

Audit Report

Global Fund Grants to the Federal Democratic Republic of Ethiopia  
Pre-Implementation Review

GF-OIG-15-004  
25 February 2015  
Geneva, Switzerland

# Pre-Implementation Review of Global Fund strategy in Ethiopia

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# Background <sup>1/5</sup>

## Ethiopia: large portfolio, strong results

### One of the largest investments to date

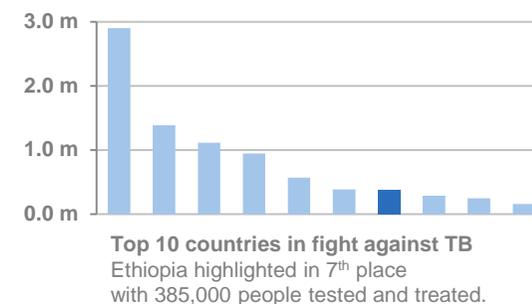
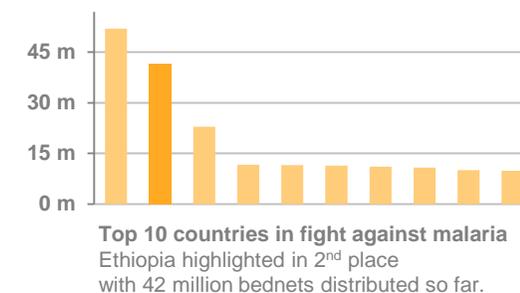
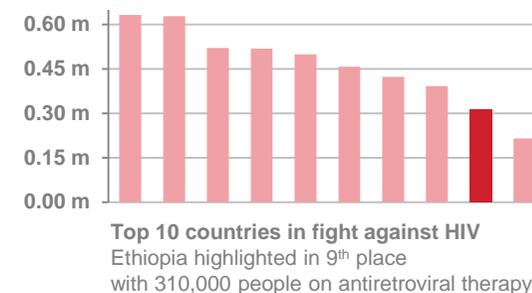
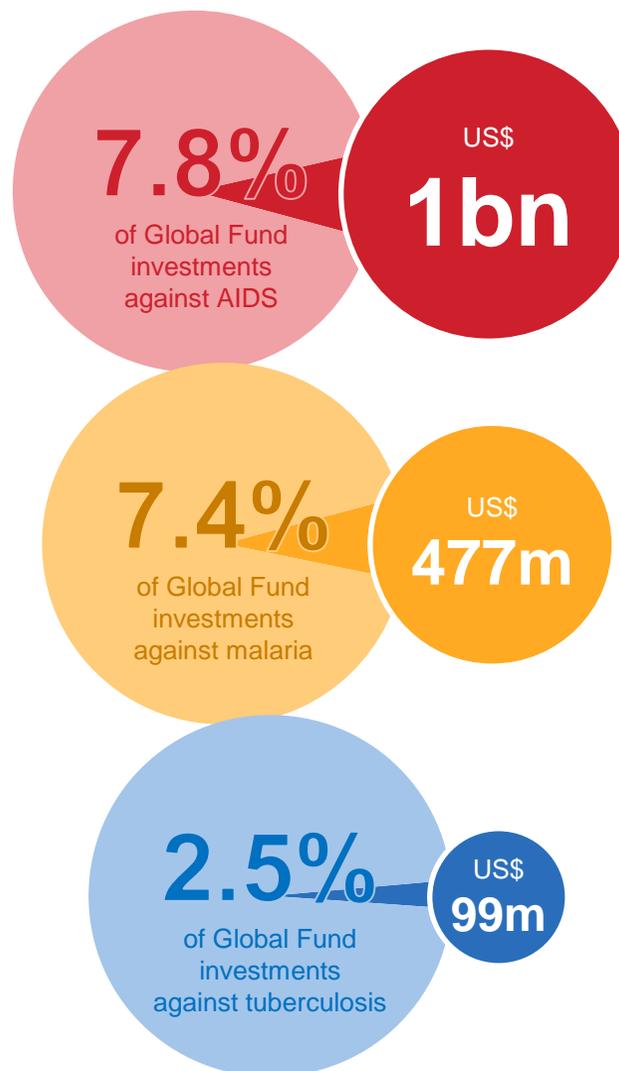
Ethiopia has been a grant recipient since the creation of the Global Fund in 2002. As at November 2014, **Ethiopia has received over US\$1.6 billion in grants** (over US\$1.0 billion in AIDS grants, US\$477 million in malaria grants, US\$99 million in tuberculosis grants, and US\$16 million in Health Systems Strengthening grants). This represents 6.5% of the US\$24.8 billion disbursed so far by the Global Fund.

