



**The
Pandemic
Fund**
FOR A RESILIENT WORLD

THE PANDEMIC FUND STAGE-2 APPLICATION QUESTIONNAIRE: STANDARDS AND RELATED CRITERIA ASSESSMENT

8 January 2024



THE PANDEMIC FUND: STAGE-2 APPLICANT QUESTIONNAIRE

1. Thank you for your interest in becoming an **Implementing Entity (IE)** and implementing projects funded by the **Financial Intermediary Fund (FIF) for Pandemic Prevention, Preparedness and Response (PPR)**, henceforth referred to as **the Pandemic Fund**. The Pandemic Fund finances critical investments to strengthen pandemic prevention, preparedness, and response capacities at national, regional, and global levels, with a focus on low- and middle-income countries.

The Pandemic Fund follows a two-stage accreditation process for applicants to become an IE. Please find herewith the **instruction** to complete the questionnaire Stage 2 for each **Standard** and the related **Criteria**. This application is based on the **Accreditation Framework**¹ which should be consulted by the applicants throughout the completion of this application. Please complete this **Stage-2 Application** to enable the **Accreditation Panel** (henceforth referred to as **the Panel**) to assess your organization's skills, capacity, expertise, and track-record to effectively support the Pandemic Fund objectives.

2. The application requires four parts of information for each Standard and Safeguard:
 - a) Specific documents of your organization related to **policies, procedures, practices (PPP)** and examples of your working files as requested;
 - b) **Descriptions** of your organization's PPP arrangements;
 - c) **Your self-assessment** as to whether your organization meets the related Criteria; and
 - d) **Corrective plans** for areas where your organization does not fully meet a Standard, Safeguard or Criteria:
 - Each plan should include: the scope of work, who will be in charge and a due date when the Standard, Safeguard or Criteria is expected to be met and communicated to the Panel
 - Plans are expected to be completed before a recommendation for accreditation is made. According to Paragraph 32 of the Accreditation Framework any open action plan at that time would be an exception.²
3. Please ensure that all the information and documents mentioned under each Standard are submitted as outlined in the questionnaire and:
 - a) That they are relevant to the Standard and related Criteria;
 - b) That they are clearly numbered and labelled for each Criterion;
 - c) Whenever a submitted document (or public web site) contains a requested description in a succinct manner, then a reference link to the document and the pages within the document can be provided in lieu of the requested description; and
 - d) The PPPs submitted are current and approved and that examples of your activities are recent.

¹ See the Pandemic Fund's accreditation Framework for Implementing Entities. [IE-Accreditation-Framework-Approved.pdf](#)

² Section 32 of the Accreditation Framework states: "an applicant that does not fully meet one or a few Standards, Criteria or Safeguards, but where there is no significant risk to the Pandemic Fund, may on an exceptional basis commit to an action plan designed to correct the deficiency in a timely manner and report semi-annually to the Panel on the progress made on corrective action".

If a specific Standard or Criterion is met, based on the results of a review by another FIF or by a multilateral or reputable organization, then please provide documented evidence that:

- a) The **third-party review** covered the specific Standards or Criteria to the same level of detail as required by this questionnaire;
- b) That the **outcome** of the third-party provided satisfactory conformance conclusions on the specific Standards or Criteria listed in this questionnaire; and
- c) That the third-party **conclusion** reflects your organization's current situation.

4. The five areas on which the application is focused for the Stage-2 review are as follows:

- a) **Legal status and authority**
- b) **Fiduciary Standards:** a) Financial Management; b) Accounting Systems and External Audit; c) Strategic vision, planning and budgeting; d) Internal Audit; e) Internal Control Framework
- c) **Fraud and corruption:** a) Integrity; b) Investigative capacity
- d) **Project and program management:** a) Identification, review, and approval; b) Execution, including risk monitoring and reporting; c) Procurement; d) Closure and evaluation;
- e) **Environmental, Social and Governance Safeguards (ESG):** a) Management system, b) Stakeholder engagement including civil society; c) Grievance mechanism.

5	Organization information	Details
Information required.		
	Organization official name	
	Headquarters address	
	Website reference	
	Executive focal point – name, email, phone number	
	Daily focal point – name, email, phone number	
	Policies, Procedures, Practices focal point – name, email, phone number	
	Project/program focal point – name, email, phone number	
	Environmental, Social, and Governance (ESG) focal point – name, email, phonenumber	
	Legal counsel focal point - name, email, phonenumber	
	Copy of/or www link to Organization Chart	
	Copy of/or relevant specific Program Organization Chart	
	ESG Organization Chart	
Applicant’s additional information:		

Applicant questionnaire Stage-2 - Legal Standard and Criteria

6	Standard 6 – Legal Status and Authority
Standard: An applicant has legal status and can contract with and become an IE for the Pandemic Fund.	
6.1	<p>Documents required for this Standard and related Criteria:</p> <p><i>Note: Much of the information for this Standard can be copied from your Stage-1 application and please highlight any changes.</i></p> <ul style="list-style-type: none"> - Establishment document including, where applicable, the registration number and date of incorporation or establishment. - Evidence that you currently are a registered legal entity in the country where your headquarters are located such as governance documents (e.g., articles of incorporation, constitution, bylaws). - Relevant international operating licenses, permits, or certifications (if applicable). - Legal authority and registration to operate in the various jurisdictions where you plan to act as an IE. - Evidence of registration in any other countries where you plan to operate as an IE. <p>Applicant's response:</p>
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
6.2	<p>Legal authority to become an IE for the Pandemic Fund.</p> <p>Please describe your organization's:</p> <p>6.2.1 Governing documents (e.g., articles of incorporation, constitution, bylaws) that grant you the authority to enter into agreements and contracts, and to act as an IE for the Pandemic Fund.</p> <p>6.2.2 Relevant sections of the governing documents that establish your legal authority to become an IE for the Pandemic Fund.</p> <p>Applicant's response:</p>
6.3	<p>Legal authority and capacity to receive and disburse funds.</p> <p>Please describe your organization's:</p> <p>6.3.1 Legal capacity to receive funds from external sources, including international entities. Explain any restrictions or regulations your organization must comply with.</p> <p>6.3.2 Your organization's ability to receive and manage funds, including any legal restrictions or regulations your organization must comply with.</p> <p>Applicant's response:</p>
6.4	<p>Legal authority and power to enter into contracts or agreements.</p> <p>Please describe your organization's:</p> <p>6.4.1 Process to legally enter into contracts or agreements including specific restrictions or limitations on your contractual authority, if any, and how addressed.</p> <p>Applicant's response:</p>
6.5	<p>Legal authority to operate internationally where required.</p> <p>Please describe your organization's:</p> <p>6.5.1 Legal authority to operate internationally if required for implementing programmes and projects.</p> <p>6.5.2 Relevant international operating licenses, permits, or certifications (if applicable).</p> <p>Applicant's response:</p>

6 Standard 6 – Legal Status and Authority	
6.6	Legal authority to work in all jurisdictions where it intends to act as an IE.
	<p>Please describe your organization’s:</p> <p>6.6.1 Jurisdictions or countries where you intend to act as an Implementing Entity for the Pandemic Fund.</p> <p>6.6.2 Legal authority to operate in each of these jurisdictions.</p>
	Applicant’s response:
6.7	Please provide:
	6.7.1 Any additional information or practices your organization employs to demonstrate alignment with the Criteria of this Standard relating to legal status and authority.
	Applicant’s response:

Self-assessment Table for Standard 6 - Legal Status and Authority					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant’s response.)
6. Legal Status and Authority	Yes/no	Your review assessment? Yes/no		Yes/no	Yes/no
6.2 To be Implementing Entity					
6.3 Receive/disburse funds					
6.4 Enter contract & agreements					
6.5 Operate internationally					
6.6 Legal authority - jurisdictions					
Applicant’s comments:					

6	Describe your corrective plans related to Legal Status and Authority — (Include scope, who has responsibility and completion date).
6a. First action plan (if needed):	
6b. Second & other action plans (if needed):	

Applicant questionnaire Stage-2 - Fiduciary Standards and Criteria

7	Standard 7 – Financial Management
Standard: An applicant has robust financial policies and procedures, accounting systems, and financial management practices.	
7.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Financial policies, procedures and control manual(s). - Annual audited financial statements for last two years. - Comments from the external auditor on the effectiveness of financial policies, procedures, and controls over financial reporting for last two years. - Examples of periodic financial management reporting on the budgets and variances. - Evidence of cashflow management. - Financial manual for programs and projects (requested under Standard 16). - Manual of the budget system or detailed description thereof. - Annual budgets for the prior and current fiscal year. - The most recent external credit rating of your organization (if available). - Organization chart of your financial management team. <p>Applicant's response:</p>
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
7.2	<p>Approved appropriate financial policies, procedures, and controls over financial reporting.</p> <p>Please describe your organization's:</p> <p>7.2.1 Financial policies, procedures and controls over financial reporting, highlight who approved them and when. Please include details on: a) Annual financial reporting, and b) Monthly or periodic reporting.</p> <p>7.2.2 Practice relating to the periodic reviewing and updating of financial policies and procedures to ensure their continued relevance and effectiveness.</p> <p>7.2.3 Internal oversight in place covering financial management, financial reporting, and assurance activities over the three lines of defense.</p> <p>7.2.4 Role of the external auditor in assessing the effectiveness of financial policies, procedures and controls over financial reporting.</p> <p>Applicant's response:</p>
7.3	<p>Accurate and regular recording of transactions, including systems for cash management and production of budgets.</p> <p>Please describe your organization's:</p> <p>7.3.1 Key features and controls of your system for recording transactions and cash flows. Explain how these systems enable effective cash management.</p> <p>7.3.2 Key controls in place to ensure accuracy and reliability in financial reporting.</p> <p>7.3.3 Processes for producing, approving, monitoring and revising the annual budget.</p> <p>Applicant's response:</p>
7.4	<p>Robust and reliable accounting and reporting systems are integrated with other financial management systems to facilitate reconciliation with budget and expenditure information.</p> <p>Please describe your organization's:</p> <p>7.4.1 Accounting and reporting system, including: Emphasizing its integration with other financial management systems such as management accounting, budgeting formulation, execution and monitoring, and programme and budget accounting.</p> <p>7.4.2 Enterprise Resource Planning (ERP), IT or other computer systems used for your accounting and reporting.</p> <p>7.4.3 Linkage between your accounting and reporting system and your project accounting system.</p>

7	Standard 7 – Financial Management
	Applicant’s response:
7.5	The necessary level of financial and accounting detail to effectively monitor expenditure, including variance analyses.
	<p>Please describe your organization’s:</p> <p>7.5.1 Level of financial and accounting detail that is used to monitor expenditures effectively, including variance analyses.</p>
	Applicant’s response:
7.6	Comprehensive and timely management reporting.
	<p>Please describe your organization’s:</p> <p>7.6.1 Key management reporting. Methods to share these reports with relevant stakeholders in a timely manner.</p>
	Applicant’s response:
7.7	Adequate banking arrangements.
	<p>Please describe your organization’s:</p> <p>7.7.1 Banking arrangements and relationships with financial institutions or other sources</p> <p>7.7.2 Existing credit facilities and use thereof.</p> <p>7.7.3 Banking controls that are in place, including the segregation of duties, and account opening and closing authorities, that ensure authorized, secure, and transparent banking transactions.</p>
	Applicant’s response:
7.8	Evidence that it has an acceptable credit risk rating.
	<p>Please describe:</p> <p>7.8.1 Evidence of an acceptable credit risk rating from a recognized credit rating agency, if available. If you do not have a credit rating, explain how your organization manages credit risks and ensure financial stability.</p>
	Applicant’s response:
7.9	Please Provide:
	7.9.1 Any additional information or practices your organization employs to demonstrate alignment with the Criteria of this Standard relating to financial management.
	Applicant’s response:

