

AGREEMENT BETWEEN

**MINISTRY OF FOREIGN AFFAIRS AND INTERNATIONAL COOPERATION OF THE ITALIAN
REPUBLIC – DIRECTORATE GENERAL FOR DEVELOPMENT COOPERATION**

AND

THE UNITED NATIONS CHILDREN'S FUND (UNICEF)

ON

**SUPPORT TO THE HEALTH POOL FUND (HPF IV)
IN SUPPORT TO THE IMPLEMENTATION PROCESS OF THE
HEALTH SECTOR TRANSFORMATION PROGRAMME OF ETHIOPIA**

1. Within the framework of the Joint Memorandum of Understanding on the Management of the Health Pool Fund (HPF IV) for Support to the Implementation Process of the Health Sector Transformation Programme of Ethiopia (HSTP) (the "Joint MOU"), signed on 8 March 2017, the Ministry of Foreign Affairs and International Cooperation (MAECI) of the Italian Republic – Directorate General for Development Cooperation ("the Donor") will make available, through the Italian Agency for Development Cooperation (AICS), to the United Nations Children's Fund (UNICEF) ("the recipient"), a sum of Euro 1.000.000,00 ("the contribution") towards "The Management of the Health Pool Fund for Support to the Implementation Process of the Health Sector Transformation Programme of Ethiopia (HPF IV)" (hereinafter "the Project") in accordance with this Agreement.
2. The project will begin with the entry into force of this Agreement and will continue through the duration of the Joint MOU up to 31 December 2020.
3. The Donor, through AICS, will make a deposit of a sum of Euro 1.000.000,00 (one million) into the following UNICEF account:

UNICEF NY Cashiers Account No. 9 785 255 01

IBAN: DE84 5008 0000 0978 5255 01

SWIFT CODE: COBADEFFXXX

Commerzbank AG

Business Banking

Kaiserstrasse 30

60311 Frankfurt am Main

Germany



4. The contribution will be administered by UNICEF and will be utilized for the Project as detailed in the attached proposal (Annex II).
5. UNICEF, as designated Pool Fund Administrative Manager, will administer and account for the contribution in accordance with its regulations, rules, directives and procedures applicable to Special Accounts, including those relating to interest, and keep separate records for the Project. Moreover, the contribution will not be used to meet the cost of import or customs duties (or any similar fees), imposed by the government of Ethiopia on the goods imported or services provided.
6. In line with the UNICEF Executive Board decision 2013/005, the contribution shall include a separate budget line, equivalent to eight percent of the total budget, for indirect programme support costs. These costs will be stated separately in the budget and financial statements. The Project, shall be subject exclusively to the internal and external auditing procedures laid down in the financial regulations, rules, directives and procedures applicable to UNICEF.
7. All funds received in the Special Account will be recorded in United States Dollars. The United Nations operational rates of exchange shall be used to convert into United States dollars all funds received in other currencies, based on the United Nations operational rates of exchange in effect on the date of receipt.
8. In accordance paragraph 36 of the Joint MOU, regular reports on the implementation of the activities and the execution of the HPF IV, including the Project, will be drawn up in the spirit of One Plan, One Budget, One Report, and accounting will not be made to individual donors. In particular, the following will be provided:
 - (a) A six-month financial uncertified statement of account and a brief summary of the activities undertaken by the fund recipients during the period in question, to be submitted within one month after the end of the reporting period in accordance with the template in Annex III.
 - (b) Overall annual progress (narrative and financial) reports for every Ethiopian Fiscal Year, to be submitted two months after the end of the reporting period in accordance with the template in the Annex IV.
 - (c) A final narrative and financial report submitted no later than six months after completion of the Project covering the entire period of the Project, in accordance with the UNICEF standard reporting template in Annex IV.
 - (d) A final certified financial statement of the accounts within six months of financial closure (18 months after grant expiry) of the contribution in accordance with UNICEF's rules and regulations.