For the current allocation period (2014-2016), **Ethiopia has been allocated a total amount of US\$591 million** (US\$377 million allocated to AIDS, US\$150 million allocated to malaria, US\$59 million allocated to tuberculosis, and US\$4 million allocated to Health Systems Strengthening).

### An impact commensurate with the large investment

Global Fund investments in Ethiopia have contributed to strong results across all three diseases, with over 310,000 people on antiretroviral therapy for AIDS, 42 million bednets distributed to protect children and families from malaria, and over 385,000 people tested and treated for tuberculosis.

N.B. This report lists Global Fund results in the fight against the three diseases in Ethiopia as at July 2014.



# Background <sup>2/5</sup>

## A proposed approach in support of the national strategy

### National strategy

Ethiopia is a federal state with extensive devolution of power from the central government to eleven regional entities. The Health Sector Development Plan approach is the health sector wide strategic plan that presents one plan for both public and private care providers, and Health Development Partners. Ethiopia is currently implementing HSDP IV, the fourth stage of its plan.

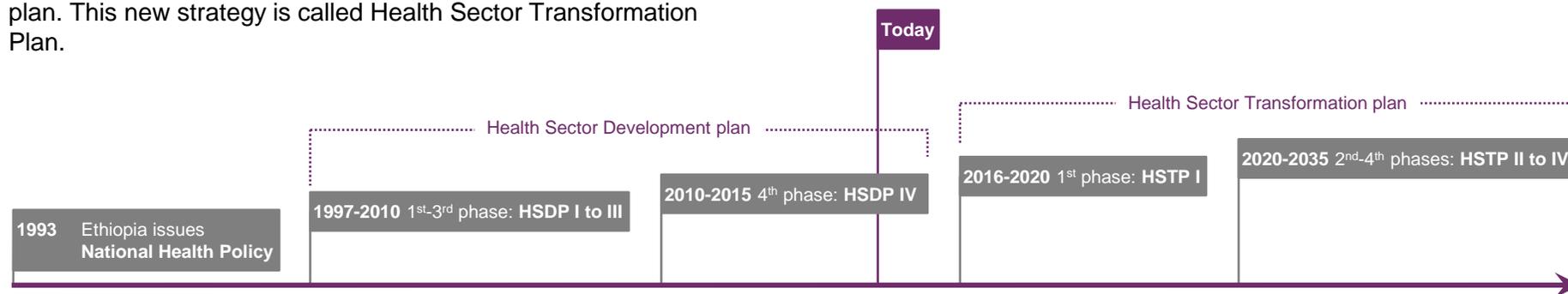
Under the previous plan (HSDP III), the Federal Ministry of Health and health development partners jointly established the MDG Performance Fund (MDG-PF) with a Joint Financing Arrangement, that enables the Federal Ministry of Health to access and make use of pooled funds.

As it prepares for the next phase, the country will move to a new 20-year strategy, expanding on the Health Sector Development plan. This new strategy is called Health Sector Transformation Plan.

### Global Fund strategy

Due to its demonstrated program success, the Secretariat is considering to adopt **National Strategy Financing (NSF)**, a results-based financing model, in Ethiopia.

