

Programme Capacity Assessment (PCA) - The Vaccine Alliance (Gavi)



Objective and features

1. Objective

PCA aims to identify risks and weaknesses and to make relevant recommendations for strengthening the in-country management and oversight of the vaccines and vaccine-related devices and direct financial support provided by Gavi.

2. Institutional coverage

National and subnational governments, nongovernmental implementers (nongovernmental organizations who mobilize resources to provide goods and services) as applicable.

3. Technical coverage

The assessment covers three main pillars: A. Program Management, B. Financial Management, and C. Vaccine and Cold Chain Management. Program Management and Vaccine and Cold Chain Management pillars are described in the Methodology section. Under the Financial Management pillar (within the stocktaking scope), the tool covers the following areas to the extent related to management of Gavi funding and immunization:

- Financial organizational structures and personnel
- Planning, budgeting, and financial monitoring processes
- Accounting and financial reporting capabilities
- Systems and controls for the disbursement of funds
- Procurement procedures for non-vaccine items
- Controls related to infrastructure development
- Fixed asset management
- Internal and external audit.

4. Application method

Custodian.

Methodology

5. Methodology

The PCA report identifies the Grant Management Requirements (GMR) which are annexed to Partnership Framework Agreements that Gavi has in place signed with countries. These requirements are discussed with implementation partners.

There are three pillars in the PCA tool. The assessment is adaptive to the requirements, and the three pillars can be applied in isolation. This is decided at the scoping stage. Each pillar has questions across various areas.

6. Benchmarking system

Scoring system, with narrative comments on the scoring presented in the key findings section (the comments are an important part of the report, adding context to the scoring). Every question is rated on a scale of 1 to 5 (1 = No, Non-existent, Not fit for purpose, Not functioning; 2 = Needs significant, urgent change or improvement; 3 = Satisfactory, Some improvement but no significant issues; 4 = Well fit for purpose; 5 = An example of good practice).

7. Linkage to PEFA framework

The indicators assessed under the Financial Management Pillar of the PCA are closely related to those of PEFA. However, given that PEFA covers broad PFM aspects and is not specific to a sector, the PCA uses PEFA reports for input on the information on PFM performance more broadly.

8. Complementarity with PEFA framework

PCA complements the PEFA Framework by assessing planning, budgeting, and financial monitoring processes; accounting and financial reporting capabilities; and internal and external audit at sector and subnational levels.



Development and use

9. Development and coordination

Launched in 2016, PCA replaced the Financial Management Assessment tool of Gavi. PCA was developed to broaden the scope of financial management assessment to include Program Management Capacity (PMC) and Vaccine and Cold Chain Management (VCCM) assessments in line with Gavi's investments in programs, vaccines, and cold chains.

The methodology was developed from experiences with other development partners like the Global Fund. During the tool development stage, discussions were held with members of the Audit and Finance Committee of the Gavi Board, external consultants, and experts.

In the course of an assessment, discussions are held with various agencies, such as Global Fund, WHO, UNICEF, FCDO, and AfDB, who are actively pursuing similar objectives to that of Gavi in a country. A joint reform action plan is designed in such cases.

10. Assessment management

PCA is conducted at the start of each investment program by Gavi. The assessment involves four stages: scoping, desk review, in-country review, and reporting and agreement with the country. Most of the assessments are done with the support of consultants.

- Scoping is done by Gavi and is shared with the consultants. Gavi tries to map the various organizations engaged in health programs in a country at this stage.
- A desk review is conducted by the consultants, covering past assessments in health, PFM, financial statements, and audit reports. A desk review note is submitted to Gavi. During the desk review phase, all available PFM-related assessments conducted in the country (such as PEFA, WB FRA, and EU reports) are consulted to understand the overall PFM context.
- A team comprising consultants and a PCA team member from Gavi visits the country and fills in the questionnaire based on consultations with relevant stakeholders. PCA in-country work is customized based on the perceived risks identified from the desk review. This may lead to revising or refining the scope. The consultant may fill in the questionnaire from the information available and validate it with the stakeholders.
- The PCA report and Grant Management Requirements are an output at this stage which are validated with the stakeholders and reviewed internally by Gavi.

Assessment findings are validated with government officials and partners. Reports are quality reviewed within the consulting firm as well as internally by Gavi.

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

PCA is used to identify and support governments in determining the means to address any capacity gaps in order to strengthen the Gavi-supported program, including through technical support (e.g., via the Partner Engagement Framework) and redirection of direct financial support (e.g., through reallocation), where appropriate. The findings will inform the programming of Gavi grants (e.g., Health System and Immunization Strengthening), technical assistance through the Partners' Engagement Framework, and other engagement with countries and partners (e.g., advocacy work).

12. Sequencing with other tools

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13. PFM capacity building

Findings from PCA report feed into capacity-building programs. Debriefing sessions with the government are conducted to agree on the follow-up actions. An implementation plan with timelines is designed and recommendations are prioritized.

In a few countries, capacity-building initiatives were planned in association with IFAC through the Memorandum of Understanding to Strengthen Accountancy and Improve Collaboration (MOSAIC) agenda or through partners in case of joint assessments. Gavi is also involved in Universal Health Coverage Plus (UHC+), an inter-donor working group that builds PFM capabilities.

14. Tracking of changes and frequency of assessments

Scores assigned can be used to track changes between assessments. Recommended assessment frequency is every three to five years, which is aligned with Gavi's grant cycle. Should there be changes in the PFM environment or in the political landscape which affect the structure designed for the program, or should audits find deviation from the program, a follow-up review is carried out again after the initial assessment conducted at the beginning of the investment cycle. This assessment is specific to Gavi's investment projects, and the repeat assessments are limited within the project duration.

15. Resource requirements

The cost of conducting an assessment varies depending on the scope and the size of the country. On average, the time required is two weeks for field work, a month to submit the draft report, and two to two-and-a-half months from field work to the final report. Team size is about four to seven people comprising an assessment coordinator to streamline activities across the three pillars, PFM specialists, procurement and supply chain specialists, and health sector specialists (medical doctor, vaccine and cold chain specialist).

Transparency

16. Access to methodology

There is a PCA user guide that outlines the purpose, principles, process and phases, contracting, and the feedback process for the PCA. The user guide is not available for public consumption but is shared with contractors.

17. Access to assessment results

Reports are shared with governments and key stakeholders, but are usually not published.