9. If any change occurs which, in the opinion of AICS impairs significantly the development value of the project, AICS will formally inform UNICEF.
10. Differences that may arise concerning the interpretation or application of this Agreement will not be subject to adjudication by any national or international court or tribunal but will instead be dealt with in an amicable way as appropriate method of achieving the peaceful settlement of those differences.
11. The Parties will consult together at any time upon request of either Party regarding any matter relating to the terms of this Agreement and will endeavor jointly in a spirit of cooperation, good faith and mutual trust to resolve expeditiously any difficulties or misunderstandings that may arise.
12. Consistent with UN Security Council Resolutions relating to terrorism, including UNSC Resolution 1373 (2001) and 1267 (1999) and related resolutions, both UNICEF and the AICS are firmly committed to the international fight against terrorism, and in particular, against the financing of terrorism. It is the policy of the AICS to seek to ensure that none of its funds are used, directly or indirectly, to provide support to individuals or entities associated with terrorism.
13. UNICEF will undertake all reasonable efforts to ensure that the contribution is not used to provide support to individuals or entities associated with terrorism pursuant to UNSC Resolution 1373 (2001) and 1267 (1999) and related resolutions. If, during the course of this Agreement, UNICEF discovers a link with any organization or individual associated with terrorism, UNICEF will inform AICS immediately.
14. If UNICEF receives an allegation of misuse of the contribution, and determines that such allegation is credible enough to warrant an investigation, it will promptly notify the Donor, to the extent that such notification does not jeopardize the conduct of the investigation. The allegation will be dealt with promptly in accordance with UNICEF's accountability and oversight framework including with regard to initiating and completing an investigation of such allegation. UNICEF will keep the Donor informed about the progress of the investigation. Promptly upon completion of the investigation, UNICEF will inform the Donor about the results of the investigation. UNICEF will either (i) repay to the Project any amounts misappropriated by UNICEF staff members; or (ii) initiate appropriate recovery efforts for any amounts misappropriated by third parties and repay to the Project all amounts recovered. The Donor may request that such funds be returned to it.
15. Nothing in this Agreement shall be deemed a waiver, express or implied, of the privileges and immunities of UNICEF under national or international law.
16. Both parties to this Agreement having agreed to all of the above terms have signed this agreement on 14 DEC 2018. It will continue to remain in effect through the



duration of the Joint MOU. Amendments may be made by mutual agreement in writing between the Parties.

For the Italian Government

- Ministry of Foreign Affairs and International Cooperation (MAECI)

Name: H.E. Mr. Arturo Luzzi

Title: Ambassador of Italy in Ethiopia

Signature: _____



For THE UNITED NATIONS CHILDREN'S FUND (UNICEF)

Name: Gillian Mellsop

Title: Representative, UNICEF Ethiopia

Signature: _____



Acknowledged by AICS:

Tiberio Chiari

Head of Office
AICS Addis Ababa
Tiberio Chiari





Federal Ministry of Health

Proposal - Health Pool Fund

IV

Handwritten signature or initials in blue ink.

1. BACKGROUND

The Federal Democratic Republic of Ethiopia, Ministry of Health (MoH) is committed to ensuring the accessibility of effective health services at every level of the health system through the implementation of the Health Sector Transformation Plan (HSTP). Different pooled financing arrangements have been used to finance the implementation of successive health sector strategic plans. The Joint Financing Arrangement (JFA) for SDG Performance Fund and The Health Pool Fund has been the preferred and prominent financing modalities under Channel 2.

Health Pool Fund (HPF) is a pioneer pool fund in the health sector, through which different development partners contribute fund and UNICEF administer the pool as trust fund manager. HPF was established in 2005 G.C as one of the framework for ensuring harmonization and alignment. It had 3 successful rounds so far each round was followed by an evaluation through which the successes identified, flaws are tracked and lessons learnt for the next round.

The successes in HPF also become one of the reasons for the establishment of the then Millennium Development Goals, now Sustainable Development Goals, Performance Fund (SDG-PF).

This short document comprises the 4th HPF, 1st year annual work plan. The document bases the revised Memorandum of Understanding which will be on effect from January 1, 2017 to December 31, 2018.