NSF is a result-based model, a performance contract which emphasizes outcomes and impacts as part of the wider national strategic plan. It aims to have complete alignment with national systems and allows the flexible use of grant funds within pre-agreed parameters.



### National strategic plans in the Ethiopian health sector

Timeline from 1993 to 2035

# Background <sup>3/5</sup>

## Key elements of the proposal: outline

### **Moving the entire portfolio to results-based financing**

For this review, the OIG considered a Secretariat briefing note dated 22 July 2014. This note supports moving the malaria component to results-based financing, and then following suit with other grants up for renewal in 2015 and 2016. Under this plan, the entire Ethiopia portfolio will have moved to results-based financing by the end of 2016.

### **Risk assessment**

In their proposal, the Secretariat rates a number of areas as high risk under the Qualitative Risk Assessment, Action Planning and Tracking Tool (QUART) for the malaria grant, including the following, classified as red or “high risk”:

- Inadequate Monitoring and Evaluation and Poor Data Quality;
- Theft or Diversion of Non-Financial;
- Poor Financial Reporting;
- Treatment Disruption;
- Substandard Quality of Health Product;
- Inadequate Principal Recipient Reporting and Compliance.

These weaknesses are primarily attributed to inadequate quality and completeness of reporting, or weak underlying systems to monitor compliance at all levels of health care service delivery.

### **Reallocation to Health Systems Strengthening**

The proposal also adds US\$50 million to the US\$4 million included in the 2014-2016 allocation for Health System Strengthening, by re-allocating part of the HIV (\$US43 million) and malaria (\$US7 million) components. This re-allocation represents almost fifteen times the initial Global Fund allocation for Health Systems Strengthening.

### **A proposed vehicle: the MDG performance fund**

The proposal seeks to channel funds through the Millennium Development Goals Performance Fund (MDG-PF), a \$US676 million multi-donor pooled funding mechanism managed by the Ministry of Health which currently concentrates 15% of the \$US4,610 million committed to HSDP. Currently, eleven donors fund the MDG-PF, which is underpinned by a “one budget, one plan, one report principle”.

# Background <sup>4/5</sup>

## Key elements of the proposal: implementation arrangements

### Performance framework

The proposal aims to achieve near zero malaria deaths in Ethiopia by 2020. Whilst the proposal is to measure a number of lower-level output indicators measuring long-lasting insecticidal nets and indoor residual spraying coverage, the broader goal will be measured based on eight indicators: four measuring impact and four measuring outcome.

Five out of six output indicators are measured based on administrative records from the national program, while the final output indicator is measured based on a nationally representative household survey: the Malaria Indicator Survey.

The impact and outcome indicators come from multiple sources including:

1. HMIS, which is the national health data system;
2. PHEM, which is an emergency reporting mechanism maintained by an entity outside the Ministry of Health;
3. Periodic household surveys, such as the Malaria Indicator Survey, scheduled to take place in 2017.

### Principles for disbursement

Disbursement is structured as follows:

- Total available funding for annual disbursements represents 95% of the overall envelope:
  - annual disbursements are tied to a review of disbursement-linked indicators;
  - first year: advanced funding of 100% of annual allocation;
  - second and third year: performance-based adjustment;
  - in the event of a catastrophic performance, floor funding for continuity of essential services.
- At the end of the program, 5% of overall funding remains available to reward multi-year program review looking at overall program performance during the grant lifecycle.

# Background <sup>5/5</sup>

## Key elements of the proposal: assurance

### Programmatic results

Proposed methods of independently verifying results are multi-layered, combining existing assurance complemented with Global Fund specific assurances. The existing assurances are:

- use of SARA, a tool designed to assess and monitor the service availability and readiness of health facilities, with a data quality review on an annual basis;
- balanced score cards developed by the Federal Ministry of Health to measure coverage performance, utilization indicators and compliance, which are already in use to report to other donors in and outside of the MDG Performance Fund;
- joint reviews by the MDG Performance Fund on a bi-annual basis to compare program reported results with partner data;
- annual consolidated HSDP performance report including evaluation from the MDG Performance Fund;
- mid-term review of HSDP including MDG Performance Fund;

The Global Fund specific assurances, designed to complement the above, are:

- Local Fund Agent-led On Site Data Verification (OSDV) for indicators not covered under SARA combined with a review on quality of services;
- Data Quality Audits reviewing suspected fraudulent reporting.

