C19RM 2021 – Executive Summary

LFA Assurance Services

September 2021

After the LFA has submitted the Executive Summary and the detailed report\* to the Country Team, the LFA is requested to **replicate the final version of the Executive Summary using an online survey tool**.

1. Open the executive summary survey with this [link](https://ee.kobotoolbox.org/single/IfJ1a71I). If you encounter any issues, please copy/paste the link into your browser (preferably Chrome, Firefox, Edge, Opera) https://ee.kobotoolbox.org/single/IfJ1a71I
2. Please complete all questions up to and including the “Conclusion” section in this form, making selections as relevant for the period under review.
3. Once all relevant questions have been completed, click “Submit” on the final page.
4. You will then be directed to a confirmation page. You will not receive an email notification of the submission. If you would like a copy of the form, kindly request one from the LFA Coordination Team (LFACoordinationTeam@theglobalfund.org)

\*High Impact/Core/Prioritized portfolios: the LFA must submit the detailed report and the executive summary to the Country Team prior to submitting the final executive summary online.

Focused portfolios/Non-prioritized portfolios: the LFA must submit the executive summary to the Country Team prior to submitting it online; the detailed report should be submitted to the Country Team only upon request.

If you experience any difficulties, please contact the LFA Coordination Team (LFACoordinationTeam@theglobalfund.org).

**Executive Summary**

1. **LFA** *(Name of organization that completed the assurance activity)*
2. **Email address** *(Please enter your email address in case we need to contact you)*
3. **Country**

[drop-down selection]

1. **Principal Recipient(s)** *(Name of the PR(s) covered by this assurance activity (separate with a comma “,”)*
2. **Period under Review** *(Indicate, with dates, the time period under review (From yyyy/mm/dd to yyyy/mm/dd*
3. **Please certify that the information provided in this form has been submitted to the Country Team and that it represents the final version of the executive summary.**

[ ] Yes, I certify

1. **Date of submission to CT** *(Enter the date when the review/report was submitted to the CT date yyyy/mm/dd,)*
2. **Please indicate which of the below COVID-19 related products/services were procured by the Implementer (including initiation of the procurement) and how during the period of the LFA review (only for material amounts).** *Please refer to the Global fund website for* [*product lists*](https://www.theglobalfund.org/en/covid-19/health-product-supply/treatment-and-oxygen-equipment/) *for each type of health product category.*

|  |  |  |  |
| --- | --- | --- | --- |
| COVID-19 related products/services | Not procured/Not material | Procured locally | Procured through pooled mechanisms, e.g. wambo.org, [AOM](https://www.theglobalfund.org/en/covid-19/health-product-supply/diagnostics-procurement/) or partner agreements (e.g. UNICEF, UNDP, GDF) |
| PPEs | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  |
| Laboratory and Health Equipment and related items | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  |
| Services (e.g. warehousing and distribution services, services provided by private providers and any other services)Please specify: | [ ]  | [ ]  | [ ]  |

1. **Please indicate which of the assurance service(s) below you provided for the period under review, and for which key findings and recommendations are reported, in this executive summary.**

|  |  |
| --- | --- |
| Assurance service(s)  | Provided  |
| Capacity Assessment of Implementers  | [ ]  |
| 1. Capacity Assessment of new implementers/tailored assessment of existing PR
 | [ ]  |
| Finance-related Verifications | [ ]  |
| 1. Expenditure verification
 | [ ]  |
| 1. Value for money reviews and analysis
 | [ ]   |
| 1. Finance spot checks of high-risk implementers/interventions
 | [ ]  |
| 1. Financial Data Quality Reviews
 | [ ]  |
| 1. Fraud Specific Review
 | [ ]  |
| Health Products Management-related Verifications | [ ]  |
| 1. Review of quantification
 | [ ]  |
| 1. Procurement review for locally procured health products and services
 | [ ]  |
| 1. Verification of quality assurance of health products
 | [ ]  |
| 1. Verification of health products storage and supply chain management
 | [ ]  |
| 1. Verification of distribution of health products
 | [ ]  |
| 1. Verification of health product related service delivery
 | [ ]  |
| 1. Verification of waste management
 | [ ]  |
| 1. Review of medical lab equipment deployment mapping, including installation, calibration, maintenance, use
 | [ ]  |
| 1. Laboratory related supply chain review
 | [ ]  |
| 1. Verification of Inventory level
 | [ ]  |
| Programmatic Verifications | [ ]  |
| 1. Programmatic Spot Checks
 | [ ]  |
| Other Verification(s) | [ ]  |
| 1. Other(s), to be specified further below in section 18
 | [ ]  |

