies, PMI can demonstrate its compliance and pursuance of conditions set by donors, and at the same time, PMI remains transparent to the people providing resources and those being served.

Outcome 7.2.

Accountability and transparency will be ‘seen and heard’ by community at large through intensive, consistent, proportionate, and transparent publication and advocacy. All of those efforts should certainly be done with sufficient media-related equipment. Each organization has to understand its public ‘positioning’, thus it requires effective public relation strategies to strategically position itself among other players. For example, by conducting analysis on the impact of media publication on PMI, therefore the publication or the development of publication products can be done in a well-planned, targeted, and measurable manner.

STRATEGIC OBJECTIVE-8

To improve the understanding of all elements of communities on humanitarian values, Fundamental Principles of the International RCRC Movement, as well as International Humanitarian Laws through communication, education, and dissemination strategies.

Outcome 8.1.

Understanding on RCRC and humanitarian values among PMI personnel and external stakeholders is improved.

Output

- 8.1.1 Updated Information, Education, and Communication (IEC) materials on RCRC Dissemination are available adequately at all levels.
- 8.1.2 Character building on humanitarian and RCRC values is facilitated by competent disseminators at all levels.
- 8.1.3 Partnership with relevant institutions (Military, Police, universities, schools, NGOs) and communities is established to disseminate humanitarian and RCRC values.

Description

Strategic Objective 8

Humanitarian values and the Fundamental Principles of the International RCRC Movement is a world heritage, especially in International Humanitarian Law. It is therefore important to inherit the awareness on the humanitarian values and the Fundamental Principles of the International RCRC Movement to all elements of community, from generation to generation, in order to preserve their existence.

Outcome 8.1

The understanding on humanitarian values and the basic principles of the International RCRC movement is mandatory for PMI personnel at all levels, starting from the leaders, staff as well as volunteers. This corresponds to PMI's Vision in Strategic Plan 2014 - 2019, " PMI demonstrates strong character...", therefore these values should be reflected in all aspects of the organization, i.e. leadership, program implementer, and nature/principles of PMI service.

The dissemination of humanitarian values and the Fundamental Principles of the International RCRC Movement internally will be integrated into all PMI training packages/module, and RCRC orientation to the board members. As for external party, the dissemination will be conducted through various events at PMI, both at the local and national levels, by utilizing media networks as well as partnership with Military, Police, universities, and schools networks.

2.2. Summary on Number of Indicator

There are indicators applicable specifically for a certain level, for example, they are only relevant for PMI NHQ or Chapter or Branch. However, there are also indicators applicable to all levels, whether for two or three levels at the same time. Overall, there are 12 Strategic Plan indicators and 172 Operational Plan indicators. The following details of indicator are disaggregated between levels of objective and PMI levels therefore irrelevant for accumulation.

Strategic Plan

In total, there are 12 indicators to be measured nationwide by midterm and by the end of the effective period of the strategic plan, for example, in 2015 (as a baseline); 2017 (as midterm evaluation); and 2019 (as end line or final evaluation).

Operational Plan

The achievement of Operational Plan indicators will be measured on a regular basis in accordance with the reporting period in effect. The indicator measurement period is highly dependent on the indicator statement, but at least all of the indicators adopted in PMI annual work plan at all levels must be reported at the end of the year.

There are 22 Outcome statements with 56 indicators

- ✓ PMI NHQ : 26 indicators
- ✓ PMI Chapter : 16 indicators
- ✓ PMI B : 31 indicators

- ✓ National Blood Transfusion Unit (UTD) : 2 indicators
- ✓ Provincial Blood Transfusion Unit (UTD) : 5 indicators
- ✓ District Blood Transfusion Unit (UTD) : 5 indicators
- ✓ PMI Hospital : 3 indicators

There are 64 Output statements with 116 indicators

- ✓ PMI NHQ : 38 indicators
- ✓ PMI Chapter : 48 indicators
- ✓ PMI Branch : 63 indicators

- ✓ National Blood Transfusion Unit (UTD) : 16 indicators
- ✓ Provincial Blood Transfusion Unit (UTD) : 13 indicators
- ✓ District/City Blood Transfusion Unit (UTD) : 14 indicators
- ✓ PMI Hospital : 6 indicators

In the Operational Plan Matrix, the indicator numbering is made sequentially per outcome and output. Thus, the arrangement is as described in the following table.

| STRATEGIC OBJECTIVE 1: To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities and the organizational policies, procedures, and system. | | | | | |
|--|--|-----------------------------------|--|---|---|
| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
| 1.1 PMI's Legal Entity is strengthened | 1. RC law is passed. | Year 2017 | 1.1.1 RC Bill is included in the National Legislation Program agenda. | 2. Number of activities to disseminate information of RC Bill. | 10 |
| 1.2 PMI's Statutes, Organizational Procedures (PO), and Implementation Guidelines (Juklak), as well as the legal products issued are institutionalized at all levels. | 3. PMI NHQ/Chapters/ Branches conducted the Five-Yearly Assembly Meeting in timely manner. 4. PMI NHQ/Chapters/ Branches conduct Annual Meeting in accordance with the assigned schedule. 5. Number of organizational Procedures (PO) adjusted to the Statute. | 1/33/420 1/33/320 5 | 1.2.1 PMI Statutes, Organizational Procedures (PO), and Implementation Guidelines (Juklak), as well as legal products are in place and implemented at all levels. | 6. PMI Chapters/Branches receive dissemination of information on statutes. 7. PMI Branches use PMI bank account for its transactions. 8. Number of PMI employees who have written employment contracts. 9. PMI NHQ/Chapters/ Branches develop asset inventory in line with the technical guidelines. 10. PMI Chapters/Branches have HR regulation in place. 11. PMI Chapters/Branches has employee database that is updated on annual basis. 12. Number of PMI employee at the Chapters/Branches. | 33/420 420 Determined by Branches 1/33/420 33/420 33/420 Determined by Chapters/ Branches |
| 1.3 PMI's Planning, Monitoring, Evaluation, and Reporting (PMER) system is well-functioning at all levels. | 13. PMI NHQ/Chapters/ Branches develop annual work plan in line with the Planning and Reporting Guidelines. 14. PMI NHQ/Chapters/ Branches develop annual report in line with the Planning and Reporting Guidelines. | 1/33/375 1/33/375 | 1.3.1 PMI board members and staff at all levels are regularly coached on the implementation of Planning, Monitoring, Evaluation, and Reporting (PMER) system by competent facilitators. 1.3.2 Planning and reporting documents that are in line with the Planning and Reporting Guidelines are available at all levels. | 16. PMI Chapters/Branches receive technical assistance visit on PMER. 17. PMI Chapters/Branches receive information regarding the Planning and Reporting Guidelines. 18. PMI Chapter/Branches submit quarterly report to one level above, in line with the Planning and Reporting Guidelines. | 20/235 33/320 33/375 |

Indicator is a measurement or benchmark or evidence of the achievement of the intended objectives, either at strategic objective, outcome, or output level.

2.3. Matrix of PMI Strategic Plan 2014-2019

| VISION: PMI demonstrates strong characters and is professional, self-sustaining, and respected by communities | | MISSION | GOAL/STRATEGIC OBJECTIVE | KEY PERFORMANCE INDICATOR | TARGET 2019 |
|---|---|---|--|---------------------------|-------------|
| 1. | To become the forefront humanitarian organization that provides quality services to communities in line with the fundamental principles of the Red Cross and Red Crescent Movement. | 1. To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities and the organizational policies, procedures, and system. | 1. RC Law is legalized. | - Year 2017 | |
| 2. | | 2. To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructures needed to serve the communities. | 2. PMI NHQ/Chapters/Branches are well-functioned. | - 1/33/235 | |
| 3. | | 3. To improve the quality of disaster and health emergency responses across Indonesia, either in terms of speed, coverage, and effectiveness of the services. | 3. Number of disaster response specialists at the national level. | - 50 people | |
| 4. | | 4. To strengthen community resilience in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services. | 4. Regional warehouses are well-functioning. | - 6 warehouses | |
| 5. | | 5. To increase the availability of safe, accessible, and quality blood throughout Indonesia. | 5. PMI Branches are prepared for disaster. | - 120 PMI Branches | |
| 6. | | 6. To strengthen the partnership with national and local governments, public and private sectors, movement partners, donor agencies, and other stakeholders in order to assume PMI's mandate and functions. | 6. Number of direct beneficiaries of PMI services. | - Actual | |
| 7. | | 7. To improve PMI's accountability as a humanitarian organization at the national and international levels. | 7. PMI Branches have ≥5 villages receiving intervention, which are disaster resilient. | - 235 PMI Branches | |
| 8. | | 8. To improve the understanding of all elements of communities on humanitarian values, fundamental principles of the international RCR movement, as well as International Humanitarian Laws (IHL) through communication, education, and dissemination strategies. | 8. Blood Transfusion Unit (UTD) Districts/Cities meet the service minimum standard. | - 200 UTDs | |
| 9. | | 9. To improve PMI's organizational reputation at the national and international levels. | 9. Percentage of increase in local government funding allocation to PMI Chapters/Branches. | - 30% | |
| 10. | | 10. To improve PMI's organizational reputation at the national and international levels. | 10. Percentage of total increase in income at PMI NHQ/Chapters/Branches. | - 30% | |
| 11. | | 11. To improve PMI's organizational reputation at the national and international levels. | 11. Number of new program/ project funded by donors. | - 15 | |
| 12. | | 12. To improve PMI's organizational reputation at the national and international levels. | 12. Percentage of surveyed respondents who are able to mention PMI name correctly. | - 70% | |

2.4. Matrix of PMI Operational Plan 2015-2019

STRATEGIC OBJECTIVE 1:
To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities and the organizational policies, procedures, and system.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|--|-----------------------------------|---|---|----------------------------------|
| 1.1 PMI's Legal Entity is strengthened. | 1. RC law is passed. | Year 2017 | 1.1.1 RC Bill is included in the National Legislation Program agenda. | 2. Number of activities to disseminate information of RC Bill. | 10 |
| 1.2 PMI's Statutes, Organizational Procedures (PO), and Implementation Guidelines (<i>Juklak</i>), as well as the legal products issued are institutionalized at all levels. | 3. PMI NHQ/Chapters/ Branches conducted the Five-Yearly Assembly Meeting in timely manner. 4. PMI NHQ/Chapters/ Branches conducted Annual Meeting in accordance with the assigned schedule. 5. Number of Organizational Procedures (PO) adjusted to the Statute. | 1/33/420 1/33/320 5 | 1.2.1 PMI Statutes, Organizational Procedures (PO), and Implementation Guidelines (<i>Juklak</i>), as well as legal products are in place and implemented at all levels. | 6. PMI Chapters/Branches receive dissemination of information on statutes. 7. PMI Branches use PMI bank account for its transactions. | 33/420 420 |
| | | | 8. Number of PMI employees who have written employment contracts. 9. PMI NHQ/Chapters/ Branches develop asset inventory in line with the technical guidelines. | Determined by Branches 1/33/420 | |
| | | | 10. PMI Chapters/Branches have HR regulation in place. 11. PMI Chapters/Branches has employee database that is updated on annual basis. | 33/420 33/420 | |
| | | | 12. Number of PMI employee at the Chapters/Branches. | Determined by Chapters/ Branches | |
| 1.3 PMI's Planning, Monitoring, Evaluation, and Reporting (PMER) System is well-functioning at all levels. | 13. PMI NHQ/Chapters/ Branches develop annual work plan in line with the Planning and Reporting Guidelines. 14. PMI NHQ/Chapters/ Branches develop annual report in line with the Planning and Reporting Guidelines. | 1/33/375 1/33/375 | 1.3.1 PMI board members and staff at all levels are regularly coached on the implementation of Planning, Monitoring, Evaluation, and Reporting (PMER) system by competent facilitators. | 16. PMI Chapters/Branches receive technical assistance visit on PMER. 17. PMI Chapters/Branches receive information regarding the Planning and Reporting Guidelines. | 20/235 33/320 |
| | | | 1.3.2 Planning and reporting documents that are in line with the Planning and Reporting Guidelines are available at all levels. | 18. PMI Chapter/ Branches submit quarterly report to one level above, in line with the Planning and Reporting Guidelines. | 33/375 |



| STRATEGIC OBJECTIVE 1: To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities and the organizational policies, procedures, and system. | | | | |
|--|--|-----------------------------------|--|--|
| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
| | 15. PMI NHQ's divisions/ bureaus/units develop annual report in line with the Planning and Reporting Guidelines. | 14 | 19. PMI NHQ's Divisions/ Bureaus/ Units submit quarterly report to the Office Manager, in line with the Planning and Reporting Guidelines. | 14 |
| | 1.3.3 Assessment tools (questionnaires/ analysis tools) for PMI organizational capacity mapping are available and adopted at all levels. | 20. | PMI NHQ/Chapters/ Branches develop Organizational Capacity Mapping every two years. | 1/33/420 |
| | 1.3.4 PMI work plans at all levels are evaluated based on the Planning, Monitoring, Evaluation, and Reporting (PMER) Reference Book. | 21. | Number of program funded by external donors that is evaluated by PMI NHQ at the end of the program. | 80% out of the existing projects/ programs |
| | 1.3.5 PMI Board Members and Staffing Database updated on regular basis. | 22. | PMI Chapters/Branches develop Board Members and Staffing Database that is registered at PMI NHQ. | 33/420 |
| 1.4 Coordination, communication, and coaching mechanism is operational at all levels. | 23. PMI NHQ/Chapters/ Branches conduct plenary meeting on monthly basis. | 1/33/460 | 1.4.1 Internal and cross- chapters/ branches communication and coordination are implemented in line with the procedures. | 33/420 |
| | 1.4.2 Tiered coaching on organizational and program development is carried out on regular as well as need basis. | 25. | PMI Chapters receive coaching visit from PMI NHQ's Board Members at least once a year. | 33 |
| | | 26. | PMI Branches receive coaching visit from PMI Chapter's Board Members at least once a year. | 320 |
| | | 27. | PMI Chapters/Branches receive technical assistance visit from PMI staff from one level above at least once a year. | 33/320 |



STRATEGIC OBJECTIVE 2:
To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructure needed to serve the communities.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|--|--|---|---|--|
| 2.1 PMI's HR Management that includes recruitment, training, assignment, supervision, reward and recognition, as well as performance evaluation is improved. | 28. Number of PMI employee at NHQ/Chapters/ Branches paid in line with the Provincial/District minimum wage standard. 29. Percentage of branch volunteer (KSR/TSR) inactive for a year. | Determined by Chapters/ Branches <20% | 2.1.1 Human resources with technical and managerial skills are available and trained to carry out their main tasks and functions for PMI at all levels. | 36. Number of branch volunteer trained in specialized skill sets of priority I/II/III services. | Determined by Branches |
| | 30. Percentage of branch volunteer (YRC/KSR/ TSR) who has taken part in branches' activities on quarterly basis. | >50% | 2.1.2 PMI personnel receive adequate health services, either in terms of promotion, prevention, or treatment. | 37. Number of employee of PMI NHQ/Chapters/ Branches who attend technical training. | Determined by NHQ/ Chapters/ Branches |
| | 31. Number of school in Districts that has active Youth Red Cross (YRC) unit. | Determined by Branches | 2.1.3 Volunteer (KSR, TSR, including corporate/ organization/ institution volunteers) and YRC management guidelines is implemented at all levels. | 38. Number of services provided by polyclinic to PMI personnel every quarter at NHQ/ Chapters/Branches. | Determined by PMI NHQ/ Chapter/ Branches with polyclinic |
| | 32. Number of corporate volunteers (corporate/ organizations/ institutions) mobilized by PMI NHQ/ Chapters/ Branches. | Determined by Chapters/ Branches | 39. PMI Branches have active Youth/Volunteer Forum. | 40. PMI Chapters/Branches organize Youth gathering (Jumbara). | 320 33/320 |
| | 33. Number of volunteer insured by PMI Branches. | Determined by Branches | | 41. PMI Chapters/Branches organize volunteer gathering (Temu Karya). | 1/33 |
| | 34. Number of PMI NHQ/ Chapters/Branches board member and staff who receive PMER training. | 915 | | 42. PMI Branches update volunteer database on quarterly basis. | 420 |
| | 35. Number of trainer certified by PMI NHQ. | 250 | | | |

STRATEGIC OBJECTIVE 2:
To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructure needed to serve the communities.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|--|-----------------------------------|---|---|---|
| 2.2 PMI's education and training system is well-functioning. | 43. Number of PMI training certified by national institutions. 44. Number of training curriculum updated by PMI NHQ at least once in every four year. 45. National education and training need analysis is available every year. | 5 trainings 5 | 2.2.1 Trainers and facilitators are trained, certified by PMI or the authorized institution, and are available to be mobilized for different trainings. | 46. Number of trainer certified by PMI NHQ who is mobilized per year. 47. Number of YRC facilitator available in primary/ secondary/high school in PMI Branches' working area. | 100 trainers per year Determined by Branches |
| | | | 2.2.2 The national training curriculum needed for internal/ external purposes is updated by PMI and accredited by national institutions (Ministry of Health, Ministry of Workforce and Transmigration Affairs, BNPB). | 48. Number of key trainer authorized by PMI NHQ through a Decree. 49. Number of trainer certified by BNSP. | 100 60 |
| | | | 2.2.3 PMI trainings are managed in line with the technical guidelines for training management. | 50. Number of training curriculum for partners ready for use/ adoption. 51. Number of training registered by PMI NHQ to be accredited. | 5 2 |
| | | | | 52. Number of training report from PMI Chapters/ Branches in line with the technical guidelines for training management. | 80% out of the reports received |
| | | | | 53. PMI Chapters/Branches develop annual training calendar. | 33/420 |

STRATEGIC OBJECTIVE 2:
To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructure needed to serve the communities.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|---|-----------------------------------|---|--|---|
| 2.3 Availability of basic supporting facilities and infrastructures for PMI operation is increased. | 54. Number of regional warehouse functioning in line with PMI standards. 55. PMI Chapters/Branches have active/functioning POSKO. 56. PMI Training Center meets certification standards. | 6 33/320 3 | 2.3.1 PMI basic operational facilities (office, disaster operation center/posko, warehouse, training center) are well-functioning. | 58. PMI Branches have at least five basic facilities and infrastructure for office operation. 59. PMI Chapters have storage for emergency & relief logistics. 60. Number of education or training activity conducted at PMI Training Center. | 375 15 Determined by each training center |
| 2.4 Performance and utilization of Information and Communication Technology in supporting PMI's operation is improved. | 57. Number of regional warehouse that maintains minimum stock of the four priority items for emergency/relief. 62. Percentage of user who reports satisfaction over PMI corporate email services. 63. Number of download for 'PMI First Aid' / Disaster Preparedness' applications. | 6 90% 100,000 | 2.3.2 PMI assets and basic facilities/infrastructures are managed in line with the guidance provided. | 61. PMI Chapters/Branches submit asset inventory to PMI NHQ on annual basis. | 33/320 |
| | | | 2.4.1 PMI's Information and Communication Technology equipment and facilities are available and well-maintained. 2.4.2 Communication network and software, e.g. communication radio, internet, email system, formal messaging, and application, are available and functioning to support PMI's operation and services, including blood services. | 64. PMI NHQ/Chapters/ Branches have fund allocated for ICT maintenance. 65. PMI Branches have internet access. | 1/33/280 375 |
| | | | | 66. Percentage of PMI employee at NHQ/ Chapters/Branches who uses PMI corporate email address. 67. PMI Branches have functioning communication radio network. | 70% 235 |

STRATEGIC OBJECTIVE 3:
To improve the quality of disaster and health emergency responses across Indonesia, either in terms of rapidness, coverage, and effectiveness of the services.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---|--|--|--|---|---|
| 3.1 PMI personnel's capacity specializing in emergency response is strengthened. | 68. Number of emergency response specialist at the national level. | 180 DR specialists 33 DBM specialists | 3.1.1 Disaster Response (Satgana) team and emergency response specialists are available and ready for mobilization at all levels, including at the regional and national levels, in line with the SoP. | 70. Number of SATGANA team members at PMI Branches. 71. Number of emergency response specialist at PMI Chapters. | 25-30 per Branch 33 RFL specialists 33 RFL field coordinators 33 CTP trainers. |
| | 69. Number of disaster response simulation by PMI Branches, in line with the SoP. | Determined by Branches | 3.1.2 Disaster response simulation is organized by PMI at all levels in line with the needs and the developed contingency plan. | 72. Number of disaster response simulation activities conducted by PMI at NHQ/ Chapters/ Branches annually. | 1/15/235 |
| 3.2 Availability of emergency response equipment in line with accountability standard is increased. | 73. Number of beneficiaries reached by PMI Branches' emergency response services. | Determined by Branches | 3.2.1 Standard equipment for emergency response, including communication equipment for coordination as well as documentation and reporting formats are in place and operational at all levels. | 74. PMI Chapters have at least five supporting equipment for emergency response operation. 75. PMI Branches have at least four equipment for emergency response team. 76. PMI Branches have at least two communication equipment for emergency situation. 77. PMI Branches provide 24 x 7 ambulance service. | 33 235 235 Determined by Branches |
| | 3.2.2 Sufficient stock of emergency/ relief items is available in regional warehouse and PMI Chapter's logistic storage to support emergency response. | | | 78. Number emergency/relief items in PMI Chapters' warehouse or logistic storage. | 33 PMI Chapters |



STRATEGIC OBJECTIVE 3:
To improve the quality of disaster and health emergency responses across Indonesia, either in terms of rapidness, coverage, and effectiveness of the services.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|---|---------------------------------------|--|---|--|
| 3.3 Emergency response management system is implemented by PMI at all level. | 79. Number of emergency incident responded by PMI Branches within the first six hours. | Determined by Branches | 3.3.1 Framework, guidelines, and SoP for emergency response operation and coordination mechanism are in place and adopted by PMI at all levels. | 82. Number of guidelines/ SoP / curriculum on emergency response issued by PMI NHQ. | Responding to needs |
| | 80. Amount of contingency fund owned by PMI NHQ/ Chapters/ Branches. | Determined by NHQ/ Chapters/ Branches | 83. Number of incident report submitted by PMI Branches to PMI NHQ/Chapters. | 80% out of the total number of incident | |
| | 81. PMI NHQ/ Chapters/ Branches develop response operation plan within 3x24 hours after the emergency incident. | Determined by NHQ/ Chapters/ Branches | 3.3.2 PMI ambulance service becomes a part of local Integrated Emergency Management System (IEMS). 3.3.3 Contingency plan is updated by PMI at all levels on annual basis. 3.3.4 Early warning information is forwarded to the communities in timely manner. 3.3.5 The need for RFL service in both normal and emergency periods is followed up by PMI at all levels. | 84. Number of PMI ambulance service responded through IEMS. 85. PMI NHQ/Chapters/ Branches develop annual Contingency Plan. 86. Number of early warning information forwarded by PMI Branches to local communities. 87. Number of RFL case followed up by PMI Branches until the procedure is completed. | Determined by Branches 1/33/420 Determined by Branches 80% out of RFL cases at Branches |

STRATEGIC OBJECTIVE 4:
To strengthen community resilience in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---|--|-----------------------------------|---|--|---|
| 4.1 PMI's capacity to manage community-based disaster preparedness and health programs is strengthened. | 88. PMI Branches has at least five villages receiving intervention support every year. | 280 | 4.1.1 Guidelines/SoP documents on community-based disaster preparedness and health programs are available, updated, and applied by PMI. | 94. Number of guidelines/ SoP on community-based programs available at PMI NHQ. | DM (14 Chapters/20 Branches where pilot programs are located). Health (100% responding to needs). |
| | 89. PMI Branches have at least five schools receiving intervention support every year. | 280 | | | Determined by Branches |
| | 90. Number of healthy schools at PMI Branches' working area. | Determined by Branches | 4.1.2 Adequate supporting materials/tools for community-based disaster preparedness and health programs (e.g., IEC materials, modeling equipment, M&E tools) are available. | 95. Number of IEC Material distributed to communities by PMI Branches. | Determined by Branches |
| | 91. Number of disaster-prepared school at PMI Branches' working area. | Determined by Branches | | | |
| | 92. Number of direct beneficiary from PMI Branch's disaster preparedness program. | Determined by Branches | 4.1.3 Community-based disaster preparedness and health program activities are implemented by competent PMI staff/volunteers/facilitators at all levels. | 96. Number of community-based programs implemented by PMI Branches. | DM (14 Chapters/20 Branches). Health (responding to needs). |
| | 93. Number of direct beneficiary from PMI Branches' community-based health program. | Determined by Branches | | 97. Number of specialist on community-based program at PMI Chapters. | |
| | | | | 98. Number of staff/volunteers at PMI NHQ/Chapters/ Branches trained on community-based program. | 33 PMI Chapters Determined by NHQ/ Chapters/ Branches |

STRATEGIC OBJECTIVE 4:
To strengthen community resilience in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|--|-----------------------------------|---|---|---------------------------------------|
| 4.2 PMI's capacity to provide social services to the communities is increased. | 99. Number of direct beneficiaries from PMI Branches' social services. | Determined by Branches | 4.2.1 Guidelines/SoP documents and supporting materials/tools for social services (e.g. IEC materials, modeling equipment, M&E tools) are available, updated, and applied in PMI. | 100. Number of guidelines/ SoP and supporting tools for social services available at PMI NHQ. | Responding to needs |
| | | | 4.2.2. Social service activities are implemented by competent PMI staff/volunteers at all levels. | 101. Number of social services carried out at PMI NHQ/ Chapters/Branches. 102. Number of staff/volunteers at PMI NHQ/ Chapters/ Branches trained in social services. | Determined by NHQ/ Chapters/ Branches |
| 4.3 PMI Hospitals' services and capacity are improved. | 103. PMI hospital receives advanced accreditation certificate from the Hospital Accreditation Commission (Komisi Akreditasi Rumah Sakit-KARS) or Joint Commission International (JCI) from Indonesian Health Ministry. | 1 | 4.3.1 Information on hospital standard services (patient services, patient safety, services to people contracted with TB, HIV/AIDS and CEOHNC) based on KARS (Hospital Accreditation Commission) or JCI (Joint Commission International) standards is disseminated to all hospitals' employees in order to guide them in performing their roles and responsibilities. | 106. Number of PMI hospital employee who receives dissemination of information on KARS/ JCI standard services. | 869 |

STRATEGIC OBJECTIVE 4:
To strengthen community resilience in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---------|---|-----------------------------------|---|--|----------------------------------|
| | 104. Annual Bed Occupancy Rate (BOR) ratio. 105. Percentage of increase in PMI Hospitals' income per year. | Determined by PMI Hospitals | 4.3.2 Medical and non-medical personnel at the hospital are working in line with the hospital standard for personnel competence (education qualification, credential competence, clinical authority, audit competence). | 107. Number of PMI hospital employee who meets the standard for competence for performance assessment. | 869 |
| | | Determined by PMI Hospitals | 4.3.3 Hospital quality and patient safety improvement programs are implemented through Infection Prevention and Control (IPC) program, Hospital Occupational Health and Safety (K3RS) program, as well a Hospital Patient Safety program. | 108. Number of PMI hospital staff who meets the employee trained in IPC/K3RS. | 869 |
| | | | 4.3.4 Adequate general and specialized/sub-specialized medical services, including flagship service for lifestyle needs, are available. | 109. Number of out-patients visit in a year at PMI hospital. 110. Number of specialized/ sub- specialized service provided at PMI hospital. | 282,819 14 |
| | | | 4.3.5 Education, training and development, as well as performance evaluation for hospital's supporting staff are well-conducted. | 111. Number of personnel who receives education/ training at PMI Hospital. | PMI Bogor Hospital: 869 |

STRATEGIC OBJECTIVE 5:
To increase the availability of safe, accessible, and quality blood throughout Indonesia.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|---|-----------------------------------|--|--|----------------------------------|
| 5.1 Blood Transfusion Unit's (UTD) capacity in line with the national standard is increased. | 112. UTD Provinces/ Districts meet Good Manufacturing Practice (GMP) standards. 113. UTD Provinces/ Districts meet national standards. | 42/35 42/35 | 5.1.1 Policies, procedures, and guidelines related to Good Manufacturing Practice (GMP) for blood service are available and implemented by UTD at all levels. 5.1.2 UTD management system, including its organizational structure, staffing, finance, planning and reporting, is operational at all levels. | 114. Number of UTD Province/District with standard organizational structure. 115. Percentage of UTD Province/ District that passes the External Quality Assurance assessment. | 42/35 100% |