Self-assessment Table for Standard 7 - Financial Management					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
7. Financial Management	Yes/no	Your review assessment? Yes/no		Yes/no	
7.2 Financial PPPs & controls					
7.3 Accurate recording & budgeting					
7.4 Reporting systems					
7.5 Variance analyses					
7.6 Management reporting					
7.7 Banking arrangements					
7.8 Credit risk rating					
Applicant's comments:					

7	Describe your corrective plans related to Financial Management — (Include scope, who has responsibility and completion date).
7a. First action plan (if needed):	
7b. Second & other action plans (if needed):	

8	Standard 8 – Accounting Systems and External Audit
Standard: An applicant produces annual audited financial statements.	
8.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Two most recent annual financial statements including external auditor’s reports. - The web reference to the accounting Standards used (translation not required). - The web reference to the auditing Standards used (translation not required). - External auditor’s observations and management letters issued in the last two years. - Management responses to the external audit’s observations and management letters. - Reports to demonstrate that the external auditor’s observations are addressed in a timely manner. - Management reports that keep its Governing Body informed about the external audit’s observations and management letters and how the deficiencies raised are rectified. - Other external observations and management letters from oversight bodies such as banking oversight or accreditation bodies issued in the last two years. - Management responses to the external oversight bodies observations and management letters. - Reports to demonstrate that the external oversight bodies’ observations are addressed. - Management reports that keep its Governing Body informed about the external oversight bodies’ observations and management letters and how the deficiencies raised are rectified.
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
8.2	<p>Annual financial statements that are prepared according to standards that are consistent with those issued by the International Federation of Accountants (IFAC) or, where relevant, according to clearly stated accounting standards.</p> <p>Please describe your organization’s:</p> <p>8.2.1 Standards that are used to prepare your organization’s annual financial statements and how they align with the IFAC Standards. If the Standards are not consistent with the IFAC Standards, then provide the rationale for using different Standards and highlight the main differences between your Standards and the IFAC Standards.</p> <p>Applicant’s response:</p>
8.3	<p>An independent external auditor audits the annual financial statements according to International Auditing Standards such as those issued by IFAC.</p> <p>8.3.1 Confirm that your annual financial statements are audited by an independent external auditor. Explain if they are not audited in a timely manner.</p> <p>8.3.2 Provide the name and contact information of your external auditor.</p> <p>Applicant’s response:</p>
8.4	<p>Management responds promptly to all the observations of the external auditor and rectifies control deficiencies noted by the external auditor.</p> <p>Please describe your organization’s:</p> <p>8.4.1 Process for addressing observations made by the external auditor.</p> <p>8.4.2 System to ensure that responses to external auditor's observations are prompt and effective and how your management and your governance body are kept informed thereon.</p> <p>Applicant’s response:</p>
8.5	<p>Management responds promptly to all the observations from external regulators and oversight bodies.</p> <p>System in relation to external regulators and oversight bodies:</p> <p>8.5.1 Specify which external regulators and oversight bodies your organization is subject to (e.g., medical, pharmaceutical, financial).</p> <p>8.5.2 Explain your organization's process for addressing observations made by the external oversight bodies.</p> <p>8.5.3 Describe how your organization ensures that responses to external oversight bodies’ observations are prompt.</p>

8 Standard 8 – Accounting Systems and External Audit	
	8.5.4 Detail how both your Governing Body and management are kept informed about the responses and actions taken on the observations of external oversight bodies.
	Applicant's response:
8.6	8.6.1 Any additional information or practices your organization employs to demonstrate alignment with the Criteria of this Standard relating to accounting systems and external audit.
	Applicant's response:

Self-assessment Table for Standard 8, Accounting Systems and External Audit					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
8. Accounting Systems and External Audit	Yes/no	Your review assessment? Yes/no		Yes/no	
8.2 Financial Statements standards					
8.3 Annual External Audit					
8.4 Addressing audit observations					
8.5 Addressing regulators obs.					
Applicant's comments:					

8	Describe your corrective plans related to Accounting Systems and External Audit —(Include scope, who has responsibility and completion date).
8a. First action plan (if needed):	
8b. Second & other action plans (if needed):	

9	Standard 9 – Strategic Vision, Planning, and Budgeting
Standard: An applicant produces and updates its strategic vision reflected in its long- and short-term planning and budgeting.	
9.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Current and previously approved strategic vision (plan). - Current and previously Governing Body-approved long- and short-range plans. - Current and previous period’s Governing Body-approved budget. - Latest and previous report tracking the strategic plan. - Latest and previous report tracking the long- and short-range plans. - Latest and previous report tracking the budget. - Summary of the focus on Pandemic Prevention Preparedness and Response for each of the above documents.
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
9.2	<p>A strategic vision that is approved by its governing body/board and which is periodically updated.</p> <p>Please describe your organization’s:</p> <p>9.2.1 Procedures to develop and periodically update its strategic vision (plan) that outlines your long-term goals and objectives.</p> <p>9.2.2 Approval process and authority of your strategic vision.</p> <p>9.2.3 The main direction and components of your strategic vision.</p> <p>Applicant’s response:</p>
9.3	<p>The vision should include a reference to core domains of the International Health Regulations (IHR,2005), possibly including the Joint Evaluation Tool (JEE), and the World Organisation for Animal Health (WOAH) International Standards.</p> <p>Please describe:</p> <p>9.3.1 The extent to which your organization’s approved strategic vision includes references to core domains of the IHR including the JEE and the WOAH International Standards. If such references are missing, then please explain the reason for their absence.</p> <p>Applicant’s response:</p>
9.4	<p>Approved long-and short-term plans that reflect its strategic vision.</p> <p>Please describe your organization’s:</p> <p>9.4.1 Procedures to develop and periodically update its long- and short-term plans.</p> <p>9.4.2 Alignment of its long-and short-term plans with its strategic vision.</p> <p>9.4.3 Approval process and authority of your long- and short-term plans.</p> <p>9.4.4 The main direction of your long- and short-term plans over the last few years.</p> <p>Applicant’s response:</p>
9.5	<p>Approved periodic budgets that are aligned with its strategic vision and its long- and short-term plans.</p> <p>Please describe your organization’s:</p> <p>9.5.1 Procedures to develop and periodically update its periodic budget.</p> <p>9.5.2 Way to ensure that your budgets adequately support the implementation of your strategic vision & plans.</p> <p>9.5.3 Alignment of its budget to the strategic vision and the long-and short-term plans.</p> <p>9.5.4 Approval process and authority of your budget.</p> <p>9.5.5 Way to modify the ongoing budget.</p> <p>9.5.6 Ways and means to ensure compliance with budgetary allocations and analyses of budgetary variances to monitor and prevent overspending.</p> <p>9.5.7 Handling of modifications to ongoing budgets.</p> <p>9.5.8 The main direction of your budget over the last few years.</p> <p>Applicant’s response:</p>

9 Standard 9 – Strategic Vision, Planning, and Budgeting	
9.6	<p>Systems and processes that monitor and report on progress towards the achievement of the entity's strategic vision, its long-and short-term plans, and analyses of variances from its periodic budgets.</p> <p>Please describe your organization's</p> <p>9.6.1 Systems and processes in place to monitor progress toward achieving your strategic vision & plans, incl.:</p> <ul style="list-style-type: none"> - Tracking and measuring progress; and - Explanation of the key performance indicators (KPIs) or metrics in use. <p>9.6.2 Your mechanisms to analyze and report on variances from your periodic budgets, including:</p> <ul style="list-style-type: none"> - Details, and periodicity of budget to actual reporting; - The variance analysis done in these reports; - how variances are managed and addressed; and - Examples of management review and corrective action based on these reports. <p>9.6.3 The reporting on the progress and achievements relating to the strategy and the long- and short-term plans, including:</p> <ul style="list-style-type: none"> - The frequency of reporting; and - How your Governing Body and senior management deal with the reporting and initiate corrective actions. <p>Applicant's response:</p>
9.7	<p>Please provide:</p> <p>9.7.1 Any additional information or practices your organization employs to demonstrate alignment with the Criteria of this Standard relating to strategic vision, planning and budgeting.</p> <p>Applicant's response:</p>

Self-assessment Table for Standard 9 - Strategic Vision, Planning and Budgeting					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
9. Strategic Vision, Planning & Budgeting	Yes/no	Your review assessment? Yes/no		Yes/no	
9.2 Approved strategic vision					
9.3 Strategic vision for IHR, etc.					
9.4 Short- & long-term plans					
9.5 Budgeting & approval					
9.6 Monitoring and evaluation of strategy & plans					
Applicant's comments:					

9	Describe your corrective plans related to Strategic Vision, Planning and Budgeting —(Include scope, who has responsibility and completion date).
9a. First action plan (if needed):	
9b. Second & other action plans (if needed):	

10	Standard 10 – Internal Audit
Standard: An applicant has an effective and independent internal audit function.	
10.1	<p>Documents required for this Standard and related Criteria: A copy of your internal audit function's:</p> <ul style="list-style-type: none"> - Standards that are being followed, - Charter that shows administrative and functional reporting lines to the Governing Body and management. - Two last annual reports of the internal audit function. - The two most recent approved annual internal audit plans. - Recent status on the execution of the internal audit plan and approved budgets for the function. - Recent status of management's implementation of internal audit recommendations. - List of audit reports issued in last two years. - Copies of recent internal audit reports dealing with project or program implementation or execution, project or program procurement, an aspect of information technology and an aspect relating to administration (other internal audit reports may be requested later). - Copy of the latest self-assessment against internal auditing Standards, as well as the latest external quality assessment report - A copy of your audit committee's; a) charter or terms of reference and b) minutes of last two meetings dealing with the internal audit function. <p>Applicant's response:</p>
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
10.2	<p>There is an independent internal audit function that operates in accordance with international internal audit standards (such as those issued by the Institute of Internal Auditors, Inc.).</p> <p>Please describe your organization's:</p> <ul style="list-style-type: none"> 10.2.1 Internal audit function, including the number of its staff and its reporting lines within the organization. 10.2.2 Internal audit standards that the internal audit function must follow. 10.2.3 Internal audit charter and who approved it. 10.2.4 Internal audit's role and responsibility vis-à-vis fraud and corruption and the investigations thereof. 10.2.5 Ability for the internal audit function to maintain its independence from management and operational activities. 10.2.6 Oversight provided to the Internal audit function by your Governing Body. <p>Applicant's response:</p>
10.3	<p>Internal auditing executes its activities according to a periodic plan that considers all significant risks of the entity.</p> <p>Please describe:</p> <ul style="list-style-type: none"> 10.3.1 The process by which internal audit formulates its periodic plan. 10.3.2 How the internal audit plan incorporates all significant risks of the organization. 10.3.3 The extent to which projects and programs are subject to the internal audit reviews (including projects and programs that are being executed by third parties). 10.3.4 How the internal audit plan is approved and whether the resources are sufficient. 10.3.5 How your senior management and the Governing Body ensure the internal audit plan is executed as planned. <p>Applicant's response:</p>
10.4	<p>Management takes timely corrective actions based on the internal audit reports</p> <p>Please describe:</p> <ul style="list-style-type: none"> 10.4.1 How internal audit monitors and reports on the implementation status of its recommendations. 10.4.2 How senior management ensures that all audit recommendations are addressed in a timely manner. <p>Applicant's response:</p>
10.5	<p>The effectiveness of the internal audit function is assured through an audit committee, and an external quality review done at least every five years.</p>