**Please note the following definitions are used throughout the executive summary:**

* No Issues: No issues have been identified that would impact the outcome of the process or activity being reviewed (ex., procurement exception procedures were followed as per manual of procedures).
* Minor Issues: Issues identified that would have some negative impact on the outcome of the process or activity being reviewed (ex., procurement exception procedures were followed but not documented according to manual of procedures).
* Moderate Issues: Issues have been identified that would have a clear negative impact on the outcome of the process or activity being reviewed (ex., procurement exception procedures were not followed according to manual of procedures, value for money of the procurement is in question).
* Major Issues: Issues have been identified that would have a serious impact on the outcome of the process or activity being reviewed (ex., procurement exception procedures were not followed according to manual of procedures and irregularities were flagged with the procurement leading to retendering and or ineligible/recoveries).
* Material amounts: LFA applies professional judgment to determine the overall materiality to guide the scope of their review based on the results of risk assessment, understanding of the entity and its environment and appropriate discussion. The level of materiality normally should be agreed between the LFA and the Global Fund Country Team prior to the start of the work

**Key findings**

**Capacity Assessment of Implementers**

1. **Capacity Assessment of new implementers/tailored assessment of existing PR**
	1. Please indicate for each of the following areas of concern the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Areas of concern | N/A – not reviewed | No issues / Minor issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| Inadequate funds flow and/or financial management controls, systems and capacity to implement C19RM activities | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate health products and supply chain management controls, systems and capacity to implement C19RM activities, incl. procurement, warehousing and distribution of COVID-19 products | [ ]  | [ ]  | [ ]  | [ ]   |
| Inadequate governance capacity to coordinate with relevant stakeholders and undertake the necessary oversight of the proposed C19RM interventions | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate capacity (including human resources capacity), to timely collect the data, provide oversight, manage, report on and track implementation of interventions | [ ]  | [ ]  | [ ]  | ☐ |
| Risk of fraud | [ ]  | [ ]  | [ ]  | [ ]  |
| Others, please specify: | [ ]  | [ ]  | [ ]  | [ ]  |

**Finance-related verifications**

1. **Expenditure verification**

2.1 Please indicate for each of the following areas of concern (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Areas of concern | N/A – not reviewed | No issues / Minor issues Identified | Moderate Issues Identified | Major Issues Identified |
| Inadequate controls/ oversight over C19RM related expenditures | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of compliance of C19RM-related expenditures with Grant Agreement and grant requirements, approved budget, procurement processes or terms of contracts, etc.  | [ ]  | [ ]  | [ ]  | [ ]  |
| Delays in incurring of expenditures and potential risk of under-absorption | [ ]  | [ ]  | [ ]  | [ ]  |
| Taxes paid and not recovered | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Value for money reviews and analysis[[1]](#footnote-2)**
	1. Please indicate for each of the following areas of concern (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Areas of concern | N/A – not reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major Issues Identified |
| Compromised Economy: costs paid not optimal and/or quality of goods/services is compromised | [ ]  | [ ]  | [ ]  | [ ]  |
| Compromised Effectiveness: investment in interventions with suboptimal impact | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Finance spot checks of high-risk implementers/interventions**
	1. Please indicate for each of the following areas of concern (only for material amounts) the level of issues identified*.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Areas of concern | N/A – not reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major Issues Identified |
| Suboptimal Capacity of finance HR function, incl. staff number, qualifications, experience  | [ ]  | [ ]  | [ ]  | [ ]  |
| Weak oversight of PR over SRs implementing C19RM activities | [ ]  | [ ]  | [ ]  | [ ]  |
| PR/SR cannot clearly track C19RM related income, interest, refunds and/or expenditures in their accounting system | [ ]  | [ ]  | [ ]  | [ ]  |
| Cash and banking – significant amount of cash payments and/or no timely bank reconciliation | [ ]  | [ ]  | [ ]  | [ ]  |
| Large and/or long-outstanding advances | [ ]  | [ ]  | [ ]  | [ ]  |
| Non-compliant expenditures identified[[2]](#footnote-3) | [ ]  | [ ]  | [ ]  | [ ]  |
| Weak accounting and reporting system | [ ]  | [ ]  | [ ]  | [ ]  |
| Procurement gaps and issues identified | [ ]  | [ ]  | [ ]  | [ ]  |
| Poor oversight over C19RM procured health products and inventory | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Financial Data Quality Reviews**
	1. Please indicate for each of the following areas of concern (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Areas of concern | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| Accounting system does not allow for proper recording of project transactions, incl. allocation of expenditures | [ ]  | [ ]  | [ ]  | [ ]  |
| No/insufficient controls in place in relation to preparation and approval of transactions | [ ]  | [ ]  | [ ]  | [ ]  |
| Implementer not able to extract data for GF reporting automatically from the accounting system  | [ ]  | [ ]  | [ ]  | [ ]  |
| Financial reporting does not allow to compare budget vs actuals | [ ]  | [ ]  | [ ]  | [ ]  |
| No/insufficient procedures in place to ensure financial management systems of PR and SRs have timely consolidated financial data | [ ]  | [ ]  | [ ]  | [ ]  |
| Fixed assets not recorded in a computerized management system and/or no periodic reconciliation between general ledger to fixed asset register | [ ]  | [ ]  | [ ]  | [ ]  |
| Others (please specify): | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Fraud Specific Review**
	1. Select for the below products/services (only for material amounts) the level of issues identified