STRATEGIC OBJECTIVE 5:
To increase the availability of safe, accessible, and quality blood throughout Indonesia.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---|---|---|---|--|--|
| | | 5.1.3 Communication, coordination, and coaching mechanism is consistently applied within internal UTD, across UTD levels, and with external stakeholders (local government, DHO, hospitals, POM, vendor, etc.). | 121. UTD Districts receive coaching visit from Province/National at least once a year. | 80% | |
| 5.2 Human resources capacity, also facilities and infrastructure at UTD National/ Provinces/ Districts are increased. | 122. Number of UTD training center accredited by the Ministry of Health. 123. Number of UTD employee at National/ Province/ District who meets 25 Professional Credit Units (<i>Satuan Kredit Profesional-SKP</i>) within 5 years. | 2 (National & Central Java) Determined by UTDs | 5.2.1 UTD employees are trained in implementing GMP and national standards, in line with their roles and responsibilities, also competences required. 5.2.2 Competent and professional technical personnel on Blood Transfusion Technique are adequately produced from the Blood Transfusion Technology Diploma Program. | 124. Number of UTD employee at National/Province/District who attends GMP training. 125. Number of UTD employee at National/Province/District who receives training at least once a year. | Determined by UTDs Determined by UTDs |



STRATEGIC OBJECTIVE 5:
To increase the availability of safe, accessible, and quality blood throughout Indonesia.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|---|-----------------------------------|---|--|---|
| 5.3 Availability of safe, accessible, and quality blood in all UTD is increased. | 131. Percentage of blood donor volunteer at UTD Province/District who donates blood 3-4 times a year. | 85% | 5.1.3 Blood Donor Unit Management Information System (SIMUDDA) is well-functioning at all levels to support blood service documentation, reporting, and tracking. | 129. UTD National/ Provinces/ Districts use Blood Donor Unit Management Information System (SIMUDDA). 130. UTD Provinces/ Districts submit blood service report to UTD. | 90% 90% |
| | 132. Amount of blood (bag) that can be used for medication every year at UTD Province/District. | 3 million | 5.2.1 Initiatives to promote Voluntary Blood Donors (DDS) are conducted at a massive scale on regular basis. | 133. Number of people reached through Voluntary Blood Donor promotional activity every quarter by UTD National/ Provinces/ Districts. | Determined by UTDs |
| | 133. Percentage of blood distributed in line with the hospitals' needs through blood provision service network. | | 5.3.2 Centralization of blood processing, blood screening, and cross-matched test is conducted for blood service efficiency and effectiveness. | 134. Number of UTD Districts that adopt the centralized system. 135. Number of centralization unit established. | 80% of UTD across Java, Bandar Lampung, and Bali 80% of centralization work plan |
| | | | 5.2.3 Blood is distributed in line with the hospitals' needs through blood provision service network. | 136. Percentage of blood request that is rational and in line with the medical indication in the hospital fulfilled at UTD Districts. | 85% |

STRATEGIC OBJECTIVE 5:
To increase the availability of safe, accessible, and quality blood throughout Indonesia.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---------|-------------------|---|---|--|--|
| | | 5.3.4 Production of blood reagent, blood bag, and plasma fractionation is conducted by UTD and PMI NHQ independently. | 137. Number of reagent type produced. 138. Number of blood reagent produced. | 20.000 set @ 10ml antisera and 1 million reagent rapid 500 bags | 2 |
| | | 5.3.5 Research and development for blood service is conducted by UTD National and Provinces. | 139. Number of minipool cryoprecipitate produced. 140. Percentage of progress in blood bag factory construction. 141. Percentage of bag utilization from Korean Green Cross (KGC) Original Equipment Manufacturer (OEM) in all UTDs. 142. Percentage of progress in plasma fractionator construction. 143. Number of plasma bag sent to fractionator in a year. | Determined by PMI NHQ 35% Determined by PMI NHQ Determined by PMI NHQ | At least 3 in each UTD National/ Province. |



| OUTCOME | OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR |
|---|---|---------------------------------------|--|--|
| 6.1 PMI's partnership with the government, public and private sectors, movement partners, organizations, national and international donor agencies, and other stakeholders is strengthened at all levels. | 145. Number of partner that has formal partnership with PMI NHQ/Chapters/ Branches. | Determined by NHQ/ Chapters/ Branches | 6.1.1 MoU and Project Agreement documents between PMI with the government, public and private sectors, movement partners, organizations, national and international donor agencies, and other stakeholders are available and implemented by PMI at all levels. | 146. Number of MoU signed at PMI NHQ/Chapters/ Branches. Determined by NHQ/ Chapters/ Branches |
| | | | 6.1.2 Partnership building initiatives, including the implementation of Cooperation Agreement Strategy (CAS), are pursued consistently by PMI at all levels. | 147. Number of promotional media distributed to potential partners by PMI NHQ/ Chapters/ Branches. Determined by NHQ/ Chapters/ Branches 25 Cooperation Agreements |
| 6.2 Resource Mobilization | 150. Amount of annual income from PMI NHQ/Chapters/ Branches' business units. | Determined by NHQ/ Chapters/ Branches | 6.2.1 Resource mobilization capacity strengthening strategy is developed and implemented by competent personnel in PMI at all levels. | 148. Number of MoU followed up with Cooperation Agreement by PMI NHQ/Chapters/ Branches. Determined by NHQ/ Chapters/ Branches 149. Number of activity conducted by PMI NHQ/Chapters/ Branches in collaboration with partners. 33 |

| STRATEGIC OBJECTIVE 6: To strengthen the partnership with national and local governments, public and private sectors, movement partners, donor agencies, and other stakeholders in order to assume PMI's mandate and functions. | | | |
|--|--|---------------------------------------|---|
| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT |
| | | | OUTPUT INDICATOR |
| | 151. Number of proposal submitted by PMI NHQ and approved by donors. | Determined by NHQ/ Chapters/ Branches | 154. Number of active and operational PMI business unit at NHQ/Chapters/ Branches. |
| | 152. Amount of PMI Chapters/ Branches' income derived from external trainings. | Determined by Chapters/ Branches | 155. Number of training facilitated by PMI Chapters/Branches to external party. |
| | | | 6.2.2 Potential donor mapping for resource mobilization nation-wide is developed and disseminated to PMI Chapters/Branches. |
| | | | 6.2.3 Guidelines regulating the utilization of fund generated from public donation is disseminated and implemented by PMI. |
| | | | 156. PMI Chapters/ Branches receive report on potential donors mapping for resource mobilization. |
| | | | 157. PMI Chapters/ Branches receive public donation in line with the guidelines. |

STRATEGIC OBJECTIVE 7:
To improve PMI's accountability as a humanitarian organization at the national and international levels.

| OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---|---|---------------------------------------|---|--|---------------------------------------|
| 7.1 Principles of accountability and transparency are well-implemented by PMI accordingly. | <p>158. PMI Chapters/Branches publish fundraising report annually.</p> <p>159. Percentage of fund allocated by PMI Branches for its services.</p> <p>160. PMI NHQ/Chapters conduct external audit on PMI fund utilization every year.</p> | <p>33/375</p> <p>80%</p> <p>1/33</p> | <p>7.1.1 Reports on financial income and expenditures, including financial and narrative reports, are developed on periodical basis for internal and external consumption.</p> <p>7.1.2 Audit on PMI's financial expenditures is conducted annually both by internal and external accountant and followed up accordingly.</p> <p>7.1.3 Guidelines on beneficiary feedback and complaint mechanism are developed and implemented by PMI at all levels.</p> | <p>161. Number of financial report submitted to partners every quarter by PMI NHQ/Chapters/ Branches.</p> <p>162. PMI Branches conduct financial audit.</p> <p>163. PMI Branches conduct survey to collect beneficiaries' feedback at least once a year.</p> | Determined by NHQ/ Chapters/ Branches |
| 7.2 Outreach, quality, and intensity of documentation, publication, promotion, and advocacy of PMI activities/services are increased. | 164. Number of people reached by mass media publication on PMI Branches' program/services. | Determined by NHQ/ Chapters/ Branches | 7.2.1 Basic PR and communication equipment and tools (camera, video camera, recorder), as well as information, education, and communication (IEC) materials are adequately available at all levels of PMI. | 280 | 33/375 |

| STRATEGIC OBJECTIVE 7: To improve PMI's accountability as a humanitarian organization at the national and international levels. | | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|--|--|--|---|---|
| OUTCOME INDICATOR | OUTCOME INDICATOR | | | |
| | 7.2.2 Analysis report on PMI publication in mass media (print, online, TV, radio) and social media (Twitter and Facebook) is developed on regular basis at PMI NHQ/Chapters. | 166. | Total number of news regarding PMI published in local/national media at PMI Branches' working area. | Determined by NHQ/ Chapters/ Branches |
| | 7.2.3 PR and communication products to promote PMI programs and services are disseminated to the communities/public on regular basis. | 167. | Number of promotional materials/publications distributed by PMI NHQ/ Chapters/ Branches. | Determined by NHQ/ Chapters/ Branches |



| STRATEGIC OBJECTIVE 8: To improve the understanding of all elements of communities on humanitarian values, Fundamental Principles of the International RCRC Movement, as well as International Humanitarian Laws through communication, education, and dissemination strategies. | | OUTCOME | OUTCOME INDICATOR | TARGET 2019 FOR OUTCOME INDICATOR | OUTPUT | OUTPUT INDICATOR | TARGET 2019 FOR OUTPUT INDICATOR |
|---|--|---------|---|--|---|---|--|
| 8.1 Understanding on RCRC and humanitarian values among PMI personnel and external stakeholders is improved. | 168. Percentage of respondent surveyed by PMI NHQ who can mention PMI mandate correctly. | 80% | 8.1.1 Updated Information, Education, and Communication (IEC) materials on RCRC Dissemination are available adequately at all levels. | 169. Number of certified disseminators at PMI NHQ/ Chapters/ Branches. | 170. Number of people who attend RCRC dissemination activities at PMI Branch. | 171. Number of IEC material on RCRC Dissemination distributed by PMI NHQ/ Chapters/ Branches. | 172. Number of dissemination activities conducted by PMI NHQ/ Chapters/ Branches in collaboration with partners. |

2.5. Indicator Registry for PMI Strategic Plan and Operational Plan

Indicator is a measurement unit that helps to determine whether the progress or achievement of the intended objectives or results occurs. An indicator determines what information should be collected to answer the key questions about the progress or achievement of the project/program.

Indicators may either be quantitative (e.g. in form of numbers, percentage) or qualitative (e.g., level of knowledge and quality of implementation). If possible, project/ program indicators should be a combination of both.

The indicators assigned must be able to answer the key questions about project/program progress, i.e.:

- ✓ How many activities have we done? How many resources have we used? (efficiency)
- ✓ Are we achieving the intended outputs/outcomes ? (effectiveness)
- ✓ How do the beneficiaries feel about our works or services? (relevance and appropriateness)
- ✓ Has the project/program corresponded to the actual needs? (effectiveness, relevance, and appropriateness)
- ✓ Do the works we do achieve the intended objectives? (impact)
- ✓ Will the benefits received by the beneficiaries be long-lasting, even after the project/program ends? (sustainability)

Information regarding these indicators will be collected during Monitoring and Evaluation. It will then be used to assess the progress and inform decision making throughout project/program implementation. The information can also be a lesson learned for the project/program in order to avoid repeating the same mistakes and to achieve success.

Indicators need to be defined so that PMI at various levels will have a good understanding on what to measure and how to measure them. Thus, the way to measure each indicator would be standardized across areas. Example on how to define indicators:

Indicator: Number of targeted villages in District A that meets the criteria of Disaster Prepared Village by the end of 2014.

The definition of “criteria of disaster prepared village” is having a DRR committee/volunteers, having a vulnerability and risk map, having a village contingency plan, having an early warning system, having an emergency fund, etc.

The indicator registry for PMI Operational Plan 2015-2019 was developed to assist the staff to understand :

- ✓ the measurement of program achievement ,
- ✓ the characteristic of subjects to be measured (specific),
- ✓ the limits of what can be measured (measurable),
- ✓ the ability to achieve it (attainable),
- ✓ its correspondence with program/project needs (relevance),
- ✓ the time span required (time-bound), when the measurement should be performed.

For the board members and staff, the indicators are also important for:

- ✓ Planning phase, to help PMI understand and set a target for results achievement
- ✓ Implementation phase, to help PMI to understand and oversee the achievement of each level of results, output (short-term result) or outcome (long-term result) through monitoring activities.
- ✓ Transition and End of Project/Program phase, as a basis for evaluation.

The indicator registry comprises of:

- ✓ Description of indicator statement,
- ✓ Definition of indicator, specifically outlining the subject to be measured,
- ✓ Means of verification, i.e. the tool to verify achievement.
- ✓ Reporting time, i.e. when and how often the intended indicator achievement will be reported.

Matriks Daftar Definisi Indikator

| STRATEGIC OBJECTIVE-1 To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities and the organizational policies, procedures, and system. | | | | | |
|---|---|---|----------------------------------|-------------------------------------|--|
| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD | |
| 1 | Red Cross Law is passed. | Red Cross Law is the law that regulates matters on: ✓ name, status, and location ✓ mandate and key responsibilities ✓ procedures on the use of Red Cross emblem ✓ and other items on the organization | The Law document | When the Law is passed | |
| 2 | Number of activities to disseminate information of RC Bill. | Dissemination activities are various activities conducted by PMI in forms of seminars, workshops, and other activities that aim to garner supports from different stakeholders toward the Law endorsement. | Activity reports | Monthly during dissemination period | |
| 3 | PMI NHQ/Chapters/ Branches conducted the Five-Yearly Assembly Meeting in timely manner. | PMI NHQ/Chapter/Branch Assembly Meeting is conducted every five year to : ✓ evaluate the board members accountability during their tenure. ✓ elect board members for 5 year period. ✓ stipulate key policies and strategic plan for the next five years (based on the organizational level). | Report of Assembly Meeting | Five-yearly | |
| 4 | PMI NHQ/Chapters/ Branches conducted Annual Meeting in accordance with the assigned schedule. | Annual Meeting is conducted by PMI NHQ/Chapters/Branches every year to: ✓ evaluate the implementation of the previous year work plan, including the budget. ✓ develop annual work plan for the following year including budget, income, and expenditure planning. ✓ It is attended by PMI board members and their counterparts at the province/district. | Report of Annual Meeting | Yearly | |
| 5 | Number of Organizational Procedures (PO) adjusted to the Statute. | The Organizational Procedures are regulations one step below the Statute and Bylaws that elaborate the main procedures of PMI governance, such as: ✓ Board Members ✓ Office Management Services ✓ Human Resource ✓ Financial Management ✓ Asset and Logistic Management ✓ Personnel ✓ Planning and Reporting ✓ Partnership ✓ Branding | Organization Procedures Document | Quarterly during PO adjustment | |



| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|------------------------|---|
| 6 | PMI Chapters/Branches receive dissemination of information on statutes. | The dissemination of statute and bylaws is an activity to provide awareness on the definition and consequences of each article in the statute and bylaws, instead of only distributing the book. Disseminations can be done in different ways, either through meetings, workshops, specific events or included into other local or national events/meetings. | Activity report | Monthly (if the dissemination is conducted) |
| 7 | PMI Branches use PMI bank account for its transactions. | The fund owned/received by PMI is deposited in PMI account, not personal account. | Bank account book | Annually |
| 8 | Number of PMI employees who have written employment contracts. | Employees are staff formally working at PMI. Employment contract is a legal document describing employment relationship between an employee and PMI, describing the roles and responsibilities of the employee or the organization and signed by relevant board member and staff. | Employment contract | Annually |
| 9 | PMI NHQ/Chapters/ Branches develop asset inventory in line with the technical guidelines. | The asset inventory in line with technical and implementation guides is a document recording information on asset's existence, including physical and legal aspect, such as: <ul style="list-style-type: none"> ✓ name of asset ✓ date of purchase ✓ quantity ✓ buying price ✓ asset status ✓ etc. | Asset inventory list | Annually |
| 10 | PMI Chapters/Branches have HR regulation in place. | HR regulation includes: <ul style="list-style-type: none"> ✓ recruitment ✓ grading, employment, pay scale ✓ Performance evaluation ✓ employees' rights and responsibilities ✓ employees welfare ✓ sanction and contract termination ✓ monitoring and supervision ✓ pension | HR regulation document | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|-----------------------------|--|
| 11 | PMI Chapters/Branches has employee database that is updated on annual basis. | Employee Database includes information on: ✓ name, place and date of birth, address, email, home/mobile phone number, contact in emergency (spouse or parents). ✓ position, length of employment, grade, salary. ✓ training history. | Employee database | Annually |
| 12 | Number of PMI employee at the Chapters/Branches. | Employee is a permanent or fixed term staff working at PMI Office and thus called Employee (based on Organizational Procedure on HR). | Employee database | Annually |
| 13 | PMI NHQ/Chapters/ Branches develop annual work plan in line with the Planning and Reporting Guidelines. | Annual work plan in line with the Planning and Reporting Guidelines is a work plan using the formats provided and including information on: ✓ Strategic Objectives ✓ Outcomes, indicators, and targets ✓ Outputs, indicators, and targets ✓ Activities ✓ Amount of budget per activity and its category | Work plan document | Annually |
| 14 | PMI NHQ/Chapters/ Branches develop annual report in line with the Planning and Reporting Guidelines. | The annual report of PMI NHQ/Chapters/ Branches in line with the Planning and Reporting Guidelines comprises of : ✓ Executive Summary ✓ Indicator Tracking Table (ITT) ✓ Financial Information Analysis | Annual Report Document | Annually |
| 15 | PMI NHQ's divisions/ bureaus/ units develop annual report in line with the Planning and Reporting Guidelines. | The annual report of PMI NHQ's division/bureau/unit in line with the Planning and Reporting Guidelines comprises of: ✓ Executive Summary ✓ Indicator Tracking Table (ITT) ✓ Financial Information Analysis | Annual Report Document | Annually |
| 16 | PMI Chapters/Branches receive technical assistance visit on PMER. | PMER technical assistance is provided by competent personnel in PMER (certified facilitators by PMI NHQ). The technical assistance is provided in a systematic approach by using the monitoring and supervision tools developed to assess and to refine: ✓ annual planning document, including detailed implementation plan. ✓ monitoring and evaluation system and mechanism. ✓ regular reporting documents (monthly, quarterly, biannually, and annually). ✓ other issues related to program implementation such as timeline, resources, staff, stakeholders, risks and issues. | Technical assistance report | Monthly (when Technical Assistance is conducted) |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|--|--|---|
| 17 | PMI Chapters/Branches receive information regarding the Planning and Reporting Guidelines. | Dissemination of Planning and Reporting Guidelines is an activity to provide awareness on the planning and reporting principles/process/ mechanism/tools/formats. This activity can be done through PMER trainings, meetings at national, chapter, or branch level, as well as through PMER technical assistance. | Activity report | Monthly (when dissemination is conducted) |
| 18 | PMI Chapter /Branches submit quarterly report to one level above, in line with the Planning and Reporting Guidelines. | <p>The quarterly report of PMI Chapter/Branch in line with the Planning and Reporting Guidelines comprises of :</p> <ol style="list-style-type: none"> 1. Indicator Tracking Table (ITT) 2. Financial Information 3. Analysis 4. The following quarterly implementation plan <p>The quarterly report has to be submitted by the 10th of the following month at the latest. For example, the report for the month of January to March 2015 will be submitted by April 10th, 2015.</p> | Quarterly Report | Quarterly |
| 19 | PMI NHQ's Divisions/ Bureaus/Units submit quarterly report to the Office Manager, in line with the Planning and Reporting Guidelines. | <p>The quarterly report of PMI NHQ's division/bureau/ unit in line with the Planning and Reporting Guidelines comprises of :</p> <ol style="list-style-type: none"> 1. Indicator Tracking Table (ITT) 2. Financial Information 3. Analysis 4. The following quarterly implementation plan <p>The quarterly report has to be submitted by the 10th of the following month at the latest.</p> | Quarterly Report | Quarterly |
| 20 | PMI NHQ/Chapters/ Branches develop Organizational Capacity Mapping every two years. | The Organizational Capacity Map is resulted from an assessment toward indicators set for the well-functioning PMI, e.g. on personnel, infrastructures and equipment, policies and procedures, program services, report availability, and other information collected through organizational capacity assessment questionnaires. | Organizational capacity assessment questionnaires | Every two years |
| 21 | Number of program funded by external donors that is evaluated by PMI NHQ at the end of the program. | Programs supported by external parties are programs funded by donors, either the government, corporates, or movement partners. | Evaluated means conducting a systematic and objective assessment on the impact, result, effectiveness, efficiency, relevance, and sustainability. The evaluation should take into account the evaluation standard and ethics as stipulated in PMER Reference book. | Evaluation report |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|------------------------------|--------------------------------------|
| 22 | PMI Chapters/ Branches develop Board Members and Staffing Database that is registered at PMI NHQ. | Board members database consists of information on: ✓ Name, sex, education, profession, home address, email address, phone/mobile number. Office database: ✓ Office address, email, phone number, width of land and building, ownership status. | Database format from PMI NHQ | Annually |
| 23 | PMI HQ/Chapters/ Branches conduct plenary meeting on monthly basis. | Plenary meeting is a meeting attended by all board members and office manager and or heads of division/bureau/unit/department. | Minutes of meeting | Monthly |
| 24 | PMI Chapters/ Branches has a formal Board Decree on Board Members and Staffing structures. | The Decree on Board Members and Staffing Structure are documents describing the structures, position, and roles and responsibilities of each position. The documents are endorsed through a decree signed by the respective chairman. | Decree document | Annually (if there is any change) |
| 25 | PMI Chapters receive coaching visit from PMI HQ's Board Members at least once a year. | The coaching visit from PMI HQ's Board Members is a visit to the chapters during the provincial assembly meeting/annual meeting or other occasions using the approved coaching guidelines. | Visit report | Monthly (if there is any visit made) |
| 26 | PMI Branches receive coaching visit from PMI Chapter's Board Members at least once a year. | The coaching visit from PMI Chapter's Board Members is a visit to the branches during the local assembly meeting/annual meeting or other occasions using the approved coaching guidelines. | Visit report | Monthly (if there is any visit made) |
| 27 | PMI Chapters/ Branches receive technical assistance visit from PMI staff from one level above at least once a year. | The technical assistance from PMI staff one level above can be done at any time using the approved coaching guidelines. | Visit report | Monthly (if there is any visit made) |



STRATEGIC OBJECTIVE -2
To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructure needed to serve the communities.

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|---|---|
| 28 | Number of PMI employee at NHQ/ Chapters/Branches paid in line with the local minimum wage standard. | PMI staff is an individual working and has written contract signed by the board members. The Local Minimum Wage (UMP/K) is the minimum wage applied for all chapters/branches. | Laporan keuangan atau slip gaji | Tahunan |
| 29 | Percentage of branch volunteer (KSR/TSR) inactive for a year. | PMI Volunteer Corps (KSR) unit is a mechanism for individual members who become KSR member with their own motivation. Professional Volunteer (TSR) is a PMI member recruited individually from professional community with specific background, e.g. medical doctor, nutritionist, sanitation expert, accountant, logistician, technician, agriculturist, artist, IT expert, teacher, etc. and willing to be PMI volunteers. | Database sukarelawan | Tahunan |
| 30 | Percentage of branch volunteer (YRC/KSR/TSR) who has taken part in branches' activities on quarterly basis. | Non-active means never participate in coaching or service activities for a year YRC volunteer is a Youth Red Cross member at schools located in respective Branches. KSR and TSR are the same as above. | Database sukarelawan | Triwulan |
| 31 | Number of school in Districts that has active Youth Red Cross (YRC) unit. | YRC unit is considered active if they have YRC regular activities and maintain consistent coordination with PMI Branches. | Database sukarelawan | Tahunan |
| 32 | Number of corporate volunteers (corporate/ organizations/ institutions) mobilized by PMI NHQ/ Chapters/ Branches. | Corporate volunteer is an employee of a corporation/institution registered to support PMI activities based on their specific specialization/skills. | Database sukarelawan | Bulan (bila ada mobilisasi sukarelawan mitra) |
| 33 | Number of volunteer insured by PMI Branches. | Insured means each personnel is provided with health/life insurance in conducting the assignment. | Kartu asuransi atau daftar peserta asuransi | Tahunan |
| 34 | Number of PMI NHQ/ Chapters/ Branches board member and staff who receive PMER training | Planning, Monitoring, Evaluation, and Reporting (PMER) training is a 4-day training facilitated by PMER trainers using standard PMER training curriculum and materials. | Laporan pelatihan PMER | Bulanan (bila ada pelatihan PMER) |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|--|----------------------------------|-------------------------------------|
| 35 | Number of trainer certified by PMI NHQ. | PMI NHQ's certificate is provided to trainers who have attended a Training of Trainer (ToT) and have had training experience based on the procedures. Each PMI Chapter organizing a ToT has to propose for a certification process from PMI NHQ in reference to the SoP for National Certificate Numbering. | Training & Education Unit Report | Annually |
| 36 | Number of branch volunteer trained in specialized skill sets of priority I/ II/III services. | <ul style="list-style-type: none"> ✓ Specialized priority service I includes assessment, first aids and evacuation, restoring family link, communication and public relations. ✓ Specialized priority service II includes public kitchen, health service, ambulance service, and psychosocial support program. ✓ Specialized priority service III includes shelter and IDPs, water and sanitation, distribution and relief. | Specialist training report | Monthly (if there is any training) |
| 37 | Number of employee of PMI NHQ/ Chapters/Branches who attend technical training. | Technical training is all types of training owned by PMI. | Training report | Monthly (if there is any training) |
| 38 | Number of services provided by polyclinic to PMI personnel every quarter at NHQ/Chapters/Branches. | Health services provided include promotional, preventive, and treatment services. | Polyclinic service report | Quarterly |
| 39 | PMI Branches have active Youth/ Volunteer Forum. | <ul style="list-style-type: none"> ✓ Volunteer Forum (FOREL) is a forum functioning as a mechanism to develop volunteers' creativity and sense of responsibility to PMI in an effective manner. ✓ Youth Forum (FORPIS) is a forum of YRC representatives to channel and coordinate the aspiration of Beginner, Secondary, and Senior (Mula, Madya, Wira) YRC. ✓ Forel/Forpis is considered active if they organize regular coaching to volunteers and maintain consistent coordination with PMI Branches. | Forum establishment document | Annually |
| 40 | PMI Chapters/Branches organize Youth gathering (Jumbara). | Youth Gathering (Jumbara-Jumpa Bakti Gembira) is an annual event attended by YRC members and coaches as well as PMI personnel in the respective province/district/ city to gather and share knowledge and experience. | Jumbara activity report | Annually (if Jumbara is organized) |



| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|--|---------------------------------|---|
| 41 | PMI NHQ/Chapters organize volunteer gathering (Temu Karya). | Volunteer Gathering (Temu Karya) is an annual event gathering PMI volunteers from different areas to learn, share experience, monitor and evaluate the volunteers' coaching and leadership development process conducted by PMI as well as to develop sustainable roles and activities for volunteers. | Temu Karya activity report | Annually (if volunteer gathering is organized) |
| 42 | PMI Branches update volunteer database on quarterly basis. | Volunteer database consists of information on: ✓ name, place & date of birth, address, email, home/mobile phone number. ✓ sex, volunteer category (beginner, secondary, senior). ✓ date of registration as a volunteer. ✓ training history. | Volunteer database | Quarterly |
| 43 | Number of PMI training certified by national institutions. | Certification is conducted by institutions authorized to provide training certification at the national level, such as the National Profession Standardization Agency (BNSP-Badan Nasional Sertifikasi Profesi), HRD of the Ministry of Health, BSN, and the Ministry of Workforce and Transmigration. | Training certification document | Annually |
| 44 | Number of training curriculum updated by PMI NHQ at least once in every four year. | A curriculum is considered updated if it has been further developed in line with new development of training material. | Training curriculum | Annually |
| 45 | National education and training need analysis is available every year. | Training need analysis map is a map of gaps between the number and type of skills owned by trained PMI personnel available and the number and type of skills owned by trained personnel needed, which comprises of information about trainers, types of training, and training alumni. | Training need analysis map | Annually |
| 46 | Number of trainer certified by PMI NHQ who is mobilized per year. | Certified means receiving certificate as a trainer from PMI NHQ. Mobilized means training or facilitating in different trainings. | Training assignment letter | Annually |
| 47 | Number of YRC facilitator available in primary/ secondary/high school in PMI Branches' working area. | YRC trainer is a trainer who has attended a YRC TOT. | YRC trainer list | Annually |
| 48 | Number of key trainer authorized by PMI NHQ through a Decree. | Main Trainer is the highest trainer rank from three trainer ranks - Beginner, Mid-Level, and Main Trainer. | Decree of Main Trainer | Annually |
| 49 | Number of trainer certified by BNSP. | BNSP is the National Profession Standardization Agency. | Certificate from BNSP | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|--|---------------------------------------|------------------|
| 50 | Number of training curriculum for partners ready for use / adoption. | Partners training curriculum is a specific training curriculum that can meet the partners' training need, e.g. First Aids for Work Security and Safety, First Aids for Ambulance Service, Family Care for Nursing School. | Partners training curriculum | Annually |
| 51 | Number of training registered by PMI NHQ to be accredited. | Accreditation should be done by national institutions such as MoH, Ministry of Workforce and Transmigration, National Disaster Management Agency (BNPB). | Accreditation registration report | Annually |
| 52 | Number of training report from PMI Chapters/ Branches in line with the technical guidelines for training management. | The content of a training report in line with the training management guidelines includes: ➢ Background ➢ Objective ➢ Expected results ➢ Name, time, and venue ➢ Organization of activity ➢ Participants, committees, and facilitators ➢ Budget and financial report ➢ Summary of activity implementation process ➢ Closing | Training report | Annually |
| 53 | PMI Chapters/Branches develop annual training calendar. | Annual training calendar includes information on: ➢ types of training needed ➢ list of staff or volunteers in need of training ➢ training schedule | Training calendar | Annually |
| 54 | Number of regional warehouse functioning in line with PMI standards. | A regional warehouse is considered well-functioning if meeting the following criteria: ➢ having at least 4 staff managing the warehouse ➢ having comprehensive and updated logistic inventory ➢ having document registration system ➢ having warehouse and logistic maintenance plan ➢ having monthly warehouse activity report | Regional warehouse assessment results | Annually |
| | | Note: these criteria will be further enhanced and formally endorsed, and then disseminated to regional warehouses. | | |



| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|---|--------------------------------|--|
| 55 | PMI Chapters/Branches have active/functioning POSKO. | A POSKO is considered active/functioning if it has standard radio communication and at least 4 volunteers standby for 24-hour operation. | Active POSKO assessment result | Annually |
| 56 | PMI Training Center meets certification standards. | <p>A PMI training center is considered meeting certification standard if:</p> <ul style="list-style-type: none"> ✓ it has standard facilities in line with PMI technical implementation guidelines on training organization. ✓ it meets the standard quality of training management in reference to authorized bodies such as HRD, MoH, or Ministry of Workforce and Transmigration. <p>Note: Standard criteria for certification will be further enhanced, endorsed, and disseminated to PMI training centers.</p> | Certificate | Annually (if conducting certification) |
| 57 | Number of regional warehouse that maintains minimum stock of the four priority items for emergency/relief. | The four priority relief items include: <ul style="list-style-type: none"> ✓ Family Kit (2,000 units) ✓ Hygiene Kit (2,000 units) ✓ Tarpaulins (2,000 units) ✓ 10,000 pieces of blankets | Warehouse stock report | Quarterly |
| 58 | PMI Branches have at least five basic facilities and infrastructure for office operation. | Basic infrastructures and equipment for office operation include: <ul style="list-style-type: none"> ✓ desks ✓ computers ✓ telephones ✓ facsimiles ✓ communication radio (landline/mobile) ✓ internet ✓ four-wheel operational vehicles ✓ two-wheel operational vehicles ✓ logistic storage/warehouse | Office asset inventory | Annually |
| 59 | PMI Chapters have storage for emergency & relief logistics. | Relief items storage is PMI Chapter's facility to store logistic, both permanent and semi-permanent, owned by the chapter, rented or borrowed. | Building/ storage report | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|---|----------------------------------|------------------|
| 60 | Number of education or training activity conducted at PMI Training Center. | Training center is an education or training facility owned by PMI, both permanent and semi-permanent, owned by PMI, rented or borrowed, which is used for internal PMI or for external parties. | PMI training center usage report | Monthly |
| 61 | PMI Chapters/Branches submit asset inventory to PMI NHQ on annual basis. | Asset is all of PMI's possessions, both moving and not moving, and have certain selling values, reported based on PMI Asset Management Technical Guidelines. | Asset inventory list | Annually |
| 62 | Percentage of user who reports satisfaction over PMI corporate email services. | User's satisfaction over PMI corporate email is the satisfaction based on the agreed survey criteria. | Survey analysis report | Annually |
| 63 | Number of download for 'PMI First Aid'/'Disaster Preparedness' applications. | 'PMI First Aids' application is an application aiming to help communities in conducting first aids through information sharing provided in stages for easier understanding. Disaster Ready application is an application containing information and lessons learned to recognize risks and to develop contingency plan, as well as features of disaster signs. | Google App Store | Monthly |
| 64 | PMI NHQ/Chapters/ Branches have fund allocated for ICT maintenance. | IT maintenance includes maintenance of all hardware and software, as well as Information and Communication Technology system. | Work plan and budget | Annually |
| 65 | PMI Branches have internet access. | Internet network entails internet connection and supporting hardware consisting of computers and networks. | Internet network | Annually |
| 66 | Percentage of PMI employee at NHQ/ Chapters/Branches who uses PMI corporate email address. | The percentage is calculated by using the ratio of PMI personnel who has been registered in PMI NHQ IT unit with the total number of PMI personnel. | Data on email users | Annually |
| 67 | PMI Branches have functioning communication radio network. | A radio communication network is considered functioning if connected with the local radio communication network (District/City and Province). | Radio communication networks | Annually |



STRATEGIC OBJECTIVE-3
To improve the quality of disaster and health emergency responses across Indonesia, either in terms of rapidness, coverage, and effectiveness of the services

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|--|--|------------------------------------|
| 68 | Number of emergency response specialist at the national level. | A national emergency response specialist is a PMI personnel who has received trainings in: 1. Management and Leadership 2. Relief Management 3. Logistic Management 4. Emergency Health Services 5. Water and Sanitation Services 6. Psychosocial Support Services 7. Shelter Services 8. IT Telecom Services 9. General Administration and Finance. | List of National Emergency Response specialists | Annually |
| 69 | Number of disaster response simulation by PMI Branches' in line with the SoP. | Disaster Response Simulation is: An exercise conducted based on the emergency scenario agreed, starting from early warning information, personnel mobilization and task assignments, coordinated with relevant parties in the field. Disaster Simulation is in line with the SoP if: ✓ Early warning for PMI personnel until mobilization run in line with the SoP. ✓ Execution of tasks is in line with PMIs standard of service. ✓ Coordinated means engaging other key players including local communities. | Simulation assessment checklist | Monthly (if there is a simulation) |
| 70 | Number of SATGANA team members at PMI Branches. | SATGANA Team is a PMI team that has completed specific Disaster Response (SATGANA) training. | Volunteer database | Annually |
| 71 | Number of emergency response specialist at PMI Chapters. | PMI Chapter's emergency response specialist is a PMI personnel who has received training in : 1. Management and Leadership 2. Relief Management 3. Logistic Management 4. Emergency Health Services 5. Water & sanitation Services 6. Psychosocial Support Services 7. Shelter Services 8. IT Telecom Services 9. General Administration and Finance. | List of Chapter's Emergency Response specialists | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|---|----------------------------|--|
| 72 | Number of disaster response simulation activities conducted by PMI at NHQ/Chapters/ Branches annually. | Disaster response simulation is an exercise conducted based on the emergency scenario agreed, starting from early warning information, personnel mobilization and task assignments, coordinated with relevant parties in the field. | Simulation activity report | Monthly (if there is any simulation) |
| 73 | Number of beneficiaries reached by PMI Branches' emergency response services. | Beneficiaries are people who receive emergency services (e.g. cash, relief items, health services, evacuation) from PMI directly. | List of beneficiaries | Monthly (if there is any emergency response) |
| 74 | PMI Chapters have at least five supporting equipment for emergency response operation. | PMI Chapters that own the standard Disaster Management service equipment to support the operational needs of Disaster Response Team, i.e.: complete Public Kitchen equipment for 500 people First Aids equipment (for Individual or Team) evacuation equipment (ambulance , stretchers) individual safety gears (life jackets, face masks, (dust) glasses, helmets, gloves, and raincoats) temporary tents + supporting equipment field equipment (hoes, shovels, hammers, ropes) trucks (if not yet owned, this could be anticipated by having an agreement for rental) operational vehicles for personnel ambulance/emergency transportation units in line with PMI standard of ambulance service. | Office inventory list | Annually |
| 75 | PMI Branches have at least four equipment for emergency response team. | PMI Branches that own the standard Disaster Management service equipment to support the operational needs of Disaster Response Team, i.e.: complete Public Kitchen equipment for 500 people First Aids equipment (for Individual or Team) evacuation equipment (ambulance , stretchers) individual safety gears (life jackets, face masks, (dust) glasses, helmets, gloves, and raincoats) temporary tents + supporting equipment field equipment (hoes, shovels, hammers, ropes) trucks (if not yet owned, this could be anticipated by having an agreement for rental) operational vehicles for personnel ambulance/emergency transportation units in line with PMI standard of ambulance service. | Office inventory list | Annually |



| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|--|---------------------------|--------------------------|
| 76 | PMI Branches have at least two communication equipment for emergency situation. | <p>Communication equipment for emergency use:</p> <ul style="list-style-type: none"> ✓ Communication radio ✓ Phone ✓ Facsimile ✓ Computer with internet connection | Office inventory list | Annually |
| 77 | PMI Branches provide 24 x 7 ambulance service. | <p>PMI Branches that operate 24-hour ambulance service on regular basis, with the following criteria but not limited to :</p> <ul style="list-style-type: none"> ✓ Having at least 1 ambulance with standard equipment in line with PMI ambulance service guidelines ✓ Having at least 9 ambulance crews trained in First Aids. ✓ Having call center facilities with at least 3 operators ✓ Having a referral system with local hospital/Integrated Health Emergency Management System (IEMS) ✓ Having operational budget allocation for ambulance. | Ambulance service report | Monthly |
| 78 | Number emergency/relief items in PMI Chapters' warehouse or logistic storage. | <p>Relief item is one of these four relief items i.e. :</p> <ul style="list-style-type: none"> ✓ Jerry cans ✓ Pails/buckets ✓ Blankets ✓ Sarongs | Warehouse report | Monthly |
| 79 | Number of emergency incident responded by PMI Branches within the first six hours. | <p>PMI Branches that conduct initial action for emergency/outbreak response within the first six hours after the incident, such as:</p> <ul style="list-style-type: none"> ✓ Sending sitrep on the most updated situation ✓ Sending PMI Branch's disaster operation report: - mobilization of SATGANA team - providing emergency assistances (SAR, evacuation, first aids, emergency shelter, relief items distribution) - conducting horizontal/vertical coordination, operating disaster operation center (POSKO) - developing emergency response action plan. | Emergency response report | For each emergency event |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|---|----------------------------------|--|
| 80 | Amount of contingency fund owned by PMI NHQ/ Chapters/Branches. | Contingency fund is an 'on call' fund allocated in the budget to support emergency response operation. | Budget document | Annually |
| 81 | PMI NHQ/Chapters/ Branches develop response operation plan within 3x24 hours after the emergency incident. | Disaster/Health Crisis Response Operation Plan is an action plan based on the need assessment analysis reported/submitted to PMI one level above within 3 x 24 hours at the latest. | Operation plan | Annually |
| 82 | Number of guidelines/ SoP/ curriculum on emergency response issued by PMI NHQ/ Chapters. | Updated guidelines/SoPs related to emergency response , relevant with the needs in the field. | Guidelines/ SoP documents | Annually |
| 83 | Number of incident report submitted by PMI Branches to PMI NHQ/ Chapters. | Disaster/health crisis incident report should contain information on : ✓ summary of disaster/health crisis incident (name of event, time of incident, level of severity), reported after the incident happened, with only brief follow up update report. ✓ number of casualties (injured, death), updated every 3 days. ✓ impact of disaster incident (number of people losing houses, destroyed public facilities, number of IDPs, IDP location, and IDP site condition), updated every 3 days. ✓ types and quantity of immediate needs, updated every 3 days. | Emergency incident report | Annually |
| 84 | Number of PMI ambulance service responded through IEMS. | IEMS is an emergency management system at the local public hospital that becomes the reference of PMI ambulance service. | Ambulance service report | Monthly |
| 85 | PMI NHQ/Chapters/ Branches develop annual Contingency Plan. | Contingency Plan is a planning process that includes certain prediction, based on the agreed scenario and purpose, specified technical and managerial response actions, and resource mobilization to mitigate or address an emergency/crisis better in the future. | Contingency Plan Document | Annually |
| 86 | Number of early warning information forwarded by PMI Branches to local communities. | Early warning information disseminated to the communities is information that is not limited to: ✓ disaster warning ✓ early emergency response action ✓ emergency communication feedback mechanism. | Information dissemination report | Monthly (if there is any early warning information disseminated) |
| 87 | Number of RFL case followed up by PMI Branches until the procedure is completed. | Permohonan pelayanan Restoring Family Link (tidak terbatas pada bencana/konflik) yang diajukan (sesuai kriteria) kepada PMI dan ditindaklanjuti dalam mencari penyelesaian hingga kasus dinyatakan ditutup oleh PMI. | RFL report | Monthly) if there is any RFL service provided) |



STRATEGIC OBJECTIVE-4
To strengthen community resilience in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services.

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|---|--|------------------|
| 88 | PMI Branches has at least five villages receiving intervention support every year. | <p>Specific village or community (high-risk communities, markets, population with HIV/ AIDS, etc.), initiated by PMI or jointly with the government, with the criteria including but not limited to :</p> <ul style="list-style-type: none"> ✓ target village in PMI Branch's DRR program (stipulated with Decree or other documents with the same legal power). ✓ conducting non-structural mitigation activities. ✓ conducting activities to reduce community vulnerability (physical/material, social/organization, behavior), such as Basic First Aids, Maternal and Child Health Promotion, Hygiene Promotion to Prevent Communicable Disease, Healthy Lifestyle Promotion to Prevent Non-Communicable Disease, Road Safety, etc. ✓ conducting activities to strengthen communities' capacity (physical/material, social/organization, behavior). ✓ responding to incidents requiring referral. ✓ responding to potential situations for extraordinary events. | Laporan kegiatan pembinaan desa | Bulanan |
| 89 | PMI Branches have at least five schools receiving intervention support every year. | <p>PMI Branches that develop programs/ activities related to RCRC and its services with activities as follows:</p> <ul style="list-style-type: none"> ✓ mobilization of YRC/KSR to conduct education campaign in universities/schools (for DM/FA training, DRR/health promotion, environmental protection initiative, disaster awareness promotion). ✓ conducting disaster response simulation in schools/universities (evacuation, preparing school/university as temporary IDP shelter). | Laporan kegiatan pembinaan sekolah | Bulanan |
| 90 | Number of healthy schools at PMI Branches' working area. | <p>Healthy School is a YRC activity in schools, such as:</p> <ul style="list-style-type: none"> ✓ Peer Education on Healthy Behaviors (healthy environment promotion, hand washing with soap, brushing teeth, throwing trash in garbage bin). ✓ Supporting PMI's School Health Unit activities. | Checklist penilaian kriteria sekolah sehat | Tahunan |
| 91 | Number of disaster-prepared school at PMI Branches' working area. | <p>PMI Branches that facilitate/develop disaster ready schools or universities , with criteria including but not limited to :</p> <ul style="list-style-type: none"> ✓ mobilization of YRC/KSR to conduct education campaign in universities/schools (for DM/FA training, DRR/health promotion, environmental protection initiative, disaster awareness promotion). ✓ conducted disaster response simulation in schools/universities (evacuation, preparing school/university as temporary IDP shelter). | Disaster ready assessment checklist | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|--------------------------------|------------------|
| 92 | Number of direct beneficiary from PMI Branch's disaster preparedness program. | Direct beneficiaries are people who are actively involved in, contribute to and receive benefit directly from PMI disaster preparedness activities. | Activity report | Monthly |
| 93 | Number of direct beneficiary from PMI Branches' community-based health program. | Beneficiaries from community-based health program are people who actively contribute to, receive benefit from and registered in community-based health activities. | Activity report | Monthly |
| 94 | Number of guidelines/SoP on community-based programs available at PMI NHQ. | Guidelines/SoP on community-based program are the existing guidelines for community-based programs, updated with good standards. | Guidelines/ SoP Document | Annually |
| 95 | Number of IEC material distributed to communities by PMI Branches. | IEC material is a tool to disseminate information in order to educate communities, which could be in form of leaflets, brochures, booklets, banners, etc. | IEC material distribution list | Annually |
| 96 | Number of community-based programs implemented by PMI Branches. | A community-based program both disaster- and health-related, implemented by PMI Branches, including in schools/universities. | Program document | Annually |
| 97 | Number of specialist on community-based program at PMI Chapters. | Community-based program specialist is a PMI staff/volunteer who has attended community-based program trainings and has been mobilized to manage community-based programs. | Staff/volunteer database | Annually |
| 98 | Number of staff/ volunteers at PMI NHQ/Chapters/ Branches trained on community-based program. | Staff/KSR/TSR who has attended at least one community-based program training, such as: ✓ PHAST ✓ CBHFA ✓ ICBRR | Staff/volunteer database | Annually |
| 99 | Number of direct beneficiaries from PMI Branches' social services. | Direct beneficiaries from social service are those receiving different assistance such as : ✓ material supports ✓ mass circumcision ✓ free health services (glasses, cataract surgery) ✓ social works | Activity report | Annually |



| NO. | PERNYATAAN INDIKATOR | DEFINISI | ALAT VERIFIKASI | WAKTU PELAPORAN |
|-----|---|---|--------------------------------|----------------------------|
| 100 | Number of guidelines/ SOP and supporting tools for social services available at PMI NHQ. | Guidelines/ SoP on social services contains technical implementation of social services starting from planning stage to evaluation or closing. Example of supporting equipment for social service, i.e. IEC materials, modeling equipment, and M&E tools. | Guidelines/ SoP document | Annually |
| 101 | Number of social services carried out at PMI NHQ/ Chapters/Branches. | Social services activities conducted by PMI include, but not limited to: ✓ material supports ✓ mass circumcision ✓ free health services (glasses, cataract surgery) ✓ social works | Activity report | Annually |
| 102 | Number of staff/ volunteers at PMI NHQ/ Chapters/ Branches trained in social services. | Staff/KSR/TSR who has attended more than one social service trainings, such as : ✓ family care ✓ street children service | Staff/ volunteer database | Annually |
| 103 | PMI hospital receives advanced accreditation certificate from the Hospital Accreditation Commission (Komisi Akreditasi Rumah Sakit-KARS) or Joint Commission International (JCI) from Indonesian Health Ministry. | The Hospital Accreditation Commission (KARS) is an Independent National Accreditation Agency endorsed by the Ministry of Health based on Law No 40/2009 regarding Hospitals. | Certification of accreditation | Every 3 years (at minimal) |
| 104 | Annual Bed Occupancy Rate (BOR) ratio. | The Bed Occupancy Rate (BOR) ratio: percentage of bed occupancy at certain point of time. This indicator provides information on the rate of bed occupancy at the hospital. An ideal parameter of BOR ranges between 60 - 85%. | Hospital report | Monthly |
| 105 | Percentage of increase in PMI Hospitals' income per year: | Clear enough. | Financial report | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|--|---|---|
| 106 | Number of PMI hospital employee who receives dissemination of information on KARS/ JCI standard services. | Dissemination of KARS/ JCI standards can be done through different methods, either through meetings, workshops organized separately or integrated with other meetings at local or national levels. | Attendance list from dissemination activity | Monthly (if there is any dissemination conducted) |
| 107 | Number of PMI hospital employee who meets the standard for competence for performance assessment. | Standard of performance evaluation competence includes: | Competence assessment form | Annually |
| 108 | Number of PMI hospital staff who meets the employee trained in IPC/ K3RS. | The Infection Prevention and Control Program (IPCI) in Hospitals is an effort to prevent and reduce infection incident in hospitals to the lowest possible rate. Infection prevention and control in hospitals is an important quality assurance standard for patients, health workers and hospital visitor, conducted to protect patients, health workers, and visitors from infection by taking into account cost effectiveness. | Training report | Monthly (if there is any training) |
| 109 | Number of out-patients visit in a year at PMI hospital. | Clear enough. | Recapitulation of outpatient services | Annually |
| 110 | Number of specialized/sub-specialized service provided at PMI hospital. | Clear enough. | Report on types of hospital service | Annually |
| 111 | Number of personnel who receives education /training at PMI Hospital | The education and training activities counted are only activities utilizing facilities in PMI Bogor Hospital, both organized by PMI or external parties. | Training report | Monthly (if there is any training) |

STRATEGIC OBJECTIVE - 5
To increase the availability of safe, accessible, and quality blood throughout Indonesia

| No. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|--|---------------------------------------|------------------|
| 112 | UTD Provinces/Districts meet Good Manufacturing Practice (GMP) standards. | Good Manufacturing Practice (GMP) standard entails all practical elements that will result in end products/services that can consistently fulfill the specification agreed (Australian Code of GMP 2000). This standard is part of a quality assurance effort that ensures that the standard quality is in line with the utilization purposes, following the specification set (WHO Guidelines on GMP 2011). | GMP standard assessment document | Annually |
| 113 | UTD Provinces/Districts meet national standards. | National Standard refers to a number of regulations regarding blood service developed by a joint team from MoH, PMI and relevant stakeholders based on AABB (American Association Blood Bank) standards, European Guidelines, and WHO. | National Standard assessment document | Annually |
| 114 | Number of UTD Province/District with standard organizational structure. | Standard of Organization Structure refers to MoH Regulation No. 83/2014 regarding blood transfusion unit, hospital's blood bank, and blood transfusion service network | Decree on Organizational Structure | Annually |
| 115 | Percentage of UTD Province/District that passes the External Quality Assurance assessment. | External Quality Assurance (EQA) assessment is conducted by observing the result of screening test/cross-match test in UTD by using standard sample sent from UTD Provinces. | Report on EQA assessment results | Annually |
| 116 | UTD National/ Provinces/Districts conduct employee performance assessment every year. | Performance assessment is conducted through Performance Appraisal Data (DP2). | Report of DP2 result | Annually |
| 117 | Number of UTD employee at National/Province/District levels with basic salary in accordance with the civil servant salary scale in effect. | Salary system is adjusted with local government's pay scale in each Province/District/City. | Copy of pay slip/ personnel document | Annually |
| 118 | UTD National/ Provinces/Districts conduct annual external financial audit. | Audit is an independent review of financial report developed by PMI to check the compliance to the procedures by external parties. | Audit result report | Annually |

| NO. | PERNYATAAN INDIKATOR | DEFINISI | ALAT VERIFIKASI | WAKTU PELAPORAN |
|-----|--|---|---------------------------------|------------------------------------|
| 119 | UTD National/ Provinces/ District develop annual work plan. | Annual work plan is a work plan using the approved format and contains information on: ✓ Strategic Objectives ✓ Outcomes, indicators, and targets ✓ Outputs, indicators, and targets ✓ Activities ✓ Amount of budget per activity and category | Survey analysis report | Annually |
| 120 | UTD National/ Provinces/Districts develop annual activity report. | Annual activity implementation report from UTD National/Provinces/ Districts/Cities is a report on the result of work plan implementation, which contains information on the achievement of: ✓ target for outcome indicator ✓ target for output indicator ✓ briefer explanation on activity implementation | Survey analysis report | Annually |
| 121 | UTD Districts receive coaching visit from Province/National at least once a year. | Coaching visit from UTD personnel one level above can be done at any time by using the approved coaching guidelines. | Financial report | Annually |
| 122 | Number of UTD training center accredited by the Ministry of Health. | Accreditation proposal process is conducted by enclosing different requirements in order to receive standard acknowledgement from MoH | Accreditation document from MoH | Annually |
| 123 | Number of UTD employee at National/ Province/District who meets 25 Professional Credit Units (Satuan Kredit Profesional-SKP) within 5 years. | Professional Credit Unit (SKP) is a credit collected by technical staff in order to gain competence as a technician to be allowed for practicing work. | List of SKP fulfillment | Annually |
| 124 | Number of UTD employee at National/Province/District who attends GMP training. | Clear enough. | GMP training report | Monthly (if there is any training) |
| 125 | Number of UTD employee at National/Province/District who receives training at least once a year. | Clear enough. | Training report | Annually |



| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|---|------------------|
| 126 | Percentage of Diploma Program graduates employed by health service providers. | Diploma Program on Blood Transfusion Technology (TTD) is an education provided for blood transfusion technicians by PTTD institution in order to provide competent human resources in blood transfusion technology. | PTTD graduate database | Annually |
| 127 | UTD National/ Provinces/Districts have standard equipment in accordance with their service grade. | UTD service, in line with MoH Regulation No 83/2014, is divided into Utama level for UTD National, Madya level for UTD Provinces, and Pratama level for UTD Districts. | Inventory document | Annually |
| 128 | UTD National/ Provinces/Districts use blood bags and reagent that comply with national standards. | National Standard for blood bag and reagent use refers to Government Regulation No. 7/2011 and MoH Regulation No 83/2014 as well as the new regulation currently being finalized at the MoH. | Procurement document | Annually |
| 129 | UTD National/ Provinces/Districts use Blood Donor Unit Management Information System (SIMUDDA). | Blood Donor Management Information System (SIMUDDA) is a documentation system of all blood service activities in UTD starting from the donor's vein to the patient's. | SIMUDDA | Monthly |
| 130 | UTD Provinces/ Districts submit blood service report to UTD. | Service activity report elaborates all activities in UTD, starting from donor recruitment, selection and blood sampling, until blood safeguards, processing, storage, and distribution for one year. | SIMUDDA | Monthly |
| 131 | Percentage of blood donor volunteer at UTD Province/ District who donates blood 3-4 times a year. | Clear enough. | Blood donor database | Annually |
| 132 | Amount of blood (bag) that can be used for medication every year at UTD Province/ District. | Clear enough. | Blood product registry document | Annually |
| 133 | Number of people reached through Voluntary Blood Donor promotional activity every quarter by UTD National/Provinces/ Districts. | Promotional activities to recruit Blood Donor Volunteers through production of leaflets, advertisement in print, TV, and online media through UTD website, etc. | List of attendance, media coverage report | Monthly |
| 134 | Number of UTD Districts that adopt the centralized system. | Centralization is an attempt to centralize blood processing and distribution existing in several UTD Districts into one or several centers within the Province. | Centralization plan document | Annually |

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|--|--|------------------------------|------------------|
| 135 | Number of centralization unit established. | Clear enough. | Centralization plan document | Annually |
| 136 | Percentage of blood request that is rational and in line with the medical indication in the hospital fulfilled at UTD Districts. | Clear enough. | Hospital report | Annually |
| 137 | Number of reagent type produced. | Clear enough. | Reagent production record | Monthly |
| 138 | Number of blood reagent produced. | Clear enough. | Reagent production record | Monthly |
| 139 | Number of minipool cryoprecipitate produced. | Clear enough. | Production record | Monthly |
| 140 | Percentage of progress in blood bag factory construction. | Progress of factory construction is measured against PMI NHQ's business plan. | Factory construction report | Monthly |
| 141 | Percentage of bag utilization from Korean Green Cross (KGC) Original Equipment Manufacturer (OEM) in all UTDs. | Clear enough. | Procurement document | Monthly |
| 142 | Percentage of progress in plasma fractionator construction. | Progress of factory construction is measured against PMI NHQ's business plan. | Construction report | Monthly |
| 143 | Number of plasma bag sent to fractionator in a year. | Clear enough. | Distribution report | Monthly |
| 144 | Number of research conducted by UTD National /Provinces. | The theme for research conducted at each UTD National/Province is unrestricted, in accordance with the interest and needs of each UTD. | Research result | Annually |



STRATEGIC OBJECTIVE -6
To strengthen the partnership with national and local governments, public and private sectors, movement partners, donor agencies, and other stakeholders in order to assume PMI's mandate and functions.