10 Standard 10 – Internal Audit	
	<p>Please describe:</p> <p>10.5.1 The audit committee in terms of composition, responsibilities and frequency of its meetings</p> <p>10.5.2 The role of the audit committee to approve the internal audit plan, and the related financial resources, review the execution of the plan, deal with significant internal audit reports and monitor the effectiveness by which senior management deals with the internal audit recommendations.</p> <p>10.5.3 The findings of the most recent external quality review of the internal audit function and how its findings are utilized to enhance the internal audit function</p> <p>Applicant’s response:</p>
10.6	<p>Please provide:</p> <p>10.6.1 Any additional information or practices your organization employs to ensure an effective and independent internal audit function in alignment with the Criteria of this Standard.</p> <p>Applicant’s response:</p>

Self-assessment Table for Standard 10 - Internal Audit					
Standard/Safeguard	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in response.)
10 Internal Audit	Yes/no	Your review assessment? Yes/no		Yes/no	
10.2 Internal audit standards					
10.3 Internal audit planning & risk					
10.4 Corrective action					
10.5 Oversight over internal audit					
Applicant’s comments:					

10	Describe your corrective plans related to Internal Audit — (Include scope, who has responsibility and completion date).
10a. First action plan (if needed):	
10b. Second & other action plans (if needed):	

11 Standard 11 – Internal Control Framework	
Standard: An applicant has a documented internal control framework.	
11.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Your organization’s internal control policy including evidence of its approval and the framework itself. If a formal internal control framework is missing, please provide your organization’s approved documents covering the roles and responsibilities of its Governing Bodies, management, and the structure and operation of the risk, control, monitoring, assurance, and oversight functions. - A copy of your approved risk policy. - A copy of the two latest financial and operational risk reports including evidence of senior management review and action on the operational risk reports and Governing Body review thereof.
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
11.2	<p>Defined and documented the roles of its governing bodies, management, and the risk, control, monitoring, and oversight functions to manage and monitor and give credibility to the effectiveness of the entity’s internal control policies, processes and reporting.</p> <p>Please describe your organization’s:</p> <p>11.2.1 Internal control policy and framework, approved by your Governing Body, that defines the roles of the Governing Body, management, and the risk, control, monitoring, and oversight functions.</p> <p>Applicant’s response:</p>
11.3	<p>Risk policies and risk-based processes are designed to provide reasonable assurance and feedback to management regarding the achievement of financial management objectives and operational risks.</p> <p>Please describe your organization’s:</p> <p>11.3.1 Risk policies and risk-based processes in place to provide reasonable assurance and feedback to management regarding financial management objectives and operational risks.</p> <p>11.3.2 Financial and operational risk reports (including medical and research related) and a listing of the recipients of those reports.</p> <p>11.3.3 Ways that senior management and your Governing Body deals with these reports.</p> <p>Applicant’s response:</p>
11.4	<p>Adequate segregation of duties which is defined and applied through entity policies and oversight activities.</p> <p>Please describe your organization’s:</p> <p>11.4.1 Principles of segregation of duties to prevent conflicts of interest, prevent or detect errors and enhance internal controls, including how these are documented.</p> <p>11.4.2 Method to mandate and implement the first and second lines of defense in its oversight activities.</p> <p>Applicant’s response:</p>
11.5	<p>Clear disbursements and payment rules and regulations that are applied.</p> <p>Please describe your organization’s:</p> <p>11.5.1 Disbursement and payment rules and how they are applied.</p> <p>11.5.2 Main practices to ensure strong controls over disbursement and payment system.</p> <p>Applicant’s response:</p>
11.6	<p>Please provide:</p> <p>11.6.1 Any additional information or practices your organization employs to ensure an effective internal control framework in alignment with the Criteria of this Standard.</p> <p>Applicant’s response:</p>

Self-assessment Table for Standard 11 – Internal Control Framework					
Standard/Safeguard	Demonstrated through 3 rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in response.)
11. Internal Control Framework	Yes/no	Your review assessment? Yes/no		Yes/no	Yes/no
11.2 Documented roles					
11.3 Risk Management					
11.4 Segregation of duties					
11.5 Disbursement & rules					
Applicant's comments:					

11	Describe your corrective plans related to Internal Control Framework – (Include scope, who has responsibility and completion date).
11a. First action plan (if needed):	
11b. Second & other action plans (if needed):	

Applicant questionnaire Stage-2 – Fraud and Corruption Standards

12	Standard 12 – Integrity, Fraud and Corruption
<p>Standard: An applicant has zero tolerance commitment for fraud and corruption and takes timely action to investigate allegations or instances thereof.</p> <p>An applicant has a framework consisting of policies, procedures, available resources, and experience to prevent fraud and corruption, collusion, coercion, obstructive practices, financial mismanagement, conflict of interest situations, money laundering, terrorist financing, unethical practices, sexual exploitation, abuse or harassment (SEAH) related to adults as well as children, and other forms of malpractice (referred hereafter as fraud and corruption) and to deal effectively with allegations and actual instances thereof. The framework must cover preventive measures against fraud and corruption in project procurement activities. The entity takes all appropriate measures to reduce the risk of fraud and corruption in connection with the Pandemic Fund’s activities, including those done by its executing entities³.</p>	
12.1	<p>Introductory note.</p> <p>For this, and the next Standard, fraud and corruption is defined in the Standard to include the following aspects:</p> <ul style="list-style-type: none"> - fraud and corruption, - collusion, - coercion, - obstructive practices, - financial mismanagement or ineffective use of funds, - conflict of interest situations, - money laundering, - terrorist financing, - unethical practices, - sexual exploitation, abuse or harassment (SEAH) related to adults as well as children, and - other forms of malpractice which would include bribery and theft. <p><i>Note: your responses for each criterion must cover EACH of the 11 aspects or groupings where some of the elements may be combined in your organization.</i></p>
12.2	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Your organization’s policies of zero tolerance for EACH aspect or grouping of fraud and corruption. - The documented internal and public commitments emanating from your Governing Body and top management emphasizing a policy of zero tolerance for EACH aspect or grouping of fraud and corruption. - Your organization’s policies for EACH aspect or grouping of fraud and corruption. - Your procedures manual for EACH aspect or grouping of fraud and corruption. - Your organization’s reporting for the last two years to the Governing Body and senior management covering EACH aspect of fraud and corruption. - Your organization’s Code(s) of Conduct and conflict of interest guidelines. - A copy of the financial disclosure questionnaire and who is required to fill it out. - Report to your Governing Body and senior management on the results and impact of the financial disclosure questionnaire including the review findings by a legal or ethics officer or an equivalent senior officer. - Your organization’s anti-terrorism and anti-money laundering regulations, rules, policies, and procedures. - Results of investigations into allegations or breaches thereof (where applicable adjusted to maintain confidentiality). - Evidence of how your organization ensures that funding. - Evidence how money from the Pandemic Fund will not be used to finance terrorism or engage in money-laundering.

³ See the WB “Good Practice Note on Gender” for definitions of “Sexual Exploitation and Abuse” and for “Sexual Harassment”. <https://thedocs.worldbank.org/en/doc/158041571230608289-0290022019/original/GoodPracticeNoteGender.pdf>. The decisions on “prohibitive payments” taken by the United Nations (UN) Security Council under Chapter VII of the Charter of the UN related are applicable.

12	Standard 12 – Integrity, Fraud and Corruption
	<ul style="list-style-type: none"> - Reports to your Governing Body and senior management on the results and impact of the anti-terrorism and anti-money laundering policies, regulations, rules, and procedures and the results of investigations into allegations or breaches thereof (where applicable adjusted to maintain confidentiality).
	<p>Applicant’s response:</p>
<p>Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:</p>	
12.3	<p>Public and internal evidence from its Board and senior management emphasizing a policy of zero tolerance for all the aspects of fraud and corruption.</p> <p>Please describe your organization’s:</p> <ul style="list-style-type: none"> 12.3.1 Policies of zero-tolerance commitment for EACH aspect or groupings of fraud and corruption including its significance in preventing fraud and corruption. 12.3.2 Support of the zero-tolerance commitment by your Board and by senior management, for EACH aspect or grouping of fraud and corruption. 12.3.3 Communication of the tone-at-the-top for EACH aspect or grouping of fraud and corruption, both within the organization and externally. 12.3.4 Commitment to require executing entities to apply its zero-tolerance policies for EACH aspect or grouping of the fraud and corruption. <p>Applicant’s response:</p>
12.4	<p>The tone-at-the-top applies to all the entity’s operations and specifically addresses project implementing and executing activities by its staff and by external sources associated directly or indirectly with their projects.</p> <p>Please describe your organization’s:</p> <ul style="list-style-type: none"> 12.4.1 Key policies, procedures, resources, and experience to address the prevention of EACH aspect or grouping of fraud and corruption in its operations, including activities related to project and program implementation and execution and related procurement activities. 12.4.2 Please cover: How it relates to your organization’s staff. 12.4.3 Actions to enforce your policies with respect to external entities associated directly or indirectly with your projects so that the same level of care is applied. <p>Applicant’s response:</p>
12.5	<p>Preventive policies, procedures, and proactive measures to protect projects which will be funded by the Fund from various types of fraud and corruption, including illegal, corrupt, and unethical practices such as collusion, coercion, obstructive practices.</p> <p>Please describe your organization’s:</p> <ul style="list-style-type: none"> 12.5.1 Additional preventive policies, procedures, and proactive measures to protect projects which will be funded by the Fund from various types of fraud and corruption. <p>Applicant’s response:</p>
12.6	<p>A code (or codes) of conduct and conflict-of-interest guidelines that applies to all its staff, including members of its governing bodies and covers all external parties working on the Fund projects.</p> <p>Please describe your organization’s:</p> <ul style="list-style-type: none"> 12.6.1 Main elements of your code of conduct and conflict-of-interest guidelines that apply to all staff, including members of Governing Bodies, and external parties working on the Fund projects. 12.6.2 Enforcement of its code of conduct and conflict-of-interest guidelines to prevent situations that may lead to fraud and corruption. <p>Applicant’s response:</p>
12.7	<p>Financial disclosure requirements for senior staff and all staff in sensitive positions such as treasury and procurement staff.</p>