2. OBJECTIVES OF THE HEALTH POOLED FUND IV

The HPF-IV will be part of HSTP's wider pooled funding scheme and will support the implementation of activities agreed and specified in the Proposal for the HPF-IV (Annex 1) and will not be used to meet the cost of import or customs duties (or any similar fees) imposed by the Government of Ethiopia on the goods imported or services provided.



3. PRIORITY AREAS TO BE SUPPORTED

The priority interventions and activities included in the 2010 EFY are categorized in to the agreed priority areas of support under the signed Health Pool Fund MOU

PRIORITY AREA 1: STRENGTHENING THE MANAGEMENT OF HSTP IMPLEMENTATION

Initiative 1.1 Support capacity of FMOH in designing, planning, budgeting, monitoring and evaluation of HSTP in decentralized context

We are now in the 2nd year of HSTP. The HSTP is cascaded to all levels and will be translated into annual operational plans using the Woreda-based health sector annual plan. The main instrument for supporting the implementation of one plan, one budget and one report approach at all levels of the health system is through conducting annual Woreda based plan where the development partners and government resource is reflected in one plan in a very decentralized context from federal to Woreda level.

The HPF has been supporting advocacy and experience sharing at international fora for improved resource mobilization and partnership and so far as evidenced in the subsequent HPF evaluations this has positively impacted the FMOH capacity in resource mobilization and designing, planning, budgeting, M&E of the HSTP in a decentralized context.

Therefore, support for Woreda based plan and capacity building and advocacy through participation in international fora are prioritized to be supported under this year HPF IV plan to strengthen the management of HSTP implementation.

Activity 1: Support for EFY 2010 Woreda based planning

The annual Woreda Based Health Sector Plan (WBHSP) is the preferred evidence based planning approach in a decentralized context to ensure the alignment of plan at all levels horizontally and vertically with the “one plan” principle of harmonization. It uses the top-down



and bottom-up approach to make sure that the priorities at different levels from Federal to district is well addressed.

The Health Pool Fund can support the annual Woreda based planning process by supporting the implementation of the following major activities:

- **Conduct Orientation at different levels:** the annual Woreda based planning process includes a stakeholder's orientation at national, regional and zonal level conduct the actual planning at Woreda and Hospital level. Including relevant government institutions, partners, and the community.
- **Provide onsite technical support:** Provide onsite technical support to Regional Health Bureaus (RHBs), Zonal Health Departments and Woreda Health Offices (WrHOs) for proper utilization of the WBHSP tool and the Resource Mapping data and produce their respective regional and Woreda plans in a harmonized way.

Total budget: 1, 1000,000 USD

Initiative 1.2 Enable health policy makers and key implementers to participate in international conferences, seminars, short study trips or visits that contribute to useful gains of experiences and exposure in health policy development and implementation.

Activity 1: Support for local and International conferences, seminars short study trips and visits

HSTP promotes experience sharing, documentation of best practices from abroad and dissemination of results at the international level through participation in international conferences, contribution to the debate on global health issues and publication of scientific articles in international journals.

The previous successive HPF supported the participation of FMOH in international and regional conferences, seminars and meetings and visits and it has impacted on establishing of local and international partnerships to realize the vision and goal of the Health Sector and improved the development, implementation and management of the HSTP.



It also helped improvement in staff knowledge and skill in strategy design, implementation support and governance. In addition the forums provide a wide range of experience and lesson sharing. It is also an opportunity for resource mobilization. The HPF is a major contributor for such type of trip expenses and thus it is also prioritized to be included in this year HPF plan.

Total budget: 100,000 USD

Initiative 1.4 Support developments of standards, guidelines and manuals in relation to the management of HSTP implementation

HSTP has prioritized enhancing policy and procedures as one of the strategic objectives which encompasses strengthening of health systems through continuous analysis and improvement of existing health and health-related policies and other health-related legal frameworks in the spirit of mainstreaming health into all policies.

It also involves the preparation, enforcement and follow-up of specific proclamations, regulations, guidelines, standards, directives to ensure programs and plans are in compliance with existing policies and procedures of the sector. The developments of those documents involve wider consultation and involvement of all relevant sectors and stakeholders so that the national health policies and plans are more robust and get implemented effectively.

