

Guided Self-Assessment of Public Financial Management Performance (PFMP-SA) for the Health Sector - United States Agency for International Development

Objective and features

1. Objective

PFMP-SA aims to encourage collaboration between Ministries of Health (MoHs) and Ministries of Finance (MoFs) in countries where the institutions may lack common language, systems, priorities, and incentives. PFMP-SA is a part of the broader toolkit that aims to help bridge the gap between these two important institutions (see Methodology section below).

2. Institutional coverage

National governments.

3. Technical coverage

The PFM functions covered by the framework are (1) budget management, (2) fiscal framework and policy, (3) accounting and reporting, and (4) treasury and cash management.

4. Application method

Self-assessment.

Methodology

5. Methodology

The PFMP-SA tool is a part of “A Toolkit for Ministries of Health to Work More Effectively with Ministries of Finance” which contains four different tools that can be used separately or together, depending upon the needs of the managers. The other three tools in the toolkit are:

- Self-Assessment of Internal Control Health Sector;
- Developing Key Performance Indicators; and
- Data for Efficiency: A Tool for Assessing Health Systems’ Resource Use Efficiency.

Of the 31 indicators included in a full PEFA assessment (2011 Framework), the PFMP-SA covers the 12 indicators that are most relevant to the health sector (performance indicators 2, 4, 10, 12, 16, 18, 19, 20, 21, 23, 24, and D2). Although the assessment is aligned with the 2011 PEFA Framework, the Health Finance and Governance (HFG) unit at USAID has adapted the framework to the needs and limitations of a line ministry versus an MoF.

In line with the 2011 PEFA Framework, the assessment evaluates the selected indicators considering their impact on the six areas of a PFM system:

- | | |
|---------------------------------------|---|
| 1. Credibility of the budget | 4. Predictability and control in budget execution |
| 2. Comprehensiveness and transparency | 5. Accounting, recording, and reporting |
| 3. Policy-based budgeting | 6. External scrutiny and audit |

6. Benchmarking system

Benchmarking with scoring. The dimensions are scored on a cardinal scale: A (high level of performance that meets international good practices), B (sound performance in line with many elements of international good practices), C (basic level of performance), or D (below basic level of performance). The overall score for an indicator is based on the scores for the individual dimensions. The scores for multiple dimensions are combined with the overall score for the indicator using either the “weakest link” method or the “averaging” method. For each indicator, the method to be used is mentioned separately.

7. Linkage to PEFA framework

Comparison between the 2011 indicators covered and 2016 PEFA is [available](#).

8. Complementarity with PEFA framework

The tool has an emphasis on financial management for public sector health organizations, which aligns with and provides additional assessments around all four categories that form a part of the 2011 PEFA Framework (i.e., PFM Outturns: Credibility of the Budget, Key Cross-Cutting Issues: Comprehensiveness and Transparency, Budget Cycle and Donor Practices).

Development and use

9. Development and coordination

The tool was designed for health sector managers to help MoH staff better manage their resources and communicate more effectively with their MOF counterparts. WB and IMF contributed to the tool development. The assessment adapts the PEFA methodology specifically to the health sector. PFMP-SA was published in 2013.

10. Assessment management

PFMP-SA is a self-assessment completed with the help and guidance of USAID. The assessment is divided into three different stages for a total maximum duration of 7 to 11 weeks. The reports are cleared at the MoH level.

11. Uses by the government and members of the PFM community

The tool is to be used primarily by the MoH or equivalent government departments of national governments to assess their systems and procedures in order to improve accountability and performance. USAID and the Health Finance and Governance (HFG) USAID project work with governments in using the PFMP-SA tool, in particular, in developing countries in Sub-Saharan Africa and Southeast Asia.

12. Sequencing with other tools

While not necessary, the PFMP-SA can be carried out alongside other tools that form a part of the toolkit.

13. PFM capacity building

Through targeted guidance and coaching, USAID and HFG support MoHs in performing either their first or repeated guided self-assessment of PFMP-SA.

14. Tracking of changes and frequency of assessments

MoHs can carry out repeated self-assessments of PFMP-SA. There is no predefined repeat assessment frequency. While the user guide does not necessarily outline instances where repeated self-assessments may be carried out, these might help in tracking changes.

15. Resource requirements

The time required is 7 to 11 weeks, with the team including at least one member with expertise in public finance and accounting; governance; and institutional capacity building, leadership, management, and facilitation training, respectively.

Transparency

16. Access to methodology

Explanation of the framework is [available](#). USAID has published a guide for the PFMP-SA along with the [overall toolkit](#) it is a part of.

17. Access to assessment results

USAID publishes reports that cover all work for a particular country on the HFG website.