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|---------------------------------------|--|
| 145 | Number of partner that has formal partnership with PMI NHQ/Chapters/ Branches. | PMI's partners are central or local government, public sector, private sector, movement partners, donor, and other stakeholders collaborating with PMI based on a legal agreement | MoU or Cooperation Agreement | Annually |
| 146 | Number of MoU signed at PMI NHQ/ Chapters/ Branches. | MoUs, Cooperation Agreements, and other equally binding partnership agreements. | MoU or other partnership documents | Annually |
| 147 | Number of promotional media distributed to potential partners by PMI NHQ/ Chapters/ Branches. | Promotional materials and tools distributed to potential partners. | Promotional media distribution report | Annually |
| 148 | Number of MoU followed up with Cooperation Agreement by PMI NHQ/ Chapters/ Branches. | MoUs presented in form of binding Cooperation Agreement for a certain period of time and in specific area. | Cooperation Agreement document | Annually |
| 149 | Number of activity conducted by PMI NHQ/Chapters/ Branches in collaboration with partners. | Clear enough. | Activity report | Monthly (if there is any joint activity) |
| 150 | Amount of annual income from PMI NHQ/Chapters/ Branches' business units. | Income derived from business units of PMI NHQ/Chapters/Branches for one year. | Financial report | Annually |
| 151 | Number of proposal submitted by PMI NHQ and approved by donors. | Clear enough. | MoU or PA | Annually |
| 152 | Amount of PMI Chapters/ Branches' income derived from external trainings. | External trainings are different services/trainings provided to external party, either private, government, or education institution resulting in income for PMI. | Income report | Annually |

| NO. | PERNYATAAN INDIKATOR | DEFINISI | ALAT VERIFIKASI | WAKTU PELAPORAN |
|-----|--|--|---|-----------------|
| 153 | PMI Chapters submit resource mobilization strengthening strategy document to PMI NHQ | Resource Mobilization strategy document is a document containing different activities with various strategies or methods to develop PMI resources. | Resource Mobilization strategy document | Annually |
| 154 | Number of active and operational PMI business unit at NHQ/Chapters/ Branches. | PMI business unit is a wide range of activities or asset utilization to bring in income. Active and operational means bringing in income for PMI. | Business unit financial report | Annually |
| 155 | Number of training facilitated by PMI Chapters/Branches to external party. | Clear enough. See definition of indicator no.152. | Training report | Annually |
| 156 | PMI Chapters/ Branches receive report on potential donors mapping for resource mobilization. | Potential donor map includes information on corporations, addresses, core business, interest of CSR program, etc. | Potential donor map | Annually |
| 157 | PMI Chapters/ Branches receive public donation in line with the guidelines | Guidelines on donation results sharing for PMI at different levels will be reviewed, approved, and disseminated. | Donation report | Annually |

STRATEGIC OBJECTIVE-7
To improve PMI's accountability as a humanitarian organization at the national and international levels.

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD |
|-----|---|---|-----------------------|--|
| 158 | PMI Chapters/Branches publish fundraising report annually. | Fundraising report is a consolidated report of fund received from PMI resource mobilization at all levels every year. The report is specified based on source of funding, either individual/institutional donation, government fund, or grants from donor agencies, to be further published to the community at large through report or mass media. | Fundraising report | Annually |
| 159 | Percentage of fund allocated by PMI Branches for its services. | Fund allocated for services including regular, emergency services, such as personnel salary and office operations, is not included in this allocation. | Planning document | Annually |
| 160 | PMI NHQ/Chapters conduct external audit on PMI fund utilization every year | External audit is an external review of financial reports conducted by external parties to check compliance to the standard procedures. | Audit report | Annually |
| 161 | Number of financial report submitted to partners every quarter by PMI NHQ/Chapters/ Branches | Financial report comprises budget plan and actual/absorption per activity, remaining balance both in cash and in the account, as well as supporting documents required for all financial transactions. | Financial report | Quarterly |
| 162 | PMI Branches conduct financial audit. | Audit is an independent review of financial report developed by PMI to check the compliance to the procedures, which can be done by internal or external parties. | Audit report | Annually |
| 163 | PMI Branches conduct survey to collect beneficiaries' feedback at least once a year. | Feedback collection survey is a survey to assess public opinion, especially direct beneficiaries, about PMI programs/services. This survey can be done through questionnaires, interviews, FGDs, phone interviews, or through emails/website (e.g. surveymonkey.com). | Survey report | Annually |
| 164 | Number of people reached by mass media publication on PMI Branches' program/ services. | Number of people reached through mass media publication is calculated based on the number of potential audience from PMI publication in print media, TV, radio, and internet. | News analysis report | Monthly |
| 165 | PMI Chapters/ Branches have at least two basic PR & communication equipment. | Basic PR & communication equipment is the supporting equipment for PMI's PR tasks, i.e. camera, video camera, and recorder. | Asset inventory | Annually |
| 166 | Total number of news regarding PMI published in local/national media at PMI Branches' working area. | News regarding PMI is news about activities conducted or supported by PMI and published at print media, radio, TV, and online. | News analysis report | Monthly |
| 167 | Number of promotional materials/ publications distributed by PMI NHQ/ Chapters/ Branches. | Promotional material/publication is promotional/publication media containing information about PMI service activities. The promotional/publication products can vary from event promotion kit (banners, giant banners, flyers, roller banners, backdrops), brochures, posters, multimedia (video), photos, calendar kit (calendar and agenda), and magazines. | Distribution report | Monthly (when conducting distribution) |

STRATEGIC OBJECTIVE 8:
To improve the understanding of all elements of communities on humanitarian values, Fundamental Principles of the International RCRC Movement, as well as International Humanitarian Laws through communication, education, and dissemination strategies.

| NO. | INDICATOR STATEMENT | DEFINITION | MEANS OF VERIFICATION | REPORTING PERIOD | |
|-----|---|--|-----------------------|--|--|
| 168 | Percentage of respondent surveyed by PMI NHQ who can mention PMI mandate correctly. | Respondent is a community member above 17 years of age. 'Can mention PMI mandate correctly' means they can mention two of the followings: ✓ disaster response service ✓ disaster preparedness service ✓ blood donor service ✓ health service ✓ social service | Survey report | Annually | |
| 169 | Number of certified disseminators at PMI NHQ/Chapters/ Branches. | Certified disseminator is a PMI personnel who has completed training on RCRC dissemination and been certified. | | Disseminator certificate | Annually |
| 170 | Number of people who attend RCRC dissemination activities at PMI Branch. | RCRC dissemination activity is an attempt to disseminate RCRC values in general, either through promotion, education, information, or advocacy to the community, legal institutions, political parties, scholars, security and defense institutions, and elementary, secondary, and high education institutions. | | Attendance list for dissemination activity | Monthly |
| 171 | Number of IEC material on RCRC Dissemination distributed by PMI NHQ/Chapters/ Branches. | IEC materials on RCRC Dissemination are printed/electronic information, education, and communication media developed specifically to disseminate RCRC values. | | Distribution report | Monthly (when conducting distribution) |
| 172 | Number of dissemination activities conducted by PMI NHQ/ Chapters/ Branches in collaboration with partners. | RCRC dissemination activities are conducted in partnership with relevant institutions. | | Dissemination activity report | Monthly (when conducting distribution) |

2.6. List of References for PMI Operational and Services Activities

In general, activities must be identified in accordance with the predefined outputs to deliver outcomes that will ultimately meet the objectives.

Activities can vary widely, according to the needs and context of local PMI branch. The following list of activities provided serves merely as a list of reference for potential activities to deliver the outputs outlined in PMI Operational Plan.

This means that there could probably be other activities which are not listed in the matrix but could still be done by PMI local branch.

One important thing that can be learned from this matrix is the way to write down an activity. The rules of writing an activity is that it should be a verb or action, not in objective phrases or language. The key is to use an active sentence and in form of action words.

For example:

- ✓ Conduct PMER training for Head of Offices
- ✓ Conduct Annual Meeting
- ✓ Conduct supervisory visit
- ✓ etc.

For certain outputs, all levels could contribute to deliver them. Yet there are also several outputs that are only relevant to be achieved at certain levels. Therefore, in the activity matrix, if the output is not relevant for a certain level, then it is written as **Not Relevant**.

LIST OF REFERENCES FOR PMI OPERATIONAL AND SERVICES ACTIVITIES

| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | PMI NHQ | PMI Chapter | PMI Branch |
|--|--|---|--|--|--|
| STRATEGIC OBJECTIVE 1: To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities with the organizational policies, procedures, and system. | | | | | |
| 1.1. PMI's Legal entity is strengthened. | 1.1.1. RC Bill is included in the National Legislation Program Agenda. | <ul style="list-style-type: none"> ✓ Conduct advocacy meeting with parliament, government, and mass organization at the national or local levels. ✓ Conduct RCRC legislation seminar /workshop. | <ul style="list-style-type: none"> ✓ Provide inputs to RC Bill. ✓ Conduct advocacy meeting at the local level. | <ul style="list-style-type: none"> ✓ Provide inputs to RC Bill. | <ul style="list-style-type: none"> ✓ Provide inputs to RC Bill. |
| 1.2. PMI's Statutes, Organizational Procedures (PO), and Implementation Guidelines (<i>Juklak</i>), as well as the legal products are in place and implemented at all levels. | 1.2.1. PMI Statutes, Organizational Procedures (PO) , and Implementation Guidelines (<i>Juklak</i>), as well as legal products are in place and implemented at all levels. | <ul style="list-style-type: none"> ✓ Print, distribute, and disseminate PMI statutes (Bahasa Indonesia and English). ✓ Conduct Annual Meeting. ✓ Review / revise PO/<i>Juklak</i>. ✓ Disseminate PO/<i>Juklak</i>. ✓ Organize a workshop to develop the hierarchy of PMI legal products and tools. | <ul style="list-style-type: none"> ✓ Conduct Annual Meeting ✓ Disseminate PO/<i>Juklak</i> to PMI Branches. ✓ Adjust PO/<i>Juklak</i> with the needs of PMI at the local level. | <ul style="list-style-type: none"> ✓ Conduct Annual Meeting ✓ Disseminate PMI statutes to staff and board members. ✓ Implement PO/<i>Juklak</i> based on guidance from PMI Chapter. | <ul style="list-style-type: none"> ✓ Conduct Annual Meeting ✓ Disseminate PMI statutes to staff and board members. ✓ Implement PO/<i>Juklak</i> based on guidance from PMI Chapter. |
| 1.3. PMI's Planning, Monitoring, Evaluation, and Reporting (PMER) system is well-functioning at all levels. | 1.3.1. PMI board members and staff at all levels are regularly coached on the implementation of Planning, Monitoring, Evaluation, and Reporting (PMER) system by competent facilitators. | <ul style="list-style-type: none"> ✓ Disseminate Strategic Plan/ Operational Plan. ✓ Review, revise, and disseminate PMI Planning & Reporting Manual. ✓ Conduct PMER training (including ToT). ✓ Provide technical assistance on PMER subject. | <ul style="list-style-type: none"> ✓ Disseminate Strategic Plan/ Operational Plan. ✓ Conduct PMER training. ✓ Provide technical assistance on PMER subject. | <ul style="list-style-type: none"> ✓ Disseminate Strategic Plan/ Operational Plan. ✓ Conduct PMER training. ✓ Provide technical assistance on PMER subject. | N/A |



| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | PMI NHQ | PMI Chapter | PMI Branch |
|---|---|--|---|-------------|------------|
| 1.3.2. Planning and reporting documents that are in line with the Planning and Reporting Guidelines are available at all levels. | <ul style="list-style-type: none"> ✓ Provide feedback on planning & reporting process. ✓ Develop quarterly report from Divisions/Bureaus/ Units ✓ Analyze data from PMI Chapters/Branches ✓ Analyze annual work plans and reports from PMI Chapters/Branches. | <ul style="list-style-type: none"> ✓ Develop annual work plan. ✓ Develop monthly, quarterly, and annual reports ✓ Provide feedback to the reports from PMI Branches. ✓ Compile semester reports from PMI Branches. ✓ Address feedback from PMI NHQ. | <ul style="list-style-type: none"> ✓ Develop annual work plan. ✓ Develop monthly, quarterly, and annual reports. ✓ Address feedback from PMI Chapter. | | |
| 1.3.3. Assessment tools (questionnaires/analysis tools) for PMI organizational capacity mapping are available and adopted at all levels.. | | | <ul style="list-style-type: none"> ✓ Conduct organizational capacity assessment. ✓ Provide technical assistance based on organizational capacity assessment results. ✓ Monitor the follow ups on organizational capacity assessment results. | | |
| 1.3.4. PMI work plans at all levels are evaluated based on the Planning, Monitoring, Evaluation & Reporting (PMER) Reference Book. | | | <ul style="list-style-type: none"> ✓ Conduct program evaluations. ✓ Provide technical assistance for self-evaluation at PMI Chapters/Branches. | | |
| 1.3.5. PMI Board Members and Staffing Database is updated on regular basis. | | | <ul style="list-style-type: none"> ✓ Develop PMI board members and staffing database. ✓ Collect data for the database. | | |
| | | | <ul style="list-style-type: none"> ✓ Submit information for PMI board members and staffing database from all PMI Branches . | | |

| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | | |
|--|--|---|--|--|
| | | PMI NHQ | PMI Chapter | PMI Branch |
| 1.4. Coordination, communication, and coaching mechanism is operational at all levels. | <p>1.4.1. Internal and cross-chapters/branches communication and coordination mechanism are implemented in line with the procedures.</p> <p>1.4.2. Tiered coaching on organizational and program development is carried out on regular as well as need basis.</p> | <ul style="list-style-type: none"> ✓ Conduct internal meetings for Board Members, Head of Office, and Staff. ✓ Issue an SoP on cross-chapters coordination and communication. <ul style="list-style-type: none"> ✓ Conduct coaching visits to PMI Chapters. | <ul style="list-style-type: none"> ✓ Conduct internal meetings for Board Members, Head of Office, and Staff. ✓ Conduct cross-branches coordination and communication. <ul style="list-style-type: none"> ✓ Conduct coaching visits to PMI Branches. ✓ Develop guidelines on development of PMI Sub-District . | <ul style="list-style-type: none"> ✓ Conduct internal meetings for Board Members, Head of Office, and Staff. ✓ Conduct cross-branches coordination and communication. <ul style="list-style-type: none"> ✓ Conduct coaching visits to PMI Sub-Districts (if any). ✓ Initiate development of PMI Sub-District. |
| STRATEGIC OBJECTIVE 2: To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructures needed to serve the communities. | | | | |
| 2.1. PMI's HR Management that includes recruitment, training, assignment, supervision, reward and recognition, as well as performance evaluation is improved. | <p>2.1.1. Human resources with technical and managerial skills are available and trained to carry out their main tasks and functions for PMI at all levels..</p> <p>2.1.2. PMI personnel receive adequate health services, either in terms of promotion, prevention, or treatment.</p> | <ul style="list-style-type: none"> ✓ Develop and update staffing database. ✓ Conduct technical and managerial trainings. ✓ Conduct staff performance evaluation. <ul style="list-style-type: none"> ✓ Provide health services (if there is any health service facilities). ✓ Provide health insurance. ✓ Facilitate access to Global IFRC's health insurance to volunteers. | <ul style="list-style-type: none"> ✓ Develop and update staffing database. ✓ Conduct technical and managerial trainings. ✓ Conduct staff performance evaluation. <ul style="list-style-type: none"> ✓ Provide health services (if there is any health service facilities). ✓ Provide health insurance for volunteers. ✓ Select volunteers who will receive Global IFRC's Health Insurance. | <ul style="list-style-type: none"> ✓ Develop and update staffing database. ✓ Conduct technical and managerial trainings. ✓ Conduct staff performance evaluation <ul style="list-style-type: none"> ✓ Provide health services (if there is any health service facilities). ✓ Provide health insurance. ✓ Nominate candidate volunteers who will receive Global IFRC's Health Insurance. |



| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | | |
|---------|---|--|--|---|
| | | PMI NHQ | PMI Chapter | PMI Branch |
| | 2.1.3. Volunteer (KSR, TSR, including corporate/organization/institution volunteers) and YRC management guidelines is implemented at all levels. | <ul style="list-style-type: none"> ✓ Provide guidelines on volunteer and YRC development and management. ✓ Conduct national youth and volunteer gatherings. | <ul style="list-style-type: none"> ✓ Monitor volunteer and YRC development and management. ✓ Conduct youth and volunteer gatherings at the provincial level. | <ul style="list-style-type: none"> ✓ Conduct volunteer and YRC development and management. ✓ Conduct youth and volunteer gathering at the district level. |
| | 2.2. PMI's education and training system is well-functioning. | <ul style="list-style-type: none"> ✓ Facilitate certification process for PMI trainers. ✓ Mobilize certified trainers for trainings at Chapters/Branches. | <ul style="list-style-type: none"> ✓ Select trainers for national certification. ✓ Mobilize certified trainers. | <ul style="list-style-type: none"> ✓ Nominate name of trainers to participate in national certification |
| | 2.2.1 Trainers and facilitators are trained, certified by PMI or the authorized institution, and are available to be mobilized in different trainings. | | | N/A |
| | 2.2.2. The national Training Curriculum needed for internal/external purposes is updated by PMI and accredited by national institutions (Ministry of Health, Ministry of Workforce and Transmigration Affairs, BNPB). | <ul style="list-style-type: none"> ✓ Revise the curriculums for technical and managerial trainings. ✓ Propose training curriculums for accreditation process. ✓ Promote PMI trainings to external parties. ✓ Mobilize trainers for external trainings. | | |
| | 2.2.3. PMI trainings are managed in line with the technical guidelines for training management. | <ul style="list-style-type: none"> ✓ Provide feedback to training reports from PMI Chapters/Branches. | <ul style="list-style-type: none"> ✓ Manage trainings in line with the technical guidelines. ✓ Develop training report. | <ul style="list-style-type: none"> ✓ Manage trainings in line with the technical guidelines. ✓ Develop training report. |

| EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | | | | |
|---|--|---|--|--|
| OUTCOME | OUTPUT | PMI NHQ | PMI Chapter | PMI Branch |
| 2.3. Availability of basic supporting facilities and infrastructures for PMI operation is increased. | <p>2.3.1. PMI basic operational facilities (office, disaster operation center / posko, warehouse, training center) are well-functioning.</p> <p>2.3.2. PMI assets and basic facilities/infrastructures are managed in line with the guidance provided.</p> | <ul style="list-style-type: none"> ✓ Maintain Office facilities. ✓ Operate Posko in line with the standard operational procedures. ✓ Construct and operate warehouses based the implementation guidelines. ✓ Construct and operate National Training Center. ✓ Monitor the ownership status and the utilization of PMI assets at all levels. | <ul style="list-style-type: none"> ✓ Maintain Office facilities. ✓ Provide a space for Posko and operate it based on the standards. ✓ Operate the Chapter's Training Center in line with the implementation guides. ✓ Provide warehouse/temporary storage. | <ul style="list-style-type: none"> ✓ Maintain Office facilities. ✓ Provide a space for Posko and operate it based on the standards. ✓ Operate the Chapter's Training Center in line with the implementation guidelines. ✓ Manage assets. ✓ Develop asset inventory report. ✓ Coach and monitor asset management at PMI Branches. |
| 2.4. Performance and utilization of Information and Communication Technology (ICT) equipment and facilities are available and well-maintained | 2.4.1. PMI's Information and Communication Technology (ICT) equipment and facilities are available and well-maintained | | <ul style="list-style-type: none"> ✓ Provide and maintain computer facilities with internet connection. | <ul style="list-style-type: none"> ✓ Provide and maintain computer facilities with internet connection. ✓ Facilitate access to internet (If not having computer with internet connection). |



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| 2.4.2. Communication network and software, e.g. communication radio, email system, formal messaging, and application, are available and functioning to support PMI's operation and services, including blood services. | <ul style="list-style-type: none"> ✓ Develop PMI corporate internet network (for email and messaging) ✓ Develop MIS and national applications. ✓ Conduct satisfaction survey over the use of PMI ICT. | <ul style="list-style-type: none"> ✓ Operate PMI corporate internet network (email and messaging). ✓ Utilize the MIS and applications. | | <ul style="list-style-type: none"> ✓ Operate PMI corporate internet network (email and messaging). ✓ Utilize the MIS and applications. |
| STRATEGIC OBJECTIVE 3: To improve the quality of disaster and health emergency responses across Indonesia, either in terms of rapidness, coverage, and effectiveness of the services. | | | | |
| 3.1. PMI personnel's capacity specializing in emergency response is strengthened.. | <ul style="list-style-type: none"> 3.1.1. Disaster Response (Satgana) team and emergency response specialists are available and ready for mobilization at all levels, including at the regional and national levels, in line with the SoP. | <ul style="list-style-type: none"> ✓ Establish and train regional, national, and international DR specialist team. ✓ Develop guidelines on emergency response and relief (e.g., Cash Transfer Program (CTP), Dead Bodies Management (DBM), and Disaster Victims Identification (DVI)). ✓ Conduct disaster-related workshops (e.g. Asia Pacific shelter technical working group, Regional DM Committee (RDMC) meeting. | <ul style="list-style-type: none"> ✓ Select, train, and coach Satgana at PMI Branches to become provincial Emergency Response team. ✓ Disseminate guidelines on emergency response and relief guidelines. ✓ Develop roster/timetable for District/cities Satgana team members. | <ul style="list-style-type: none"> ✓ Establish, train, and coach Satgana team. ✓ Establish roster/timetable for Satgana team members. |

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| 3.1.2. Disaster response simulation is organized by PMI at all levels in line with the needs and the developed contingency plan. | <ul style="list-style-type: none"> ✓ Coordinate with BNPB, AHA Centre, etc. related to DR Management. ✓ Facilitate the development of PMI contingency plans at the local level. ✓ Facilitate the arrangement of national disaster response simulation. | <ul style="list-style-type: none"> ✓ Develop contingency plan at the chapter level. ✓ Contribute to the development of contingency plan for Provincial BPBD Facilitate the arrangement of disaster response simulation at the chapter level. | <ul style="list-style-type: none"> ✓ Develop contingency plan at the branch level. ✓ Disseminate information on PMI Branch's role to relevant local stakeholders. ✓ Contribute to the development of contingency plan for local District BPBD . ✓ Facilitate the arrangement of disaster response simulation at the branch level. | <ul style="list-style-type: none"> ✓ Develop contingency plan at the branch level. ✓ Disseminate information on PMI Branch's role to relevant local stakeholders. ✓ Contribute to the development of contingency plan for local District BPBD . ✓ Facilitate the arrangement of disaster response simulation at the branch level. |
| 3.2. Availability of emergency response equipment in line with accountability standard is increased. | <ul style="list-style-type: none"> 3.2.1. Standard equipment for emergency response, including communication equipment for coordination as well as documentation and reporting formats are in place and operational at all levels. | <ul style="list-style-type: none"> ✓ Procure standard equipment for emergency response services. ✓ Mobilize basic supporting equipment and personnel for disaster response. | <ul style="list-style-type: none"> ✓ Mobilize standard equipment for emergency response to support disaster response operation at the branch level. ✓ Initiate pre partnership agreement with transportation companies for transportation transports. | <ul style="list-style-type: none"> ✓ Purchase standard communication equipment for emergency situation. ✓ Procure individual gears for Satgana Team members. |
| 3.2.2. Sufficient stock of emergency/relief items is available in regional warehouse and PMI Chapter's logistic storage to support emergency response. | | <ul style="list-style-type: none"> ✓ Procure emergency and relief items for regional warehouses. ✓ Conduct logistic training at the national level. | <ul style="list-style-type: none"> ✓ Provide trained personnel in logistic. ✓ Manage the logistics storages/transits. ✓ Assess and draw access map also transportation means to disaster prone areas. | N/A |



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| 3.3. Emergency response management system is implemented at all levels. | <p>3.3.1. Framework, guidelines, and SoP for emergency response operation and coordination mechanism are in place and adopted at all levels.</p> <p>3.3.2. PMI ambulance service becomes part of local Integrated Emergency Management System (IEMS).</p> <p>3.3.3. Contingency Plan is updated by PMI at all levels on annual basis.</p> | <ul style="list-style-type: none"> ✓ Review and update the Framework for PMI Disaster Response/Health Crisis. ✓ Develop various SoPs for regional, national, and international disaster response operations (e.g. “6 hours arrival” SoP, GIS-Mapping SoP). ✓ Conduct DR/Health Crisis simulation, test relevant frameworks, SoPs. | <ul style="list-style-type: none"> ✓ Disseminate relevant emergency response frameworks and SoPs. | <ul style="list-style-type: none"> ✓ Adopt relevant emergency response frameworks and SoPs. ✓ Conduct refresher training for Satgana Team related to the adoption of emergency response frameworks and SoPs. |
| | | <ul style="list-style-type: none"> ✓ Develop and disseminate operational guidelines on integrated Ambulance Operation with local IEMS. ✓ Develop IEMS Partnership Agreement with the Ministry of Health | <ul style="list-style-type: none"> ✓ Facilitate PMI Branches in initiating and maintaining network with referral hospitals (IEMS). | <ul style="list-style-type: none"> ✓ Operate ambulance service. ✓ Operate call center service for ambulance. ✓ Maintain ambulance and its supporting equipment. ✓ Train ambulance crews. ✓ Initiate and maintain network with referral hospitals. |
| | | <ul style="list-style-type: none"> ✓ Update the National Contingency Plan. ✓ Allocate contingency fund. | <ul style="list-style-type: none"> ✓ Update the chapter's contingency plan. ✓ Disseminate information on PMI Chapter's role to Provincial BPBD. ✓ Allocate contingency fund. | <ul style="list-style-type: none"> ✓ Update the branch's contingency plan. ✓ Disseminate information on PMI Branch's role to District BPBD. ✓ Allocate contingency fund. |

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| 3.3.4. Early warning information is forwarded to the communities in timely manner | <ul style="list-style-type: none"> ✓ Review, revise and publish guidelines on early warning information for the community. ✓ Update MoU with the Government to link PMI Posko with local early warning system. | <ul style="list-style-type: none"> ✓ Disseminate guidelines on early warning information for the community to PMI Branches. ✓ Link PMI Branches with Provincial Government's early warning system. ✓ Establish communication network with communities/focal points in disaster prone areas. | | <ul style="list-style-type: none"> ✓ Adopt guidelines on early warning information for the community into local preparedness mechanism ✓ Link PMI Posko with local early warning system. ✓ Establish communication network with communities/focal points in disaster prone areas. |
| 3.3.5. The need for RFL service in both normal and emergency periods is followed up by PMI at all levels. | | <ul style="list-style-type: none"> ✓ Respond to RFL requests. ✓ Monitor RFL cases across Indonesia. | <ul style="list-style-type: none"> ✓ Respond to RFL requests. ✓ Mobilize volunteers to support RFL operations. Purchase RFL operational equipment. | <ul style="list-style-type: none"> ✓ Assess RFL needs. ✓ Respond to RFL requests. |
| STRATEGIC PLAN 4: To strengthen community resiliency in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, social programs, also referral health services. | | | | |
| 4.1. PMI's capacity to manage community based disaster preparedness and health program is strengthened. | <ul style="list-style-type: none"> 4.1.1. Guidelines/SoP documents on community-based disaster preparedness and health programs are available, updated and applied by PMI. | <ul style="list-style-type: none"> ✓ Review, revise, and publish guidelines/SoPs on community-based programs in disaster preparedness and health sector (e.g. ICBRR, CBHFA). ✓ Develop indicators for community-based projects. ✓ Adapt CBHFA e-learning from the IFRC's CBHFA e-learning. | <ul style="list-style-type: none"> ✓ Disseminate the updated guidelines/ SoPs on community-based programs. ✓ Disseminate indicators for community-based projects. ✓ Link PMI Branches that implement community-based programs/ projects with CBHFA e-learning. | <ul style="list-style-type: none"> ✓ Adopt guidelines/ SoPs on community-based programs into community-based programs. ✓ Adopt indicators for community-based projects. |



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| 4.1.2. Adequate supporting materials/tools for community-based disaster preparedness and health programs (e.g. IEC materials, modeling equipment, M&E tools) are available. | <ul style="list-style-type: none"> ✓ Develop and print IEC materials and modeling equipment for community-based programs. ✓ Develop and disseminate M&E tools | <ul style="list-style-type: none"> ✓ Distribute IEC materials, M&E tools, and modeling equipment to support community-based programs at PMI Branches. | <ul style="list-style-type: none"> ✓ Train PMI and village volunteers to use IEC materials and modeling equipment. ✓ Monitor direct beneficiaries of community-based programs. | <ul style="list-style-type: none"> ✓ Train PMI and village volunteers to use IEC materials and modeling equipment. ✓ Monitor direct beneficiaries of community-based programs. |
| 4.1.3. Community-based disaster preparedness and health program activities are implemented by competent PMI staff/volunteers/facilitators at all levels. | <ul style="list-style-type: none"> ✓ Conduct national training for personnel in community-based programs (e.g. Healthy School, Disaster-Prepared School/University, ICBR, CBHFA). ✓ Provide technical assistance on development of community-based programs. | <ul style="list-style-type: none"> ✓ Provide technical assistance on development of community-based programs. ✓ Mobilize trained personnel (specialists) to coach community-based activities. | <ul style="list-style-type: none"> ✓ Develop community-based programs and activities. ✓ Mobilize volunteers to implement community-based activities. | <ul style="list-style-type: none"> ✓ Develop community-based programs and activities. ✓ Mobilize volunteers to implement community-based activities. |
| 4.2. PMI's capacity to provide social services to the communities is increased. | 4.2.1. Guidelines/SoP documents and supporting materials/tools for social services (e.g. IEC materials, modeling equipment, M&E tools) are available, updated, and applied in PMI. | <ul style="list-style-type: none"> ✓ Develop and finalize guidelines on social services (e.g. psychosocial support guidelines, Family Care Handbook). ✓ Develop and print IEC materials and modeling equipment for social services. ✓ Develop and disseminate M&E tools. ✓ Conduct road safety campaign. ✓ Conduct social services (free cataract surgery, free eye glasses, other assistances). | <ul style="list-style-type: none"> ✓ Distribute IEC materials, M&E tools, and modeling equipment to support social service at PMI Branches. ✓ Conduct road safety campaign. ✓ Integrate ambulance service with road safety campaign. ✓ Monitor direct beneficiaries of social services. | <ul style="list-style-type: none"> ✓ Train volunteers to use IEC materials and modeling equipment. ✓ Conduct road safety campaign (if there is no ambulance service). ✓ Integrate ambulance service with road safety campaign. ✓ Monitor direct beneficiaries of social services. |

