## Role of province, districts, urban councils and rural local authorities

- What is the mandate of provinces, districts, urban councils and rural local authorities in service provision? (e.g., Are they required to provide public health services? Outreach services? Supervision activities? Directly responsible for service delivery of health facilities? Financial management of all funds under their jurisdiction?)
- What are the reporting requirements for the various funding sources? What is the guiding financial legislation for each funding source?
- Do they receive transfers from central government? If so, how important are they (in both absolute and relative terms i.e., as a proportion of total revenue), and how reliable are they (in terms of timeliness and specific amounts)? If they receive the funds, what channels do they use? What instructions do these funds come with?
- How frequently are such transfers received (i.e., monthly, quarterly or annually)?
- Do provinces/districts/local authorities procure inputs (e.g., on an 'in kind' basis) on behalf of service providers? Does this differ based on the type of service provider?
- Do provinces (e.g., Provincial Management Team and Provincial Hospital Executive)/districts (e.g., District Management Team vs District Hospital Executive)/local authorities manage human resources on behalf of service providers? Is the wage bill centralized?
- Is the mandate of service delivery aligned with the financing flows at the province/district/local authority level? Does this support accountability?
- Do facilities provide plans and are they integrated with province/district/local authority budgets?
- How well do districts communicate province/district/local authority budget provisions to local service providers? (i.e., Do they know when they should expect grants or 'in kind' support and how much?)
- What is the oversight role of provinces/districts/local authorities (e.g., administrative structures) in service delivery?

# Provider autonomy

- What is the role of hospitals and primary care health centers in the budget? How do operational plans from RBF Health Centres feed into the budget process?
  - Do they receive a budget allocation?
  - Do they receive a grant?
  - Do they receive 'in kind' support from the provinces/districts/local authorities?
  - How frequently is any such support received (i.e., monthly, quarterly, annually)?
  - Are they independent cost centres?
- How much flexibility do facilities have in the utilization of resources?
  - Is spending strictly determined by what was in the budget?
  - Is spending locked to activities in the budget?
  - Is there opportunity for virement? If so, by how much? Is virement possible amongst broad spending categories? Is virement possible across programs? What are the rules?
  - o Do facilities have control over incentive payments? Can they hire contractual staff?
  - Does the level of flexibility differ, and if so how, depending on the source and/or purpose of the funding?
  - How is spending recorded (e.g., PFMS? Other systems or manual records?)
- Do facilities have access to financing services?
  - Do they use commercial bank accounts?

- Do they use linked accounts in the TSA / zero balance accounts?
- Do they use mobile money?
- o Do they operate Statutory or Retention Funds to facilitate operations?
- Can facilities retain revenue across fiscal years?
- What is the role of communities in managing health facilities? Are they a significant part of managing committees?

### **Basic financial management capacity**

- How are funds accounted for at the facility level (e.g., use of financial management systems and tools for documenting and reporting fund use?)
- How is fund use reported against?
- Is there adequate financial accountability?
- What are facilities allowed to purchase with funds, and is there confidence to control this?
- What FM support do facilities receive from the national/provinces/districts/local authorities?
- If provinces/districts/local authorities are responsible for accounting and reporting on fund use, what assurances are given that funds (or in-kind provisions) reach facilities?
- Is there periodic bank reconciliation?
- What type of controls (e.g. appropriations control? Budget control?) apply at facility spending? Are these adhered to and are these adequate? What's the reporting mechanism for these?

#### Unified payment system

- How many revenue sources are there per facility?
- Provide details by financing source (e.g., gov't budget; insurance payments; user fee collection; development partner contributions).
- Do these follow the government financial year?
- Are sources pooled at a higher level?
- Is there fragmentation of execution protocols across financing sources?
- Does the payment system support strategic facility management?
- Does the program budget structure fragment the payment system?

### Strategic purchasing or performance orientation in the budget

- How does the program budget reform relate to facility financing mechanisms? How do funds flow from the subprogram to facilities? Is this expected to change over time?
- Do facilities receive budgets against an output orientation?
- Is the budget evaluation process oriented to performance as well as compliance?
- How timely is the budget evaluation process?
- How credible are performance audits and do they inform the subsequent budget allocation process? How often are facility performance audits undertaken?
- How is facility performance monitored and verified? What systems are used?