11 February 2021

**Implementation Readiness Assessment**

All grants are expected to be ‘implementation-ready’ at the implementation period (IP) start date. Implementation readiness is critical to ensure (i) timely implementation of grant activities; (ii) continuity of grants across implementation periods, and (iii) high absorption of funds in the first year of implementation.

This assessment serves to determine the grant’s level of implementation readiness at the IP start date, identify any possible bottlenecks and propose mitigating measures and what actions, if any, the Principal Recipient (PR) needs to complete to achieve full implementation readiness.

As per the [OPN on Make, Approve and Sign Grants](https://www.theglobalfund.org/media/3266/core_operationalpolicy_manual_en.pdf), PRs are expected to implement grant activities immediately from the IP start date and are therefore required to have the following in place:

1. Contracts signed with all PR human resources;
2. Contracts signed with all Sub-recipients (SRs);
3. Contracts signed with suppliers of health products and critical services[[1]](#footnote-2); and
4. An agreed implementation work plan for year one of the implementation period *(see Annex 1 of this assessment)*

This assessment is performed by LFAs as early as possible after grant signing in **High Impact and Core portfolios only** and completed within three months of the IP start date.

LFAs are requested to complete one assessment per grant, first in Word using the below template and to submit it to the Global Fund Country Team for review and approval. Once finalized and agreed with the Country Team, the LFA is requested to replicate the agreed and approved version in the MS Forms report template and submit it to the Global Fund.

# Section 1: Grant Information - *Please complete a separate assessment for each grant*

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| **GRANT INFORMATION** | |
| **Country** |  |
| **Principal Recipient** |  |
| **Grant name** |  |
| **Date of submission of assessment to GF Country Team:** |  |

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| 1. **PR Human Resources Identification and Contracting**   On the IP start date, the PR management / staffing structure is defined, and PR staff directly supporting grant implementation has been selected with defined ToRs and the contracts signed. For continuing PRs, a competitive re-selection process may not be required by the Global Fund[[2]](#footnote-3) and ToRs can be updated and contracts extended for well-performing staff.  (For more details, refer to paragraph 34(i) of the [*OPN on Make, Approve and Sign Grants*](https://www.theglobalfund.org/media/3266/core_operationalpolicy_manual_en.pdf)). | |
| Implementation Readiness Requirements | Current Status |
| * 1. Has the grant / PR management structure been defined and approved by the PR? | Select |
| Fully defined & approved |  |
| Fully defined & not approved |
| Partly defined |
| Not defined |
| n/a |
| * 1. **Continuing PRs**: Has the grant / PR management structure changed for the new implementation period? | Select |
| Yes |  |
| No |
| n/a |
| *If any changes, briefly explain here* |
| * 1. Is the management structure adequate for managing the Global Fund grant? | Select |
| Fully adequate |  |
| Mostly adequate |
| Somewhat inadequate |
| Inadequate |
| n/a |
| * 1. Have all PR staff directly supporting grant implementation been selected with defined ToRs? | Select |
| 100% selected |  |
| 75%-99% selected |
| 50%-74% selected |
| Less than 50% selected |
| Not yet started |
| n/a |
| * 1. Has the PR signed contracts with all PR staff directly supporting grant implementation? | Select |
| 100% signed |  |
| 75%-99% signed |
| 50%-74% signed |
| Less than 50% signed |
| Not yet started |
| * n/a |
| * 1. **Continuing PRs with Existing Staff:** Has the PR re-hired and contracted well-performing staff who were supporting grant implementation in the previous implementation period? | Select |
| 100% contracted |  |
| 75%-99% contracted |
| 50%-74% contracted |
| Less than 50% contracted |
| Not yet started |
| n/a |
| * 1. Do you have any concerns related to any of the selected PR staff and/or how they were selected? | Select |
| Yes, major concerns |  |
| Yes, some concerns |
| * No concerns |
| *If concerns, please briefly explain here* |
| Briefly describe the identified key issues/bottlenecks with PR Human Resource contracting and proposed actions and timelines to address them. | | |