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| 4.2.2. Social service activities are implemented by competent PMI staff/volunteers at all levels. | <ul style="list-style-type: none"> ✓ Conduct national training for personnel in social service programs/activities . ✓ Provide technical assistance on development of social service activities. ✓ Mobilize trained personnel to carry out social service activities. | <ul style="list-style-type: none"> ✓ Provide technical assistance on development of social service activities. ✓ Mobilize trained personnel to carry out social service activities. | <ul style="list-style-type: none"> ✓ Mobilize trained personnel to carry out social services activities. | |
| 4.3. PMI Hospital's services and capacity are improved . | <p>4.3.1. Information on hospital standard services (patient services, patient safety, services to people contracted with TB, HIV/AIDS and CEONC) based on KARS (Hospital Accreditation Commission) or JCI (Joint Commission International) standards is disseminated to all hospitals' employees in order to guide them in performing their roles and responsibilities.</p> | <ul style="list-style-type: none"> ✓ Provide assistance to internal assessment team for accreditation assessment and coaching on KARS implementation. ✓ Conduct training and personnel orientation for KARS-based patient services on regular basis. ✓ Add patient facilities for maternity services. ✓ Conduct internal audit, quality monitoring, and customer satisfaction survey on regular basis. | | <ul style="list-style-type: none"> ✓ Develop standard for human resource competence, standard for titles, and professional standard . ✓ Recruit medical and non-medical staff based on the hospital's standard for personnel competence. ✓ Develop/review, disseminate, and monitor the implementation of service guidelines and the SoPs. |
| | 4.3.2. Medical and non-medical personnel at the hospital are working in line with the hospital standard for personnel competence (i.e. education qualification, credential competence, clinical authority, audit competence). | | | |



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| 4.3.3. Hospital quality and patient safety improvement programs are implemented through Infection Prevention and Control (IPC) program, Hospital Occupational Health and Safety (K3RS), as well as Hospital Patient Safety program. | <ul style="list-style-type: none"> ✓ Conduct training of trainers for IPC, K3RS, and Patient Safety. ✓ Monitor the implementation of IPC, K3RS, and Patient Safety programs on regular basis. ✓ Conduct IPC, K3RS, and Hospital Patient Safety simulations on regular basis. | | | |
| 4.3.4. Adequate general and specialized/sub-specialized medical services, including flagship service for lifestyle needs, are available. | <ul style="list-style-type: none"> ✓ Provide continued education for sub-specialist medical personnel. ✓ Recruit external specialist doctors. ✓ Provide additional diagnostic services, i.e. Magnetic Resonance Imaging (MRI), C Arm, dental X-ray, laparoscopy, and Cath Lab. | | | |
| 4.3.5. Education, training, and development, as well as performance evaluation for hospital's supporting staff are well-conducted. | <ul style="list-style-type: none"> ✓ Construct and secure the operational permit for STIKes building and its supporting infrastructures. ✓ Propose an accreditation to the Ministry of Health for the education and training section, as well as trainer certification. | | | |
| STRATEGIC PLAN 5: To increase the availability of safe, accessible, and quality blood throughout Indonesia. | | | | |
| 5.1. Blood Transfusion Unit's (UTD) capacity in line with the national standard is increased. | 5.1.1. Policies, procedures, and guidelines related to Good Manufacturing Practice (GMP) for blood service are available and implemented by UTD at all levels. | <ul style="list-style-type: none"> ✓ Review, revise, and publish policies, procedures, and guidelines regarding GMP for blood service. ✓ Disseminate policies, procedures, and guidelines regarding GMP for blood service to Provincial/Branch UTDs. ✓ Monitor the implementation of policies and guidelines regarding GMP at District UTDs. | <ul style="list-style-type: none"> ✓ Disseminate policies, procedures, and guidelines regarding GMP for blood service to District UTDs. ✓ Implement policies and guidelines regarding GMP for blood service at District UTDs. | |

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| 5.1.2. UTD management system, including its organizational structure, staffing, finance, planning and reporting, is operational at all levels. | <ul style="list-style-type: none"> ✓ Conduct EQA to UTDs and performance appraisal (DP2). | <ul style="list-style-type: none"> ✓ Conduct documentation on staffing, finance, planning, and reporting. | | <ul style="list-style-type: none"> ✓ Conduct documentation on staffing, finance, planning, and reporting. |
| 5.1.3. Communication, coordination, and coaching mechanism is consistently applied within internal UTD, across UTD levels, and with external stakeholders (local government, DHO, hospitals, POM, vendors, etc.). | <ul style="list-style-type: none"> ✓ Monitor UTD at all levels in the development of work plan, annual report, and activity reports through SIMUJDDA. ✓ Audit and coach UTDs at the local level . | <ul style="list-style-type: none"> ✓ Conduct national annual meeting on regular basis. ✓ Conduct internal planning meeting on a regular basis. ✓ Maintain coordination and collaboration with local stakeholders. | <ul style="list-style-type: none"> ✓ Conduct national annual meeting on regular basis. ✓ Conduct internal planning meeting on a regular basis. ✓ Maintain coordination and collaboration with local stakeholders. | <ul style="list-style-type: none"> ✓ Conduct national annual meeting on regular basis. ✓ Conduct internal planning meeting on a regular basis. ✓ Maintain coordination and collaboration with local stakeholders. |
| 5.2. Human resources capacity, also facilities and infrastructure at UTD National / Provinces/Districts are increased. | <ul style="list-style-type: none"> ✓ UTD employees are trained in implementing GMP and national standards, in line with their roles and responsibilities, also competencies required. | <ul style="list-style-type: none"> ✓ Conduct GMP training and other trainings based on needs. | <ul style="list-style-type: none"> ✓ Adopt GMP and other national standards in line with the requirement standard in effect. | <ul style="list-style-type: none"> ✓ Adopt GMP and other national standards in line with the requirement standard in effect. |
| 5.2.2. Competent and professional technical personnel on Blood Transfusion Technique are adequately produced from the Blood Transfusion Technology Diploma Program. | | <ul style="list-style-type: none"> ✓ Monitor and evaluate the quality of graduates from the Blood Transfusion Technology Diploma Program (D3 PTTD). ✓ Develop need mapping of the graduates from D3 PTTD in all District UTDs. ✓ Recruit and place D3 PTTD graduates in District UTDs in need . | <ul style="list-style-type: none"> ✓ Develop report on the need of D3 PTTD graduates from District UTDs in its operational areas. | <ul style="list-style-type: none"> ✓ Report the need of the D3 PTTD graduates for local District UTD to PMI Chapter. |



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| 5.2.3. Adequate and standard facilities and infrastructure, also furniture, fixtures and equipment (FF&E) are available at all UTDs. | <ul style="list-style-type: none"> ✓ Register and develop inventory of UTD equipment at all levels based on the service grade, including the number of blood bag and reagent. | <ul style="list-style-type: none"> ✓ Manage infrastructures, equipment, and consumable items in line with the guidelines. ✓ Apply procedures on infrastructures and equipment maintenance in line with the guidelines. ✓ Replace equipment and consumable items in line with the guidelines. | <ul style="list-style-type: none"> ✓ Manage infrastructures, equipment, and consumable items in line with the guidelines. ✓ Apply procedures on infrastructures and equipment maintenance in line with the guidelines. ✓ Replace equipment and consumable items in line with the guidelines. | <ul style="list-style-type: none"> ✓ Manage infrastructures, equipment, and consumable items in line with the guidelines. ✓ Apply procedures on infrastructures and equipment maintenance in line with the guidelines. ✓ Replace equipment and consumable items in line with the guidelines. |
| 5.2.4. Blood Donor Unit Management Information System (SIMUDDA) is well-functioning at all levels to support blood service documentation, reporting, and tracking. | <ul style="list-style-type: none"> ✓ Establish SIMUDDA implementation team. ✓ Provide infrastructure for SIMUDDA data hosting. | <ul style="list-style-type: none"> ✓ Assist the use of SIMUDDA in all District UTDs in its operational areas. ✓ Monitor and evaluate the utilization of SIMUDDA in all District UTDs in its operational areas. | <ul style="list-style-type: none"> ✓ Conduct blood service recording, reporting, and tracking using SIMUDDA. | <ul style="list-style-type: none"> ✓ Conduct blood service recording, reporting, and tracking using SIMUDDA. |
| 5.3. Availability of safe, accessible, and quality blood in all UTD is increased. | <p>5.3.1. Initiatives to promote Voluntary Blood Donors (DDS) are conducted at a massive scale on regular basis.</p> | <ul style="list-style-type: none"> ✓ Develop and disseminate promotional materials on DDS to local UTDs. ✓ Conduct DDS promotion and recruitment at the national level. | <ul style="list-style-type: none"> ✓ Disseminate and coach utilization methods of DDS promotional materials to local UTDs. ✓ Conduct DDS promotion and recruitment at the provincial level. | <ul style="list-style-type: none"> ✓ Conduct promotion for DDS recruitment using the promotional materials provided. ✓ Conduct DDS promotion activities by visiting various institutions on regular basis. ✓ Register DDS with SIMUDDA. |

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| | 5.3.2. Centralization of blood processing, blood screening, and cross-matched test is conducted for blood service efficiency and effectiveness. | <ul style="list-style-type: none"> ✓ Coordinate to establish centralization with local UTDs. ✓ Coordinate to establish centralization with UTD National and District UTDs in its operational areas. ✓ Improve the quality of blood processing, blood screening and cross matched test. | <ul style="list-style-type: none"> ✓ Coordinate to establish centralization with UTD National and District UTDs in its operational areas. ✓ Improve the quality of blood processing, blood screening and cross matched test. | <ul style="list-style-type: none"> ✓ Coordinate to establish centralization with UTD National and provincial UTD. ✓ Improve the quality of blood processing, blood screening and cross matched test. |
| | 5.3.3. Blood is distributed in line with the hospitals' needs through blood provision service network. | <ul style="list-style-type: none"> ✓ Monitor blood distribution by local UTDs. | <ul style="list-style-type: none"> ✓ Monitor blood distribution by local UTDs | <ul style="list-style-type: none"> ✓ Monitor blood needs in local hospitals. ✓ Take and store blood in line with the standard. ✓ Distribute blood based on the needs at local hospitals. |
| | 5.3.4. Production of blood reagent, blood bag, and plasma fractionation is conducted by UTD and PMI NHQ independently. | <ul style="list-style-type: none"> ✓ Pilot and conduct quality control to the types of reagent and cryo produced. ✓ Construct blood bag and plasma fractionation factory in line with PMI NHQ's business plan. | N/A | N/A |
| | 5.3.5. Research and development for blood service is conducted by UTD National and Provinces. | <ul style="list-style-type: none"> ✓ Develop standard for research and development (R&D) at the national and provincial levels. ✓ Equip the research and development unit. ✓ Conduct research and development on blood services on regular basis. | <ul style="list-style-type: none"> ✓ Equip the research and development unit. ✓ Conduct research and development on blood services on regular basis. | N/A |



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| STRATEGIC PLAN 6: To strengthen the partnership with national and local government, public and private sectors, movement partners, donor agencies, and other stakeholders in order to assume PMI's mandate and functions. | | | | |
| 6.1. PMI's partnership with the government, public and private sectors, movement partners, organizations, national and international donor agencies, and other stakeholders is strengthened at all levels. | 6.1.1. MoU and Project Agreement documents between PMI and the government, public and private sectors, movement partners, organizations, national and international donor agencies, and other stakeholders are available and implemented by PMI at all levels. | <ul style="list-style-type: none"> ✓ Initiate partnership with potential local, national, and international partners. ✓ Prepare legal framework for cooperation with partners. ✓ Conduct planning meeting to develop, distribute, and disseminate PMI partnership guidelines with different types of partner. | <ul style="list-style-type: none"> ✓ Follow up and implement cooperation with partners. ✓ Facilitate partnership between PMI Branches and local partners. | <ul style="list-style-type: none"> ✓ Follow up and implement cooperation with partners. ✓ Facilitate partnership between PMI Branches and local partners. |
| | 6.1.2. Partnership building initiatives, including the implementation of Cooperation Agreement Strategy (CAS), are pursued consistently by PMI at all levels. | <ul style="list-style-type: none"> ✓ Review, revise, and disseminate partnership guidelines. ✓ Identify potential organizational development areas and develop proposals. ✓ Facilitate development of partnership proposal by PMI Branches. ✓ Develop and distribute promotional and marketing materials for PMI's commercial trainings and programs. ✓ Conduct workshop to develop policies and strategies on training for partners. ✓ Participate actively in RCRC Movement forums at the regional and international levels. | <ul style="list-style-type: none"> ✓ Identify potential organizational development areas and develop proposals. ✓ Facilitate development of partnership proposal by PMI Branches. ✓ Apply the content of partnership guidelines. ✓ Develop and send newsletters and reports to partners. | <ul style="list-style-type: none"> ✓ Identify potential organizational development areas and develop proposals. ✓ Facilitate development of partnership proposal by PMI Branches. ✓ Apply the content of partnership guidelines. ✓ Develop and send newsletters and reports to partners. |

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| 6.2. Resource Mobilization capacity to enhance participation from partners and communities is strengthened. | 6.2.1. Resource mobilization strategy is developed and implemented by competent personnel in PMI at all levels . | <ul style="list-style-type: none"> ✓ Conduct national trainings for Resource Development personnel. ✓ Develop and distribute Resource Development guidelines. ✓ Mobilize experts on micro business from partners to provide technical assistance to local levels. | <ul style="list-style-type: none"> ✓ Select staff/volunteers to participate in Resource Development trainings. ✓ Engage staff/ volunteers trained in Resource Development for activities under output 6.2.2. | <ul style="list-style-type: none"> ✓ Select staff/ volunteers to participate in Resource Development Trainings. ✓ Engage staff/ volunteers trained in Resource Development for activities under output 6.2.2. |
| | 6.2.2. Potential donor mapping for resource mobilization nation-wide is developed and disseminated to PMI Chapters/ Branches. | <ul style="list-style-type: none"> ✓ Compile and analyze information on potential partners and resource development activities at the local level. ✓ Develop database of potential partners for PMI at all levels. ✓ Develop and distribute Mapping Report on Potential Resource Development Partners to the local level. ✓ Link PMI Chapters and Branches with sources of resource development at the national level. | <ul style="list-style-type: none"> ✓ Identify potential business units. ✓ Develop business plan. ✓ Compile and send information on potential partners and resource development activities to PMI HQ. ✓ Initiate strategic partnership with local partners. | <ul style="list-style-type: none"> ✓ Identify potential business units. ✓ Develop business plan. ✓ Compile and send information on potential partners and resource development activities to PMI Chapter. ✓ Initiate strategic partnership with local partners. |
| | 6.2.3. Guidelines regulating the utilization of fund generated from public donation is disseminated and implemented by PMI. | <ul style="list-style-type: none"> ✓ Conduct national workshop on the mechanism to utilize donation from the national level . ✓ Disseminate the mechanism to utilize donation to PMI Chapters . | <ul style="list-style-type: none"> ✓ Disseminate the mechanism to utilize donation to PMI Branches. ✓ Open a separate account for public donation. ✓ Adopt various direct/ indirect fundraising methods and link them with public donation specific account | <ul style="list-style-type: none"> ✓ Open a separate account for public donation. ✓ Adopt various direct/ indirect fundraising methods and link them with public donation specific account. |



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| | | <ul style="list-style-type: none"> ✓ Introduce various direct/indirect public fundraising methods to PMI Chapters/ Branches. ✓ Open a separate account for public donation at the national level. | | <ul style="list-style-type: none"> ✓ Develop periodical reports on income and expenditures from donation for both internal and external parties. ✓ Promote and update the content of PMI Online Donation. |
| STRATEGIC PLAN 7: To improve PMI's accountability as a humanitarian organization at the national and international levels. | | | | |
| 7.1. Principles of accountability and transparency are well-implemented by PMI accordingly. | <p>7.1.1. Reports on financial income and expenditures, including financial and narrative reports, are developed on periodical basis for internal and external consumption.</p> | <ul style="list-style-type: none"> ✓ Develop periodical reports on income and expenditures from donation for both internal and external parties. ✓ Promote and update the content of PMI Online Donation. | <ul style="list-style-type: none"> ✓ Develop periodical reports on income and expenditures from donation for both internal and external parties. ✓ Promote and update the content of PMI Online Donation. | <ul style="list-style-type: none"> ✓ Develop periodical reports on income and expenditures from donation for both internal and external parties. ✓ Promote and update the content of PMI Online Donation. |
| | <p>7.1.2. Audit on PMI's financial expenditures is conducted annually both by internal and external accountant and followed up accordingly.</p> | <ul style="list-style-type: none"> ✓ Conduct cash opname, review on cash record handling, as well as internal control. ✓ Review/observe PMI Hospitals, National UTD, and audit Wisma PMI. | <ul style="list-style-type: none"> ✓ Conduct cash opname, review on cash record handling, as well as internal control. ✓ Review/observe PMI Hospitals, National UTD, and audit Wisma PMI. ✓ Conduct compliance audit over procedures related to PMI activities. ✓ Facilitate external financial audit. | <ul style="list-style-type: none"> ✓ Conduct cash opname, review on cash record handling, as well as internal control. ✓ Facilitate external financial audit. |

| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | | |
|---------|---|---|---|--|
| | | PMI NHQ | PMI Chapter | PMI Branch |
| | 7.1.3. Guidelines on beneficiary feedback and complaint mechanism are developed and implemented by PMI at all levels. | <ul style="list-style-type: none"> ✓ Develop guidelines on feedback collection mechanism from beneficiaries and its supporting tools. ✓ Collect feedback from beneficiaries of RCRC services. | <ul style="list-style-type: none"> ✓ Collect feedback from beneficiaries of RCRC services. | <ul style="list-style-type: none"> ✓ Collect feedback from beneficiaries of RCRC services. |
| | 7.2. Outreach, quality, and intensity of documentation, publication, promotion, and advocacy of PMI activities/services are increased. | <ul style="list-style-type: none"> ✓ Provide basic public relation equipment. | <ul style="list-style-type: none"> ✓ Provide basic public relation equipment. | <ul style="list-style-type: none"> ✓ Provide basic public relation equipment. |
| | 7.2.1. Basic PR and communication equipment and tools (camera, video camera, recorder), as well as information, education, and communication (IEC) materials are adequately available at all levels of PMI. | | | |
| | 7.2.2. Analysis report on PMI publication in mass media (print, online, TV, radio) and social media (Twitter dan Facebook) is developed on regular basis at PMI NHQ/Chapters . | <ul style="list-style-type: none"> ✓ Analyze PMI publication data from monitoring service company. ✓ Update news in PMI media (website, social media), and register the number of visitor. ✓ Develop analysis report on PMI's image. | <ul style="list-style-type: none"> ✓ Monitor and compile PMI publication in local mass media and social media (if any). | <ul style="list-style-type: none"> ✓ N/A |
| | 7.2.3. PR and communication products to promote PMI program and services are disseminated to the communities/ public on regular basis. | <ul style="list-style-type: none"> ✓ Develop and distribute various advocacy and public relation materials (e.g. brochures, newsletters) to PMI at the local level . | <ul style="list-style-type: none"> ✓ Distribute various advocacy and PR materials (e.g. brochures, newsletters) to communities. ✓ Develop distribution reports for advocacy materials and PR products to PMI NHQ. | <ul style="list-style-type: none"> ✓ Distribute various advocacy and PR materials (e.g. brochures, newsletter) to communities. ✓ Develop distribution reports for advocacy materials and PR products to PMI NHQ. |



| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | | |
|--|--|--|--|---|
| | | PMI NHQ | PMI Chapter | PMI Branch |
| STRATEGIC PLAN 8: To improve the understanding of all elements of communities on humanitarian values, Fundamental Principles of the International RCRC Movement, as well as International Humanitarian Laws (IHL) through communication, education, and dissemination strategies. | | | | |
| 8.1. Understanding on RCRC and humanitarian values among PMI personnel and stakeholders is improved. | 8.1.1. Updated Information, Education, and Communication (IEC) materials on RCRC Dissemination are available adequately at all levels. | <ul style="list-style-type: none"> ✓ Document distribution reports for advocacy materials and public relation products to PMI at the local level. ✓ Document RCRC activities worthy to be published at the national level. | <ul style="list-style-type: none"> ✓ Review, revise, and or develop IEC materials on RCRC dissemination based on target groups (e.g. journalists, school age and working age groups). ✓ Distribute IEC materials on RCRC Dissemination to PMI Chapters/Branches. | <ul style="list-style-type: none"> ✓ Document RCRC activities worthy to be published at the chapter and national level. ✓ Distribute IEC materials on RCRC Dissemination to PMI Branches. ✓ Train volunteers from PMI Branches to use IEC materials on RCRC Dissemination. |
| | 8.1.2. Character building on humanitarian and RCRC values is facilitated by competent disseminators at all levels. | <ul style="list-style-type: none"> ✓ Provide technical assistance for dissemination activities by PMI Chapters/Branches. ✓ Review and revise dissemination training curriculum. ✓ Conduct disseminator training at the national level. ✓ Publish dissemination guidelines for different target groups. ✓ Finalize and distribute Exploring Humanitarian Law (EHL) guidelines for teachers and conduct the training. ✓ Conduct Ten Step training at national level. | <ul style="list-style-type: none"> ✓ Mobilize disseminators for dissemination activities at PMI Branches. ✓ Conduct dissemination activities. ✓ Conduct Ten Step training at the chapter level (if it is a target area). | <ul style="list-style-type: none"> ✓ Conduct dissemination activities. ✓ Provide orientation on the updated dissemination materials to (teachers) YRC Facilitators. ✓ Incorporate dissemination materials into YRC activities at schools. |

| OUTCOME | OUTPUT | EXAMPLES OF ACTIVITIES TO ACHIEVE OUTPUTS | | |
|---|---|---|---|------------|
| | | PMI NHQ | PMI Chapter | PMI Branch |
| 8.1.3. Partnership with relevant institutions (Military, Police, universities, schools, NGOs) and communities is established to disseminate humanitarian and RCRC values. | <ul style="list-style-type: none"> ✓ Initiate dissemination partnership with different stakeholders at the national level. ✓ Mobilize disseminators to implement partnership with different stakeholders. ✓ Conduct commemoration of RCRC-related big days/ events . | <ul style="list-style-type: none"> ✓ Follow up PMI's partnership with different stakeholders at the chapter level. ✓ Mobilize disseminators to implement partnership with different stakeholders. ✓ Conduct commemoration of RCRC-related big days/ events . | <ul style="list-style-type: none"> ✓ Follow up PMI's partnership with different stakeholders at the branch level. ✓ Conduct commemoration of RCRC- related big days/ events . | |

PMI at all levels, starting from NHQ, Chapters, to Branches should move in the same direction and speed in implementing the 2014-2019 Strategic Plan and Operational Plan as a national agenda in order to achieve PMI that demonstrates strong character, is professional, self-sustaining, and respected by communities.

Thus, PMI at the NHQ, 33 Chapters, 460 Branches are not only united by emblem but also by the same vision, missions, and objectives.

III. PLANNING IMPLEMENTATION



3.1. Principles of Planning Implementation

- a. Participatory.** PMI planning at all levels should be done by involving all elements within PMI organization, i.e. volunteers, staff, and board members by taking into account the needs of and recommendations from the communities.
- b. Priorities.** PMI planning at all levels should define at least four out of the eight key program plans above to be the main priorities. Clearly, this should be done based on the need and capacity assessment for PMI at the local level.
- c. Result-oriented.** PMI planning at all levels should be result-oriented, which means that every program must contribute to the achievement of the organization's strategic objectives. Therefore, each work plan should refer to the Strategic Plan and Operational Plan 2014-2019 with results indicators adopted from PMI Indicator Registry.
- d. Realistic and independent.** PMI planning at all levels develops programs based on local capacities and potential resources. PMI should be able to establish strategic partnerships with local stakeholders and through other resource mobilization initiatives to fund operations and services independently.
- e. Integrated.** Planning should reflect integration and synergy, either between working units within PMI, across levels, or in its relation with local government's development programs.
- f. Sustainable.** PMI planning at all levels should be sustainable from year to year in order to achieve the short-term and long-term objectives defined in the Strategic Plan and Operational Plan 2014-2019.

3.2. Inter-Level Planning (read from the bottom up)

Table 2. Bottom-up Planning Process

| PMI Level | Bottom-up Planning Process |
|--------------------|--|
| National Level | <p>1. Development of strategic programs. 2. Include sectoral programs for PMI nation-wide. 3. Development of PMI coaching strategy nation-wide. 4. Endorsed in the National Annual Meeting/Mukernas.</p> |
| Chapter Level | <p>1. Include coaching strategies/activities for PMI Branches . 2. Include activities proposed by PMI Branches to be implemented by PMI Chapters. 3. Include activities proposed by PMI Chapter to be implemented by PMI NHQ. 4. Endorsed in PMI Chapter's Annual Meeting/Mukerprov.</p> |
| Branch Level | <p>1. Include details of PMI Branch's regular programs/activities/ services. 2. Include coaching activities for PMI Sub-districts and cross-sectoral coordination. 3. Include proposed activities that can be effectively implemented by PMI Chapter. 4. Endorsed in PMI Branch's Annual Meeting/MukerKab/Kota.</p> |
| Sub-district Level | <p>1. Identify the regular programs/activities/services needed by local communities. 2. Proposed to PMI Branch to be accommodated in the work plan development process.</p> |

3.3. Planning Implementation Process

- a. In the first year of implementation of this guidelines, the work plan developed is a work plan, including budget, for two years at the same time. For example in 2015, the work plan developed is work plans for 2016 and 2017. Yet in the following year, i.e. 2016, the indicative work plan for 2017 will be adjusted and the indicative work plan for 2018 is identified; and so on.
- b. PMI Sub-districts identify suitable regular programs/activities/ services to the needs and priorities of local communities. This process requires participation from community representatives, such as village leaders and volunteers. Subsequently, PMI Sub-districts will send the identified results to PMI Branch to be accommodated in the annual plan document.

- c. The work plan development, including budget, at PMI Branch level is conducted based on assessment on local needs of regular programs/ activities/services. Information from PMI Sub-districts is very helpful for this need analysis. The annual work plan and the following year indicative work plan are then submitted to PMI Chapter.
- d. At PMI Chapters, PMI Branches' annual work plans are compiled and summarized so that PMI Chapters are able to map out PMI Branches activities well, and could thus identify activities that can be facilitated by PMI Chapters, which then become part of PMI Chapter's work plan.
- e. PMI Chapters submit the work plan and the following year indicative work plan to PMI NHQ. Thus, PMI NHQ is able to identify strategic work plans that can be adopted nationally.
- f. Endorsement of work plan and budget is conducted through Annual Meetings at each level on the specified timeline.
- g. With the availability of the following year indicative work plan, PMI is able to propose the work plan to the local government through the Development Planning Meeting (*Musrenbang*) scheme.