Activity 1: Support developments of standards, guidelines and manuals

HPF has been supporting the development of such manuals, guidelines and legal frameworks so that those documents will help link sector strategies with service delivery at the ground level. Financial support for the preparation of the aforementioned documents is prioritized to be included in the HSTP IV plan.

Total budget: 20,000 USD



PRIORITY AREA 2: TECHNICAL ASSISTANCE

Technical assistance (TA) is an important part of development cooperation in Ethiopia. The contribution of HPF in providing short and long term technical assistance for building the capacity of the government staffs was significant.

Shortage of skilled human resource and high turnover of skilled staff are the major bottleneck to the achievement of Health plans in the sector. Coupled with poor motivation and retention mechanisms in the civil service, migration of skilled professionals aggravates the situation. To address these challenges, the Ethiopian Government is, in fact, implementing various Civil Service Reform Program initiatives.

However, the different reform initiatives and capacity development efforts, through the implementation of HRH strategy, will take long-term investment and time to show results and gaps in capacity are likely to persist. Hence, the health sector will continue to require critical technical assistance. Complementing to this, the HPF has been supporting the capacity development through recruitment and deployment of TAs at Federal and developing regions in areas with critical gap exists.

Initiative 1: Provide Technical Assistance (TA) in areas where specific needs for technical assistant support have been identified (IT, Audit, Procurement, Grant Management, Health Infrastructure development and others with skilled critical HR gaps in low performing regions).

Activity 1: Recruit/maintain TAs for identified skill gaps

Ministry of Health recruits, and manages TAs (technical assistants) both on a short and long term basis, at different levels of the health system, and financed by HPF fund. To sustain the already started capacity development efforts at federal level, the existing TAs will be retained and additional TAs will be recruited for areas with critical gap through the Health Pool Fund support.



As part of the transformation agenda to improve quality and equity in health care, high caliber TAs will be recruited and/or retained for developing regional state to build their capacity and strengthening the health system and improve implementation of health programs.

In addition, as part of strengthen emergency referral system at Addis Ababa hospital and to improve emergency services TAs who are already deployed will be maintained.

Total budget: 805,000 USD

PRIORITY AREA 3: PLANNING, MONITORING AND EVALUATION, HARMONIZATION AND ALIGNMENT

The HSTP implementation process requires periodic monitoring and follow-up to look progresses, identify key bottlenecks and to ensure whether the key health intervention targets for annual plans are on track and to take appropriate measures if off track. It is also relevant to fine tune the implementation approaches to appropriate context.

The regular monitoring and evaluation process creates an opportunity to see how coordination, management and governance of the HSTP can be improved; how efficiently and effectively resources are utilized and how timely decision can be made to resolve any constraints and /or problems that are encountered during its implementation.

For these effects, the HPF will support a number of progress monitoring and review activities which will be conducted jointly with government and development partners. These are also identified as the indicators in the IHP Compact (IHP, 2008) to ensure the mechanisms are there for better harmonization and alignment.



Initiative 1: Support the monitoring and evaluation programs of HSTP such as ARMs and JSC meetings to improve its implementation and to facilitate the sector's inputs towards the Growth Transformation Plan II/ Sustainable Development Goals monitoring and reporting process as well as the tracking of progress in terms of the relevant indicators and targets in the HSTP policy matrix.

Activity 1: Annual Review Meeting (ARM)

In accordance with the provisions of the Harmonization and Alignment manual, the performance of the Sector Program has been continually reviewed through successive government-Partners Annual Review Meetings (ARMs). The meeting takes place once a year in late September or early October.

It brings together representatives (usually over 800) from federal and regional government, agencies, selected Woreda Health Offices, HPN Development Partners Working Groups, NGOs, Professional Associations, universities, the private sector and local and international consultants.

This provides a platform for broad policy dialogue and the opportunity for all stakeholders to comprehensively review policy, strategy, performance, annual work plans and capacity needs in the health sector. It also serves as the vehicle for development partners and the government for a joint annual oversight guidance and decision-making around HSTP.