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| Summary of key outstanding issues with PR Human Resource contracting | Proposed management actions | Timeline for completion | Actor responsible for completion |
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| 1. **Sub-recipient Identification and Contracting**   On the IP start date, and based on the defined implementation arrangements, the PR has selected the SRs with approved ToRs and contracts (to be signed immediately after the grant has been approved by the Global Fund Board). The Global Fund may not require competitive re-selection of existing, well-performing SR(s) if there is no change in the programmatic areas of work in the new implementation period[[3]](#footnote-4).  (For more details, refer to paragraph 34(ii) of the [*OPN on Make, Approve and Sign Grants*](https://www.theglobalfund.org/media/3266/core_operationalpolicy_manual_en.pdf)). | |
| Implementation Readiness Requirements | Current Status |
| 2.1 Have ToRs of SR(s) been defined and approved by the PR? | Select |
| Defined & approved |  |
| Defined, but not approved |
| Some defined |
| * None defined |
| 2.2 Have all SR(s) been selected by the PR? | Select |
| 100% selected |  |
| 75%-99% selected |
| 50%-74% selected |
| Less than 50% selected |
| Not yet started |
| n/a |
| 2.3 Has the PR signed contracts with all SR(s)? | Select |
| 100% signed |  |
| 75%-99% signed |
| 50%-74% signed |
| Less than 50% signed |
| Not yet started |
| * n/a |
| 2.4 Do you have any concerns related to any of the selected SRs and/or how they were selected? | Select |
| Yes, major concerns |  |
| Yes, some concerns |
| No concerns |
| * n/a |
| *If* ***concerns****, please briefly explain here* |
| 2.5 Does the PR have a defined approach/plan for SR oversight and performance management*?* | Select |
| Fully defined |  |
| Mostly defined |
| Somewhat defined |
| Not defined |
| * n/a |
| *If* ***fully defined****, please comment below on its adequacy to effectively manage SR implementation performance.*  *If* ***not fully defined****, please comment on the PR’s plans/timelines to develop a SR management approach.* |
| 2.6 How many SRs are continuing SRs? |  |
| 2.7 How many SRs are new SRs? |  |
| Briefly describe the identified key issues/bottlenecks with Sub-recipient contracting and proposed actions and timelines to address them. | |

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| Summary of key outstanding issues with Sub-recipient contracting | Proposed management actions | Timeline for completion | Actor responsible for completion |
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| 1. **Suppliers for health products and critical services Identification and Contracting**   For grants requiring procurement of core health products and critical services[[4]](#footnote-5) for the first year of implementation, the PR has initiated the procurement process on the IP start date in line with the quantities and timelines in the Health Product Management Template and associated procurement / supply plan (For more details, refer to paragraph 34(iii) of the [*OPN on Make, Approve and Sign Grants*](https://www.theglobalfund.org/media/3266/core_operationalpolicy_manual_en.pdf)). | |
| Implementation Readiness Requirements | Current Status |
| **3.1 How does the PR plan to procure core health products and critical services?** | Select |
| * Planning to use PPM / Wambo |  |
| * Planning to use PPM / Wambo, as well as its own procurement channel |
| * Not planning to use PPM / Wambo, only its own procurement channel |
| * n/a - Not planning to procure core health products and critical services |
| *If the PR is planning to use PPM / Wambo please complete 3.2*  *If the PR is planning to use own procurement channel, please complete section 3.3*  *If the PR is planning to use a combination of PPM / Wambo and their own procurement channel, please respond to both sections 3.2 and 3.3.*  *If the PR is not planning to procure core health products, please skip questions 3.2 – 3.3.* |  |
| **3.2 For PRs procuring through PPM / Wambo:** |  |
| 3.2.1 Has the PR’s PPM / Wambo registration been submitted? | Select |
| * PPM / Wambo registration completed / already registered |  |
| * PPM / Wambo registration in progress |
| * PPM / Wambo registration not submitted |
| *If* ***not completed registration****, please indicate what these services or products are and when they need to be in place* |
| 3.2.2 What is the status of the PR’s PPM / Wambo Purchase Requisition? | Select |
| * Submitted & approved |  |
| * Expected to be submitted & approved on time |  |
| * Expected to be submitted & approved late |  |
| * n/a |  |
| **3.3 For PRs procuring through their own procurement channel:** | |
| 3.3.1 Has the procurement process for selecting qualified suppliers been initiated? | Select |
| * Yes |  |
| * No |
| * n/a |
| *If* ***no****, please highlight any expected delays or bottlenecks and the mitigation measures**to address them (e.g. Are direct appointment processes available?)* |
| 3.3.2 Have procurement contracts been signed or are these expected to be signed on time with selected suppliers to ensure timely delivery? | Select |
| Selection and contracts are fully signed |  |
| Selection is fully initiated, and contracts expected to be signed on time |
| Selection is fully initiated, however contracts expected to be signed late |
| * Selection not initiated |
| *If* ***none or few suppliers signed****, please highlight below any expected delays or bottlenecks and mitigation measures to address them (e.g. Are template contracts available to be used?).* |