3.4. Planning and Annual Meeting Implementation Schedule

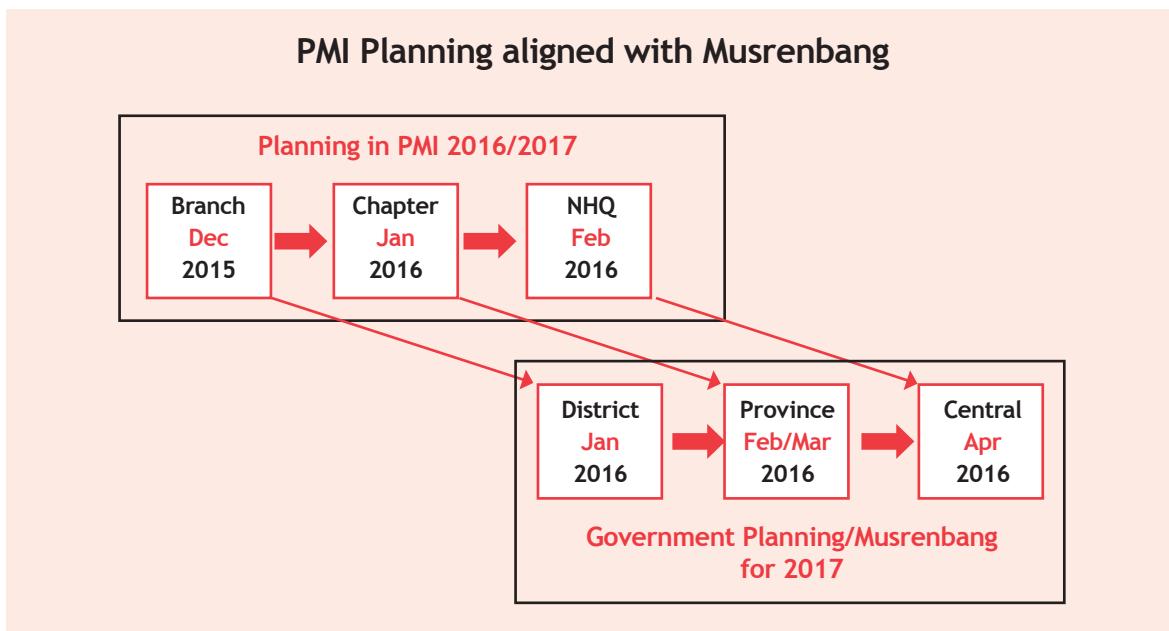
To synergize the planning between different levels in PMI and also with the Government planning mechanism (Musrenbang), the planning schedule for all PMI levels has been specified. The following table is a scenario of planning and budgeting schedule developed for the 2016 planning and the 2017 proposed/indicative work plan.

Table 3. Planning Cycle and Schedule

Jadwal Pelaksanaan Musyawarah Kerja di tingkat -Skenario untuk rencana kerja 2016/2017-

| Activity | PMI Branch | PMI Chapter | PMI NHQ |
|--|-------------------------|------------------------|-------------------------|
| Planning meeting: • Endorsement of 2015 Report` • Endorsement of 2017 Work Plan • Endorsement of 2017 Indicative Work Plan | December 2015 | January 2016 | February 2016 |
| Follow up of Planning Meeting: Participate in2016 Musrenbang, PMI propose the 2017 Work Plan | January 2016 | Feb/Mar 2016 | Apr 2016 |
| Initiatives of diversify sources of funding for the 2016 Work Plan, including Local Budged (APBD) | | During 2016 | |

In general, the planning process schedule in PMI and its relations with the government planning cycle through Musrenbang is described in the following diagram.

Figure 1. Example of linkage between PMI Planning and Musrenbang

Description

In December 2015, PMI Branches prepare the 2016 work plans and the 2017 indicative work plans, and then submit them to the Chapters. Musrenbang at the district level for the 2017 work plan will be conducted in Feb/March 2016. In this scenario, the 2017 indicative work plan developed by PMI Branches can be submitted in the District Musrenbang process to obtain financial support.

With this scenario, PMI Branches a synergized planning process with the local government's planning. Certainly, the effort to secure government support requires positive and strong relationships through consistent communication and coordination. In the end, local government support can be optimized if PMI has a clear plan and high accountability.

3.5. Adjustment of Provincial Strategic Plan (PMI Chapter)

PMI Strategic Plan 2014-2019 was developed based on the analysis toward the capacities, conditions, and needs of PMI nation-wide, informed by the organizational capacity assessment and different program reports as well as results of monitoring and supervision visits.

PMI Strategic Plan 2014-2019 was developed to become a national reference so that PMI throughout Indonesia can work in synergy to achieve the goal, and finally on the right track to manifest the vision of the organization .

In each term of PMI NHQ board membership, the content or priorities included in the Strategic Plan document are adjusted with the most updated development. The Strategic Plan contains the organization's mandate, articulated in the vision, mission, and strategic objective statements, therefore adjustments commonly occur slowly from one period to another.

The congress/assembly meeting in PMI at different levels are conducted at varied and different times from the tenure of PMI NHQ board members. Therefore, PMI Chapters need to adjust their Strategic Plan with the Strategic Plan published by PMI NHQ. These adjustments are generally not major and intended to align the Local Strategic Plan with the one published by PMI NHQ. This will be specified in details in a specific policy issued by PMI in a form of a Decree or Circular.

A bottom-up planning process starting from Sub-districts, Branches, Chapters, and NHQ levels which is conducted on the assigned schedule and referring to the Strategic Plan and Operational Plan 2014-2019 will support a more synergized planning.

A successful planning is planning for success.

IV. PLANNING PROCESS



4.1. Planning Process in PMI Sub-district

First, PMI Sub-districts develop proposed activities by considering the followings:

- a. Relevance with local challenges: vulnerability to disaster, health, economy, and social.
- b. Relevance with PMI Key Program Plan (RPP)/Operational Plan.
- c. Capacity of local communities.
- d. Analysis or study on the challenges and opportunity (relations between PMI and local government, communities, NGOs, private sector, and local government plan (RPJM Daerah).

Second, based on the analysis, PMI Sub-districts develop the Annual Activity Plan that contributes to the achievement of outputs/outcomes from the respective PMI Branches, along with PMI Sub-districts' budget plan in line with the format specified in section 4.2.

4.2. Work Plan or Activity Plan Format for PMI Sub-district

**WORK/ACTIVITY PLAN OF PMI "X" SUB-DISTRICT
Year 20xx**

4.3. Planning Process in PMI Branch

First, as explained in section 4.1., PMI Sub-districts have formulated proposed activities and submitted them to PMI Branches as references to formulate their annual work plan.

Second, PMI Branches review the activities proposed by PMI Sub-districts by considering the followings:

- a. Relevance with local challenges: vulnerability to disaster, health, economy, and social.
- b. Relevance with PMI Key Program Plan (RPP)/Operational Plan.
- c. Capacity of local communities.
- d. Analysis or study on the challenges and opportunity (relations between PMI and local government, communities, NGOs, private sector, and local government plan (RPJM Daerah).

Third, based on the analysis, PMI Branches develop the Annual Work Plan, along with PMI Branches' budget plan in line with the format specified in sub-section 4.4.

PMI Branches need to complete all of the following four formats:

Format A - Work Plan of PMI Branch Year 20xx

This format includes details on what to be achieved by PMI in one year period, i.e. Strategic Objectives, Outcomes, Outputs, Indicators and Targets, as well as Activities and Budget.

Format B - Budget Summary

This information is important to know the proportion or percentage of budget allocation in PMI at all levels, either for operational, program service, or emergency response.

Format C - Proposed Activity to PMI Chapter

This format summarizes the activities proposed to PMI Chapter, based on the criteria explained in point 10 section 4.5 - Description on Filling Planning Matrices for PMI Branch.

Format D - Detailed Planning Implementation

This format comprises details of activity implementation schedules/timelines for one year period in monthly unit. Next, this format will be used as a basis for implementation and monitoring throughout the year.

4.4. Annual Work Plan Format for PMI Branch

WORK PLAN OF PMI "X" BRANCH

Year 20xx

A. Format of Work Plan Matrix

Note: The content of Strategic Objectives, outcomes and the indicators is taken from PMI Operational Plan 2015-2019 Matrix on page 34. It will be explained in further details in the following pages.



B. Format of Budget Summary

| Budget Category | Amount (Rupiah) | Percentage (Amount of Rupiah/Total x 100%) |
|--|-----------------|--|
| Operational (salary, electricity, telephone, fuel, stationaries, etc.) | | |
| Services (Regular service/program activities) | | |
| Emergency/Response (specifically for emergency assistance) | | |
| Total Budget | | |

C. Format of Proposed Activity to PMI Chapter

Proposed activity from PMI X Branch to PMI X Chapter (10):

| No. | Proposed Activity | Implementation Schedule | Reason for proposing the activity |
|------|-------------------|-------------------------|-----------------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| etc. | | | |

D. Format of PMI Branch's Detailed Implementation Plan

DETAILED IMPLEMENTATION PLAN

WORK PLAN OF PMI X" BRANCH, Year 20xx

| No | Activity | Budget | Implementation Timeline | | | | | | | | | | | |
|------|----------|--------|-------------------------|-----|-----|-----|-----|-----|-----|-----|-----|--------------|-----|-----|
| | | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Des |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |
| etc. | | | | | | | | | | | | | | |
| | | | | | | | | | | | | Total Budget | | |

4.5. Description on Filling Planning Matrices for PMI Branch

1. Strategic Objective

Strategic Objective (or often referred to as Strategic Goal) is a simple and clear statement that describes the long-term result intended to be achieved by a work plan. Strategic Objective reflects the end goal, which is an unsatisfactory condition/situation that in the end has to be changed by a project/program. There are Eight Strategic Objectives of PMI Operational Plan 2015-2019. PMI Branch will select several or all of the Strategic Objectives to be operationalized in the annual work plan.

2. Outcome

Outcome is an intermediate result intended to be achieved by a work plan, normally in form of capacity building, policies/system implementation, increase in knowledge, attitude, and practice. Outcome is an intermediate result that has to be achieved in order to meet the Strategic Objective. Outcomes are selected from the options provided under each Strategic Objective and then copied into the format. The outcome numbering should be the same with the one in the Operational Plan document for easy reference.

3. Outcome Indicator

Indicator is a **measurement unit** that helps determining whether the progress or achievement of the intended objectives or outcomes occurs. Indicators determine what information should be collected to answer key questions about the progress or achievement of the work plan. The indicator numbering should be the same with the one in the Operational Plan document for easy reference. The indicator statement should be adjusted with the Branch level, for example:

| Original Statement | Adjustment |
|--|---|
| 4. PMI NHQ/Chapters/Branches conducted Annual Meeting in accordance with the assigned schedule. | 4. PMI X Branch conducted Annual Meeting in accordance with the assigned schedule. |
| 25. PMI NHQ/Chapters/Branches develop annual work plan in line with the Planning and Reporting Guidelines. | 25. PMI X Branch develop annual work plan in line with the Planning and Reporting Guidelines. |
| 29. Number of PMI employee at NHQ/Chapters/ Branches paid in line with the Provincial/ District minimum wage standard. | 29. Number of PMI employee at X Branch paid in line with the District minimum wage standard. |
| 56. PMI Chapters/Branches have active/ functioning POSKO. | 56. PMI X Branch have active/ functioning POSKO. |

4. Target (Outcome Indicator)

The number or percentage intended to be achieved for each indicator is defined based on the needs and capacity. Each indicator should be provided with unit, such as people, unit, and activity. See point 7 for explanation regarding target setting.

5. Output

Output is “a tangible product, either material or service or immediate results that leads to outcome achievement”. Output is an immediate result from activities conducted, which has to be produced in order to achieve outcome, not more, not less. Outputs are selected from the lists provided under each outcome and then copied into the format. The output numbering should be the same with the one in the Operational Plan document for easy reference.

6. Output Indicator

Indicator is a measurement unit that helps determining whether the progress or achievement of the intended objectives or results occurs. Indicators determine what information should be collected to answer key questions about the progress or achievement of the work plan. The indicator numbering should be the same with the one in the Operational Plan document for easy reference. The indicator statement should be adjusted with the Branch level, for example:

| Original Statement | Adjustment |
|---|--|
| 8. Number of PMI employees who have written employment contracts. | 8. Number of PMI X Branch employees who have written employment contracts. |
| 27. PMI Branches receive coaching visit from PMI Chapter's Board Members at least once a year. | 27. PMI X Branch receive coaching visit from PMI Chapter's Board Members at least once a year. |
| 41. Number of YRC facilitator available in primary/secondary/high school in PMI Branches' working area. | No adjustment required. |
| 75. Number of SATGANA team members at PMI Branches. | 75. Number of SATGANA team members at PMI X Branch. |

The indicator registry is essentially not fixed. Additional indicators can be provided if there is any project/program that cannot be measured with the existing indicators. However, the development of new indicator(s) should meet the good indicator criteria (SMART) or use the existing and tested indicators, also relevant with outcomes or outputs in PMI Operational Plan.

7. Target (Output Indicator)

Number or percentage intended to be achieved for each indicator is defined based on the needs and capacity. Each indicator should be provided with unit, such as people, unit, and activity. The explanation regarding target setting for outcome also applies for output indicators.

In the Strategic Plan and Operational Plan Matrices, there are a few indicators of which the targets have been set as national targets. For example, Indicator 6, “PMI Chapters/Branches receive dissemination of information on statutes; the target for 2019 is 33 Chapters and 420 Branches”.

There also some other indicators of which the targets have to be set by each Chapter and Branch, for example Indicator 8 “Number of PMI employees who have written employment contract”. The target for this indicator should be set by each Branch .

Target in general is in a form of number or percentage. However, for certain indicators, targets can be converted to time. For example, Indicator 3 “PMI NHQ/Chapters/Branches conducted the Five-Yearly Assembly Meeting in timely manner”; at the Branch level, the target will certainly be time, when the Assembly Meeting needs to be conducted.

8. Activity

Activity is a group of tasks that needs to be performed in order to achieve output—daily actions that need to be done to deliver program outputs that will in turn achieve the outcomes. Activities are identified and decided by PMI Branches themselves in order to deliver the specified outputs.

On page 81, there is a list of potential activities to help the planning process. Yet, PMI Branches may add other activities that are not in the list but needed to produce outputs.

Activities can be divided into two types, i.e.:

- ✓ Regular operational activities, such as meeting, monitoring, report development, and salary payment.
- ✓ Specific activities, such as services or project/program activities in PMI neighborhood and communities (training, coaching, campaign, public campaign, etc.).

Remember, activities are developed based on the objective to be achieved at output level. Activities cannot be developed based on indicators because indicator is a measurement unit to find out whether the objectives are achieved or not. Therefore, it is important to understand the output statement well, and then identify which activities need to be done in order to deliver those outputs.

In this Guidelines, a “List of References for PMI Operational and Service Activities” is provided. You may use the list in order to help identifying activities, but may also add other unlisted activities deemed necessary to deliver the outputs.

9. Budget

The amount of budget estimated and allocated to implement each activity. The budget has to be estimated carefully so that it is close to real expenses.

10. Proposed Work Plan to PMI Chapter

It is a work plan that cannot or will not be effective if conducted only by the Branch, thus can be proposed to PMI Chapter and becomes part of PMI Chapter's work plan. Those activities should meet the following criteria:

- a. Activities that are relatively similar to other Branches, so the implementation can be combined to be organized by PMI Chapter (e.g. certain training).
- b. Activities that require external technical support/expertise that can be coordinated by PMI Chapter.
- c. Activities that are relatively similar to PMI Chapter's priorities.

4.6. Planning Process in PMI Chapter

First, PMI Chapters summarize PMI Branches' work plans. The summary of PMI Branches' work plans does not need to be sent to PMI NHQ, but only used as a reference for monitoring by PMI Chapter during the implementation of the work plan.

The summary of PMI Branches' work plans is presented in a matrix format, like format A and B below.

Format A - Summary of Proposed Activities from PMI Branches to PMI Chapter

The summary is important to inform PMI Chapter in developing its Annual Work Plan, including in prioritizing coaching activities for PMI Branches in its operational area.

Format B - Summary of PMI Branches' Budget

The summary provides information on budget allocation in all Branches, either for operational, services, or emergency/response. With this information, PMI Chapter can analyze and map out the budget allocation needs and priorities in its area every year, and is thus informed on the yearly trend.

Second, based on the summary of PMI Branches' work plans and also the activities proposed to be conducted by PMI Chapter as well as the need assessment of local PMI context, PMI Chapters develop an Annual Work Plan of PMI Chapter which is then broken down in matrices format based on the formats in section 4.7.

PMI Chapters need to complete all of the following four formats:

Format A - Work Plan of PMI Chapter Year 20xx

This format includes details on what to be achieved by PMI in one year period, i.e. Strategic Objectives, Outcomes, Outputs, Indicators and Targets, as well as Activities and Budget.

Format B - Budget Summary

This information is important to know the proportion or percentage of budget allocation in PMI at all levels, either for operational, program service, or emergency response.

Format C - Proposed Activity to PMI NHQ

This format summarizes the activities proposed to PMI NHQ, based on the criteria explained in point 10 section 4.8 - Description on Filling Planning Matrices for PMI Chapter.

Format D - Detailed Planning Implementation

This format comprises details of activity implementation schedules/timelines for one year period in monthly unit. Next, this format will be used as a basis for implementation and monitoring throughout the year.

A. Format of Summary of Proposed Activities from PMI Branches to PMI Chapter

| No. | Proposed Activity | Implementation Schedule | Reason of proposal |
|-----|-------------------|-------------------------|--------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| | | | etc. |

B. Format of Summary of PMI Branches' Budget

4.7. Annual Work Plan Format for PMI Chapter

WORK PLAN OF PMI "X" CHAPTER Year 20xx

A. Format of Work Plan Matrix

| Tujuan Strategis-1 (1) | Indikator Outcome (2) | Indikator Outcome (3) | Target Indikator Outcome (4) | Output (5) | Indikator Output (6) | Target Indikator Output (8) | Kegiatan (8) | Anggaran (9) | Total Budget |
|----------------------------|-----------------------|-----------------------|------------------------------|------------|----------------------|-----------------------------|--------------|--------------|--------------|
| Strategic Objective -2 (1) | | | | | | | | | |
| Strategic Objective -3 (1) | | | | | | | | | |
| Strategic Objective -6 (1) | | | | | | | | | |
| etc. | | | | | | | | | |

Note: The content of Strategic Objectives, outcomes and the indicators, outputs and the indicators is taken from PMI Operational Plan 2015-2019 Matrix on page 34. It will be explained in further details in the following pages.



B. Format of Budget Summary

| Budget Category | | Amount (Rupiah) | Percentage (Amount of Rupiah/Total x 100%) |
|--|--|-----------------|--|
| Operational (salary, electricity, telephone, fuel, stationaries, etc.) | | | |
| Services (Regular service/program activities) | | | |
| Emergency/Response (specifically for emergency assistance) | | | |
| Total Budget | | | |

C. Format of Proposed Activity to PMI NHQ

Proposed activity from PMI X Chapter to PMI NHQ (10):

| No. | Proposed Activity | Implementation Schedule | Reason for proposing the activity |
|------|-------------------|-------------------------|-----------------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| etc. | | | |

D. Format of PMI Chapter's Detailed Implementation Plan

DETAILED IMPLEMENTATION PLAN WORK PLAN OF PMI X" CHAPTER, Year 20xx

| No | Activity | Budget | Implementation Timeline | | | | | | | | | | | |
|------|----------|--------------|-------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |
| etc. | | | | | | | | | | | | | | |
| | | Total Budget | | | | | | | | | | | | |

4.8. Description on Filling Planning Matrices for PMI Chapter

1. Strategic Objective

Strategic Objective (or often referred to as Strategic Goal) is a simple and clear statement that describes the long-term result intended to be achieved by a work plan. Strategic Objective reflects the end goal, which is an unsatisfactory condition/situation that in the end has to be changed by a project/program. There are Eight Strategic Objectives of PMI Operational Plan 2015-2019. PMI Chapter will select several or all of the Strategic Objectives to be operationalized in the annual work plan.

2. Outcome

Outcome is an intermediate result intended to be achieved by a work plan, normally in form of capacity building, policies/system implementation, increase in knowledge, attitude, and practice. Outcome is an intermediate result that has to be achieved in order to meet the Strategic Objective. Outcomes are selected from the options provided under each Strategic Objective and then copied into the format. The outcome numbering should be the same with the one in the Operational Plan document for easy reference.

3. Outcome Indicator

Indicator is a **measurement** unit that helps determining whether the progress or achievement of the intended objectives or outcomes occurs. Indicators determine what information should be collected to answer key questions about the progress or achievement of the work plan. The indicator numbering should be the same with the one in the Operational Plan document for easy reference. The indicator statement should be adjusted with the Chapter level, for example:

The indicator registry is essentially not fixed. Additional indicators can

| Original Statement | Adjustment |
|--|--|
| 4. PMI NHQ/Chapters/Branches conducted Annual Meeting in accordance with the assigned schedule. | 4. PMI X Chapter conducted Annual Meeting in accordance with the assigned schedule. |
| 25. PMI NHQ/Chapters/Branches develop annual work plan in line with the Planning and Reporting Guidelines. | 25. PMI X Chapter develop annual work plan in line with the Planning and Reporting Guidelines. |
| 29. Number of PMI employee at NHQ/Chapters/ Branches paid in line with the Provincial/ District minimum wage standard. | 29. Number of PMI employee at X Chapter paid in line with the District minimum wage standard. |
| 56. PMI Chapters/Branches have active/functioning POSKO. | 56. PMI X Chapter have active/ functioning POSKO. |

be provided if there is any project/program that cannot be measured with the existing indicators. However, the development of new indicator(s) should meet the good indicator criteria (SMART) or use the existing and tested indicators, also relevant with outcomes or outputs in PMI Operational Plan.

4. Target (Outcome Indicator)

The number or percentage intended to be achieved for each indicator is defined based on the needs and capacity. Each indicator should be provided with unit, such as people, unit, and activity. See point 7 for explanation regarding target setting.

5. Output

Output is “a tangible product, either material or service or immediate results that leads to outcome achievement”. Output is an immediate result from activities conducted, which has to be produced in order to achieve outcome, not more, not less. Outputs are selected from the lists provided under each outcome and then copied into the format. The output numbering should be the same with the one in the Operational Plan document for easy reference.

6. Output Indicator

Indicator is a measurement unit that helps determining whether the progress or achievement of the intended objectives or results occurs. Indicators determine what information should be collected to answer key questions about the progress or achievement of the work plan. The indicator numbering should be the same with the one in the Operational Plan document for easy reference. The indicator statement should be adjusted with the Chapter level, for example:

| Original Statement | Adjustment |
|---|---|
| 43. PMI NHQ/Chapters organize volunteer gathering (Temu Karya). | 43. PMI X Chapter organize volunteer gathering (Temu Karya). |
| 76. Number of emergency response specialist at PMI Chapters. | 76. Number of emergency response specialist at PMI X Chapter. |
| 90. PMI NHQ/Chapters/Branches develop annual Contingency Plan. | 90. PMI X Chapter develop annual Contingency Plan. |
| 144. Number of active and operational PMI business unit at NHQ/Chapters/Branches. | 144. Number of active and operational PMI business unit at X Chapter. |

7. Target (Output Indicator)

Number or percentage intended to be achieved for each indicator is defined based on the needs and capacity. Each indicator should be provided with unit, such as people, unit, and activity. The explanation regarding target setting for outcome also applies for output indicators.

In the Strategic Plan and Operational Plan Matrices, there are a few indicators of which the targets have been set as national targets. For example, Indicator 6, “PMI Chapters/Branches receive dissemination of information on statutes; the target for 2019 is 33 Chapters and 420 Branches”.

There also some other indicators of which the targets have to be set by each Chapter and Branch, for example Indicator 8 “Number of PMI employees who have written employment contract”. The target for this indicator should be set by each Branch .

Target in general is in a form of number or percentage. However, for certain indicators, targets can be converted to time. For example, Indicator 3 “PMI NHQ/Chapters/Branches conducted the Five-Yearly Assembly Meeting in timely manner”; at the Branch level, the target will certainly be time, when the Assembly Meeting needs to be conducted.

8. Activity

Activity is a group of tasks that needs to be performed in order to achieve output—daily actions that need to be done to deliver program outputs that will in turn achieve the outcomes. Activities are identified and decided by PMI Chapters themselves in order to deliver the specified outputs.

On page 81, there is a list of potential activities to help the planning process. Yet, PMI Chapters may add other activities that are not in the list but needed to produce outputs.

Activities can be divided into two types, i.e.:

- ✓ Regular operational activities, such as meeting, monitoring, report development, and salary payment.
- ✓ Specific activities, such as services or project/program activities in PMI neighborhood and communities (training, coaching, campaign, public campaign, etc.).

Remember, activities are developed based on the objective to be achieved at output level. Activities cannot be developed based on indicators because indicator is a measurement unit to find out whether the objectives are achieved or not. Therefore, it is important to understand the output statement well, and then identify which activities need to be done in order to deliver those outputs.

In this Guidelines, a “List of References for PMI Operational and Service Activities” is provided. You may use the list in order to help identifying activities, but may also add other unlisted activities deemed necessary to deliver the outputs.

9. Budget

The amount of budget estimated and allocated to implement each activity. The budget has to be estimated carefully so that it is close to real expenses.

10. Proposed Work Plan to PMI NHQ

It is a work plan that cannot or will not be effective if conducted only by the Chapter, thus can be proposed to PMI NHQ and becomes part of PMI NHQ’s work plan. Those activities should meet the following criteria:

- a. Activities that are relatively similar to other Chapters, so the implementation can be combined to be organized by PMI NHQ (e.g. certain training).
- b. Activities that require external technical support/expertise that can be coordinated by PMI NHQ.
- c. Activities that are relatively similar to PMI NHQ’s priorities.

4.9. Planning Process in PMI NHQ

First, PMI NHQ summarizes and analyzes PMI Chapters' programs to produce a conclusion of trends and PMI priorities at the local level, which is then presented in format A and B.

Format A - Summary of Proposed Activities from PMI Chapters to PMI NHQ

The summary is important to inform PMI NHQ in developing its Annual Work Plan, including in prioritizing coaching activities for PMI Chapters.

Format B - Summary of PMI Chapters' Budget

The summary provides information on budget allocation in all Chapters, either for operational, services, or emergency/response. With this information, PMI NHQ can analyze and map out the budget allocation needs and priorities in its area every year, and is thus informed on the yearly trend.

Second, PMI NHQ will determine the relevant program priorities to the Strategic Plan and Operational Plan as well as Key Policies to support priorities at the local level, which is then developed in form of work plan in the formats in section 4.10.

PMI NHQ needs to complete all of the following four formats:

Format A - Work Plan of PMI NHQ Year 20xx

This format includes details on what to be achieved by PMI in one year period, i.e. Strategic Objectives, Outcomes, Outputs, Indicators and Targets, as well as Activities and Budget.

Format B - Budget Summary

This information is important to know the proportion or percentage of budget allocation in all Divisions/Bureaus, either for operational, program service, or emergency response.

Format C - Detailed Planning Implementation

This format comprises details of activity implementation schedules/timelines for one year period in monthly unit. Next, this format will be used as a basis for implementation and monitoring throughout the year.

A. Format of Summary of Proposed Activities from PMI Chapters to PMI NHQ

| No. | Proposed Activity | Implementation Schedule | Reason of proposal |
|------|-------------------|-------------------------|--------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| etc. | | | |

B. Format of Summary of PMI Chapters' Budget

4.10. Annual Work Plan Format for PMI NHQ

WORK PLAN OF "X" DIVISION/BUREAU - PMI NHQ

Year 20xx

A. Format of Work Plan Matrix

Note: The content of Strategic Objectives, outcomes and the indicators, outputs and the indicators is taken from PMI Operational Plan 2015-2019 Matrix on page 34. It will be explained in further details in the following pages.

B. Format of Budget Summary

| Budget Category | Amount (Rupiah) | Percentage (Amount of Rupiah/Total x 100%) |
|--|-----------------|--|
| Operational (salary, electricity, telephone, fuel, stationaries, etc.) | | |
| Services (Regular service/program activities) | | |
| Emergency/Response (specifically for emergency assistance) | | |
| Total Budget | | |

C. Format of PMI NHQ-Division/Bureau's Detailed Implementation Plan**DETAILED IMPLEMENTATION PLAN
WORK PLAN OF PMI NHQ, Year 20xx**

| No | Activity | Budget | Implementation Timeline | | | | | | | | | | | |
|------|----------|---------------------|-------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |
| etc. | | | | | | | | | | | | | | |
| | | Total Budget | | | | | | | | | | | | |

4.11. Description on Filling Planning Matrices for PMI NHQ

1. Strategic Objective

Strategic Objective (or often referred to as Strategic Goal) is a simple and clear statement that describes the long-term result intended to be achieved by a work plan. Strategic Objective reflects the end goal, which is an unsatisfactory condition/situation that in the end has to be changed by a project/program. There are Eight Strategic Objectives of PMI Operational Plan 2015-2019. PMI NHQ will select several or all of the Strategic Objectives to be operationalized in the annual work plan.

2. Outcome

Outcome is an intermediate result intended to be achieved by a work plan, normally in form of capacity building, policies/system implementation, increase in knowledge, attitude, and practice. Outcome is an intermediate result that has to be achieved in order to meet the Strategic Objective. Outcomes are selected from the options provided under each Strategic Objective and then copied into the format. The outcome numbering should be the same with the one in the Operational Plan document for easy reference.

