



ADAPTATION FUND

Accreditation Process

Rabat, September 2016



Direct Access Modality & Implementing Entities

• Objectives:

 Direct Access, whereby a country can access funds directly from the AF and other funds adopting similar modality to manage adaptation/mitigation projects, requires an accredited National Implementing Entity meeting the funds' fiduciary standards, environmental and social safeguards and gender policy

Implementing Entities(IEs):

- Bear full responsibility for the overall management of the projects and programmes approved by the AFB; and
- ✓ Carry out financial management, monitoring and reporting responsibilities for the project.

 \checkmark Therefore, to be accredited, the IE applicant should be able to demonstrate

- The existence of appropriate policies, processes and procedures in the areas covered by the Fiduciary Standards; and
- □ That they are effectively working as designed

Accreditation is a process through which a team of experts undertakes an independent review of an application and recommends accreditation once it determines that the applicant entity meets the Adaptation Fund's Fiduciary Standards

Accreditation: What is it?

- Approved by the Adaptation Fund Board
- Implementing entities must meet the requirements in four key areas:
 - Legal status
 - Financial Management and Integrity;
 - Institutional Capacity; and
 - Transparency, Self-investigative Powers and Anti-Corruption Measures and Polices and Mechanisms to monitor and address Complaints about Environmental, Social and Gender Harms Caused by Projects.

Accreditation Assessment Criteria

Accreditation is a process through which a team of experts undertakes an independent review of an application and recommends accreditation once it determines that the applicant entity meets the Adaptation Fund's Fiduciary Standards

Focus on Capacity Building

Legal status

 Financial Management and Integrity

- Demonstration of legal personality
- Ability to contract with AF and authority to directly receive funds
- > Effective financial management:
 - Use of Internal Control Framework
 - Preparation of business plans and budgets
 - Monitoring financial performance
- Financial accountability:
 - High quality Annual Financial Statements
 - Clean external audit opinion and commentary to management
 - Effective internal audit assurance
- > Effective oversight arrangements in place:
 - Formal oversight/audit committee arrangements are in place
 - Proper use of internal and external audit
 work and assurances including follow-up
 - Management held to account

Focus on Capacity Building

Institutional Capacity

Transparency, Self-investigative
 Powers, Anti-corruption measures
 and handling complaints about
 harmful Environmental or Social
 Impact of projects

- Effective Procurement arrangements including audits
- Project management:
 - Project Preparation and Appraisal
 - Project Implementation Planning
 - Project budgeting, financial
 performance monitoring and auditing
 - Project Monitoring and Evaluation
 - Project Closure
 - Post-closure Evaluation

- Policies and Framework and capacity to deal with fraud, corruption and other forms of malpractice
- Commitment by the entity to apply the Fund's Environmental & Social and Gender policy
- Mechanism to deal with complaints on environmental and social harms caused by projects

Common Capacity-building gaps and AF examples of mitigating factors

Financial Management and Integrity

Légal

- Gap: Difficulties on identifying the responsible Entity (Ability to contract with AF and authority to directly receive funds) within the Ministry;
- > Mitigating factors:
 - AF allows Ministry to be the Designated Implementing Entity and to identify an Executive Entities that reports to the Ministry.
 - Review of the legal capacity of the applicant at screening stage
- Gap: Difficulties on identifying appropriate internal control framework.
- Mitigating factors: In addition to referring to the COSO framework, the Panel strongly encourages the issuance of an annual public statement signed by Chief Executive Officer and the Chief Accountant of the IE, which confirms that the internal control framework is operating satisfactorily. This representation should be supported by periodic review of the effectiveness of these internal control elements, i.e., internal control reviews satisfactorily carried out by management or by the internal and external auditors

Common Capacity-building gaps and AF examples of mitigating factors

Institutional Capacity

• At Quality at entry

Project Risk Assessment

Gap: Weakness of a supervisory review of the project quality during the design, appraisal, and preimplementation stages with respect to the key areas of the project;

Mitigating factor: support the Entity on identifying areas that are missing or need improvement and define role and responsibilities and the appropriate course and type of corrective action required; and Review the corrective actions taken.

Gap: Capacity of the entity to assess the risk as systematic process for identifying, evaluating, and managing potential events that could occur and adversely affect the achievement of an IE's project or objectives or result in unintended or undesirable negative consequences.

Mitigating factor:

Undertake assessment of project/programme risks including:

- Financial, economic, political risks, and
- Environmental and social risks, and integrate mitigating strategies and environmental and social risk management plans into the project document.