12 Standard 12 – Integrity, Fraud and Corruption	
	<p>Please describe your organization’s:</p> <p>12.7.1 Financial disclosure requirements from senior staff and individuals in fiduciary and sensitive positions, such as treasury and procurement staff, including which staff are subject to these requirements.</p> <p>12.7.2 Ways in which financial disclosure requirements contribute to prevent conflicts of interest and enhance transparency.</p> <p>12.7.3 Controls in place to ensure that: a) All financial disclosures are made on a timely basis; b) Reviewed, verified and by whom, and c) How potential or real conflicts of interest are addressed.</p> <p>Applicant’s response:</p>
12.8	<p>Preventative regulations, rules, policies and procedures are in place to ensure that funding provided by the Fund is not used to assist, or otherwise support individuals or entities associated with terrorism or money laundering.</p> <p>12.8.1 Please describe and provide evidence of how your organization ensures that funding from the Fund will not be used to finance terrorism or engage in money-laundering.</p> <p>Applicant’s response:</p>
12.9	<p>Please provide:</p> <p>12.9.1 Any additional information or practices your organization employs to ensure an effective system for receiving, investigating and reporting fraud and corruption by your organization and your executing entities that is in alignment with the integrity, fraud and corruption Criteria of this Standard.</p> <p>Applicant’s response:</p>

Self-assessment Table for Standard 12 – Integrity, Fraud and Corruption					
Standard/Criteria	Demonstrated through 3 rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant’s response.)
12. Integrity, Fraud and Corruption:	Yes/no	Your review assessment? Yes/no			Yes/no
12.3 Zero tolerance					
12.4 Tone- at-the-top					
12.5 Preventive policies & actions					
12.6 Code of conduct					
12.7 Financial disclosure of staff					
12.8 Anti-terrorism and anti-money laundering					
Applicant’s comments:					

12	Describe your corrective plans related to Integrity, Fraud and Corruption — (Include scope, who has responsibility and completion date).
12a. First action plan (if needed):	
12b. Second & other action plans (if needed):	

13	Standard 13 – Investigative Capacity for Fraud and Corruption
Standard: An applicant has an effective investigative function to prevent, tackle or investigate allegations and occurrences of any form of fraud and corruption and other malpractices in a timely manner.	
13.1	<p>Introductory note.</p> <p>13.1.1 For this, and the previous Standard, fraud and corruption is defined to include the following elements:</p> <ul style="list-style-type: none"> - fraud and corruption, - collusion, - coercion, - obstructive practices, - financial mismanagement or ineffective use of funds, - conflict of interest situations, - money laundering, - terrorist financing, - unethical practices, - sexual exploitation, abuse or harassment (SEAH) related to adults as well as children, and - other forms of malpractice which would include bribery and theft. <p>Your responses for each criterion should cover EACH of these 11 elements or groupings where some of the elements may be combined in your organization.</p>
13.2	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Information that shows the resources available to your organization to investigate wrongdoing (including resumes of staff). - Organization chart for the investigative function for EACH of the fraud and corruption elements. - Two years statistics on staff allocated to the investigation for EACH of the fraud and corruption elements. - Your whistleblower and anti-terrorist financing policies. - Your organization’s investigative policies and procedures manual. - Your organization’s policies, procedures, processes and complaint-receiving mechanisms that are in place to investigate allegations of EACH element of fraud and corruption. - Evidence of the communication of the communication of the above to internal and external staff, the public, and project stakeholders. - Current and previous year reporting to your Governance Body and senior management, Including: Evidence of review of the reports by your Governance Body and senior management. - Two years statistics on investigations covering the status (open and closed), average time to close investigations and actions taken on allegations where fraud and corruption was established. - Evidence of the communication of the above to internal and external staff, the public, and project stakeholders. - Three examples of your organization’s monitoring of anti-fraud and corruption activities by implementing entities. - Evidence that your senior management and Governing Body act in a timely way to hold individuals and organizations accountable when wrongdoing is uncovered. <p>Applicant’s response:</p>
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
13.3	<p>Policies, procedures, processes, and complaint-receiving mechanisms that are readily accessible to internal and external staff, the public, and stakeholders of projects.</p> <p>Please describe your organization’s:</p> <p>13.3.1 Policies, procedures, processes and complaint-receiving mechanisms that are in place to receive allegations for EACH element of fraud and corruption.</p> <p>13.3.2 Communication of these policies, procedures, processes, and mechanisms are disseminated and made readily accessible to internal and external staff, the public, and stakeholders of projects.</p> <p>Applicant’s response:</p>

13	Standard 13 – Investigative Capacity for Fraud and Corruption
13.4	<p>Timely action for the prevention and tackling or dealing with allegations and occurrences of any form of fraud and corruption and other malpractices including violations of the code of conduct and conflict of interest provisions.</p> <p>Please describe your organization's:</p> <p>13.4.1 Policies, procedures of your organization to address allegations and occurrences for EACH of the elements of fraud and corruption in a timely manner.</p> <p>Applicant's response:</p>
13.5	<p>Controls to ensure complaints are recorded, investigated, and regularly reported upon;</p> <p>Please describe your organization's:</p> <p>13.5.1 System for receiving, recording, investigating, and regularly reporting on all allegations, provide details about:</p> <ul style="list-style-type: none"> - How no allegation can be missed. - The system for EACH of the elements of fraud and corruption. - Reporting to the Governing Body and management. <p>Applicant's response:</p>
13.6	<p>A whistleblower protection policy that protects entity staff, contracted staff, outside contractors, and other third parties who communicate information of alleged wrongdoing or provide evidence during investigations.</p> <p>Please describe your organization's:</p> <p>13.6.1 Whistleblower protection policy, including: a) What safeguards and protection the policy provides to entity staff, contracted staff, outside contractors, and third parties who communicate information of alleged wrongdoing, or provide evidence during an investigation; b) How the whistleblower policy is communicated to entity staff, contracted staff, outside contractors, and third parties; c) The number of whistleblower complaints received in the last two years and how these were resolved.</p> <p>Applicant's response:</p>
13.7	<p>The capacity and procedures to deal with fraud, corruption and other forms of malpractice including financial mismanagement.</p> <p>Please describe your organization's:</p> <p>13.7.1 Capacity and procedures for handling investigations related to EACH element of fraud and corruption.</p> <p>13.7.2 Capacity, in terms of financial and human resources available, to effectively deal with all allegations and existing threats related to EACH element of fraud and corruption and established procedures.</p> <p>13.7.3 Extent to which procedures for investigation are established and documented.</p> <p>13.7.4 The results of any recent third-party assessment of your investigative function.</p> <p>13.7.5 For any investigations done on allegations of wrongdoing that fall outside the scope of your investigations function, please provide information about such investigations and evidence that these are properly conducted, managed, and reported to senior management and the Governing Body.</p> <p>Applicant's response:</p>
13.8	<p>Evidence of its ability and activities to conduct objective investigations relating to fraud and corruption, including the internal reporting thereof to its Governing Body and senior management.</p> <p>Please describe your organization's:</p> <p>13.8.1 Authority and capability, and activities to conduct objective investigations for EACH element of fraud and corruption.</p> <p>13.8.2 Communication of investigation outcomes to your Governing Body and senior management for EACH element of fraud and corruption.</p> <p>Applicant's response:</p>

13	Standard 13 – Investigative Capacity for Fraud and Corruption
13.9	<p>Evidence that senior management acts appropriately when allegations of wrongdoing are proven.</p> <p>Please describe your organization's:</p> <p>13.9.1 Response by senior managers to investigation outcomes and how they take appropriate action when allegations of wrongdoing are proven during investigations. Please cover EACH element of fraud and corruption.</p> <p>13.9.2 Response by senior managers to take appropriate action when an investigation points to a systematic or repetitive incidence of fraud and corruption that relates to unethical practices, sexual exploitation, abuse or harassment as well as EACH other element of fraud and corruption.</p> <p>Applicant's response:</p>
13.10	<p>The ability to oversee the investigative function of its executing entities.</p> <p>Please describe for EACH element of fraud and corruption:</p> <p>13.10.1 How your organization ensures that executing entities have the policies, procedures, experience, the means and the willingness to undertake investigations affecting projects that are financed by the Pandemic Fund or other organizations.</p> <p>13.10.2 Your organization's oversight and monitoring to ensure that all significant allegations and investigation outcomes from executing entities are communicated to your organization as an IE.</p> <p>Applicant's response:</p>
13.11	<p>The means and willingness to undertake investigations affecting projects financed by the Pandemic Fund, and to inform the Pandemic Fund Governing Board of the outcome on a timely basis (as required by paragraph 21 of the Fund's Operational Manual).</p> <p>Please describe your organization's:</p> <p>13.11.1 Any Restrictions, if any, to inform the Pandemic Fund's Governing Board of significant fraud and corruption allegations and investigation results, in a timely manner. Note: in your response include all existing or future allegations and investigations whether or not these occur within your organization, by an implementing entity or any third-party working on a project financed by the Pandemic Fund.</p> <p>Applicant's response:</p>
13.12	<p>Please Provide:</p> <p>13.12.1 Any additional information or practices your organization employs to ensure that both you and your executing entities have an effective investigative capacity for fraud and corruption that is in alignment with the Criteria of this Standard.</p> <p>Applicant's response:</p>

Self-assessment Table Standards 13 - Investigative Capacity for Fraud and Corruption.					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
13. Investigative Capacity for Fraud and Corruption	Yes/no	Your review assessment? Yes/no			Yes/no
13.3 PPP & complaint-receiving mechanisms					
13.4 Timely action					
13.5 Process controls					
13.6 Whistleblower					
13.7 Resources and capacity					
13.8 Investigation ability					
13.9 Senior management actions					
13.10 Overseeing executing entities					
13.11 The Pandemic Fund reporting					
Applicant's comments:					

13	Describe your corrective plans related to Capacity for Fraud and Corruption — (Include scope, who has responsibility and completion date).
13a. First action plan (if needed):	
13b. Second & other action plans (if needed):	

Applicant questionnaire Stage-2: Project Management Standards and Criteria Standards

	<p>Documents required and applicable for all project and program standards 14 through 18 <i>Note: these would contain the project manual which could be referred to for all projects and programs required</i></p>
	<p>Applicant's response:</p>

14 Standard 14 – Project and Program Management

Standard: An applicant has documented risk-based policies and procedures that govern all aspects of the project cycle, ensuring management oversight of executing entities, transparency, and accountability.

Please note: The word “project” applies equally to “program” where applicable.