It is an important joint event which: -

- Reviews progress made during the previous year and the first half of the current year
- Reviews and endorses HSTP plans, and the plan for the coming year
- Reviews reports of HSDP annual and progresses reviews or any joint review mission and final evaluation.
- Includes both a backward look at progress and a forward assessment of objectives and resources required.
- Deliberates on studies, new policy issues and developments of significant to the sector.

Its major outputs are recommendations/next steps, the HSTP Annual plan of Action for the coming Year, and a commitment by all stakeholders. Therefore, the Health Pooled Fund covers significant proportion of expenses of the health sector annual review meeting every year.

Total budget: 250,000 USD



Activity 2: FMOH-RHB Joint Steering Committee meeting

The formal health sector governance and operational structure for consultations is designed in a way it can ensure maximum coordination and harmonization in the health sector. This includes the Joint FMOH RHB Steering Committee (JSC) meeting conducted every two months. This has significant role in addressing the bottlenecks and disparities in implementation among regional states.

The MoH-RHBs Joint Steering Committee meeting, chaired by the Minister, in which MoH and RHB heads meet for a consultative forum every two months where policies and strategies are debated and consensus built in leading the health sector. Annual operational plans are set jointly, performances reviewed and follow-up actions streamlined accordingly in the JSC meeting.

The Federal Ministry of Health coordinates regions to implement activities in a harmonized manner centrally in order to avoid fragmented planning and policy initiatives. Hence all the independent strategic initiatives be it program oriented (Child survival, maternal health, malaria, HEP... etc) or function oriented (M&E, supply chain, regulatory, Health Care Financing, Health Information System,.....etc) are conducted under this joint umbrella.

The JSC is expected to be conducted 6 times a year and the expense for this important joint steering committee meeting is also covered by the Health Pooled Fund.

Total budget: 130,434 USD

Initiative 2: Provide resources for other relevant process activities included in the plan for the support of the management of the implementation of HSTP.

Activity 1: Sponsor joint FMOH and stakeholder consultations on policy dialogue

Sponsor joint meetings of Ministry with other relevant stakeholders (RHBs, DPs, CSOs and private health sector to monitor the progress of HSTP implementation, conduct policy dialogue and stakeholder's consultation on different guidelines, manuals and dissemination of workshops.



Total budget 10,000 USD

PRIORITY AREA 4: OTHER CRITICAL AREAS NOT FUNDED BY PROGRAMS (Eg. Critical emergency program based linked to HSTP implementation; documentation; printing)

Improve health emergency risk management is one of the strategic objectives of the HSTP. This strategic objective is meant to improve the prevention, mitigation, early detection and rapid response to any crises, which directly or indirectly impact the health, social, economic and political wellbeing of the society.

Activity: Support for management of health emergencies

Disease prevention and health promotion has been the sector priority and promising achievements against communicable disease were recorded. These achievements don't mean, it has reached the intended result.

At this critical time where the country battles the residual needs arising from the El Niño-induced drought in the southern and eastern parts of the country which led to water and food shortages and made the area prone for disease outbreaks, there is a need to proactively plan for a flexible resources to support the specific capacity need which arise in the management of those possible emergencies.

HPF can be a means to support this area and fill the gap.

Total budget: 41,300 USD

ANNEX 1: Activity Based Annual Work Plan (In USD)



S.No	Priority Area and Activity	Unit cost	Total quantity	Total budget	Remark
1	Strengthening the management of HSTP implementation				
1.1	Support for EFY 2010 Woreda based planning			1,100,000 USD	
1.2	Support for local and International conferences, seminars short study trips and visits			100,000 USD	
1.3	Support developments of standards, guidelines and manuals			20,000 USD	
2	Priority area 2: Technical Assistance				
2.1	Recruit/maintain TAs for identified skill gaps:			805,000 USD	
3	Priority Area 3: Planning, monitoring and evaluation, harmonization and alignment				
3.1	Annual Review Meeting (ARM)			250,000 USD	
3.2	FMOH-RHB Joint Steering Committee meeting			130,434 USD	
3.3	Sponsor joint FMOH and stakeholder consultations on policy dialogue			10,000 USD	
4	Priority Area 4: Other critical areas: (Eg. Critical emergency)				