3. Outcome Indicator

Indicator is a measurement unit that helps determining whether the progress or achievement of the intended objectives or outcomes occurs. Indicators determine what information should be collected to answer key questions about the progress or achievement of the work plan. The indicator numbering should be the same with the one in the Operational Plan document for easy reference. The indicator statement should be adjusted with the NHQ level, for example:

| Original Statement | Adjustment |
|---|--|
| 4. PMI NHQ/Chapters/Banches conducted Annual Meeting in accordance with the assigned schedule. | 4. PMI NHQ conducted Annual Meeting in accordance with the assigned schedule. |
| 25. PMI NHQ/Chapters/Banches develop annual work plan in line with the Planning and Reporting Guidelines. | 25. PMI NHQ develop annual work plan in line with the Planning and Reporting Guidelines. |

4. Target (Outcome Indicator)

The number or percentage intended to be achieved for each indicator is defined based on the needs and capacity. Each indicator should be provided with unit, such as people, unit, and activity. In the Strategic Plan and Operational Plan matrices, generally the indicator targets have been established by PMI NHQ, specifically for indicators to be achieved at the National level. At the NHQ level, the targets to be achieved is the ones recorded in the matrices.

Assessment on indicator achievement at the NHQ level will be conducted covering National scope, either through reporting or specific assessment, such as endline survey.

5. Output

Output is “a tangible product, either material or service or immediate results that leads to outcome achievement”. Output is an immediate result from activities conducted, which has to be produced in order to achieve outcome, not more, not less. Outputs are selected from the lists provided under each outcome and then copied into the format. The output numbering should be the same with the one in the Operational Plan document for easy reference.

6. Output Indicator

Indicator is a measurement unit that helps determining whether the progress or achievement of the intended objectives or results occurs. Indicators determine what information should be collected to answer key questions about the progress or achievement of the work plan. The indicator numbering should be the same with the one in the Operational Plan document for easy reference. The indicator statement should be adjusted with the NHQ level, for example:

| Original Statement | Adjustment |
|---|--|
| 43. PMI NHQ/Chapters organize volunteer gathering (Temu Karya). | 43. PMI NHQ organize volunteer gathering (Temu Karya). |
| 90. PMI NHQ/Chapters/Branches develop annual Contingency Plan. | 90. PMI NHQ develop annual Contingency Plan. |
| 144. Number of active and operational PMI business unit at NHQ/Chapters/Branches. | 144. Number of active and operational PMI NHQ's business unit. |

7. Target (Output Indicator)

Number or percentage intended to be achieved for each indicator is defined based on the needs and capacity. Each indicator should be provided with unit, such as people, unit, and activity.

The explanation regarding target setting for outcome also applies for output indicators.

8. Activity

Activity is a group of tasks that needs to be performed in order to achieve output—daily actions that need to be done to deliver program outputs that will in turn achieve the outcomes. Activities are identified and decided by PMI NHQ themselves in order to deliver the specified outputs.

On page 81, there is a list of potential activities to help the planning process. Yet, PMI NHQ may add other activities that are not in the list but needed to produce outputs.

Activities can be divided into two types, i.e.:

- ✓ Regular operational activities, such as meeting, monitoring, report development, and salary payment.
- ✓ Specific activities, such as services or project/program activities in PMI neighborhood and communities (training, coaching, campaign, public campaign, etc.).

Remember, activities are developed based on the objective to be achieved at output level. Activities cannot be developed based on indicators because indicator is a measurement unit to find out whether the objectives are achieved or not. Therefore, it is important to understand the output statement well, and then identify which activities need to be done in order to deliver those outputs.

In this Guidelines, a “List of References for PMI Operational and Service Activities” is provided. You may use the list in order to help identifying activities, but may also add other unlisted activities deemed necessary to deliver the outputs.

9. Budget

The amount of budget estimated and allocated to implement each activity. The budget has to be estimated carefully so that it is close to real expenses.

The Work Plan Matrices have to be approved and signed by the Chairman of PMI PNHQ to be proposed afterward to the National Annual Meeting for endorsement.

V. REPORTING



5.1. Background

A report is a mean of communication that plays a significant role to inform PMI's organizational development, starting from the Branch, Chapter, and NHQ level. A report is a monitoring tool for the implementation of the planned activities in the annual work plan.

A report provides information to help monitoring, control, and decision making process in implementing PMI's Work Plan. Writing a report is not merely a routine, but it is a responsibility attached to either the organization or the person/unit in charge for the organization activities.

A report should be clear, concise, and easy to understand by all levels of PMI. Therefore, it requires a standard reporting pattern, and thus requires a technical guidelines for reporting. PMI has had reporting formats issued by PMI NHQ in early 2000. However, with the more diverse activities implemented by PMI and greater need of information to date, the reporting formats need to be improved.

The reporting technical guidelines is expected to guide the use of a simpler content and format yet able to provide the information needs at all levels.

5.2. Benefits of Report

First, a report serves as a monitoring tool. In this case, the report is intended more for internal party, either for board members or office management at different levels of PMI. An internal report helps PMI (Head of Office and Head of Working Unit) to:

- a. Analyze the program, identify the strengths and weaknesses, and make decision for better management.
- b. Help measuring the progress and performance, as an early warning tool if there are issues.
- c. Improve communication between team members.
- d. Be used as a reference for external reports.

As such, internal reports, either formal or informal, have to be available on a regular basis and contain relevant information to fulfill the above needs.

Second, a report is an evidence that we are accountable or trustworthy.

The report referred to here is intended to external party, whether they be donor, government, partners, etc.

With the external report, PMI is able to:

- a. Show donors and the public what we have done/achieved with their funding supports,
- b. Show (the existing/non-existent) quality and integrity of our works,
- c. Show accountability and transparency (saying what we do and doing what we say).

An external report should be formal, which means:

- a. it contains information on the implemented program/activities,
- b. it is prepared on behalf on an organization and approved by the highest leader,
- c. it is prepared on a paper that includes the organization's identity, name, and address,
- d. it is prepared in a standard reporting format.

Third, a report is a tool for advocacy, marketing, and resource mobilization. A report strengthens the organization's credibility by demonstrating achievements, success in addressing challenges, and gaining lessons learned as well as future support and funding.

With an understanding on the three benefits above, it can be concluded that a report is for your interest as the organization or program manager, not for others. Our mindset about reporting should be changed from 'to other people' into 'to ourselves'.

You cannot expect other people to read your report if you yourself never read it carefully. Likewise, you also cannot expect your report to be useful or used by other people if you have not been using it beforehand.

The "mindset" that my report is useful for myself so I can better manage the organization or program should be attached in your mind. With that, reporting does not become a burden, but instead you enjoy writing a report.

5.3. Characteristics of Quality Report

- a. **Relevant and useful.** Reporting should have specific objective/use. Avoid excessive, unnecessary, or expensive reports or information.
- b. **Timely.** Reporting should be timely to be used. Information will have less value if it comes late or rarely be provided for the intended purpose. Timeliness means planning the report writing and allocating sufficient time for it, not doing it randomly.
- c. **Complete.** Reporting should provide sufficient information to be used. It is critical to make sure that the content of the report fulfills the requirements of a specific report.
- d. **Reliable.** Reporting should provide accurate facts.
- e. **Simple and easy to use.** Reporting should be relevant to the target audiences. The reporting language and format should be clear, concise, and easy to understand.
- f. **Consistent.** Reporting should adopt the units and formats that enable comparison from time to time, so that the progress of indicators can be continuously tracked.

5.4. Tips for Developing a Useful Report

- a. **Engage other people** in the drafting process, but make sure to have one person responsible/in charge. This engagement could be done through discussion or written feedback.
- b. Use **executive summary** or brief information/analysis to summarize the overall status of the project/ program and to highlight challenges or key issues that need to be addressed.

- c. Allocate one part of the report to identify specific actions that have to be taken to address the findings and report recommendation, as well as the people responsible and the timeline for doing them.
- d. Clear, succinct, and avoid long sentences- avoid jargon, statistic, and over use of technical terms. Remove unnecessary information and words.
- e. Use formats, such as bold or underline graphics, photos, captions, and examples to highlight or explain information.
- f. Accurate, balance, not taking side, and use logic to arrange the report.
- g. Follow the use of PMI/organization's format, writing guidelines, and the use of PMI emblem accurately.
- h. Check the spelling and grammar.

5.5. Purpose of Reporting Guideline

- a. PMI has a standard and simple reporting pattern in order to ease the monitoring and evaluation on PMI's progress and activities, qualitatively or quantitatively at all levels.
- b. PMI at all levels can use the information from the report to improve program performance, to share information for advocacy, and to improve PMI's accountability.
- c. PMI at all levels can document the results of completed activities as valuable promotional materials to the government and other parties such as donors and private companies.

5.6. Types of Report

Incidental Report, is a report that should be provided in emergency condition to inform the activities completed and the fund spent in emergency situation. The report consists of:

- a. Disaster incident report (the format refers to the Disaster Management Guidelines).
- b. Short-term emergency response report, for example during disaster (the format refers to the disaster response guidelines).

Periodical Report, is a regular report on the implementation of work plan, including PMI operations and services in line with the assigned indicators.

Periodical report comprises of:

- a. Monthly Report
- b. Quarterly Report
- c. Semester Report
- d. Annual Report

To develop these reports, an Activity Report is required, prepared as soon as an activity is completed. Formats for these reports are provided in the following page.

For different, more specific types of report, such as financial report, logistic supply report, asset inventory report, training report, and others should be reported separately in line with the technical guidelines for each reporting.

For information which describes the organization capacity, it can be collected in a short term through specific assessment or survey

5.7. Indicator Tracking Table - ITT

In the Quarterly and Annual Report, PMI will also use Indicator Tracking Table (ITT). ITT is a simple monitoring tool to document and monitor project/program indicators performance in a sustainable manner in order to find out progress of the achievement. The information in the ITT is as follow:

1. Title. For example “Indicator Tracking Table for Work Plan of PMI Branch/Chapter/Division/Bureau/Unit Year 20xx”.
2. List of all indicators for each outcome and output.
3. Measurement period (actual per quarter/per year/end of project/program; or cumulative from time to time). The determination of measurement period highly depends on the indicator statement. For example: “Number of Program Report submitted in 3 months”; this will certainly be measured by actual every quarter. Vice versa, “Number of village that completes HVCA for a year”, can be measured cumulatively every quarter.
4. Baseline value and implementation date. The baseline value is normally relevant only for specific indicators at the outcome level (e.g. indicators on knowledge, attitude, and practice). However, at the output level, the baseline value is normally “Not Applicable”.
5. Target value, actual achievement, and comparison between actual and target (in %) for each quarter and end of year.

There are several rules in using the ITT, i.e.:

1. You should understand when to write “0” or “Not Applicable/NA” or “Unknown/UK”.
 - ✓ If the achievement is still zero or has no progress then write “0”;
 - ✓ If the target or achievement is not relevant to be achieved by the respective period or it has been achieved in the previous period then write “NA”;
 - ✓ If there is no information related to a certain indicator because the data is not available yet or incomplete then write “UK”.
2. Target cannot be “0”, it should be greater than “0”, (target can be number or percentage). If there is no target for a certain quarter, the write “NA”.

3. You cannot change target at will (either the quantity or the timeline).
For example, if the target for Quarter I (10 villages that completed HVCA) is not achieved, you cannot move that target to Quarter II.

If you achieve it in Quarter II, the target in Quarter II is “NA”, meanwhile the actual is “10” and % of the actual/target is “NA”. With that, readers will understand that the target was achieved but delayed.

4. You should pay attention to the percentage of actual per target either for each quarter or annual, and during the life of project/program (LoP). Look at the variance or the gap; each gap of less or more than 10-20% should be explained further in the project/program report.
5. If the indicators are assessed regularly, observe when to use the highest or final achievement on annual achievement or LoP achievement. This depends on the indicator statement. Examples will be provided during training.

One of the key role of ITT is to help identifying the gaps or differences between the target and the actual result or the percentage of target achievement. By observing the gap, it will help the analysis and reporting of the project/program performance, as well as target setting. Knowing whether the indicator performance is exceeding or under the target helps to decide if the project/program is on track, or requires an adjustment in the implementation or timeline.

5.8. PMI Reporting Formats for All Levels

A. ACTIVITY REPORT

An Activity Report comprises brief information on the implementation of each activity in 1-2 pages. An Activity Report is used as: 1) supporting document for financial report, 2) references for monthly report , and 3) staff performance documentation.

The daily or routine operational activities at the office are not included in this activity report, but can be reflected in the Monthly Report .

An Activity Report is developed by staff and submitted to the Head of his/her Working Unit (Head of Division/Bureau/Department/Section) in 3 days at the latest after activity completion, in format as follow:

| ACTIVITY REPORT | | | | |
|---------------------|--|----------------|-------------------------|-----------------------------------|
| 1. | Title of Activity | | | |
| 2 | Date and location of implementation | | | |
| 3 | Budget (IDR): | Advance (IDR): | Actual (IDR): | Balance (IDR) (Advance-Actual) |
| 4 | Number of participants/beneficiaries : | | Total : | M : F : |
| 5 | Activity Results <i>(Provide information on target and actual, e.g.: Training: number of people trained/certified; Workshop: document completed; Monitoring: findings, issues addressed; Procurement:: number of item.)</i> | | | |
| 6 | Challenges/ Issues encountered <i>(i.e. challenges during preparation or implementation of activity, e.g.: administration, finance, logistic, participant/community participation, etc.)</i> | | | |
| 7 | Solution conducted/taken <i>(i.e. action taken to address or reduce the impact of challenges/issues in point 6.)</i> | | | |
| 8 | Suggestions for improvement <i>(i.e. recommendation to improve the quality of activity implementation in the future)</i> | | | |
| 9 | Follow up required <i>(i.e. follow ups needed in order to sustain the activity results.)</i> | | | |
| <u>REPORTED BY:</u> | | | <u>ACKNOWLEDGED BY:</u> | |

*Attach the ToR as well as photos of activity (2-3 pcs)

** This format can also be used for trip report, adjust the information to be included (Attach the ToR, Memo, or Assignment Letter).

B. MONTHLY REPORT

A Monthly Report includes information on the implementation of all activities planned, date of implementation, results achieved, brief description of implementation process, challenges encountered, follow up, and activity plan for the following month.

At PMI Branch/Chapter, Monthly Report is developed by the Head of Working Unit and reported to the Head of Office, to be then compiled and reported to the Board Members. At the NHQ, the Monthly Report is submitted by the Head of Division/Bureau/Unit to the Head of Office and copied to the Board Members. A Monthly Report is submitted the 5th of the following month at the latest. For example, the January 2015 Report is submitted by 5 February 2015 at the latest. The Monthly Report is prepared in 2-5 pages using the format below:

**MONTHLY REPORT OF PMI BRANCH/CHAPTER/
DIVISION/BUREAU/UNIT OF PMI NHQ
MONTH _____, YEAR _____**

I. Summary of Activity Implementation Matrix

| No | Activity | Date and Location of Implementation | Budget (3 variables) | Actual | Activity Results |
|------|----------|-------------------------------------|----------------------|--------|------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| etc. | | | | | |

II. Analysis

2.1. Activity and Budget Plan vs Actual

(Describe briefly whether all activities planned were implemented. Were all intended results achieved? If there were any results not achieved/completed, explain why and what should be done afterward. Describe the causes of variance between budget and actual, especially if more than 10 %.)

2.2. Implementation Process

(Describe briefly about the implementation quality, e.g. on training: explain about the quality of facilitator, participant's participation and results, as well as follow up plan after the training. For awareness raising activity in the community, explain the topic and messages disseminated, what was the role of PMI/village volunteers, what behaviors agreed to be done. For meetings, explain the decisions needed to be followed up. Include photos of activity.)

2.3. Challenges/Issues Encountered

(Describe in specific 1-3 main challenges/issues encountered, the causes and impact, and what have been/need to be done to address them.)

2.4. Follow up Required

(Describe the follow up needed to sustain the activity results.)

III. Information about Regular Activities (Office Operations)

(Describe briefly about the implementation of regular Office activities, as well as challenges encountered and follow up, if any).

IV. Activity Plan for the following Month

| No | Activity | Date of Implementation | Budget |
|------|----------|------------------------|--------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| etc. | | | |

Developed/reported by:

Acknowledged/approved by

C. QUARTERLY REPORT

A Quarterly Report is a **compilation and analysis from Monthly Reports** that describes the achievement of indicators in PMI work plan. At **Branches and Chapters**, the Quarterly Report is submitted by the **Head of Office** to the **Board Members**. At the **NHQ**, the Quarterly Report is submitted by the **Head of Division/Bureau/Unit** to the **Head of Office** and copied to the **Board Members**.

The Quarterly Report is submitted by the **10th** of the following month at the latest. For example, the January-March 2015 Report is submitted on 10 April 2015. The Quarterly Report is prepared in 10 pages at maximum using the format below.

QUARTERLY REPORT OF PMI BRANCH/CHAPTER/

DIVISION/BUREAU OF PMI NHQ

QUARTER _____, YEAR _____

I. Summary of Key Achievements

(Describe briefly the achievement of key activities in the last 3 months.

For example:

- ✓ 30 KSR were trained and mobilized
- ✓ 200 YRC members received coaching from volunteers
- ✓ 500 community members received free medication
- ✓ etc.)

II. Indicator Tracking Table or ITT

ITT is a simple table to document the progress of indicator achievement from time to time. Fill in the ITT in line with the guidelines provided under point 5.7 on the previous pages.

| Work Plan Indicators | Quarter I (Jan-Mar 20xx) | | | Quarter II (Apr-Jun 20xx) | | | Quarter III (Jul-Sep 20xx) | | | Quarter IV (Oct-Dec 20xx) | | | Year 20xx | | |
|-----------------------|--------------------------|--------|---|---------------------------|--------|---|----------------------------|--------|---|---------------------------|--------|---|-----------|--------|---|
| | Target | Actual | % | Target | Actual | % | Target | Actual | % | Target | Actual | % | Target | Actual | % |
| Strategic Objective 1 | | | | | | | | | | | | | | | |
| Outcome 1.2. | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | | | |
| Output 1.2.1. | | | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | | | |
| 9. | | | | | | | | | | | | | | | |
| Outcome 1.3. | | | | | | | | | | | | | | | |
| 13. | | | | | | | | | | | | | | | |
| Output 1.3.1. | | | | | | | | | | | | | | | |
| 16. | | | | | | | | | | | | | | | |
| 17. | | | | | | | | | | | | | | | |
| Strategic Objective 2 | | | | | | | | | | | | | | | |
| Outcome 2.1. | | | | | | | | | | | | | | | |
| 29. | | | | | | | | | | | | | | | |
| etc. | | | | | | | | | | | | | | | |

Note / Remarks:

1. Include objective statements (Strategic Objective, Outcome, and Output) first before the indicators.
2. List relevant indicators under outcome and output statements. Indicator numbering should be the same with the one in the Operational Plan.

III. Financial Information (Rupiah)

| Time | Total Budget | Total Actual | % Actual/Budget |
|----------------|--------------|--------------|-----------------|
| Month-1 | | | |
| Month-2 | | | |
| Month-3 | | | |
| Total 3 months | | | |

IV. Analysis

a. Description of variance/gaps between target and actual.

(Describe factors causing differences between activity planning and implementation, indicator target and actual, budget versus actual, especially if the gap is more than 10 %.)

b. Description of relations between activity, indicator achievement, output and outcome.

(Describe the links between indicator achievement toward output, and then how the output contributes to outcome. What needs to be done to ensure that such links exist in achieving PMI strategic objectives? Include photos of activity .)

c. Issues/challenges as well as follow up solution.

(Describe in specific 2-3 issues/challenges encountered, causes and impacts, as well as what have/need to be done to address them.)

V. Activity Plan for the Following Quarter

| No | Activity | Implementation Timeline | Budget |
|------|----------|-------------------------|--------|
| 1 | | | |
| 2 | | | |
| Etc. | | | |

Developed/reported by:

Acknowledged/approved by

D. SEMESTER REPORT

A Semester Report comprises of **information needed to be submitted by each National Society** to the International Federation of Red Cross and Red Crescent (IFRC). PMI NHQ can fulfill the needs of information if all Branches submit their Semester Reports. The availability of information from PMI at the international level is an indication that documentation and reporting system in all levels of PMI is working well.

Considering the variety of program implemented by different National Societies across the world, it is very difficult or even impossible to measure their performance specifically. Therefore, IFRC uses ‘Proxy Indicators’, i.e. indirect indicators that can describe the performance or capacity of a National Society. The 7 proxy indicators are:

1. **Number of volunteers involved in services:** people who provide at least four hours per year to support different PMI activities.
2. **Number of staff paid:** people who work at local PMI office for at least three months period and receive salary.
3. **Number of blood donors:** people who donate blood at least once a year.
4. **Number of PMI Sub-districts, Branches, Chapters.**
5. **Number of people served:** people who receive PMI services indirectly, either from regular or emergency services.
6. **Amount of total income:** amount of money received by PMI every year, either from the government, donors, private companies, communities, or from different resource mobilization activities.
7. **Amount of total expenditures:** amount of money used for operational and services need in a year.

This information will be distributed to all PMI stakeholders in Indonesia or at the international level. The Semester Report should be **submitted by PMI Branches to PMI Chapters twice a year**, i.e. on **July 5th and January 5th**.

Afterward, PMI Chapters will compile semester reports from all Branches in its areas, and submit it to PMI NHQ on **July 20th and January 20th**. Below is the format of Semester Report for PMI Branches and Chapters.

SEMESTER REPORT OF PMI XXXX BRANCH YEAR 20XX

| No | Data needed | | Semester 1 | Semester 2 |
|----|---|---------------------------------------|------------|------------|
| 1 | Number of Youth Red Cross (YRC) members still active* to date. <i>Active if involved in the YRC unit activities or with PMI at least once in the last six month.</i> | Elementary | M | |
| | | | F | |
| | | | Total | |
| | | Secondary | M | |
| | | | F | |
| | | | Total | |
| | | Senior | M | |
| | | | F | |
| | | | Total | |
| 2 | Number of volunteers (KSR/TSR) involved in PMI activities at least once in the last 6 months. | | M | |
| | | | F | |
| | | | Total | |
| 3 | Number of Voluntary Blood Donors who donated blood at least once in the last 6 months | | M | |
| | | | F | |
| | | | Total | |
| 4 | Number of staff paid (either by PMI, government, or donors). | | M | |
| | | | F | |
| | | | Total | |
| 5 | Number of people who received <u>direct benefit</u> from emergency response/ relief services | a. Individual beneficiaries | M | |
| | | | F | |
| | | | Total | |
| | | b. Head of Household beneficiaries | Total | |
| 6 | Number of people receiving <u>direct benefit</u> from non-emergency services | a. Health Services | M | |
| | | | F | |
| | | | Total | |
| | | b. Social Services | M | |
| | | | F | |
| | | | Total | |
| | | c. Community Empowerment (DRR, ICBRR) | M | |
| | | | F | |
| | | | Total | |
| 7 | Total income (IDR) | | | |
| 8 | Total expenditures (IDR) | | | |
| 9 | Number of PMI Sub-District | | | |

Developed/reported by:

Acknowledged/approved by

Description on information included in the Semester Report matrix:

1. **Active YRC members** are YRC members either elementary, secondary, or senior in all schools who participated in YRC activities at school or with local PMI Branch at **least once in the last six month**. If someone participated in more than one activities in the last 6 months, then he/she is still counted as one person. Data should be disaggregated by sex.
2. If a **KSR/TSR member** participated in more than one activities in the last 6 months, then he/she is still counted as one person. Data should be disaggregated by sex.
3. If a **Voluntary Blood Donor** donated more than once in the last 6 months, then he/she is still counted as one person. Data should be disaggregated by sex.
4. Clear. **Data** should be disaggregated by sex.
5. **Direct beneficiaries** from emergency response/relief services are divided into two categories, i.e. :
 - a. Individuals impacted by disaster and received different assistances directly for local PMI Branch, such as field kitchen, health services, water/sanitation services, and other individual services. Data should be disaggregated by sex (if available).
 - b. Head of Households who received assistance in form of packages (family kit, hygiene kit, tool kit, baby kit, and other package assistance).

If in a specific location affected by disaster (Village A), PMI provided more than one service to individuals, then use data with the highest figure. For example, in Village A District X, 500 people received health services, 800 people received water distribution, and 750 people received public kitchen service. Then, the data used is the highest one, i.e. 800 people who received water distribution. The figure included in point 5.a. is the total individual from the highest figure receiving services in all locations.

Another example for point 5.b., for example 70 HHs received family kit, 85 HHs received hygiene kit, and 45 HHs received baby kit. Then, the figure used is the highest one, i.e. 85 HHs who received hygiene kit. The figure to be included in point 5.b. is the total HHs from the highest figure who received package assistance in all locations.

In order to collect the information accurately, data from the initial assessment results to the population affected by disasters can be a very important reference.

6. **Direct beneficiaries** from non-emergency assistance are individuals who are targeted by PMI projects/program in normal time, comprises of:
 - a. PMI health services, e.g. free medication, health clinic service, ambulance service, Siaga Lebaran (Posko during Eid holiday) service, etc. Data should be disaggregated by sex (if available).
 - b. PMI social services, e.g. free mass circumcision, cataract surgery, special material assistance (optical eyeglasses, crutch, etc.), PSP for non -emergency context, etc. Data should be disaggregated by sex (if available).
 - c. Community empowerment activities, i.e. activities conducted by mobilizing existing resources in the community. E.g., promoting communities to work together, health/DRR education, disaster risk mitigation, etc. Data should be disaggregated by sex (if available).
7. **Total income** is the amount of total fund received from different sources per semester. E.g., from local government, donor agencies, community groups, individuals, companies, etc.
8. **Total expenditures** is the amount of total fund spent per semester, including operational, program services, and emergency responses.
9. **Number of PMI Sub-district** is the communities supported by PMI located in an area equals to sub-district and affiliated with PMI Branch.

COMPILATION OF PMI BRANCHES SEMESTER REPORT IN XXXX CHAPTER YEAR XXXX

| No | Data Needed | | | Branch A | Branch B | Branch C | Etc. |
|----|---|---------------------------------------|-------|----------|----------|----------|------|
| 1 | Number of Youth Red Cross (YRC) members still active* to date. <i>Active if involved in the YRC unit activities or with PMI at least once in the last six month.</i> | Elementary | M | | | | |
| | | | F | | | | |
| | | | Total | | | | |
| | | Secondary | M | | | | |
| | | | F | | | | |
| | | | Total | | | | |
| | | Senior | M | | | | |
| | | | F | | | | |
| | | | Total | | | | |
| 2 | Number of volunteers (KSR/TSR) involved in PMI activities at least once in the last 6 months. | M | | | | | |
| | | F | | | | | |
| | | Total | | | | | |
| 3 | Number of Voluntary Blood Donor who donated blood at least once in the last 6 months | M | | | | | |
| | | F | | | | | |
| | | Total | | | | | |
| 4 | Number of staff paid (either by PMI, government, or donors). | M | | | | | |
| | | F | | | | | |
| | | Total | | | | | |
| 5 | Number of people who received <u>direct benefit</u> from <u>emergency response/ relief services</u> | a. Individual beneficiaries | | M | | | |
| | | | | F | | | |
| | | | | Total | | | |
| | | a. Head of Household beneficiaries | | Total | | | |
| 6 | Number of people receiving <u>direct benefit</u> from <u>non-emergency services</u> | a. Health services | | M | | | |
| | | | | F | | | |
| | | | | Total | | | |
| | | b. Social services | | M | | | |
| | | | | F | | | |
| | | | | Total | | | |
| | | a. Community empowerment (DRR, ICBRR) | | M | | | |
| | | | | F | | | |
| | | | | Total | | | |
| 7 | Total income (IDR) | | | | | | |
| 8 | Total expenditures (IDR) | | | | | | |
| 9 | Number of PMI Sub-district | | | | | | |

Developed/reported by:

Acknowledged/approved by:

E. ANNUAL REPORT

An Annual Report is the materials prepared for the board members' accountability to be reported during the Branch/Chapter/National Annual Meeting.

At the Branch, the Annual Report is developed by the Head of Office by compiling the Quarterly Report. Afterward, the Head of Office reports it to the Board Members to receive feedback/approval. The Annual report will be submitted to PMI Chapter and copied to PMI NHQ.

At the Chapter, the Annual Report is developed by each Division/Unit, to be compiled afterward by the Head of Office to become PMI Chapter's Annual Report. The Head of Office then reports it to the Board members to receive feedback/approval. The Annual Report is submitted to PMI NHQ.

At the NHQ, the Annual Report is developed by the Head of Division/Bureau, to be reported to the Head of Office and Board Members. Afterward, the Head of Office establishes a team to consolidate the Annual Reports from the Divisions/Bureaus to become the Annual Report for the Annual Meeting.