14.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Document that communicates the eligibility criteria to potential executing entities for project funding. - Three recent examples where your organization did a due diligence review of an executing entity. - Three recent examples of approved projects to be done by an executing entity.
	<p>Applicant's response:</p>

Criteria: An applicant must be able to demonstrate that it has documented policies, procedures, and practices which:

14.2	<p>Guide the due diligence of executing entities.</p> <p>Please describe your organization's:</p> <p>14.2.1 Due diligence process for selecting and collaborating with executing entities.</p> <p>14.2.2 Include details about legal, financial, organizational capacity, and past performance assessments.</p> <p>14.2.3 Include details about alignment with Pandemic Fund's health system focus areas such as health regulations, and medical and research projects.</p>
	<p>Applicant's response:</p>

14.3	<p>Guide project identification and formulation by executing entities and approval of such projects or programs.</p> <p>Please describe your organization's:</p> <p>14.3.1 Eligibility criteria for funding projects, ensuring alignment with your organization's objectives.</p> <p>14.3.2 Role in guiding and overseeing executing entities during project identification and formulation and appraisal stages.</p> <p>14.3.3 Detailed review process of the projects for funding proposed by executing entities.</p> <p>14.3.4 Approval procedures and criteria for projects proposed by executing entities.</p>
	<p>Applicant's response:</p>

14.4	<p>Monitor the project execution including procurement and reporting done by executing entities.</p> <p>14.4.1 Covered under “Standard 16, Execution, including Monitoring and Reporting”.</p>
	<p>Applicant's response:</p>

14.5	<p>Monitor the project closure and evaluation done by executing entities.</p> <p>14.5.1 Covered under “Standard 18, Project Closure and Evaluation”.</p>
	<p>Applicant's response:</p>

14	Standard 14 – Project and Program Management
14.6	<p>Please provide:</p> <p>14.6.1 Any additional information or practices your organization employs to ensure an effective support to your implementing entities’ project and program management so that both you and your executing entities are in alignment with the Criteria of this Standard.</p>
	Applicant’s response:

Self-assessment Table for Standard 14 - Project and Program Management					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant’s response.)
14. Project and Program Management	Yes/no	Your review assessment? Yes/no		Yes/no	
14.2 Due diligence of executing entities					
14.3 Project identification & formulation					
14.4 Monitoring execution and procurement					
14.5 Monitoring closure & evaluation					
Applicant’s comments:					

14	Describe your corrective plans related to Project and Program Management — (Include scope, who has responsibility and completion date).
14a. First action plan (if needed):	
14b. Second & other action plans (if needed):	

15	Standard 15 – Project Identification, Review and Approval
Standard: An applicant has documented policies, procedures, and practices for project identification and approval processes.	
15.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Your organization’s documentation that communicates the eligibility criteria for project funding including safeguards considerations. - Three recent examples where your organization has guided the executing entity in the identification and formulation of projects. - Three recent examples where your organization has reviewed and approved projects presented by executing entities: a) that demonstrate the different characteristics contained in the criteria for this standard; b) that demonstrate coordination amongst different stakeholders and partners. - At least one should be aligned with the Pandemic Fund’s health system focus areas such as health regulations, and medical and research projects.
Applicant’s response:	
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
15.2	<p>Policies, procedures, and practices for guiding the identification and formulation of projects which include monitoring, evaluation, research and learning (MERL).</p> <p>Please describe your organization’s:</p> <p>15.2.1 Policies, procedures and practices used for guiding implementing entities in:</p> <ul style="list-style-type: none"> - Guiding the identification of projects, - Formulating of projects, including monitoring, evaluation, research, and learning (MERL), and - Identify the risks inherent in projects.
Applicant’s response:	
15.3	<p>Policies and procedures for reviewing project proposals that integrate the relevant core domains of the International Health Regulations (2005), possibly including the Joint Evaluation Tool (JEE), and the World Organisation for Animal Health (WOAH) International Standards.</p> <p>Please describe your organization’s:</p> <p>15.3.1 PPPs define for reviewing project proposals that integrate relevant core domains of the International Health Regulations (2005), including the JEE and WOAH.</p>
Applicant’s response:	
15.4	<p>Policies and procedures for reviewing project proposals that integrate legal, financial, and economic requirements, as well as environmental, social and governance safeguards.</p> <p>Please describe your organization’s:</p> <p>15.4.1 PPPs for a comprehensive review of project proposals that integrate:</p> <ul style="list-style-type: none"> - Legal, technical, financial, economic, and environmental aspects. - Environmental, social and governance safeguards. Implementation of the Social and Environmental Impact Assessment (SEIA) recommendations. - Adherence to the special aspects that align with Pandemic Fund’s health system focus areas such as health regulations, and medical and research projects. - Continuous engagement and reporting with stakeholders. - Analysis of related risks.
Applicant’s response:	
15.5	<p>Sufficient track record and experience in reviewing environmental and social studies.</p> <p>Please describe your organization’s:</p>

	<p>15.5.1 Track record and experience in reviewing environmental and social aspects related to project proposals, including: evaluating identified risks and how these will be monitored and reported upon during the execution of the project.</p> <p>Applicant's response:</p>
15.6	<p>Experience in compiling and analyzing project sustainability, project finances, budget comparisons, and timeline management.</p> <p>Please describe your organization's:</p> <p>15.6.1 Track record and experience in compiling and analyzing project sustainability, project finances, budget comparisons, and timeline management.</p> <p>Applicant's response:</p>
15.7	<p>Publicly available and transparent approval processes for projects presented by Executing Entities.</p> <p>Please describe your organization's:</p> <p>15.7.1 Approval processes for projects presented by executing entities. 15.7.2 Ways to provide transparency and public accessibility to your project approval processes.</p> <p>Applicant's response:</p>
15.8	<p>Please provide:</p> <p>15.8.1 Any additional information or practices your organization employs to ensure an effective support to your executing entities with project identification review and approval so that both you and your executing entities are in alignment with the Criteria of this Standard.</p> <p>Applicant's response:</p>

Self-assessment Table for Standard 15 - Project Identification, Review and Approval					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
15. Project identification, review, approval	Yes/no	Your review assessment? Yes/no		Yes/no	
15.2 Project formulation incl. MERL					
15.3 Integrate core domains IHR, etc					
15.4 PPP review of proposals					
15.5 Track record ESG aspects					
15.6 Track record analyzing projects					
15.7 Transparent project approval					
Applicant's comments:					

15	Describe your corrective plans related to Project Identification, Review and Approval —Include scope, who has responsibility and completion date.
15a. First action plan (if needed):	
15b. Second & other action plans (if needed):	

16 Standard 16 – Project Execution, including Monitoring and Reporting	
Standard: An applicant has documented policies, procedures, and processes and the ability to oversee, as an implementing entity, the project execution and reporting thereof.	
16.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Three files of your organization’s monitoring of recent or ongoing projects at the executing entity level. - Three examples of timely reporting of monitoring results to your Governing Body, management, and donors. - Your organization’s latest two reports on the projects-at-risk related to any aspect of a project, and evidence of senior management or governing body action thereon. - A description of best practices and outstanding impacts achieved by your organization as demonstrated by documents, impact studies, etc.
	Applicant’s response:
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
16.2	<p>Established and effective methodologies, procedures, and processes to monitor project execution and ongoing reporting from executing entities.</p> <p>Please describe your organization’s:</p> <p>16.2.1 Guidelines for executing entities describing the procedures, checks and balances and reporting that they need to follow when executing projects. The guidelines must, amongst others, cover the project execution areas listed under this standard.</p> <p>16.2.2 Policies, procedures, and processes in place for your staff to monitor: a) Effective use of project proceeds through the payments and disbursements, and b) Project execution and ongoing reporting from executing entities.</p>
	Applicant’s response:
16.3	<p>Monitoring that includes all aspects identified in the project formulation such as relevant Health Regulations and local objectives.</p> <p>Please describe your organization’s:</p> <p>16.3.1 Monitoring activities to ensure all aspects identified in the project document, including: relevant Health Regulations and local objectives are monitored during project execution.</p> <p>16.3.2 Monitoring processes to ensure that all relevant aspects of project formulation are considered during project execution.</p>
	Applicant’s response:
16.4	<p>Existing capacity and experience to monitor project execution and portfolio performance, including routinely reviewing reports from executing entities.</p> <p>Please describe your organization’s:</p> <p>16.4.1 Existing capacity and experience in monitoring project execution, including routinely reviewing reports from executing entities.</p> <p>16.4.2 Describe your monitoring goals and the percentage of your monitoring goals are met.</p> <p>16.4.3 Capacity and experience contributing to effective monitoring of your portfolio of all projects.</p>
	Applicant’s response:
16.5	<p>Monitoring considerations which must include legal, financial, economic, environmental, social, governance, and gender aspects of the projects.</p> <p>Please describe your organization’s:</p> <p>16.5.1 Monitoring of legal, financial, economic, environmental, social, governance, and gender aspects of the projects.</p>
	Applicant’s response:

16.6	<p>Established processes, such as a project-at-risk system, to flag when a project has developed problems that may interfere with the achievement of project objectives, including the sustainability thereof.</p> <p>Please describe your organization's:</p> <p>16.6.1 Established processes, such as a project-at-risk system, that timely flag projects facing problems potentially affecting project objectives and sustainability. Include:</p> <ul style="list-style-type: none"> - the emphasis given to identifying projects-at-risk during monitoring, and - the systematic reporting of projects-at-risk to senior management. <p>Applicant's response:</p>
16.7	<p>Ability and experience to address the problems of projects-at-risk, including, where appropriate, to take an executing role.</p> <p>Please describe your organization's:</p> <p>16.7.1 Success rate of your executing entities to have projects completed in time and on budget.</p> <p>16.7.2 How project-at-risk system operates and contributes to timely identification and mitigation of project issues, including:</p> <ul style="list-style-type: none"> - the initiation of mitigating actions, and - the additional monitoring of projects that are at-risk. <p>16.7.3 Ability and experience in addressing the problems of projects-at-risk.</p> <p>16.7.4 Success rate (provide statistics) to correct and mitigate deficiencies related to projects-at-risk.</p> <p>16.7.5 Role that senior management and the governing body exercise in ensuring an effective project-at-risk system.</p> <p>Applicant's response:</p>
16.8	<p>Ability to provide timely project-related documentation to its governing body, management, and donors.</p> <p>Please describe your organization's:</p> <p>16.8.1 Ability to provide timely project-related documentation to its governing body, management, and donors, including: a) Status of all projects managed as an IE; b) Specific project reports, including reporting on:</p> <ul style="list-style-type: none"> - Projects-at-risk, - Progress, financial, monitoring, safety change order etc., - Compliance with IHR and - Environmental, Social and Governance issues. <p>Applicant's response:</p>
16.9	<p>Please provide:</p> <p>16.9.1 Any additional information or practices your organization employs to ensure an effective program management support, oversight and monitoring to your executing entities so that both you and your executing entities are in alignment with the Criteria of this Standard.</p> <p>Applicant's response:</p>

Self-assessment Table for Standard 16 - Project Execution, including Risk Monitoring and Reporting					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
16. Project Execution, including Risk Monitoring and Reporting	Yes/no	Your review assessment? Yes/no			Yes/no
16.2 Monitoring project execution					
16.3 Monitor planning and health					
16.4 Ongoing monitoring capacity					
16.5 Monitoring fiduciary & ESG					
16.6 Identifying projects-at-risk					
16.7 Correcting projects-at-risk					
16.8 Project reporting to Board					
Applicant's comments:					

16	Describe your corrective plans related to Project Execution, incl. Risk Monitoring & Reporting—(Include scope, who has responsibility and completion date).
16a. First action plan (if needed):	
16b. Second & other action plans (if needed):	