4.1	Support for management of health emergencies			41,300 USD	
Total				2,456,734	



UNITED NATIONS CHILDREN'S FUND (UNICEF)



OTHER RESOURCES CONTRIBUTION RECEIVED FROM:
STATEMENT OF ACCOUNT AS OF 23 OCTOBER 2018 IN US DOLLARS

Status of Contribution

External Reference: D197-RY
Description: Project Description
Contribution Reference: SC
Effective Date: 30.05.2017
Expiry Date: 30.06.2019
Recipient Office(s): Ethiopia
Agreement Currency: USD
Agreement Amount: USD
Funds Received: USD
Refunds: USD
Funds Receivable: USD

Summary of Expenditures (USD)

<u>Description</u>	<u>Cumulative Expenditure</u>
Programmable Expenditure:	
Indirect support cost 8%	
Total:	
Funds Received in USD:	
Unspent Balance:	

Details of Expenditures

Description	Incurred Expense		Cash Advances and Prepayments	Cumulative Expenditure	Commitments*
	2017	2018			
Staff and Other Personnel Costs					
Supplies and Commodities					
Equipment, Vehicles and Furniture					
Contractual Services					
Travel					
Transfers and Grants to Counterparts					
General Operating + Other Direct Costs					
Total Programmable Cost					
Indirect support cost 8%					
Total					

* "Commitments" include undelivered purchase orders, payment commitments for implementing partners and travel advances approved but not yet paid. The amounts shown in this column represent the status and value of the commitment as at the date the report is produced. As goods are received and commitments in respect of implementing partners and travel advances are paid these amounts will be added to "incurred expense".

Prepared by

Certified by

Simon Cope
Accountant

Thomas Asare
Comptroller

**UNICEF PROGRESS/FINAL REPORT TO
DONOR NAME**

TITLE OF PROJECT

PHOTO

© UNICEF Ethiopia/YEAR/PHOTOGRAPHER

**Submitted By
UNICEF Ethiopia**

Month 2017

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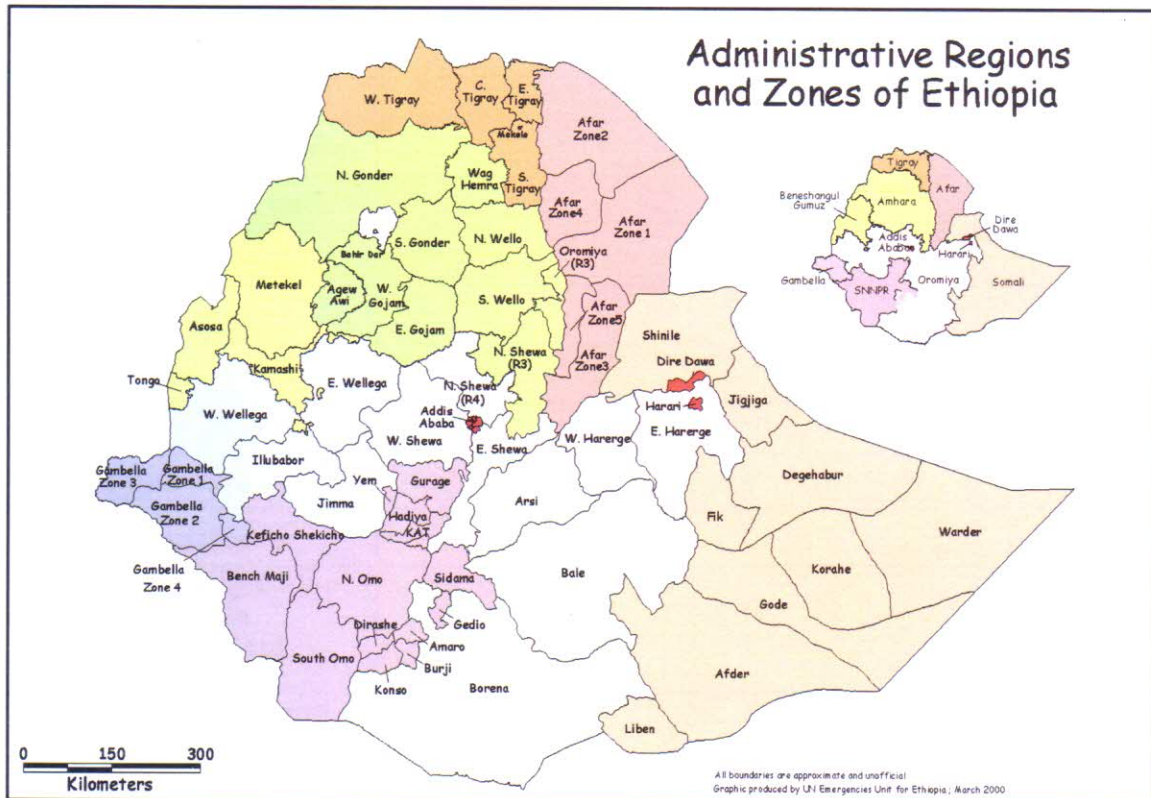
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Map of Ethiopia