Common Capacity-building gaps and AF examples of mitigating factors

Transparency, Self-investigative Powers, Anti-corruption measures and handling complaints about harmful Environmental or Social Impact of projects **Gap:** Non-transparent mechanisms for handling complaints about harmful Environmental or Social Impact of projects and/or fraud and corruption complaints

Mitigating factors:

- A public statement setting the tone from senior management;
- A code of conduct and ethics applicable to the staff of the entity, consultants, and other parties directly or indirectly associated with the projects financed through the applicant entity;
- An anti-fraud policy and investigative procedures;
- An effective and working anti-fraud policy, process, and procedures that guide the receipt, investigation and disposition of complaints/allegations of wrongdoing including non-compliance, fraud, violation, misconduct and business conduct concerns including how business related to its activities and projects is conducted or instances where there is a non-appropriate conflict of interest
- Capacity to perform effective investigations of complaints

Accredited Implementing Entities

- As of today, 24 NIEs have been accredited; 8 Re-accredited les
 - Four of them are in LDCs (Senegal, Rwanda, Benin and Ethiopia)
 - Six NIEs are in SIDSs (Antigua and Barbuda, Belize, Dominican Republic, Jamaica, and Micronesia, Cook Island)

Phases of the Accreditation Process

DPhase I

>Nomination of Designated authority for accreditation application;

> DA's submission of IE Endorsement Letter to the AFB Sec;

> Online Application.

ØPhase II

>AFB Sec performs screening and checks completeness of documentation;

>Accreditation application review by the Accreditation Panel;

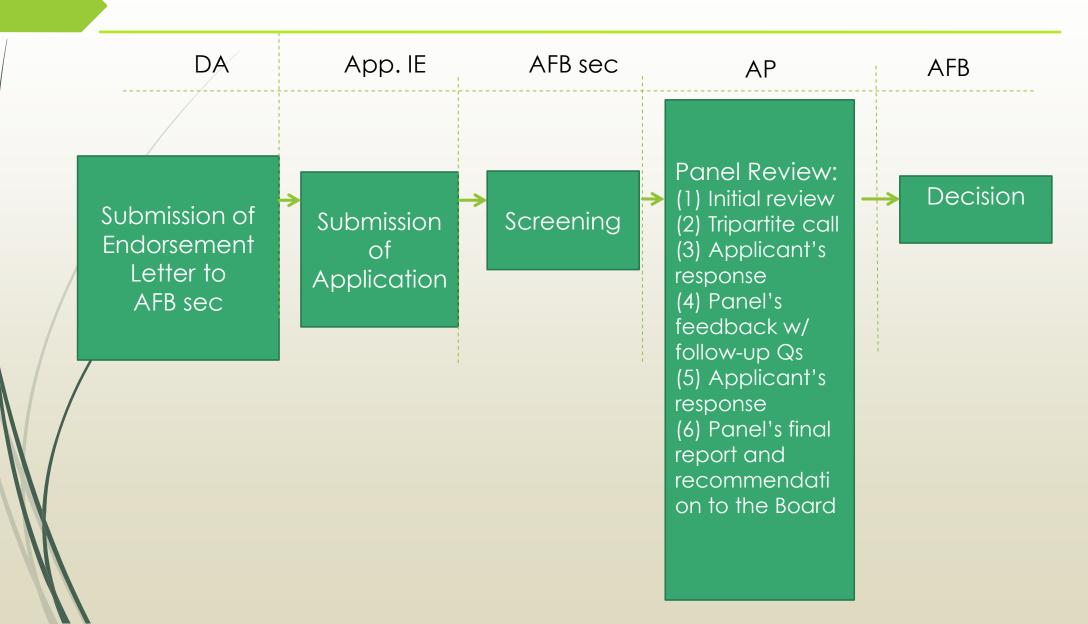
Accreditation Panel Meeting to finalize recommendations to the Board.

□Phase III:

>Submission of the recommendation to the AF Board for final decision (intersessionally on non objection basis or at the Board meeting);

Communication of the Board decision to the applicant

A Country Driven Process: Accreditation Parties



AF Secretariat

- Screens the application for completeness
- Communicates with Adaptation Fund Board
- Communicates with applicant and the Accreditation Panel

Submit their applications to the Secretariat with the required supporting documentation to demonstrate how they meet the Fiduciary, the Fund's ESP and Gender Policy

 Respond to the Accreditation Panel's information requests and clarify any pending issues



- Independent review of the application
- V Deliberate on the findings and conclusions and reach consensus
- Provide feedback to the applicant
- Make a recommendation to the AF Board