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen equipment and Consumables | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |
| Services (e.g. warehousing and distribution services, services provided by private providers and any other services)Please specify: | [ ]  | [ ]  | [ ]  | [ ]  |
| Human Resources | [ ]  | [ ]  | [ ]  | [ ]  |
| Travel-related Costs | [ ]  | [ ]  | [ ]  | [ ]  |
| Procurement of non-health related goods and services | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and health equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | Services (e.g. storage space or distribution services) | Human Resources | Travel-related Costs | Procurement of non-health related goods and services |
| Falsified or fabricated documents identified | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Partial or total diversion of assets to non-program use (Misappropriation / Misuse/embezzlement) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Prohibited behavior[[3]](#footnote-4) (corruption, coercive practices, collusive practices, retaliation, money laundering) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Procurement irregularities (absence of competitive tender or other procurement issues) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Waste (Spoilage or loss of goods due to negligence, poor storage conditions, procurement within budget but with materially inadequate quantification, resulting in unused surplus) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Prices in excess of prevailing market prices | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Non-competitive tenders/ collusion/ inappropriate facilitation payments | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Health Products Management-related Verification**

1. **Review of quantification**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables  | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
|  Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |
| Services (e.g. warehousing and distribution services, services provided by private providers and any other services)Please specify: | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and Health Equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | Services (e.g. warehousing and distribution services, private lab charges and other services) |
| Quantification likely to lead to over- or undersupply of health products  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of validation of quantification/ coordination among national authorities/partners supplying the same health products before orders are placed | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of robust and detailed assumptions such as pipeline, stock on hand, needs assumptions | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Procurement review for locally procured health products and services**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |
| Services (e.g. warehousing and distribution services, services provided by private providers and any and other services)Please specify: | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and health equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | Services (e.g. warehousing and distribution services, private lab charges and other services) |
| Lack of technical capacity and controls of the procuring entity indicating a risk of fraud and corruption | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate procurement planning impacting timely supply of goods. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate procurement processes, tendering procedures and contract awards, including non-compliance to formal written procurement procedures/guidelines | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of competitive procurement process/ non-compliance with applicable procurement guidelines/lack of approval by relevant authorities, as required | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of value for money of the procurement | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Verification of quality assurance of health products**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen equipment and Consumables | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and health equipment and related items  | X-Ray Equipment and related items | Medical Oxygen equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| Non-compliance of health products procured to [Global Fund Quality Assurance Policy, or Quality Assurance Interim Requirements](https://www.theglobalfund.org/en/covid-19/health-product-supply/quality-assurance/).  | [ ]  | ☐ | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of registration of the products in country/approval by the NMRA/MOH for procurement under pandemic scheme (unless a waiver for registration is provided). | [ ]  | [ ]  | [ ]  | [ ]  | ☐ | [ ]  | [ ]  |
| Non-compliance of essential medicines procured, e.g. Dexamethasone, with quality standards of the National Regulatory Authorities | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Products procured are not the products received | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Verification of health products storage and supply chain management**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issued / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |
| --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| Inadequate controls for receiving of goods, stock placement and location, inventory control and records management, order processing, inventory counts, order release and dispatch, good house-keeping, equipment management, etc | [ ]  | [ ]  | [ ]  |
| Inadequate controls to minimize the risk of loss/ diversion/ damage in the storage facilities | [ ]  | [ ]  | [ ]  |
| Receipt, storage and management of goods are not in accordance with Good Storage Practices, as applicable for the concerned health products | [ ]  | [x]  | [ ]  |
| Management of storage and distribution not in accordance with the COVID-19 response plan  | [ ]  | [ ]  | [ ]  |
| Inadequate systems/LMIS and controls to minimize the risk of stock-outs, over-stocks and expiry. | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]   | [ ]  |