1. Programme Summary

Project Name	
Country	Ethiopia
Donor	
Grant Reference	
Total Contribution	
Funds received to date	
Funds utilized to date	
Unspent balance	
Duration of grant	
Report Type	
Reporting Period	
Report due date	
Report prepared in	
UNICEF Strategic Plan and Sustainable Development Goal (SDG) targets	
UNICEF Outcome and Output	
Geographic focus area	
Focus Population	
Programme Partners	
UNICEF Contact	Name of section chief, Title Email: XXX@unicef.org, tel. + 251 XXXXX



2. Executive Summary

This section should provide a brief overview of the country and regional situation as related to the reported programmatic area or priorities funded by the donor, efforts and interventions made, key results achieved during the year or reporting period. More specifically:

- Relevant situation analysis (focusing on the situation of children and women) as summarized in the Country Programme Action Plan (CPAP) or UNDAF Action Plan, and focusing particularly on the programme area/s covered by this report.
- Summary of results achieved, as they relate to the results planned in the proposal, including number, location, gender and age of beneficiaries.
- Summary of results achieved should be child and rights-focused and should include UNICEF's strategic role in addressing the problems stated in the situation analysis.
- Strategic partners.
- Budget implementation status.

3. Purpose

This section is a resume of the expected programme results as agreed with the donor in the funding proposal. It includes:

- Main outcomes expected as per the funding proposal, and its contribution to the CPAP or UNDAF Action Plan (as relevant).
- Reference to how the programme relates to the UNDAF or relevant UN Framework, such as the Consolidated Appeal Process, including how it aims to support the SDGs and national development priorities as pertinent.
- A listing of the main implementing and strategic partners.

4. Results

4.1. Main Results Achieved

An assessment of the extent of progress in relation to the outcomes and outputs planned for the year or reporting period.

4.2. Specific Project Activities and Results Achieved

Main activities undertaken and achievements

This should include the following:

- Description of the main activities undertaken and UNICEF's specific role in achieving project outputs
- Number of children and women assisted, geographic coverage and other statistical information from each project activity
- Comparison between project objectives and project achievements
- Please make sure this is consistent both with the proposal and any previous reports



4.3. Challenges and Lessons Learned

Implementation challenges, how we have addressed or plan to address these (solutions), and lessons learned from addressing challenges.

4.4. Monitoring and Evaluation

Knowledge gained from evaluations and studies that have taken place.

4.5. Key Partnerships and Inter-Agency Collaboration

- a) Key Partnerships
- b) Inter-Agency Collaboration

Other highlights and cross cutting issues pertinent to the results being reported on.

5. Future Workplan

Information in this section includes:

- Priority actions planned for the following year to overcome constraints, build on achievements and partnerships, and use the lessons learned during the previous year or reporting period.
- Indication of any major adjustments in the strategies, targets or key outcomes and outputs planned in the funding proposal or, where funding proposal is not required, planned in the country programme.
- Estimated additional budget required (including funding shortfalls).