17	Standard 17 - Project Procurement
<p>Standard: An applicant has a transparent and fair procurement system that safeguards against misuse and the inefficient use of funds by executing entities.</p>	
17.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Monitoring files for large procurement (which may be part of other monitoring files already submitted). - Instances where your organization addressed procurement failures by an executing entity. - Instances where your organization reviewed the executive entities' procurement dispute resolution/complaints mechanism. - Approved request for tenders and bidding documents. - Non-objection(s) granted to significant procurement or contract. - Your organization's periodic or annual reports on the procurement and contracting complaints mechanism involving or affecting execution entities.
<p>Applicant's response:</p>	
<p>Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:</p>	
<p>Documented and approved procurement policies, procedures, and processes to oversee the procurement of executing entities that:</p> <ol style="list-style-type: none"> a. Are consistent with national or international procurement practices, including those related to the PPR domain. b. Are transparent to bidders and interested parties. c. Contain safeguards to prevent conflicts of interest in the procurement process and outcomes. d. Enforce fair dispute resolution procedures. e. Contain safeguards to prevent the misuse and ineffective use of funds. 	
17.2	<p>Please describe your organization's:</p> <p>17.2.1 Procurement guidelines for executing entities including procedures, checks and balances and reporting during procurement and contracting for goods, works, and services for projects. The guidelines must include, amongst others:</p> <ul style="list-style-type: none"> - Consistency requirements with national or international procurement practices, including those related to the PPR domain. - Transparency to bidders and stakeholders. - Safeguards against conflicts of interest in the procurement process. - Enforcing fair dispute resolution procedures. - Safeguards against misuse and ineffective use of funds. - Require competition, value for money, and transparency. - Guidance on pre and post review by your organization. <p>17.2.2 Guidance for Project Procurement and Contracting Monitoring including your internal authorities and responsibilities and other aspects such as:</p> <ul style="list-style-type: none"> - How these guidelines are available to executing entities, bidders and interested parties. - How these guidelines provide guidance on procurement and contracting practices related to the Pandemic PPR domain. <p>17.2.3 Guidelines for your organization to oversee the procurement done by your executing entities covering, amongst others, the areas contained in the Guidance for Project Procurement and Contracting Monitoring above as well as your internal authorities and responsibilities and other aspects such as:</p> <ul style="list-style-type: none"> - How these guidelines are available to executing entities, bidders and interested parties. - How these guidelines provide guidance on procurement and contracting practices related to the Pandemic PPR domain.
<p>Applicant's response:</p>	

<p>Criteria: Existing capacity and experience in overseeing ongoing and expected procurements by executing entities, including:</p> <p>a. The ability to take corrective actions in case of procurement failures.</p> <p>b. The ability to address procurement complaints involving/affecting executing entities and maintain a record of taking appropriate action when this is discovered.</p>	
17.3	<p>Please describe your organization's:</p> <p>17.3.1 Ability to ensure at the start of a project (and periodically thereafter) that an executing entity has:</p> <p>a) A procurement policy which outlines the relevant methods, procedures, standards, a code of conduct and principles such as competition, value for money, transparency, and measures against fraud and corruption.</p> <p>b) Specific guidance and procedures for thresholds and approval requirements, including:</p> <ul style="list-style-type: none"> - The thresholds for different procedures such as limited tenders, open tenders etc. - The requirements for pre-approval such as a non-objection from your organization. - Methods to solicit, receive, open and evaluate bids. - Transparency of bidding outcomes to all bidders and to stakeholders. <p>c) An independent procurement dispute resolution or complaints mechanism that:</p> <ul style="list-style-type: none"> - Is known and available to all bidders and stakeholders. - Settles disputes in a timely and fair manner. <p>d) A competent procurement staff and practices, including:</p> <ul style="list-style-type: none"> - Skilled and experienced individuals familiar with the applicable legal and regulatory framework, practices within the industry and your organization's requirements. <p>e) Defined and established practices with strong procurement controls, including:</p> <ul style="list-style-type: none"> - Bid preparation, issuance, receiving and evaluation. formatting - Measures to prevent fraud, corruption and favoritism. - Ability to manage the process and conduct effective risk assessments including mitigating risk. <p>17.3.2 Capacity and experience in overseeing ongoing and expected procurements by executing entities, ensuring:</p> <ul style="list-style-type: none"> - System for fair dispute resolution procedures concerning the procurement process and outcomes. - Processes for corrective actions in case of procurement failures by executing entities. <p>17.3.3 Ability to conclude that <u>all</u> your executing entities have an effective project procurement function in place.</p> <p>17.3.4 Experience where your organization strengthened procurement systems of executing entities.</p> <p>17.3.5 Procurement dispute resolution involving or affecting executing entities, including:</p> <p>Stakeholder awareness of the complaint recording, processing and resolution mechanism related to:</p> <ul style="list-style-type: none"> - Conflict of interest and code of conduct violations. - Procedural errors. - Allegations of fraud and corruption. - Request for dispute resolution.
	<p>Applicant's response:</p>
17.4	<p>An effective project procurement function whenever the applicant expects to do project procurement activities.</p> <p>Please describe your organization's:</p> <p>17.4.1 Ability to execute a project procurement and contracting function whenever:</p> <ul style="list-style-type: none"> - Your organization considers it advisable to execute the project procurement function itself as opposed to leaving that responsibility with the executing entity. (This could be due to factors such as the lack of policies, procedures, knowledge, or experience of the executing entity or to avoid a conflict of interest).
	<p>Applicant's response:</p>
17.5	<p>Please provide:</p> <p>17.5.1 Any additional information or practices your organization employs to ensure an effective support of oversight and monitoring of project and program procurement to your executing entities so that both you and your executing entities are in alignment with the Criteria of this Standard.</p>
	<p>Applicant's response:</p>

Self-assessment Table for Standard 17 - Project Procurement					
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
17. Project Procurement	Yes/no	Your review assessment? Yes/no		Yes/no	Yes/no
17.2 PPP to oversee executing entities procurement					
17.3 Monitoring ongoing procurement					
17.4 Procurement capacity					
Applicant's comments:					

17	Describe your corrective plans related to Project Procurement — (Include scope, who has responsibility and completion date).
17a. First action plan (if needed):	
17b. Second & other action plans (if needed):	

18	Standard 18 - Project Closure and Evaluation
Standard: An applicant has monitoring policies, procedures, and processes to ensure that executing entities finalize project accounts, return unused funds to donors, and internalize lessons from the post-evaluation of the project.	
18.1	<p>Documents required for this Standard and related Criteria:</p> <ul style="list-style-type: none"> - Last two reports to senior management & the governance body giving statistics on monitoring project closure. - Three files of monitoring project closure. - Timeliness statistics on your organization’s project closures. - Your organization’s evaluation frameworks and guidelines for assessing project performance, impact, and effectiveness. <p>Applicant’s response:</p>
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
18.2	<p>Policies, procedures, processes to ensure that executing entities effectively close out projects on a timely basis.</p> <p>18.2.1 Policies, procedures, and processes that ensure that executing entities effectively finalize projects and do it promptly.</p> <p>18.2.2 Timing statistics and reporting mechanism for completed project closure by executing entities.</p> <p>Applicant’s response:</p>
18.3	<p>Sufficient existing capacity and experience to monitor project closing by executing entities.</p> <p>Please describe your organization’s:</p> <p>18.3.1 Staff resources and ability to monitor timely project closure, including verifying and signing off on:</p> <p>18.3.2 Project deliverables.</p> <p>18.3.3 Completeness of technical and other project documentation and storing these for record keeping.</p> <p>18.3.4 Closing report with lessons learned.</p> <p>18.3.5 Compliance with Social, Environmental, and Governance Safeguards.</p> <p>18.3.6 Confirming and archiving medical research studies and data.</p> <p>18.3.7 Final project accounting including the audit report thereon.</p> <p>18.3.8 Ensuring that remaining funds are returned or transferred as per project agreement.</p> <p>Applicant’s response:</p>
18.4	<p>Executes project closures on time.</p> <p>Please describe your organization’s:</p> <p>18.4.1 Timing statistics and reporting on the closing of projects completed by executing entities compared to project plans.</p> <p>Applicant’s response:</p>
18.5	<p>Experience to perform or contract for post-closing project evaluations and ensure that lessons learned do inform the entity and are considered for future projects.</p> <p>Please describe your organization’s:</p> <p>18.5.1 Evaluation framework and guidelines to assess the performance, impact, and effectiveness of projects, including:</p> <ul style="list-style-type: none"> - Achieving objectives and outcomes and how to deal with non or partially achieved objectives. - Financial performance, including budget utilization. - Impact and Results on the target beneficiaries or the intended sector. - Compliance Management with the lender's guidelines, policies. - Risk management practices. - Addressing social, environmental and governance observations and related plans. - Stakeholder engagement throughout the project lifecycle, including the involvement of local communities, government entities, civil society organizations, and other relevant stakeholders.

	<p>- Lessons learned and best practices learned for future projects.</p> <p>18.5.2 Experience to conduct or contract for post-closing project evaluation, ensuring evaluation lessons learned and integrated into future endeavors.</p> <p>Applicant's response:</p>
18.6	<p>Reports project evaluation results to its governing body and donors promptly (through practice).</p> <p>Please describe your organization's:</p> <p>18.6.1 Experience to perform or contract for post-closing project evaluations, including:</p> <ul style="list-style-type: none"> - Practices of senior management and governing body to review evaluations and management comments. - Practices for disseminating the post-evaluation studies, including management comments thereon, to stakeholders. <p>Applicant's response:</p>
18.7	<p>Please provide:</p> <p>18.7.1 Any additional information or practices your organization employs to ensure an effective and timely support to your executing entities for project closure and evaluation and ensure that both you and your executing entities are in alignment with Criteria of this Standard.</p> <p>Applicant's response:</p>

18	Self-assessment Table for Standard 18 - Project Closure and Evaluation				
Standard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated? (Describe plan in applicant's response.)
18. Project Closure and Evaluation	Yes/no	Your review assessment? Yes/no		Yes/no	
18.2 PPP to close out projects					
18.3 Monitoring capacity for closing					
18.4 Timeliness of closure					
18.5 Evaluation experience					
18.6 Distributing evaluation results					
Applicant's comments:					

18	Describe your corrective plans related to Project Closure and Evaluation — (Include scope, who has responsibility and completion date).
18a. First action plan (if needed):	
18b. Second & other action plans (if needed):	

Applicant questionnaire Stage-2: ESG Safeguard and Criteria Safeguards 19 through 22