1. **Verification of distribution of health products**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |
| --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| Distribution of the products not in accordance with Good Distribution Practices | [ ]  | [ ]  | [ ]  |
| Goods not distributed according to plan (quantity, type of products, quality, frequency of receipt) | [ ]  | [ ]  | [ ]  |
| Goods not distributed at no charge to the end users/beneficiaries. | [ ]  | [ ]  | [ ]  |
| Inadequate reconciliations of quantities ordered, received at central location, dispatched to different locations | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  |

1. **Verification of health products related service delivery**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables  | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |
| Services (e.g. warehousing and distribution services, services provided by private providers and any other services)Please specify: | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Laboratory and Health Equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables  | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | Services (e.g. warehousing and distribution services, private lab charges and other services) |
| Lack of availability/ineffective use of Covid-19 services and equipment (incl. routine maintenance of equipment...) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate transportation of samples; lack of adherence to biosafety measures and availability of all items for testing | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Administration and use of COVID-19 related health product and health equipment not in accordance with the latest WHO guidelines (including treatments, diagnostics algorithm, medical oxygen administration...)  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate availability/use of products by end users (medical staff, laboratory staff, community health workers...) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate availability of COVID-19 related services (testing, oxygen administration, access to treatment,…) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Verification of waste management**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and Health Equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| No availability of waste management policies and procedures (collection, storage, transportation, treatment, disposal) for used, expired or damaged health products (e.g. PPE, cartridges etc.) and biomedical samples  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Poor quality of implementation of waste management policies and procedures (collection, storage, transportation, treatment, disposal) for used, expired or damaged health products (e.g. PPE, cartridges etc.) and biomedical samples  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate adherence to occupational health and safety standards by waste handlers | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  |  | [ ]  | [ ]  |

1. **Review of medical and lab equipment deployment mapping, including installation, calibration, maintenance, use**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables  | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

[ ]

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Laboratory and Health Equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| Testing coverage gaps  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of standardization of equipment | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate installation, calibration & maintenance, as well as utilization of installed testing capacity and functionality of equipment | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate installation and functionality of equipment (such as PSA oxygen generator plants, oxygen concentrators, building of intensive care capacity, etc.) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Laboratory related supply chain review**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and Health Equipment and related items  | X-Ray Equipment and related items | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| Inadequate supply chain management systems for lab commodities (including LMIS) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of continuous availability of reagents, consumables, and spare parts | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate laboratory information system (LIS) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate storage conditions or capacities | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

1. **Verification of Inventory level**
	1. Select for the below products/services (only for material amounts) the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the below areas of concern **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and Health Equipment and related items | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) |
| Lack of visibility of the inventory level | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Risk of expiration (due to over stock and/or orders in the pipelines) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Risk of stock out (due to low level of stock, delayed orders, and/or absence of orders) | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Programmatic Verification**