6. Financial Implementation

Please see attached Donor Statement by Activity.

If the donor requires a special financial utilization summary (other than or in addition to the DSA), please create a summary utilization report, using the same budget line items agreed with the donor in the proposal, and report funds utilized against each, in line with the figures in the DSA.

7. EXPRESSION OF THANKS

UNICEF seizes this opportunity to express its sincere appreciation for the contributions of **NAME OF DONOR**. Thousands of children have benefitted and many more stand to benefit from your generous support to UNICEF-assisted programmes in Ethiopia. On behalf of the entire UNICEF team, we thank you once again for your generous support to the realization of our commitments to protecting the rights and improving the well-being of children and women in Ethiopia.

Donor Report Feedback Form

UNICEF is working to improve the quality of our reports and would highly appreciate your feedback. Kindly answer the questions below for the above-mentioned report and return to the Public Sector Alliances and Resource Mobilization Office (PARMO) who will share your input with relevant colleagues in the field and in headquarters. Thank you!

Please return the completed form back to UNICEF by email to:

Name: XXX

Email: XXX@unicef.org

SCORING: 5 indicates "highest level of satisfaction" while 0 indicates "complete dissatisfaction"

1. To what extent did the narrative content of the report conform to your reporting expectations? (For example, the overall analysis and identification of challenges and solutions)

5

4

3

2

1

0

If you have not been fully satisfied, could you please tell us what did we miss or what could we do better next time?

2. To what extent did the fund utilization part of the report meet your reporting expectations?

5

4

3

2

1

0

If you have not been fully satisfied, could you please tell us what did we miss or what could we do better next time?

3. To what extent does the report meet your expectations in regard to the analysis provided, including identification of difficulties and shortcomings as well as remedies to these?



5	4	3	2	1	0

If you have not been fully satisfied, could you please tell us what could we do better next time?

4. To what extent does the report meet your expectations with regard to reporting on results?

5	4	3	2	1	0

If you have not been fully satisfied, could you please tell us what did we miss or what could we do better next time?

5. Please provide us with your suggestions on how this report could be improved to meet your expectations.

6. Are there any other comments that you would like to share with us?

dh 

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**Ministero degli Affari Esteri
e della Cooperazione Internazionale**

DGCS - Ufficio IV



MAE02192722018-12-07

Protocollo Arrivo

Classifica

NON CLASSIFICATO

Urgenza

ORDINARIO

Protocollo MAE02192722018-12-07 Data 07 DICEMBRE 2018

Assegnazioni ADDIS ABEBA AMB

Visione AICS ADDIS ABEBA / AICS ROMA / NEW YORK RAP ONU

Diffusione LIMITATA Modalita' INFORMATIVO TUM M/100

Oggetto ETIOPIA - 011337 - "CONTRIBUTO ITALIANO AL "HEALTH POOL FUND" - HPF IV"
RICHIESTA APPROVAZIONE DELL'ACCORDO IN SEGUITO A MODIFICHE EFFETTUATE
DALL'ORGANISMO INTERNAZIONALE UNICEF.

Riferimento MSGADDIS AMB. N. 2694 DEL 20.NOVEMBRE 2018 -MSG UFFICIOIV 211454 DEL 28.11.2018 E AICS ROM
17139 DEL 5 DICEMBRE 2018

Redazione DONATELLA.GENZANO

Firma TOMMASO.SANSONE Funzione VICARIO

Allegato 1

Allegato 2

Allegato 3

Trattato in CHIARO Spedito il 07/12/2018 - 18:14:48

Sintesi

Testo In relazione ai messaggi in riferimento e a seguito del parere favorevole di AICS Roma alla firma dell'Accordo in oggetto, nulla osta anche per quanto di competenza dello scrivente.

AICS

ADDIS ABABA

NO. DI PROT. 1589/AICS
DATA DI ARRIVO 10/12/18
FILE A: d 011337

parcellato