19	Safeguard 19 – Environmental, Social and Governance
	<p>Safeguard: The entity has policies, procedures, and processes to address environmental, social and governance safeguards in its implementing activities for the Pandemic Fund projects aligned with the Pandemic Fund’s requirements. <i>Note: The Pandemic Fund requires IEs to have policies, procedures, and guidance for environmental, social and governance safeguards. Alternately, for projects financed by the Pandemic Fund, IEs can follow “The World Bank Environmental and Social Framework” (ESF¹⁵) together with the WB’s “Good Practice Note on Gender”¹⁶ and make a specific mention of that in their project proposals that they are following the WB Framework and the Good Practice Note on Gender for the project they are proposing.</i></p> <p>¹⁵ https://thedocs.worldbank.org/en/doc/837721522762050108-0290022018/original/ESFFramework.pdf ¹⁶ https://thedocs.worldbank.org/en/doc/158041571230608289-0290022019/original/GoodPracticeNoteGender.pdf</p>
19.1	<p>Documents required for this Safeguard and related Criteria:</p> <ul style="list-style-type: none"> - Policies, procedures, and guidance for Environmental, Social, and Governance (ESG) safeguards as they apply to potential projects financed by the Pandemic Fund or projects financed by the World Bank. - Documented and approved Environmental and Social Management System (ESMS) manual containing policies, procedures and guidance. - Gender policies, procedures or guidelines. - If adhering to World Bank Environmental and Social Framework (ESF), provide details approved by your governing body on how your organization implements the ESF and the Good Practice Note on Gender of the World Bank for projects financed by the Pandemic Fund. - Three examples of monitoring ESG safeguards in projects, including the: <ul style="list-style-type: none"> - Environmental and Social Assessment (ESA), Environmental and Social Commitment Plan (ESCP), monitoring reports and senior management responses thereto. - Monitoring of gender aspects including sexual exploitation and abuse and sexual harassment risks.
	<p>Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:</p>
19.2	<p>Policies, procedures, and guidance for its environmental, social and governance safeguards that are equally as robust as those contained in the ESF of the World Bank in so far as it applies to the projects of the IE financed by the Pandemic Fund; or</p> <p>An approved statement that the IE will adhere to the ESF of the World Bank in so far as it applies to the projects of the IE financed by the Pandemic Fund; or</p> <p>An approved statement that the IE will adhere to the Environmental and Social Framework of the World Bank in so far as it applies to the projects of the IE financed by the Pandemic Fund.</p> <p>Please describe your organization’s:</p> <p>19.2.1 Policies, procedures, and guidance for environmental, social, and governance safeguards as they will apply to projects financed by the Pandemic Fund.</p> <p>19.2.2 The Board’s role to oversee that the ESG safeguards are integrated into the strategy of its projects that are similar as those to be financed by the Pandemic Fund, including how resources are made available therefor and data is captured and reported upon on a project-by-project basis and on an organizational-wide basis.</p> <p>19.2.3 Capacity and experience in executing robust policies, procedures, and guidance for environmental, social, and governance safeguards during projects execution for those projects financed by the Pandemic Fund. Please cover the following:</p> <p>a) Gender considerations:</p> <ul style="list-style-type: none"> - Ensure that gender aspects are included in the Environmental and Social Assessment (ESA) and Environmental and Social Commitment Plan (ESCP) where applicable. - Consider risk related to sexual exploitation and abuse (SEA) in the project formulation. - Consider risk related to sexual harassment (SH) in the project formulation. - Consider gender aspects in each of the environmental and social standards as applicable. <p>b) Environmental and social standards (ESS), state if a specific standard is not applicable:</p> <ul style="list-style-type: none"> - Assessment and management of environmental and social risks and impacts. - Labor and working conditions. - Resource efficiency and pollution prevention.

	<ul style="list-style-type: none"> - Community, health and safety. - Land acquisitions, restrictions on land use and involuntary resettlement. - Biodiversity conservation and sustainable management of living natural resources. - Indigenous peoples. - Cultural heritage. - Financial intermediaries. - Stakeholder engagement and information disclosure. <p>19.2.4 Capacity and experience to conduct and manage an ESA and ESCP throughout their full lifecycle.</p> <p>19.2.5 Monitoring and reporting mechanisms by the executing entities for ensuring adherence to the safeguards throughout project implementation.</p>
	<p>Applicant's response:</p>
19.3	<p>Policies, systems, procedures and resources and a demonstrated capacity and experience to adhere to World Bank Standards 1, 9, and 10 or equivalent.</p> <p><i>Note: these Standards are specifically mentioned because they enable the other World Bank standards and the Good Practice Note on Gender. Thus, they ensure the other standards can be effectively adhered to:</i></p> <ul style="list-style-type: none"> a) Standard 1: Assess and manage environmental and social risks and impact. b) Standard 9: Financial intermediaries which require an IE to develop and maintain an ESMS, including a grievance mechanism; and c) Standard 10: Stakeholders engagement and information disclosure, which recognizes the importance of open and transparent engagement between the IE and project stakeholders. <p>19.3.1 Please provide the explanation related to this standard by completing the sections related to the following Safeguards:</p> <ul style="list-style-type: none"> - Environmental and Social Management System. - Stakeholders engagement. - Grievance mechanism.
	<p>Applicant's response:</p>
19.4	<p>Please provide:</p> <p>19.4.1 Any additional information or practices your organization employs to ensure an effective support for the environmental, social, and governance (ESG) challenges of your executing entities so that both you and your executing entities are in alignment with the ESG Criteria of this safeguard.</p>
	<p>Applicant's response</p>

Self-assessment Table for Safeguard 19 - Environmental, Social and Governance					
Safeguard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated?
19. ESG Safeguard	Yes/no	Your review assessment? Yes/no			Yes/no
19.2 Own ESG policies, or					
19.2 Policies & resources Std 1, 9, 10					
Applicant's comments:					

19	Describe your corrective plans related to Environmental, Social and Governance —(Include scope, who has responsibility and completion date).
19a. First action plan (if needed):	
19b. Second & other action plans (if needed):	

20	Safeguard 20 – Environmental, Social and Management System
<p>Safeguard: An applicant must have a sufficiently staffed Environmental and Social Management System (ESMS) that is effective and operational.</p>	
20.1	<p>Documents required for this Safeguard and related Criteria:</p> <ul style="list-style-type: none"> - The Environmental, Social Management System (ESMS). - Organization chart of your environmental, social management unit. - Three examples of environmental and social assessments (ESA) and environmental and social commitment plans (ESCP) where your environmental and social management unit played a key role to formulate or validate them: a) at least one example should include gender issues; b) two examples of monitoring these ESAs and the ESCPs. - Three examples of project evaluation that includes social and environmental issues. - Last two reports by your environmental and social management unit on the full portfolio.
<p>Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:</p>	
20.2	<p>An ability to assess and manage environmental and social risks and their impact, including risks to sexual exploitation, abuse and harassment.</p> <p>Please describe your organization's:</p> <p>20.2.1 Methods to measure ESG maturity, including: use periods with including</p> <ul style="list-style-type: none"> - Targets that are set and the data obtained; and - Reliability of the data to measure these targets. <p>20.2.2 Ability to assess and manage environmental, social, and gender risks, including:</p> <ul style="list-style-type: none"> - Your gender targets and the reporting and monitoring thereof; - Risks associated with sexual exploitation, abuse, and harassment; - The staff resources you have for these tasks. <p>20.2.3 Please describe your Governing body's:</p> <ul style="list-style-type: none"> - Role to provide oversight over the implementation of the ESMS on projects. <p>Applicant's response:</p>
20.3	<p>ESMS to identify, assess, manage, and monitor environmental and social risks and other risks such as those relating to gender, health, safety, and contractors, including those that impact executing entities ⁴.</p> <p>Please describe your organization's:</p> <p>20.3.1 ESMS that identifies, assesses, manages, and monitors environmental, social, and gender risks, including:</p> <ul style="list-style-type: none"> - Approved ES policy with commitments, objectives and metrics and projects requirements. - Roles and responsibilities for ESG aspects in the ESMS. - Guidelines for environmental and social assessments (ESAs) on projects. - Disclosure of ESAs to project stakeholders. - Development of an Environmental and Social Commitment Plan (ESCP). - How your organization monitors ESG maturity on projects, including: a) project targets that are set and data obtained, b) how gender targets are set for projects and the reporting and monitoring thereof, and the c) reliability of the project data to measure these project targets. - Monitoring projects to ensure that all the measures in the ESCP are implemented. Monitoring must cover activities of both executing entities and contractors. - Periodically reporting on project ES performance to management and stakeholders. - Procedures for stakeholders' engagements on ES risks. - Communications mechanisms for public inquiries and concerns. - Integration of environmental and social performance in project evaluations. - Guidance related to sexual exploitation, abuse, and harassment. <p>Applicant's response:</p>

⁴ As a good reference, see the Safeguarding policies and guidelines agreed to by 23 countries: <https://www.mfat.govt.nz/en/aid-and-development/our-approach-to-aid/preventing-sexual-exploitation-abuse-and-harassment/>

20.4	<p>Sufficient, qualified, and competent resources to operationalize the ESMS at an overall portfolio level as well as for each project being undertaken by Executing Entities.</p> <p>Please describe your organization's:</p> <p>20.4.1 Resources and capacities to operationalize the ESMS at both portfolio and project levels for projects done by executing entities. Comment on resource quality and quantity for activities like:</p> <ul style="list-style-type: none"> - Developing and updating the ESMS. - Providing guidance to executing entities including for gender targets. - Ensuring that required project ESAs are done and ESCPs are formulated. - Monitoring ESCP implementation and project ES aspects. - Stakeholders' interaction and responding to inquiries and concerns. - Integrating ES aspects into project evaluation terms of reference. - Sharing ES lessons learned with stakeholders. - Your Governing Body's role to provide oversight over the implementation of the ESMS on projects. <p>Applicant's response:</p>
20.5	<p>Sufficient managerial involvement, accountability, and independent oversight over the ESMS.</p> <p>Please describe your organization's:</p> <p>20.5.1 Managerial involvement, accountability, and independent oversight over the ESMS to ensure effective implementation and risk management, Including:</p> <ul style="list-style-type: none"> - Reporting by the environmental and social management unit. - The structure of the first and second lines of defense. - Reporting done by each line relating to the ESMS. - Recent studies done by the third line of defense. - The managerial oversight on ES issues related to projects. <p>Applicant's response:</p>
20.6	<p>Controls in place to ensure that projects with substantial environmental, social, health, safety and gender risks are subjected to environmental and social assessments that result in a realistic ESCP to mitigate the risks.</p> <p>Please describe your organization's:</p> <p>20.6.1 Controls and procedures in place to ensure projects with substantial environmental, social, health, safety, and gender risks undergo comprehensive environmental and social assessments resulting in a realistic ESCPs for effective risk mitigation. Elaborate on these controls concerning health and safety, and research projects.</p> <p>Applicant's response:</p>
20.7	<p>Appropriate policies, procedures, and processes to assess and monitor environmental, social and gender risks for its total portfolio and each stage of projects implemented through Executing Entities.</p> <p>Provide details on your organization's:</p> <p>20.7.1 Policies, procedures, and processes for assessing and monitoring environmental, social, and gender risks across the total portfolio and at each project stage involving executing entities. Include for <u>each</u> risk:</p> <ul style="list-style-type: none"> - Assessment and formulation stage of your portfolio. - Projects submitted for approval. - Projects under implementation including how projects with high ESG risks are addressed. - Projects in the closure and post-evaluation stage. <p>Applicant's response:</p>
20.8	<p>Please provide:</p> <p>20.8.1 Any additional information or practices your organization employs to effectively support your executing entities to have an effective ESMS and that you and your executing entities are in alignment with the ESMS Criteria of this Safeguard.</p> <p>Applicant's response:</p>

Self-assessment Table for Safeguard 20 - Environmental, Social Management System					
Safeguard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated?
20. ESMS Safeguard	Yes/no	Your review assessment? Yes/no			Yes/no
20.2 Ability to assess & manage					
20.3 Existence ESMS					
20.4 Adequate resources					
20.5 Management - oversight					
20.6 PPPs ensuring ES attention					
20.7 Monitoring					
Applicant's comments:					