### Financial reporting

Proposed methods for reporting on fund use are also multi-layered:

- a quarterly financial and activity report from the Principal Recipient detailing budget and expenditure detailed by activity, as well as bank statements and transactions, planned and achieved procurement and distribution, and cash flow forecast;
- further MDG Performance Fund reporting, including reports from joint review missions as needed to serve as independent monitoring mechanism.

The proposal includes a Global Fund specific review of procurement of commodities for Global Fund supported program.

### Audit

Annual internal and external audits are also used as a source of assurance. These are:

- internal audits from the Principal Recipient;
- external financial audits of the Principal Recipient and performance audits conducted by the External Auditor;
- procurement audits from the procurement authority.

# Scope and methodology

## Assessing the proposal to adopt a National Strategy Financing model in Ethiopia

The OIG was invited by the Secretariat to perform a pre-implementation review of the proposal for piloting the National Strategy Financing model in Ethiopia. The OIG agreed to add this item to its 2014 Audit Plan given the proposal to move US\$426 million in grants, one of the largest country portfolios, to a set of new and untested grant management modalities.

The OIG assessed the proposal, and looked at the rigor and robustness of processes in place at the Global Fund Secretariat. This was complemented with a review of a number of previous assessments, including internal reports from the Ministry and external reports from donors. OIG also took part in meetings to discuss the findings with in country partners and the Principal Recipients.

The OIG focused on answering **three key questions** relating to the decision to pilot the **National Strategy Financing** model:

- 1 Did the Global Fund Secretariat perform sufficient due diligence prior to choosing Ethiopia as a pilot for National Strategy Financing?
- 2 Is the Ethiopian environment of internal controls ready to sustain a National Strategy Financing proposal?
- 3 Has the Secretariat proposed an appropriate assurance framework for Ethiopia to ensure its strategic objectives are met?

With respect to the internal controls environment, the OIG reviewed its adequacy in three areas of grant management, namely:

- ✓ **Data collection, monitoring and evaluation**
- ✓ **Financial management of Global Fund grants**
- ✓ **Procurement and Supply Chain**

For each of these areas, the OIG **assessed the design** of the system, i.e. whether elements were missing in the system, and whether the controls and assurances over grant funds in a National Strategy Financing context were placed at the right level.

### Scope limitation

The scope of this pre-assessment review focused on the adequacy of the systems in place. The OIG did not perform an in-depth review of the effectiveness of the systems.

The observations in this review relate to the proposal when the OIG was invited to opine. Any subsequent refinements have not been assessed in this report.

Unlike other OIG audit reports, this review took place before the implementation of a Secretariat proposal. As a result, the OIG did not assign a rating to the management processes being considered.

# Executive summary

## Did the Global Fund Secretariat perform sufficient due diligence prior to choosing Ethiopia as a pilot for National Strategy Financing?

The proposal for piloting the National Strategy Financing model measures, but doesn't sufficiently incentivize impact and strengthening of national systems. Therefore, the rationale used to justify the adoption of a results-based financing model is not in line with the current design of the grant.

Thorough due diligence was not performed by the Secretariat for the proposed National Strategy Financing grants. Consequently, critical known risks have not been properly mitigated.

Root cause: the Secretariat currently has no mechanism for formally developing and approving new modalities of grant management.

**Management action:** The Secretariat has agreed to assess the validity of pursuing National Strategy Financing on a case by case basis (see details, page 15) ; and to adopt a mechanism for developing and approving alternative grant management modalities (see details, page 16).