At each level, the Annual Report should be submitted by December/January at the latest. The Annual report is prepared in 30 pages at maximum using the following format:

ANNUAL REPORT OF PMI BRANCH/CHAPTER/

DIVISION/BUREAU OF PMI NHQ

YEAR _____

1. Report Summary

Description of Report Summary

- ✓ Key activities results
- ✓ Total amount of money received and spent
- ✓ Total number of direct beneficiaries and information on geographical area (sub-district/administrative village, village/RW, hamlet/RT, school/institution)
- ✓ Impact of activity implemented on PMI capacity building
- ✓ Recommendation for future work plan

2. Indicator Tracking Table

| Work Plan Indicators | Quarter I (Jan-Mar 20xx) | | | Quarter II (Apr-Jun 20xx) | | | Quarter III (Jul-Sep 20xx) | | | Quarter IV (Oct-Dec 20xx) | | | Year 20xx | | |
|------------------------------|--------------------------|--------|---|---------------------------|--------|---|----------------------------|--------|---|---------------------------|--------|---|-----------|--------|---|
| | Target | Actual | % | Target | Actual | % | Target | Actual | % | Target | Actual | % | Target | Actual | % |
| Strategic Objective 1 | | | | | | | | | | | | | | | |
| Outcome 1.2. | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | | | |
| Output 1.2.1. | | | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | | | |
| 9. | | | | | | | | | | | | | | | |
| Output 1.3. | | | | | | | | | | | | | | | |
| 13. | | | | | | | | | | | | | | | |
| Output 1.3.1. | | | | | | | | | | | | | | | |
| 16. | | | | | | | | | | | | | | | |
| 17. | | | | | | | | | | | | | | | |
| Strategic Objective 2 | | | | | | | | | | | | | | | |
| Outcome 2.1. | | | | | | | | | | | | | | | |
| 29. | | | | | | | | | | | | | | | |
| etc. | | | | | | | | | | | | | | | |

Note / Remarks:

- Include objective statements (Strategic Objective, Outcome, and Output) first before the indicators.
- List relevant indicators under outcome and output statements. Indicator numbering should be the same with the one in the Operational Plan.

3. Financial Information

| a. Income Source | Amount (Rupiah) | Remarks |
|---|-----------------|---------|
| Donation from communities/ institutions | | |
| Business Units | | |
| Government | | |
| Donors/Partners | | |

b. Expenditures

| Timeline | Total Budget | Total Actual | % Actual/Budget |
|-------------------------------|--------------|--------------|-----------------|
| Quarter I (Jan-Mar) | | | |
| Quarter II (Apr-Jun) | | | |
| Quarter III (Jul-Sep) | | | |
| Quarter IV (Oct-Dec) | | | |
| Year 20xx | | | |
| End of year balance (Rupiah): | | | |

4. Analysis/Discussion

a. Achievement of outcome indicators and success story

(Describe achievement of each outcome indicator for 1 year, what are the factors supporting the achievements; e.g. leadership from board members/staff, volunteer activeness, stakeholder/communities participation/supports, etc. Select 3-5 success stories about PMI activities and describe each in 1 paragraph.)

b. Description of differences between target and actual.

(Describe what causes differences between targets and actual which are more than 10% for indicator achievement and budget actual.)

c. Description of relations between achievement of output, outcome, and strategic objective.

(Describe how the output achievement contributes to outcome achievement and ultimately leads to strategic objective achievement. What needs to be done to ensure the sustainability of those achievements?)

d. Issues/challenges and follow up solutions.

(Describe specific challenges/issues encountered, their causes and impacts, and what have been/needs to be done to address/solve them.)

e. Organizational management and work plan implementation.

(Describe how the board members/Head of Office/Head of Division/Bureau: 1) manage the activity implementation and assure the quality of results, 2) manage resources (staff, fund, asset), 3) manage time/schedule of activity implementation, 4) communicate and coordinate with PMI stakeholders at different levels and external stakeholders, 5) manage planning, monitoring, evaluation, and reporting process.)

f. Relevance

(Relevance is the correspondence between activities or services with the needs of the organization or the communities. Describe whether the activities or services conducted by PMI are in line with the needs of the organization or the communities served. Mention the activities or services which are considered less/not relevant and why is that so.)

g. Sustainability

(What are the results of PMI activities which will potentially be sustainable in the future, and what are the supporting factors for their sustainability.)

h. Lessons learned

(Describe positive lessons learned that should be maintained or replicated; and also negative lessons that should be anticipated or avoided in the future. These lessons learned focus on three main topics, i.e. 1) organizational/work plan management, 2) service to communities, and 3) coordination with stakeholders.)

i. Recommendation for work plan of the following year

(Provide several recommendations needed to maintain or expand the results/positive impact achieved.)

j. Photo Annex

(This includes relevant important information, supporting documents, photos, etc. Photos should represent all types of activities conducted during the year, starting from meetings, program service, training, etc. Visibility of PMI logo should be displayed as much as possible in the photos.)

5. Closing

(Including signatures and name of board members (chairman of respective local PMI.))

Developed/reported by:

Acknowledged/approved by:

**A quality and timely report is an evidence that you
are accountable and trustworthy.**

**Your report is useful to inform decision making in
managing PMI work plan and organization
in your Office .**

VI. ANNEXES

Annex 1. Sample of PMI Branch Planning Document

1. SAMPLE OF ANNUAL WORK PLAN MATRIX OF PMI SUKARIA BRANCH

| Outcome | Outcome Indicator | Target for Outcome Indicator | Output | Output Indicator | Activity | Budget |
|---|--|------------------------------|--|---|--|----------------|
| STRATEGIC OBJECTIVE 1: To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities with the organizational policies, procedures, and system. | | | | | | |
| Outcome 1.2. PMI's Statutes, Organizational Procedures (PO), and Implementation Guidelines (<i>Jukikak</i>), as well as the legal products issued are institutionalized at all levels. | 4. PMI NHQ/ Chapters/ Branches conducted Annual Meeting in accordance with the assigned schedule. | December 2015 | Output 1.2.1. PMI Statutes, Organizational Procedures (PO), and Implementation Guidelines, as well as legal products are in place and implemented at all levels. | 6. PMI Chapters/Braches receive dissemination of information on statutes. | 1. Disseminate PMI Statutes to Staff and Board Members. | IDR 500,000 |
| | | | | 8. Number of PMI employees who have written employment contracts | 2. Develop HR regulation. | |
| | | | | 9. PMI NHQ/Chapters/ Branches develop asset inventory in line with the technical guidelines. | 3. Register assets based on implementation/ technical guidelines. | IDR 1,000,000 |
| | | | | 10. PMI Chapters/Braches have HR regulation in place . | 4. Update employee database. | IDR 0 |
| | | | | 11. PMI Chapters/Braches have employee database that is updated on annual basis . | 5. Conduct Annual Meeting. | IDR 6,000,000 |
| Outcome 1.3. PMI's Planning, Monitoring, Evaluation, and Reporting (PMER) system is well-functioning at all levels. | 13. PMI NHQ/ Chapters/ Branches develop annual work plan in line with the Planning and Reporting Guidelines. | December 2015 | Output 1.3.1. PMI Board Members and staff at all levels are regularly coached on the implementation of Planning, Monitoring, Evaluation, and Reporting (PMER) system by competent facilitators. | 17. PMI Chapters/Braches receive information regarding the Planning and Reporting Guidelines. | 1. Participate in the SP/ OP dissemination workshop | IDR 13,230,000 |
| | | | | | 2. Conduct workshop to develop annual work plan and annual report. | |
| | 14. PMI NHQ/ Chapters/ Branches develop an annual report in line with the Planning and Reporting Guidelines | December 2015 | | | | IDR 4,000,000 |

| Outcome | Outcome Indicator | Target for Outcome Indicator | Output | Output Indicator | Target for Output Indicator | Activity | Budget |
|--|--|------------------------------------|---|--|-----------------------------|---|---|
| STRATEGIC OBJECTIVE 2: To strengthen the capacity of PMI's organizational resources at all levels, both its human resources and the facilities and infrastructure needed to serve the communities. | | | | | | | |
| Outcome 2.1.1 PMI's HR Management that includes recruitment, assignment, training, supervision, reward and recognition as well as performance evaluation is improved. | 29. Percentage of branch volunteer (KSR/TSR) inactive for a year . 30. Percentage of branch volunteer (YRC/KSR/TSR) who has taken part in branches' activities on quarterly basis. 31. Number of school in Districts that has active Youth Red Cross (YRC) unit. | <20% >50% 10 schools | Output 2.1.1. Human resources with technical and managerial skills are available and trained to carry out their main tasks and functions at all levels.. | 36. Number of branch volunteer in specialized skill sets of priority I/II/III services. 37. Number of employee of PMI NHQ/Chapters/ Branches who attend technical training. | 50 people 3 people | 1. Conduct Basic KSR training. 2. Send personnel to participate in Ambulance Crew Training. | IDR 10,000,000 IDR 5,000,000 |
| | | | Output 2.1.3. Volunteer (KSR, TSR, including corporate/ organization/institution volunteers) and YRC management guidelines is implemented at all levels. | 40. PMI Chapters/Branches organize Youth gathering (Jumbara). | July 2015 | 1. Conduct volunteer coaching every three months. 2. Update volunteer database. 3. Select youth gathering participants at YRC units. 4. Conduct youth gathering. | IDR 1,000,000 IDR 0 IDR 2,500,000 IDR 40,000,000 |
| Outcome 2.3. Availability of basic supporting facilities and infrastructures for PMI operation is increased. | 55. PMI Chapters/ Branches have active/ functioning POSKO. | Since April 2015 | Outcome 2.3.2. PMI assets and basic facilities/infrastructure are managed in line with the guidance provided. | 61. PMI Chapters/Branches submit asset inventory to PMI NHQ on annual basis. | November 2015 | 1. Assign volunteer shift at Posko. 2. Participate in 'apel siaga' of Chapter's Posko. 3. Monitor early warning information from BPBD on regular basis. 4. Record and disseminate early warning information to PMI Chapter. 5. Develop and submit asset inventory register. | IDR 21,600,000 IDR 0 IDR 0 IDR 500,000 |



| Outcome | Outcome Indicator | Target for Outcome Indicator | Output | Output Indicator | Target for Output Indicator | Activity | Budget |
|--|--|------------------------------|---|--|-----------------------------|---|---|
| STRATEGIC OBJECTIVE 3: To improve the quality of disaster and health emergency responses across Indonesia, either in terms of rapidness, coverage, and effectiveness of the services | | | | | | | |
| Outcome 3.1. PMI personnel's capacity specializing in emergency response is strengthened. | 69. Number of disaster response simulation by PMI Branches in line with the SoP. | 1 time | Output 3.1.1. Disaster Response (Satgana) team and emergency response specialists are available and ready for mobilization at all levels, including at the regional and national levels, in line with the SoP. | 70. Number of SATGANA team members at PMI Branches . | 30 people | 1. Conduct SATGANA Training. 2. Develop SATGANA team assignment calendar. | IDR 50,000,000 IDR 0 |
| Outcome 3.2. Availability of emergency response equipment in line with the accountability standard is increased. | 73. Number of beneficiaries reached by PMI Branches' emergency response services. | Actual | Output 3.2.1. Standard equipment for emergency response, including communication equipment for coordination as well as documentation and reporting formats are in place and operational at all levels. | 75. PMI Branches have at least four equipment for emergency response team. | August 2015 | 1. Conduct procurement process for emergency response gears. 2. Conduct procurement process for emergency communication equipment. 3. Record beneficiaries based on guidelines. | IDR 60,500,000 IDR 20,000,000 IDR 0 |
| Outcome 3.3. Emergency response management system is implemented by PMI at all levels. | 79. Number of emergency incident responded by PMI Branches within the first six hours. | Actual | Output 3.3.1. Framework, guidelines, and SoP for emergency response operation and coordination mechanism are in place and adopted by PMI at all levels. | 83. Number of incident report submitted by PMI Branches to PMI NHQ/Chapters. | Actual | 1. Conduct disaster response based on SoP. | IDR 5,000,000 |

| Outcome | Outcome Indicator | Target for Outcome Indicator | Output | Output Indicator | Target for Output Indicator | Activity | Budget |
|---|---|---|---|---|--|---|---------------|
| 80. Amount of contingency fund owned by PMI NHQ/ Chapters/ Branches. | Actual | IDR 5.000.000 | Output 3.3.3. Contingency plan is updated by PMI at all levels on annual basis. | 85. PMI NHQ/Chapters/ Branches develop annual Contingency Plan. | February 2015 | 1. Develop/update Contingency Plan. | IDR 6,000,000 |
| 81. PMI NHQ/ Chapters/ Branches develop response operation plan within 3x24 hours after the emergency incident. | Actual | | Output 3.3.4. Early warning information is forwarded to the communities in timely manner. | 86. Number of early warning information forwarded by PMI Branches to local communities. | Actual | 1. Monitor early warning information. | IDR 0 |
| | | | Output 3.3.5. The need for RFL service in both normal and emergency periods is followed up by PMI at all levels. | 87. Number of RFL case followed up by PMI Branches until the procedure is completed. | Actual | 1. Develop networking with relevant stakeholders that can provide information on RFL needs (hospital, police, etc.) 2. Facilitate dissemination of information related to RFL. | IDR 500,000 |
| STRATEGIC PLAN 4: To strengthen community resiliency in order to reduce the risks and impact of disasters and diseases through disaster preparedness, health, and social programs, also referral health services. | | | | | | | |
| Outcome 4.1. PMI's capacity in managing community-based disaster preparedness and health program is strengthened. | 82. PMI Branches have at least five villages receiving intervention support every year. | 2 villages | Output 4.1.2. Adequate supporting materials/tools for community-based disaster preparedness and health programs (e.g. IEC materials, modeling equipment, M&E tools) are available. | 95. Number of IEC Material distributed to communities by PMI Branches. | Actual | 1. Distribute IEC materials to communities. | IDR 500,000 |
| 1. PMI Branches have at least five schools receiving intervention support every year. 2. Number of healthy schools at PMI Branches' working area. | 5 schools | Output 4.1.3. Community-based disaster preparedness and health program activities are implemented by competent PMI staff/volunteers/facilitators at all levels | 96. Number of community-based programs implemented by PMI Branches. | 1 program | 1. Conduct training on community-based program to PMI staff and volunteers. 2. Select target villages/communities | IDR 25,000,000 IDR 3,000,000 | |

| Outcome | Outcome Indicator | Target for Outcome Indicator | Output | Output Indicator | Activity | Budget |
|---------|--|------------------------------|--------|------------------|---|------------------------|
| | | | | | Target for Output Indicator | |
| | 3. Number of disaster-prepared school at PMI Branches' working area. | 5 schools | | | 3. Conduct HVCA at selected villages/communities | IDR 5,000,000 |
| | 4. Number of direct beneficiary from PMI Branch's disaster preparedness program. | 40 people | | | 4. Develop plan with communities. | IDR 5,000,000 |
| | 5. Number of direct beneficiary from PMI Branches' community-based health program. | 40 people | | | 5. Implement community-based program based on joint planning with the community | IDR 10,000,000 |
| | | | | | 6. Record beneficiaries based on guidelines. | IDR 0 |
| | ROUTINE ACTIVITIES AT THE OFFICE | | | | 1. Conduct board members plenary meeting every month | IDR 1,200,000 |
| | | | | | 2. Conduct coordination meeting between Head of Office with Staff. | IDR 1,200,000 |
| | | | | | 3. Conduct Office and asset maintenance. | IDR 6,000,000 |
| | | | | | 4. Pay electricity, water, phone, and gas bills. | IDR 12,000,000 |
| | | | | | 5. Develop activity report and periodical reports (monthly, quarterly). | IDR 0 |
| | | | | | TOTAL BUDGET | IDR 340,730,000 |

2. Budget Summary

| Budget Category | Amount (Rupiah) | Percentage (Amount of Rupiah/ Total x 100%) |
|--|------------------------|---|
| Operational (salary, electricity, telephone, fuel, stationeries, etc.) | IDR 102,219,000 | 30% |
| Services (regular services/program activities) | IDR 170,365,000 | 50% |
| Emergency/Response (specifically for emergency assistance) | IDR 68,146,000 | 20% |
| TOTAL BUDGET | IDR 340,730,000 | 100% |

3. Proposed Activity from PMI Sukaria Branch to PMI Suka Suka Chapter (10):

| No. | Proposed Activity | Implementation Schedule | Reason for Proposing the Activity |
|-----|--|-------------------------|---|
| 1 | Conduct PMER Training. | August 2015 | To strengthen the capacity of the board members and staff before conducting annual meeting. |
| 2 | Provide basic DR equipment (rubber boat, tent, and field kitchen equipment). | July 2015 | Sukaria District is a flood prone district, thus it requires equipment supports. |



4. Detailed Implementation Plan - Work Plan of PMI Sukaria Branch, Year 2015

| No | Activity | Budget | Implementation Timeline | | | | | | | | | | | |
|--------------|---|----------------|-------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Okt | Nov | Dec |
| 1 | Disseminate PMI Statutes to Staff and Board Members. | IDR 500,000 | X | | | | | | | | | | | |
| 2 | Develop HR regulation. | IDR 1,000,000 | | X | | | | | | | | | | |
| 3 | Register assets based on implementation/ technical guidelines. | IDR 0 | | | X | | | | | | | | | |
| 4 | Update employee database. | IDR 0 | | | | X | | | | | | | | |
| 5 | Conduct Annual Meeting. | IDR 6,000,000 | | | | | X | | | | | | | |
| 6 | Participate in the SP/OP dissemination workshop | IDR 13,230,000 | | | | | | X | | | | | | |
| 7 | Conduct workshop to develop annual work plan and annual report. | IDR 4,000,000 | | | | | | | X | | | | | |
| 8 | Conduct Basic KSR Training. | IDR 10,000,000 | | | | | | | | X | | | | |
| etc. | | | | | | | | | | | | | | |
| TOTAL BUDGET | | | | | | | | | | | | | | |
| IDR xxx xxx | | | | | | | | | | | | | | |

Annex 2. Sample of PMI Branch Reports

SAMPLE OF ACTIVITY REPORT

| ACTIVITY REPORT OF PMI SUKARIA BRANCH | | | | | | |
|---|--|----------------|---|--------------------------------|--|--|
| 1. | Title of Activity | | SP/OP Dissemination Workshop | | | |
| 2 | Date and Location of Implementation | | PMI Sukaria Office, 26 February 2015 | | | |
| 3 | Budget (IDR): | Advance (IDR): | Actual (IDR) | Balance (IDR) (Advance-Actual) | | |
| | 13,230,000 | 10,000,000 | 8,525,000 | 1,475,000 | | |
| 4 | Number of participants/ beneficiaries | | Total : | M : F : | | |
| | 30 ppl (Board members and Staff) | | 20 ppl | 10 ppl | | |
| 5 | Activity results | | <ul style="list-style-type: none"> ✓ PMI Strategic Plan and Operational Plan 2014-2019 ✓ PMI Planning and Reporting Guidelines | | | |
| 6 | Challenges/issues encountered | | <ul style="list-style-type: none"> ✓ The understanding on Operational Plan outcome and output indicators is still lacking. ✓ Practice session for work plan development is a bit short and not comprehensive. | | | |
| 7 | Solution conducted/taken | | <ul style="list-style-type: none"> ✓ Request for technical support from PMI Chapter in a form of guidance and knowledge exploration to be incorporated into the planning document. | | | |
| 8 | Suggestions for improvement | | <ul style="list-style-type: none"> ✓ It requires a comprehensive Planning, Monitoring, Evaluation, and Reporting training in Sukaria Branch. | | | |
| 9 | Follow up required | | <ul style="list-style-type: none"> ✓ Send a letter to PMI Chapter requesting for technical support in work plan development. ✓ Send letter to PMI NHQ requesting PMER training. | | | |
| REPORTED BY: | | | ACKNOWLEDGED BY: | | | |
| TUTUNG TARUTUNG Staff of Organizational Division | | | DENDI MAHMUD Head of Office | | | |

SAMPLE OF MONTHLY REPORT

PMI SUKARIA BRANCH MARCH 2015 REPORT

I. Summary of Activity Implementation Matrix

| No | Activity | Date and Location of Implementation | Budget (3 variables) | Actual | Activity Results |
|----|---|-------------------------------------|----------------------|-------------|---|
| 1 | Volunteer coaching in form of coordination meeting between volunteers with board members. | PMI Sukaria Office, 2 March 2015 | IDR 250,000 | IDR 227,000 | 38 volunteers attended. The Secretary attended to represent the board members. |

II. Analysis

2.1. Activity and Budget Plan vs Actual

Coordination meeting between volunteers and board members is a new initiative implemented for the first time by Sukaria Branch, as a form of volunteer coaching/development activities. This meeting was initiated on 5 March 2015; 38 KSR attended and had a dialogue with the Secretary.

From the total budget amounted of IDR 1,000,000 allocated for a year, four meetings were planned with budget division of IDR 250,000 per meeting. The budget spent for this initial meeting is IDR 227,000; IDR 77,000 was used for consumption and IDR 150,000 for KSR local transport.

2.2. Implementation Process

This initial meeting was responded positively by the KSRs; most of them mentioned that this was an opportunity for them to have a dialogue with the board members and to share ideas and challenges they were facing. The participation from participants was good. The main results of this meeting was the request to reactivate basic KSR training sessions, because the last session conducted was more than six months ago. They need a refresher.

The Secretary welcomed this request considering that it had been included in the work plan. The plan is that it will be conducted in April 2015. However, the technical implementation will be discussed further with the staff.

2.3. Challenges/ Issues Encountered

To date, PMI Sukaria does not have human resource with sufficient capacity to facilitate basic KSR training.

2.4. Follow up required

PMI Sukaria will send a letter to PMI Chapter to request for support of trainer to facilitate basic KSR training session to be carried out.

III. Information about Regular Activities (Office Operations)

- ✓ The February 2015 Monthly Report has been submitted to the board members to be discussed in the board plenary meeting.
- ✓ The board members plenary meeting was conducted on 11 March 2015, with consumption cost amounted to IDR 85,000.
- ✓ Coordination Meeting between Head of Office and Staff was conducted on 13 March 2015 to follow up the results of board members plenary meeting, with consumption cost amounted to IDR 64,000.
- ✓ Electricity, water, phone, and gas bills had been paid with a total amount IDR 843,000.

IV. Activity Plan for the following Month

| No | Activity | Date of Implementation | Budget |
|----|---|------------------------|----------------|
| 1. | Board members plenary meeting | 8 April 2015 | IDR 100,000 |
| 2. | Coordination meeting between Head of Office and staff | 10 April 2015 | IDR 100,000 |
| 3. | Basic KSR training | 23-27 April 2015 | IDR 10,000,000 |

Developed/reported by:

Acknowledged/approved by:

DENDI MAHMUD, Head of Office

JOKO SAMBODO, Chairman

SAMPLE OF QUARTERLY REPORT

QUARTER I (Jan-Mar) 2015 REPORT PMI SUKARIA BRANCH

I. Summary of Key Achievements

- ✓ Nine personnel of PMI Sukaria Branch received dissemination of PMI Statutes, which consists of 5 staff and 4 board members.
- ✓ Three personnel of PMI Sukaria Branch participated in SP/OP dissemination workshop organized by PMI NHQ in Jakarta. The workshop was attended by the Secretary, Board Member for OD, and Head of Office.
- ✓ The first volunteer development activity was initiated on 5 March 2015 in form of coordination meeting between volunteers and board members. This meeting was attended by 38 KSRs, the Secretary, and staff from Volunteer Division.

II. Indicator Tracking Table

| Work plan Indicators | Quarter I (Jan-Mar 2015) | | Quarter II (Apr-Jun 2015) | | Quarter III (Jul-Sep 2015) | | Quarter IV (Oct-Dec 2015) | | Year 2015 | | | |
|--|--------------------------|--------|---------------------------|--------|----------------------------|----|---------------------------|--------|-----------|--------|--------|------|
| | Target | Actual | % | Target | Actual | % | Target | Actual | % | Target | Actual | % |
| STRATEGIC OBJECTIVE 1: To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities with the organizational policies, procedures, and system. | | | | | | | | | | | | |
| 4. PMI Branch conducted Annual Meeting in accordance with the assigned schedule. | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| Output 1.2.1. PMI Statutes, Organizational Procedures (PO), and Implementation Guidelines (Juklak), as well as legal products are in place and implemented at all levels | | | | | | | | | | | | |
| 6. PMI Branch receive dissemination of information on statutes. | 10 | 9 | 90% | NA | NA | NA | NA | NA | NA | 10 | 9 | 90% |
| 8. Number of PMI employees who have written employment contracts | NA | NA | NA | NA | NA | NA | NA | NA | NA | 5 | NA | NA |
| 9. PMI Branch develops asset inventory in line with the technical guidelines. | NA | NA | NA | NA | NA | NA | NA | NA | NA | 1 | NA | NA |
| 10. PMI Branch has HR regulation in place . | 1 | 0 | 0% | NA | NA | NA | NA | NA | NA | 1 | 0 | 0% |
| 11. PMI Branch has employee database that is updated on annual basis . | NA | NA | NA | NA | NA | NA | NA | NA | NA | 1 | NA | NA |
| Outcome 1.3. PMI's Planning, Monitoring, Evaluation, and Reporting (PMER) system is well-functioning at all levels. | | | | | | | | | | | | |
| 13. PMI Branch develops annual work plan in line with the Planning and Reporting Guidelines. | NA | NA | NA | NA | NA | NA | NA | NA | NA | 1 | NA | NA |
| 14. PMI Branch develops annual report in line with the Planning and Reporting Guidelines. | NA | NA | NA | NA | NA | NA | NA | NA | NA | 1 | NA | NA |
| Output 1.3.1. PMI board members and staff at all levels are regularly coached on the implementation of Planning, Monitoring, Evaluation, and Reporting (PMER) system by competent facilitators | | | | | | | | | | | | |
| 17. PMI Branch receive information regarding the Planning and Reporting Guidelines . | 3 | 3 | 100% | NA | NA | NA | NA | NA | NA | 3 | 3 | 100% |
| Etc. | | | | | | | | | | | | |

III. Financial Information (Rupiah)

| Time | Total Budget | Total Actual | % Actual/Budget |
|-----------------------|-----------------------|-----------------------|-----------------|
| Month-1 | IDR 2,200,000 | IDR 1,639,000 | 74.5% |
| Month-2 | IDR 15,930,000 | IDR 14,723,000 | 92% |
| Month-3 | IDR 1,950,000 | IDR 1,219,000 | 62.5% |
| Total 3 months | IDR 20,080,000 | IDR 17,581,000 | 87.6% |

III. Analysis

a. Description of variance/gaps between target and actual.

Indicator 10 could not be achieved as per target in March 2015 due to the lack of references needed by OD staff in developing a human resource guidelines. Coordination has been conducted with PMI Chapter to request support for this activity, and this indicator is expected to be achieved in quarter II.

b. Description of relations between activity, indicator achievement, output and outcome.

The completion of internal workshop to disseminate the statutes has contributed to the achievement of indicator 6 by 90%, which contributed to output 1.2.1. However, the delay in the achievement of indicator 10 also reduced the contribution for the respective output. Meanwhile, the participation of PMI Sukaria in SP/OP dissemination workshop contributed to the achievement of indicator 17 by 100%, which further supported the achievement of output 1.3.1.

c. Issues/challenges as well as follow up solutions.

Staff and board members still have some difficulties in understanding several parts of SP/OP, and to operationalize those objectives into the 2016 work plan. OD staff also had challenges in seeking for references to develop the HR regulation.

Both of these challenges will be coordinated with PMI Chapter so that they can provide assistance. Aside from that, the ability of PMI Sukaria in understanding the strategic plan and operational plan as well as in developing objective-based work plan will be strengthened with the forthcoming PMER training facilitated by PMI NHQ.

To address those issues, PMI Sukaria will send a letter to PMI Chapter requesting for an assistance in preparing the work plan and organizational policies, and send a letter to PMI NHQ to request for PMER Training.

IV. Activity Plan for the Following Quarter

| No | Activity | Implementation Timeline | Budget |
|----|---|-------------------------|----------------|
| 1 | Conduct basic KSR training | April week-4 | IDR 10,000,000 |
| 2 | Send personnel to participate in ambulance training | May week-2 | IDR 5,000,000 |
| 3 | Develop HR regulation | May week-2 - 4 | IDR 1,000,000 |
| 4 | Update employee database | June week-1 | IDR 0 |
| 5 | Conduct coordination meeting between volunteers and board members | June week-1 | IDR 250,000 |

Developed/reported by:

DENDI MAHMUD, Head of Office

Acknowledged/approved by:

JOKO SAMBODO, Chairman

PMI's Planning, Monitoring, Evaluation, and Reporting (PMER) System will be well-functioning if this Planning and Reporting Guidelines is used effectively.

A good PMER system will contribute to the achievement of Strategic Objective 1: "To build a well-functioning PMI at all levels, with the capacity to create synergy between program activities with the organizational policies, procedures, and system."

PMER is Everybody's Business

PMER adalah Tanggung Jawab Bersama



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