20	Describe your corrective plans related to Environmental, Social Management System —(Include scope, who has responsibility and completion date).
20a. First action plan (if needed):	
20b. Second & other action plans (if needed):	

21	Safeguard 21 – Stakeholders Engagement
Safeguard: An applicant has policies and practices to ensure stakeholders’ engagement.	
21.1	<p>Documents required for this Safeguard and related Criteria:</p> <ul style="list-style-type: none"> - Your organization’s guidance for creating a project Stakeholder Engagement Plan (SEP). - Three examples of recent SEPs (may be contained in a project plan). - Three examples of project documentation that demonstrates the integration of stakeholders' inputs into the project plans, execution and closure. - Three examples of your organization’s capacity to record and effectively respond to environmental, social and gender concerns – cover each of these concerns.
Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:	
21.2	<p>A SEP that ensures a systematic involvement of all stakeholders throughout all stages of a project.</p> <p>Please describe your organization’s:</p> <p>21.2.1 Practices to establish a clear understanding of its stakeholders’ engagements throughout a project, incl:</p> <ul style="list-style-type: none"> - Objectives of a SEP. - Responsibilities for project communication and stakeholders’ engagement. - Identification of stakeholders including their interests, concerns, needs, expectations and potential influence on the project. - Identification and resolution of obstacles to reach stakeholders. - Details of information to be shared and methods of distribution. - Nature, timing and methods of engagement throughout the life cycle of the project lifecycle. - Documentation in your files of stakeholders’ engagements. - Restrictions, if any, to stakeholders’ engagement. <p>Applicant’s response:</p>
21.3	<p>The SEP mandates that stakeholders are adequately informed throughout the project cycle and have the means to provide timely input into each stage of the project.</p> <p>Please describe your organization’s:</p> <p>21.3.1 Guidance for the SEP to ensure that stakeholders are adequately informed throughout the project cycle and have the means to provide timely input into each stage of the project.</p> <p>Applicant’s response:</p>
21.4	<p>The capacity and experience to integrate stakeholders' inputs into the project plans and execution.</p> <p>Please describe your organization’s:</p> <p>21.4.1 Procedures and practices to integrate stakeholders' inputs into the project plans and execution.</p> <p>Applicant’s response:</p>
21.5	<p>The capacity to record and effectively respond, in a timely way, to environmental, social and gender events as they affect projects, which includes a commitment to take all practical steps to:</p> <ol style="list-style-type: none"> a) Ensure the health and safety of all workers, including subcontractors who may be put at risk by projects; b) Prioritize the needs of victim and survivor of sexual exploitation, abuse and harassment (SEAH); c) Protect children, including displaced and/or unaccompanied children affected by projects; and d) Have protection of privacy; non-discrimination and guaranteed provision of services regardless of sexual orientation, disability or ethnicity; cultural competence; combatting modern slavery; and protection of traditional knowledge. <p>Please describe your organization’s:</p> <p>21.5.1 Capacity to record and effectively respond, in a timely way, to environmental, social and gender issues as they affect projects. Cover each of these possible events and include:</p> <ul style="list-style-type: none"> - Your project standards for health and safety and SEAH and the communication thereof. - Project risk assessment relating to project health and safety, and SEAH during different stages of the

	<p>project. Incorporate stakeholders' input.</p> <ul style="list-style-type: none"> - Clarification of the full scope of possible issues that can be raised in the complaints and resolution mechanisms. - Communication of complaints and conflict resolution mechanisms to stakeholders and how to access these. - Training for project staff and stakeholders relating to health and safety, and SEAH concerns on projects. - Monitoring and record keeping of project health and safety and SEAH.
	Applicant's response:
21.6	<p>Please provide:</p> <p>21.6.1 Any additional information or practices your organization employs to ensure that you and your executing entities are in alignment with the stakeholders engagement Criteria of this Safeguard.</p>
	Applicant's response:

Self-assessment Table for Safeguard 21 - Stakeholders Engagement					
Safeguard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated?
21 ESMS Safeguard	Yes/no	Your review assessment? Yes/no			Yes/no
21.2 Stakeholders engagement					
21.3 Inform stakeholders					
21.4 Use stakeholders input					
21.5 Response capacity					
Applicant's comments:					

21	Describe your corrective plans related to Stakeholders Engagement — (Include scope, who has responsibility and completion date).
21a. First action plan (if needed):	
21b. Second & other action plans. (if needed):	

22	Safeguard 22 – Grievance Mechanism
<p>Safeguard: An applicant must have a grievance mechanism that allows complaints to be received confidentially and deals with the concerns and complaints related to projects in a timely manner that follows due process and adheres to principles of accountability and appropriate resolution. The applicant must have oversight over the grievance mechanisms of its executing entities, which must have the same elements as its own.</p>	
<p>Documents required for this Safeguard and related Criteria:</p> <ul style="list-style-type: none"> - The grievance mechanism policies and procedures and processes. - The information shared with stakeholders about the grievance mechanism. - Three examples or case studies where your grievance mechanism successfully resolved concerns or complaints related to your projects. Please describe the issues and the resolution process - Statistics for last two years that show how the grievance mechanism addressed concerns promptly and efficiently. - Organization chart for those involved with the grievance mechanism. - Resumes of the key members involved with the grievance mechanism. - Three examples of your oversight or monitoring of grievance issues at your implementing entity level. - Your reports of the last two years covering the oversight or monitoring of your executing entities. 	
<p>Criteria: An applicant must be able to demonstrate that it has the following elements and capacities in place:</p>	
22.1	<p>Formal policies, procedures and processes in place that together make for effective grievance mechanisms available to IE staff and to project stakeholders. It includes processes in place related to the prevention and detection of sexual exploitation, abuse, and harassment.</p> <p>Please describe your organization's:</p> <p>22.1.1 Policies, procedures and processes related to the grievance mechanism that collectively establish effective grievance mechanisms available to your staff & project stakeholders. Include areas related to:</p> <ul style="list-style-type: none"> - Clearly defined roles, responsibilities, and authorities regarding the operation of the grievance mechanism. - The various stages of the grievance mechanism, including: - How you ensure that the grievances made are adequately documented upon receipt and tracked throughout the resolution process. - How the different grievances are investigated. Cover the following grievances: - Environmental and social concerns. - Gender concerns. - Procurement concerns. - Prevention of sexual exploitation, abuse, and harassment. - Detection of sexual exploitation, abuse, and harassment. - Other, such as ethical misconduct, employment matters, etc. <p>Applicant's response:</p>
22.2	<p>The grievance mechanism is procedurally transparent and made known to the public using a comprehensive communications strategy that reaches stakeholders at the project level.</p> <p>Please describe your organization's:</p> <p>22.2.1 Communications strategy for the grievance mechanism, including:</p> <ul style="list-style-type: none"> - How the grievance mechanism is made known and available to the public and different types of project stakeholders. - How the mechanism's procedures are made transparent and are effective. - Details of instances where feedback from the grievance mechanism has led to improvements in your project implementation or policies. <p>Applicant's response:</p>

22.3	<p>The grievance mechanism addresses concerns promptly and efficiently in a transparent manner and is readily accessible to all project-affected parties, at no cost and without retribution.</p> <p>Please describe your organization's:</p> <p>22.3.1 Efforts to make the grievance mechanism readily accessible to all project-affected parties without fear of retribution through a whistleblower mechanism.</p> <p>22.3.2 Efforts to keep expected costs (professional and other) low for those raising a grievance.</p> <p>22.3.3 Ways to ensure that grievances are handled in a transparent manner and with discretion, objectivity, sensitivity, and responsiveness to the needs and concerns of the project-affected parties.</p> <p>22.3.4 Statistics that show how the grievance mechanism addresses concerns promptly and efficiently.</p> <p>Applicant's response:</p>
22.4	<p>Grievances are handled in a culturally appropriate manner, and investigations are discreet, objective, sensitive, and responsive to the needs and concerns of the project-affected parties.</p> <p>Please describe your organization's:</p> <p>22.4.1 Ways to ensure how grievances are handled in a transparent manner and with confidentiality, discretion, objectivity, sensitivity, and responsiveness to the needs and concerns of the project-affected parties.</p> <p>22.4.2 Designated personnel responsible for operating the grievance mechanism.</p> <p>22.4.3 Resources for operating the grievance mechanism.</p> <p>Applicant's response:</p>
22.5	<p>Policies and procedures formally define roles, responsibilities, and authorities and designate specific personnel who have the responsibility to operate the grievance mechanism.</p> <p>Please describe your organization's:</p> <p>22.5.1 Policies and procedures that formally define roles, responsibilities, and authorities and designate specific personnel who have the responsibility to operate the grievance mechanism.</p> <p>Applicant's response:</p>
22.6	<p>There is effective management oversight of the grievance mechanism, which is subject to periodic independent third-party reviews.</p> <p>Provide details on your organization's:</p> <p>22.6.1 Management of and reporting on the grievance mechanism.</p> <p>22.6.2 Frequency in reviewing the status of received grievances, particularly those with significant risks, and how these are addressed.</p> <p>22.6.3 Oversight practices in place to monitor the effectiveness of your grievance mechanism over time and make improvements if necessary, including:</p> <ul style="list-style-type: none"> - Third party reviews of the oversight practices. - The team or staff responsible for managing and overseeing the grievance mechanism including their roles and responsibilities. <p>Applicant's response:</p>
22.7	<p>The governance body oversees the grievance mechanism and periodically reviews the status of grievances received and how those with significant risk are being addressed.</p> <p>Provide details on your organization's:</p> <p>22.7.1 Governance arrangements to oversee the grievance mechanism.</p> <p>22.7.2 How the governance body ensures that the effectiveness of your grievance mechanism is monitored over time and improved as necessary.</p> <p>Applicant's response:</p>
22.8	<p>There is effective oversight of the grievance mechanisms of its executing entities.</p> <p>Provide details on your organization's:</p>

	<p>22.8.1 Oversight and monitoring of the grievance mechanisms of your executing entities to ensure they have the same elements as your own.</p> <p>22.8.2 Reporting arrangements to your senior management on the findings of the oversight and monitoring of your executing entities' complaint mechanism.</p>
	Applicant's response:
22.9	<p>Please provide:</p> <p>22.9.1 Any additional information or practices your organization employs to ensure in alignment with the Criteria of this grievance mechanism Safeguard.</p> <p>22.9.2 Any additional information or practices your organization employs to ensure you and your executing entities are in alignment with the grievance mechanism Criteria of this Safeguard.</p>
	Applicant's response:

Self-assessment Table for Safeguard 22 - Grievance Mechanism					
Safeguard/Criteria	Demonstrated through 3rd party review?	In place?	Partly in place?	Not in place?	Corrective Plan Formulated?
22. Grievance mechanism	Yes/no	Your review assessment? Yes/no			Yes/no
22.2 Is known to all stakeholders					
22.3 Prompt & accessible					
22.4 Discreet & objective					
22.5 Policies & assigned staff					
22.6 Management oversight					
22.7 Governance oversight					
22.8 Executing entities review					
Applicant's comments:					

22	Describe your corrective plans related to Grievance Mechanism — (Include scope, who has responsibility and completion date).
22a. First action plan (if needed):	
22b. Second & other action plans (if needed):	