## Is the Ethiopian environment of internal controls ready to sustain a National Strategy Financing proposal?

Ethiopia is investing in building and maturing its national oversight mechanisms, which were still being constructed at the time of this review.

Currently, the checks over key financial, programmatic and health products data remain at an early stage in their development, and a review culture in the health sector remains a longer term aspiration.

The Country Coordinating Mechanism decision to reallocate close to \$US50 million to Health Systems Strengthening is sound. This should be used to mitigate key systems risks identified by the Secretariat.

**Management action:** The Secretariat has agreed to adopt a phased approach to address systems weaknesses (see details, page 17).

## Has the Secretariat proposed an appropriate assurance framework for Ethiopia to ensure its strategic objectives are met?

Despite the stated intention to rely on a "one-plan, one-budget and one-report" approach, the proposed assurances have been designed in isolation, are fragmented and lack coordination.

Moreover, financing arrangements are not aligned between donor partners in terms of timelines and structure.

The Secretariat should consider having a long term plan to rely fully on national systems and phase out reliance on parallel systems.

**Management action:** The Secretariat has agreed to develop an assurance plan, in conjunction with development partners (see details, page 18).

# Findings <sup>1/5</sup>

## Did the Global Fund Secretariat perform sufficient due diligence prior to choosing Ethiopia as a pilot for National Strategy Financing?

### Assessing the viability of the model against its stated goals

The Secretariat's proposal does not sufficiently incentivize impact any more than the current model: it is focused more on reporting impact data via surveys and reducing the administrative burden, rather than creating incentives to build national systems that produce reliable results and drive impact.

The work performed to date has not fully identified or assessed the actual and potential risks in the Ethiopian health sector. The model proposed by the Secretariat neither corrects nor provides incentives to correct known weaknesses, and does not link disbursements to improvements in systems.

This approach is not in line with the National Strategy Financing model where donors pool their funds in support of a costed national strategy, and relies mainly on existing national mechanisms. It does not set milestones for systems improvements, or minimum standards for reliance on national systems.

### Assessing the proposed disbursement model

The proposed disbursement approach does not represent a fundamental difference with the current annual performance-based disbursement which is triggered by a single grant rating.

Under the proposed approach, the country will receive advance funding for the first year of implementation, with performance-tied disbursements for subsequent years based on indicators. None of those indicators relate to strengthening the procurement, supply and financial management capacities of the Ethiopian Health System.

### Assessing the due diligence performed by the Secretariat

At the time of the audit, the Secretariat had not performed an independent comprehensive assessment on the robustness of internal controls of the national systems to be relied upon for National Strategy Financing before deciding on the model to be applied.

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# Findings <sup>2/5</sup>

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Analysis by the Global Fund Secretariat to date has relied on past reviews, with limited coordination with other donors on the scope of the reviews or the follow-up of mitigating actions.

Although the Secretariat has documented part of the processes related to financial management, procurement and data collection, the controls and assurances over those processes were neither documented, nor scrutinized for robustness by the Global Fund Secretariat.

## **Assessing the identification and mitigation of known risks**

As when OIG assessed the rigor and robustness of processes in place at the Global Fund Secretariat for piloting a new results-based financing model in Rwanda (Audit of Global Fund grants to Rwanda, GF-OIG-14-023, December 2014), the rationale used for selecting Ethiopia to pilot the model is the country's demonstrated program success and capacity for innovation.

## **Assessing the modalities to approve new modalities**

Reflecting on both the Rwanda and Ethiopian National Strategy Financing pilots, the OIG notes that the Secretariat currently has no mechanism for formally developing and approving new modalities of grant management.

Both pilots show that there has been no examination of the risks inherent to adopting alternative ways of doing business. The type and level of assurance required to ensure that the strategic objectives will be met have not been systematically formulated.