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| Briefly describe the identified key issues/bottlenecks with Supplier contracting and proposed actions and timelines to address them. | | | |
| Summary of key outstanding issues with Supplier contracting | Proposed management actions | Timeline for completion | Actor responsible for completion |
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| 1. **Agreed Implementation work plan for year one**   On the IP start date, an agreed implementation work plan for the first year of implementation is available, which includes the planned activities, timelines and assigned responsibilities to deliver the agreed targets in the Performance Framework and in line with the Detailed Budget.  (For more details, refer to paragraph 34(iv) of the [*OPN on Make, Approve and Sign Grants*](https://www.theglobalfund.org/media/3266/core_operationalpolicy_manual_en.pdf)). | | |
| Implementation Readiness Requirements | Current status | |
| * 1. Has the PR developed and finalized the implementation work plan for year one of the grant? | Select | |
| Fully finalized |  | |
| Mostly finalized |
| Somewhat developed |
| * Not developed |
| *If* ***not fully finalized****, highlight any delays or bottlenecks and the mitigation measures**to address them here* |
| * 1. Has the PR developed the work plan in consultation with key stakeholders and incorporated relevant feedback? | Select | |
| Workplan consulted with all key stakeholders, and feedback incorporated |  | |
| Workplan consulted with some key stakeholders, and feedback partly incorporated |
| Workplan consulted, but feedback not incorporated |
| Not consulted |
| * 1. For key activities, is the work plan aligned with signed grant documents (Performance Framework, Detailed Budget, Health Product Management Template (HPMT))? | Select | |
| Fully aligned |  | |
| Mostly aligned |
| Somewhat aligned |
| Not aligned |
| * 1. For key activities, are the roles, responsibilities and timelines clearly defined in the work plan? | Select | |
| Fully defined |  | |
| Mostly defined |
| Somewhat defined |
| Not defined |
| * 1. Are key activities prioritized for the achievement of the grant’s objectives? | Select | |
| Fully prioritized |  | |
| Mostly prioritized |
| Somewhat prioritized |
| Not prioritized |
| * 1. Are key activities mapped out in the work plan with an adequate chronology of key steps to lead to the timely implementation of the activities? | Select | |
| * Fully mapped |  | |
| * Mostly mapped |
| * Somewhat mapped |
| * Not mapped |
| * 1. For key activities, are critical path / dependencies clearly documented in the work plan with adequate buffers? | Select | |
| * Fully documented |  | |
| * Mostly documented |
| * Somewhat documented |
| * Not documented |
| * 1. For key activities, does the work plan reflect a consideration of risks and potential bottlenecks to implementation? | Select | |
| * Fully considered |  | |
| * Mostly considered |
| * Somewhat considered |
| * Not considered |
| * 1. Considering the capacity of the PR/key implementers and the wider country context, how likely is it that the work plan will be implemented as planned? | Select | |
| * Highly likely |  | |
| * Likely |
| * Unlikely |
| * Highly unlikely |
| *If your answer is ‘unlikely’ or ‘highly unlikely’ please ensure to briefly state, the key reasons and proposed actions in the table below* |
| Briefly describe the identified key issues with the Implementation work plan and proposed actions and timelines to address them. | |