1. **Programmatic spot checks**
	1. Select from the products/services below (only for material amounts) and the level of issues identified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COVID-19 related products/services | N/A – Not Reviewed | No Issues / Minor Issues Identified | Moderate Issues Identified | Major IssuesIdentified |
| PPEs | [ ]  | [ ]  | [ ]  | [ ]  |
| Diagnostics and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Laboratory and health equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| X-Ray Equipment and related items | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Equipment and Consumables  | [ ]  | [ ]  | [ ]  | [ ]  |
| Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | [ ]  | [ ]  | [ ]  | [ ]  |
| Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | [ ]  | [ ]  | [ ]  | [ ]  |
| Services (e.g. warehousing and distribution services, services provided by private providers and any other services)Please specify: | [ ]  | [ ]  | [ ]  | [ ]  |

* 1. Please indicate for which of the areas of concern below, **major issues** were identified. *Please do NOT tick the below if the issues are minor.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Areas of concern | PPEs | Diagnostics and related items | Laboratory and Health Equipment and related items  | X-Ray Equipment and related items | Medical Oxygen Equipment and Consumables | Medical Oxygen Liquid & Gas (PSA Plant and Cylinders) | Covid-19 Therapeutics (approved Covid-19 treatment as per HPMT + new ones when approved, e.g. IL-6 blockers) | Services (e.g. warehousing and distribution services, private lab charges and other services) |
| Inadequate availability of health workers | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Reduction in HTM service provision and/or utilization  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate stock of PPE for safe care provision | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Limited HTM diagnostic services | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate stock of HTM treatment products | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of training on C-19 management | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Inadequate availability of Oxygen and /or Oxygen delivery equipment | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Lack of HTM community outreach services | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Poor timeliness of submission of HTM and COVID-19 reports from the facility to the next reporting level | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other (please specify): | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Other Verification(s)**

1. **Please describe any other verifications that were conducted which are not covered above along with key findings**

**Any Other Key Findings**

1. **Please indicate any additional pertinent findings not covered above, as relevant**

**Conclusion**

1. **Overall Conclusion and Recommendations**
	1. Based on the issues identified and reported in the executive summary for the review/verification performed *(choose one option)*:

[ ]  No major issues were identified

Please provide additional relevant information, if any.

[ ]  Major issues were identified but their total impact on the implementation of C19RM is not significant/is manageable (e.g. the financial impact is limited; timely corrective actions can be taken; the timeliness and quality of the implementation of key activities are not much affected; etc.)

In case where major issues were identified but their total impact on the implementation of C19RM is not significant/is manageable, please provide justification for the conclusion and any additional relevant information.

[ ]  Major issues were identified **AND** their total impact on the implementation of C19RM is significant (e.g. the financial impact is significant; the progress of implementation of key activities is majorly delayed, including the recruitment of community health workers and/or other key staff; C19RM products/services are not reaching the intended beneficiaries as planned; the quality of implementation of C19RM is majorly affected; etc.)

In cases where major issues were identified and reported in the executive summary, the following recommendation is relevant *(choose as many as are applicable)*:

[ ]  Non-compliant expenditure was identified and the Global Fund should pursue their recovery as stipulated under Section 5.3 of the Guidelines for Grant Budgeting

[ ]  Re-tendering is required and it is practical to do so

[ ]  Indicators of fraud were identified which may require further review

[ ]  Consider changes in implementation arrangements (PRs, SRs, service providers)

[ ]  Controls and management processes of the implementer(s) need to be strengthened

[ ]  Policies/guidelines/tools/capacity related to HIV/TB/malaria service(s) need to be strengthened to facilitate implementation

[ ]  Grant implementation at the health facility level, including monitoring and delivery of HIV/TB/malaria service(s), needs to be strengthened

[ ]  Grant implementation at the Community level, including monitoring and delivery of HIV/TB/malaria service(s), needs to be strengthened

[ ]  Timeliness of submission of HIV/TB/malaria reports from health facilities needs to be improved

[ ]  Other(s), please specify

Please provide any additional relevant information. If selected *Other*, please specify.

1. Please refer to Value for Money Technical Brief (November, 2019) (<https://www.theglobalfund.org/media/8596/core_valueformoney_technicalbrief_en.pdf?u=637087223220000000>) [↑](#footnote-ref-2)
2. As defined under Section 195 of the Guidelines for Grant Budgeting (December, 2019) [↑](#footnote-ref-3)
3. Please refer to the Global Fund Policy to Combat Fraud and Corruption (November, 2017) (<https://www.theglobalfund.org/media/6960/core_combatfraudcorruption_policy_en.pdf?u=636492856530000000>) [↑](#footnote-ref-4)