# Findings <sup>3/5</sup>

## Is the Ethiopian environment of internal controls ready to sustain a National Strategy Financing proposal?

### Assessing the readiness of oversight structures

National Strategy Financing is reliant on strong oversight from national institutions; while previous reviews by the OIG, the Local Fund Agent or partners did not identify cases of corruption, many institutions require strengthening or are still being built. For example:

- The External Auditor, Audit Service Corporation which is appointed by the Auditor General of Ethiopia, is being strengthened and its quality improvement plans are still being constructed. Work is underway to speed up the delivery of its audits.
- Despite the launch of ambitious projects, such as the Health Extension program, which reaches out to populations in need, or creating fulltime Health Information Technician positions, the supervisory structures of the health systems are still at an early stage of maturity. For example, a major health facility building program remains underway, and the recruitment and training of Health Information Technicians is in progress.
- There are no consequences for not following up on recognized issues, some of which remain outstanding and without time-lines. Issues are not pursued to ensure that improvements are embedded. There is no mechanism to draw lessons from existing assessments and to be applied to the overall universe to mitigate similar risks.

### Assessing the controls over impact and outcome data

Ethiopia has demonstrated a capacity to deliver results, by achieving MDG 4, making progress on MDG 5 and 6, and reducing morbidity and mortality across the three diseases. However, attention to the quality of health information could feature more prominently in the Ministry of Health's strategic plan for human resources:

- The Ministry does have a scorecard tracking the performance of health facilities and administrative offices, however, none of the performance indicators in these scorecards relate to data quality.
- At an individual level, health workers are not appraised on the quality of the data they report.

These factors have contributed to a Health Management Information System (HMIS) which lacks robust mechanisms to identify and correct known weaknesses to ensure quality and timely data. For example: while the Federal Ministry of Health conducts verifications on a sample basis, supervisory controls at the facility level are insufficient in coverage, and data collected is not independently verified before reporting; key management information is not sought or used to identify trends or manage performance at the central level; duties are inadequately segregated as Health Information Technicians have to manage both data reporting and staff training.

# Findings 4/5

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## Assessing the controls over procurement

The United Nations Office for Project Services (UNOPS), which is the Local Fund Agent for Ethiopia, conducted a procurement review in 2013. The review highlighted that PFSA, the government's procurement and drugs distribution agent which receives 78% of grant funds, has adequate capacity to procure pharmaceuticals and health products, complies with the Global Fund quality assurance policy and conducts procurement in a fair and transparent manner.

However, no formal capacity or financial assessment of PFSA has been conducted so far.

The Local Fund Agent acts as a procurement agent for the Ministry of Health for MDG-PF. As the Global Fund Secretariat did not consider this a conflict of interest, there was no plan to mitigate the inherent real or perceived conflict of interest.

The mechanisms to review stock data quality and reconciliation between stock levels, stock cards, requisitions and health data at facility level are inadequate.

## Assessing the controls over financial management

This review found a host of improvements in financial management, such as the establishment of a Grant Management unit within the Federal Ministry of Health, based on an OIG recommendation (2011). One of the key roles of this unit is to ensure that funds are spent in accordance with the approved budget and plan.

However, there is a lack of controls around the financial processes at all levels of the federal system. For example:

- supporting documents are not mandated for expenditure reported up from health facilities ;
- there are minimal checks on spending by supervisory staff; and
- grant recipients delay the settlement of advances and commitments.

While an integrated accounting system is piloted at the federal level, financial systems are not fully integrated: grant recipients use two separate accounting systems (donor funding and government-funded programs), which creates the risk of duplicate payments and is unsustainable.

# Findings <sup>5/5</sup>

## Has the Secretariat proposed an appropriate assurance framework for Ethiopia to ensure its strategic objectives are met?