Accreditation cycle

| | Steps | Timeline | (start & end) Date | Mark | Finalized in (n.of days) |
|----------------|--|--|-----------------------|------|-----------------------------|
| | I. Submission of application (by applicant) | | | | |
| | 2. Screening by secretariat (check completeness) and send complete application to Panel | 3 weeks | | | |
| ľ | 3. Initial Review by Panel (report with list of questions & additional equired information are sent to applicant) ¹ legal capacity review conducted by sec. | 4 weeks | | | |
| 4 | 4. First call with Applicant | 1 week (after delivering initial review) | | | |
| / ⁴ | 5. Applicant's response to Panel's Qs | 4 weeks (after receiving the initial review) | | | |
| (| 5. Panel's subsequent follow-up Qs, if necessary | 2 weeks (after receiving Applicant's response) | | | |
| 7 | 7. Second call with applicant, if necessary | 1 week (after delivering follow up Qs) | | | |
| 8 | 3. Applicant's response to Panel's Qs | 3 weeks (after receiving Panel's Qs) | | | |
| 9 | 7. Panel's Final Report | 3 weeks (after receiving all requested info) | | | |
| | 10. Panel's Recommendation on accreditation (at AP meeting or ntersessionally) | 2 weeks (after Panels' review on recommendation for 2 weeks) | | | |
| Ī | 11. AFB decision on accreditation (at AFB meeting or intersessionally) | 2 weeks, if intersessionally | | | |



The Accreditation Process can take up from Six to 24 Months

 Lapsed time depends on how quickly applicant entity provides all the required information

Possible causes of delays

- Applicant's experience limited to handling of small projects (hence systems and processes not adequate to meet AF Standards)
- Applicant's underestimating the work involved in completing the accreditation process and not driving process actively.
- Lack of in depth understanding of the Accreditation Criteria and their requirements
- Limited competencies in some areas of the Fiduciary Standards

The right choice

- What are the criteria for identifying an NIE that will increase chances of accreditation and access to financing?
- Selection of an appropriate entity for accreditation is vital
- Due diligence is required when reviewing existing institutional capacity of potential candidates for NIE
- Entity's ability and willingness to devote time and resources to actively pursue and complete the accreditation process

RE-ACCREDIATION PROCESS

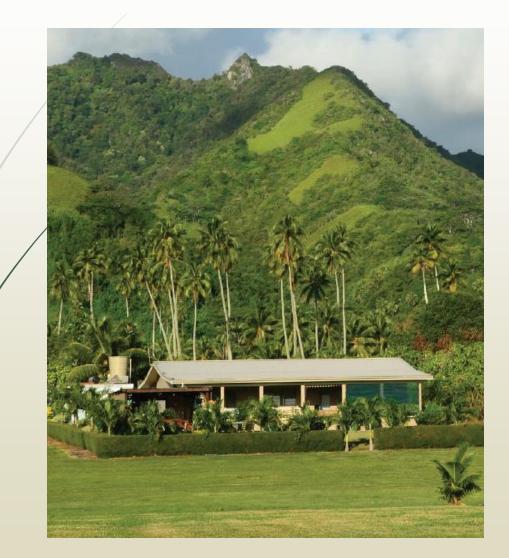
Rationale: Accreditation is valid for 5 years.

 Continue to be eligible to submit project proposal and readiness grant proposal

Process

- (Sec) Notification letter to accredited IEs (15 months)
- (IE) A letter of an Expression of interest indicating its interest in re-accreditation and intention to submit the application 9 months prior to the accreditation expiration.
- (IE) Submission of re-accreditation in the Workflow

Streamlined accreditation process (smaller entities)



- Approved in April 2015
- In some countries, may be difficult to find suitable NIE candidates that are able to access up to USD 10 million
- Streamlined process:
 - Same accreditation standards
 - Flexibility in means of verification
 - Reduced time, effort
 - Possible limit to funding request

Policy: Environmental and Social (November 2013) and Gender Policy (March 2016)

Environmental and Social Policy now rolled out to operations and Gender policy approved in March 2016

At accreditation stage:

In addition to overall risk management capacity: systems to assess, mitigate and manage environmental and social risk and the commitment to gender equality



At project proposal stage:

- Screening against 15 principles of the ESP
- Categorization of proposed project
- Grievance mechanism

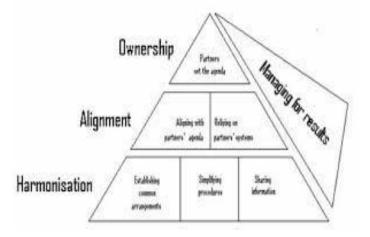


An Important Framework

Paris Declaration in 2005 and Accra Agenda for Action (AAA) in 2008

- ✓ Ownership: Developing countries set their own strategies for poverty reduction, improve their institutions and tackle corruption: encouraging local ownership
- Alignment: Donor countries align behind these objectives and use local systems: alignment of development programmes around recipient country's development strategy
- ✓ Harmonisation: Donor countries coordinate, simplify procedures and share information to avoid duplication: harmonization of practices to reduce transaction costs
- *Results:* Developing countries and donors shift focus to development results and results get measured: creation of results frameworks for development objectives
- Mutual accountability: Donors and partners are accountable for development results: ensuring mutual accountability.

The High Level Fora on Aid Effectiveness in 2011 further strengthened the five principles and embraced South-South and triangular development co-operation that include CSOs and private sector in addition to the traditional donors.







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