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| Summary of key outstanding issues with the Implementation work plan | Proposed management actions | Timeline for completion | Actor responsible for completion |
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| **5. Other Issues**  Are there other issues that prevent the PR from being implementation-ready but are not part of the core implementation readiness requirements. | |
| Other Issues | Current Status |
| 5.1 Are there any issues that prevent the PR (and/or SR) from being implementation ready, such as legal requirements, bank account arrangements, funds flow and disbursement arrangements (e.g. devolution to states or provinces, impact of elections and government budgetary allocation processes)? | Select |
| * Yes |  |
| * No |
| * n/a |
| *If* ***yes****, please indicate the process and timeline, and any impact on grant implementation here* |
| 5.2 Are insurance arrangements in place to cover PR and SR program assets from the IP start date? | Select |
| * Yes |  |
| * Partial |
| * No |
| * n/a |
| *If* ***no or partial****, please briefly explain below the process and timeline, and any impact on grant implementation.* |
| 5.3 Are there any issues that delay or prevent obtaining any necessary licenses, approvals or authorizations related to grant implementation (e.g. relating to HARM reduction or Key Population programs, sanctions regimes or geographical restrictions)? | Select |
| * Yes |  |
| * No |
| * n/a |
| *If* ***yes****, please briefly describe below the process and timeline, and any impact on grant implementation.* |
| 5.4 Are there any other issues/risks delaying the start of grant implementation? | Select |
| * Yes |  |
| * No |
| *If* ***yes****, please briefly explain and propose below any mitigating actions and timelines.* |
| 5.5 Did the PR do anything else that enabled implementation readiness or was there anything that could have been done / done differently to ensure implementation readiness? | Select |
| * Yes |
| * No |
| *If* ***yes****, please briefly explain here* |
| 5.6 Based on the available information, are there any key areas for which implementation has not yet started? *[Start of implementation means that the service is being delivered (by PR or SRs).]* | Select |
| *If* ***yes****, please briefly explain here* | |

# Section 3: Status of achievement of implementation readiness

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| **Overall Implementation Readiness Status** | Based on the assessment, the grant is:  Implementation-ready – no outstanding issues / actions to be completed  Implementation-ready – only minor outstanding issues / actions to be completed  Not implementation-ready - major outstanding issues / actions to be completed |
| If the grant is not implementation ready, please tick one or more root causes from the list below:  Insufficient time to sign contracts  Lack of planning and/or coordination with stakeholders  Extensive in-country processes  PR capacity  Lack of defined policies and/or processes  Other root cause(s) (please describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Annex 1. Implementation work plan standard good practices**

The Global Fund does not have a prescribed template for the implementation work plan but expects PRs to develop work plans aligned with standard good practices:

1. The PR develops the work plan in consultation with key stakeholders and incorporates relevant feedback.
2. For key activities, the work plan is aligned with signed grant documents (Performance Framework, budget, Health Product Management Template (HPMT).
3. Key activities are prioritized for the achievement of the grant’s objectives.
4. Key activities are mapped out in the work plan with an adequate chronology of key steps to lead to the timely implementation of the activities.
5. For key activities, critical path / dependencies are clearly documented in the work plan with adequate buffers.
6. For key activities, the work plan reflects a consideration of risks and potential bottlenecks to implementation.
7. Considering the wider country context and capacities of key implementation stakeholders, the work plan is feasible and likely to be implemented as planned.

1. Such as warehousing or distribution services that need to be in place without a break in contract. [↑](#footnote-ref-2)
2. 2 The Country Team encourages the PR to (i) review its applicable contracts for any restrictions, conditions or other requirements applying to the selection or hiring of staff, and (ii) seek independent professional advice, if the PR has any queries relating to these matters. [↑](#footnote-ref-3)
3. The Global Fund encourages the PR to: (i) review its applicable contracts for any restrictions, conditions or other requirements applying to the appointment of SRs; and (ii) seek independent professional advice, if the PR has any queries relating to these matters. [↑](#footnote-ref-4)
4. Such as warehousing or distribution services that need to be in place without a break in contract. [↑](#footnote-ref-5)