### Assessing the proposed assurance framework

The proposed framework does not provide assurance that the Global Fund strategy in Ethiopia will be successful:

- proposed assurances are overly complex, multi-layered, largely uncoordinated;
- many proposed assurances are either a self-assessment by the Federal Ministry of Health or validated by weak oversight mechanisms, and they fail to mitigate areas of known risks;
- while the stated ambition is to rely on national systems, the Secretariat does not propose to test the system of internal controls which produces the results;
- in terms of Global Fund specific assurance, the coverage of data validation tools is not tailored to the size of the country or its population, and is not sufficiently representative to determine whether program objectives are being achieved at all levels.

### Assessing the combined assurance with donors

The proposed model is not in line with the “one budget, one plan, one report” principle, in particular:

- The coordination for a combined assurance framework over the MDG-PF can be improved. At the time of the audit, the Secretariat has not engaged with donors in the MDG-PF to establish a shared identification of risks and risk mitigation measures. The Secretariat has not assessed the overlaps or gaps between the Local Fund Agent, External Auditors and other assurance providers;
- Supplementary verifications required under the proposed Global Fund approach add a further unsustainable administrative layer to the MDG-PF reporting requirements.

The above lack of alignment is partly due to MDG-PF donors developing individual and sometimes diverging approaches on commitment duration, structure of financing (grant or credit), and the performance framework.

# Agreed management action 1

## To assess the validity of pursuing National Strategy Financing

With immediate effect, the Secretariat will assess the validity of pursuing National Strategy Financing on a case-by-case basis; this justification will be approved by the Executive Grant Management Committee or equivalent before grant signing and should include as a minimum:

1. A full articulation of the rationale used to determine that a particular country is suitable.
2. A description of the system of internal controls in place, including critical controls, weaknesses and vulnerabilities.
3. Evidence that the system of internal controls has been independently and thoroughly tested and that there is a remedial action plan in place to address key weaknesses.

Owner: Head of Grant Management  
Target date: 30 June 2015

This agreed action is already tracked under a previous report "Audit of Global Fund Grants to Rwanda", GF-OIG-14-023, December 2014.

## Agreed management action 2

A mechanism for developing and approving alternative grant management modalities

The Secretariat should adopt an appropriate mechanism for developing and approving alternative grant management modalities.

This development of alternative grant modalities should be placed under the oversight of an appropriate executive-level forum, which should include the Executive Director, head of Grant Management, the Chief Finance Officer, the Chief Risk Officer and the Legal Advisor.

This forum should review proposals for alternative grant management modalities.

Owner: Head of Grant Management  
Target date: 30 September 2015

# Agreed management action 3

## To adopt a phased approach to address systems weaknesses

In the event the Secretariat decides to go ahead with National Strategy Financing or another results-based modality in Ethiopia, it should adopt a phased approach to address systems weaknesses, which should be split into shorter term and longer term objectives as follows:

1. A short term strategy to strengthen the internal control environment over national systems, within the timeframe of the grant lifecycle, which should include at a minimum:
  - a. A full articulation of the risk mitigation measures proposed to address known risks inherent to the internal control environment over national systems in Ethiopia;
  - b. Targeted performance goals to support the delivery of strengthened internal control environment over national systems.
2. A longer term strategy, possibly going beyond the grant lifecycle, towards full reliance on national systems which would include at a minimum:
  - a. A phased approach including set milestones to increasingly rely on the internal control environment over national systems.
  - b. An implementation plan for phasing out reliance on parallel systems.

Owner: Head of Grant Management  
Target date: 31 December 2015

## Agreed management action 4

To develop an assurance plan, combined with development partners

In the event the Secretariat decides to go ahead with National Strategy Financing or another results-based modality in Ethiopia, it will develop an assurance plan to ensure that the strategic objectives will be met.

This plan will be combined with development partners involved in the MDP Performance Fund.

In particular, the assurance plan will ensure that the systems that manage grant funds within MDG Performance Fund, and at the Principal Recipients, are and remain, robust.

Owner: Head of Grant Management  
Target date: 31 December 2015

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