

AGENCY PROFILE

The Australian Government's overseas aid program is helping improve the lives of millions of people in developing countries. Australia is working with the governments and people of developing countries to deliver aid where it is most needed and most effective.

COUNTRIES WHERE THE AGENCY IS DEMONSTRATING PROGRESS



COUNTRIES WHERE THE AGENCY IS REPORTING LIMITED PROGRESS

EXPECTED RESULTS

PROGRESS

OVERALL RESULTS



Commitments are documented and mutually agreed.



An IHP+ Country Compact or equivalent has been signed by the agency in 100% of IHP+ countries where they exist. Target = 100%.



Support is based on country plans & strategies, including to strengthen Health Systems.



In 2009 76% of health sector aid was reported by the agency on national health sector budgets - a decrease from 100%. Target = 50% reduction in aid not on budget (with ≥ 85% on budget).



Insufficient data has been provided to enable a rating for this Standard Performance Measure.



In 2009 76% of health sector aid was provided by the agency through programme based approaches - an increase from 50%. Target = 66%.



Funding commitments are long-term.



In 2009 76% of health sector aid was provided by the agency through multi-year commitments - an increase from 50%. Target = 90%.



Funds are disbursed predictably, as committed.



In 2009 76% of health sector aid disbursements provided by the agency were released according to agreed schedules - an increase from 50% in 2008. Target = 90%.



Country systems for procurement & public financial management are used & strengthened.



In 2009 100% of health sector aid provided by the agency used country procurement systems - no change from 100%. Target = 33% reduction in aid not using procurement systems (with ≥ 80% using country systems).



In 2009 100% of health sector aid provided by the agency used national public financial management systems - no change from 100%. Target = 33% reduction in aid not using PFM systems (with ≥ 80% using country systems).



In 2009 the stock of parallel project implementation units (PIUs) used by the agency in the surveyed countries was 0.0 - no change from 0.0. Target = 66% reduction in stock of PIUs.



Resources are being managed for Development Results.



In 2009 national performance assessment frameworks were routinely used by the agency to assess progress in 100% of IHP+ countries where they exist. Target = 100%.



Mutual accountability is being demonstrated.



In 2009 the agency participated in health sector mutual assessments of progress in 100% of IHP+ countries where they exist. Target = 100%.



Civil Society actively engaged.



In 2009, evidence exists in 100% of IHP+ countries that the agency supported civil society engagement in health sector policy processes. Target = 100%.

DETAILS OF WHAT THE AGENCY IS DOING TO ACHIEVE RESULTS

This additional information is reported by the Agency to explain what specific actions it is taking to implement its IHP+ commitments to the 8 Expected Results, or to qualify its measures of progress.



Commitments are documented and mutually agreed

Nepal's Compact was signed on 1 February 2009 by Australia and 7 other Development Partners. Nepal's SWAp in Nepal was progressing well (since 2004), IHP+ has provided impetus for improved harmonization and coordination: eg non-pooling partners (USAID, UNICEF, UNFPA) signing a Joint Financing Agreement in August 2010. AusAID actively supports joint efforts to ensure mutual accountability and alignment of Technical Assistance to the Nepal Health Sector Program.



Support is based on country plans and strategies that sufficiently address Health Systems Strengthening

AusAID contribution to the pool fund for NHSP increased to 4.53m in 2009 from 0.66m in 2008. A proportion of these pooled funds were spent on technical cooperation (TC) but it is not possible to report these figures, hence the question mark rating. Also, AusAID contributes through UNICEF (0.76m in 2008 and 1.7m in 2009/10). These figures are not accounted for in these ratings, but are reflected as UNICEF contribution in the health sector program budget. This funding is TC through a coordinated program based on the national Annual Work Plan.



Funding commitments are long-term

AusAID joined Nepal's pooled funding arrangement in 2008, and committed \$7m over the final 2 years of the Nepal Health Sector Program-Implementation Plan I (2004-10). AusAID's contribution to NHSDPII was announced at UNGA in September 2009. This will also be through the pooled funding mechanism. Technical assistance through UNICEF is also under discussion to align with the national strategic Technical Assistance framework.



Funds are disbursed predictably, as committed

All disbursements were made as per the schedule.



Country systems for procurement & public financial management are used & strengthened

All AusAID's pooled funding uses national procurement and public financial management (PFM) systems. AusAID is actively involved in efforts to strengthen national procurement and PFM systems. A joint Governance and Accountability Action Plan intends to monitor the PFM performance of the sector. AusAID has established no parallel PIUs for Health related programs in Nepal.



Resources are being managed for Development Results

The Joint Annual Review processes and periodical reporting of MoHP (Financial Management Report, Implementation Progress report) are used to assess progress in the country. As a pooling partner to the Health Sector Program, we refrain from having any independent performance assessment.



Mutual Accountability is being demonstrated

MoF in Nepal has recently conducted an aid effectiveness survey. In the Health Sector, Nepal used the JANs tool for the first time to assess the second phase of the health sector program in 2009. AusAID has pooled funding for NHSP since 2008, demonstrating its commitment to IHP+. And have announced commitment to the NHSP II for five years (AUD \$26m).



Civil Society actively engaged

AusAID does not provide separate funding to CSOs to enable their participation in health sector planning and review processes. However, as a donor to the pool fund and a signatory to the IHP+ compact, AusAID is working with other DPs to advocate with the government to ensure participation of civil society in the planning and review processes. AusAID (Canberra) also funds the AusAID NGO Cooperation Program, that results in funding to Nepali NGOs working in health such as Tilganga Institute of Ophthalmology.

HOW TO INTERPRET THIS SCORECARD

12 Standard Performance Measures (SPMs) were agreed by IHP+ signatories to track the implementation of Expected Results (see below). A detailed list of SPMs can be found at www.ihpresults.net

Countries where the Agency is reporting limited progress: Where ratings of ➡ or ✓ for the minority of SPMs.

Expected Results: Reflect key commitments made in the IHP+ Global Compact.

Progress: Symbols illustrate whether the Agency has achieved ✓, is making progress ➡, or has not made progress ! against 12 SPMs.

Specific points on interpreting progress:

- **Comparability of ratings:** Five targets* track change over time. For these, ➡ reflects progress since baseline, rather than absolute performance in 2009. Negative or flatline trend performance receives !. These ratings should not be used to compare absolute performance between agencies. In all instances ✓ shows that the target has been met.

- **Scorecard ratings are aggregates** of performance across a number of countries. Aggregates might hide variations in the agency's performance. The additional information above provides more detail on the agency's performance. This was drafted by IHP+Results using data provided by the agency, but in some cases the agency made significant changes before the final text was agreed.

* Corresponding to the following Standard Performance Measures (SPMs) - 2DPa, 4DP, 5DPa, 5DPb, 5DPc. For more information on SPMs and targets see www.ihpresults.net