

GUIDANCE NOTE

Implementing Partnership Management during the COVID-19 Pandemic

1. Background information

- In response to the COVID-19 pandemic, many Governments have enforced restrictions of movement, social distancing and limited face-to-face contact to curb the spread. These measures have a significant impact on programme implementation and working with implementing partners (“IP”) that warrant management consideration and discussion between offices and implementing partners.
- Currently there are ~2,000 active Programme Documents with CSO partners in place and UNICEF transferred US\$187 million to Implementing Partners (\$116M CSOs and \$71M to government partners)¹; to achieve critical results planned in first half of the year.
- Depending on individual country contexts, the situation of COVID19 may result in the suspension, cancelation and amendment of existing plans and commitments with implementing partners and initiating new partnerships to specifically address the pandemic.
- This guidance note is intended to complement the [UNICEF Emergency Procedures for Coronavirus \(COVID-19\)](#), issued by EMOPS on 20 March 2020. In responding to the COVID-19 pandemic, UNICEF and implementing partners should make use of all available procedural simplifications to expedite humanitarian responses.
- UNICEF policies and procedures are mandatory and provide alternative provisions and solutions for emergency contexts to offices on how to manage implementing partnerships during emergencies including the [CCCs](#), [General Terms and Condition](#) of the [PCA](#), the [UNDG HACT Framework](#) and the [UNICEF HACT Procedure](#) are applicable in all situations and provide flexibility to customize risk management processes in accordance with the operating environment and programming context.

2. Objectives

- This guidance note intends to provide suggested approaches and considerations on implementing partnership management to country and regional offices related to the unique challenges during the COVID-19 pandemic, including country movement restrictions, that impact upon programme delivery.
- The guidance note aims to complement efforts of country offices as they innovate Programme delivery and risk management approaches in the context of COVID-19 and their unique operating environment.
- This guidance note is not a procedure and is not mandatory. It is not intended to be a set of comprehensive instructions in response to the COVID-19 pandemic.

¹ Data obtained from the Partnership Analysis Cube as of 23 March 2020.

3. Guiding principles

- Offices should proactively assess, in consultation with their implementing partners, the impact of the COVID-19 pandemic on programme activities in active Work Plans signed with Government entities and active Programme Documents/Small-Scale Funding Agreements signed with Civil Society Organizations (CSOs).
- As a rights-based organization, it is important that UNICEF takes a principled approach in both the guidance we give and how that guidance is applied. Decision making in partnership management and prioritizations ensures due consideration of the Human rights-based approach, Do-no-harm, Centrality-of-protection and Non-discrimination principles and key considerations include:
 - The health and safety of the personnel and families of UNICEF and its implementing partners including CSOs, governments and the private sector. Adherence to government measures on social distancing and other means of restriction of movement should always be adhered to by all implementing partners of UNICEF and reflected in the way programme activities are implemented.
 - Minimizing transmission within and between communities, particularly the most vulnerable. There are clear equity considerations affecting vulnerability that relate to lack of access to adequate healthcare due to financial, geographic or other barriers.
 - The overarching humanitarian principle of Humanity should guide UNICEF and its implementing partners' response. This means that human suffering must be addressed wherever it is found, without discrimination, with the aim to protect life and health and ensure respect for human beings.
 - The imperative to save lives, protect health and alleviate suffering should guide our efforts to ensure continuity in providing assistance to affected populations Most critical activities are defined as lifesaving at scale that would have an immediate and significant impact on mortality. Ensuring continued delivery of critical programmes and preventing measures that would lead to programmatic failure or non-performance must be considered when making decisions.

4. Implementing partnership management considerations with CSOs

To complement this guidance, an externally available reference guide has also been developed to support CSO partners in navigating the impact of COVID-19 on programme partnerships with UNICEF:

[Partnership Management Between UNICEF and Civil Society Organizations in the Context of the COVID-19 Pandemic: Guiding Principles and Efficiency Measures](#)

4.1. Activation of contingency CSO partnerships

- Offices should consider the activation, via e-mail, of any Contingency Programme Documents developed as part of emergency preparedness.

4.2. Amendment of existing CSO partnerships

- Offices are advised to analyse their CSO partnership: number of active partnerships, estimated value of the partnership (disbursed and planned) as well as donor agreements and grant validity.
- If programme activities in active Programme Documents cannot be performed as originally planned, and are not deemed programmatically critical or relevant at this time, offices and the implementing partner may suspend or terminate the programme intervention as per the *force majeure* provisions in the [General Terms and Conditions](#) of UNICEF partnership agreements. Offices should assess the impact of termination or suspension on relevant grant agreements (e.g. terms and conditions on timeline and validity).
- Where the activities, timelines or budgets of existing Programme Documents should be amended to better respond to the COVID-19 pandemic, offices process [Programme Document Amendments](#). Offices should assess the impact of such amendments on relevant grant agreements (e.g. change in timeline and grant expiry) and potentially seek guidance from the PPD and/or PD focal point at headquarters for the corresponding donor if needed.
- Programme Document amendments related to the COVID-19 pandemic undergo review by the Deputy Representative (or Chief of Field Office if applicable), and approval by the Representative, using the [Programme Document Amendment Submission and Approval Form](#). No Partnership Review Committee assessment is required.

4.3. Establishment of new CSO partnerships

- When developing new partnerships, offices may opt for either an open selection or a direct selection with one of the 10,000 CSOs registered on the [UN Partner Portal \(UNPP\)](#). Alternatively, offices may engage CSOs via offline processes.
- New partnerships related to the COVID-19 pandemic preparedness and response for up to a 12-month period may be processed using the [Humanitarian Programme Document template](#), which is a simplified version of the standard Programme Document template. UNICEF offices can adopt a flat percentage for “Effective and Efficient Programme Management” costs to expedite budget development. No Partnership Review Committee assessment is required when processing Humanitarian Programme Documents.
- For first-time CSO partners that do not have a PCA with UNICEF: the [Small-Scale Funding Agreement](#) may be used to transfer up to US\$50,000 in cash in a 12-month period and, in addition, up to three months of humanitarian supplies, with no limit on the value of these humanitarian supplies. The use of the SSFA for humanitarian responses is appropriate for first-time CSO partners, and in cases where the scale of the emergency is either limited or supply-oriented.
- Humanitarian Programme Documents and SSFAs undergo review by the Deputy Representative (or Chief of Field Office if applicable), and approval by the Representative, using the [Non-PRC Submission and Approval Form](#) (no Partnership Review Committee assessment is required).

4.4. PSEA assessments for national CSO partners

- Offices are strongly recommended to conduct the remote PSEA assessments for national CSOs using the UN Partner Portal. This will be an opportunity for offices to increase the

number of partners with profiles in the UNPP. This will also facilitate the PSEA assessment to be available to other UN agencies. If utilizing UNPP is not possible, offices may opt for the self-assessment to be emailed.

- Offices conduct a PSEA toolkit training for national CSOs via webinars. This is suggested to be done in groups of maximum 12 partners, to provide enough time for questions and answers.
- One session includes the self-assessment exercise. National CSOs are walked through each core standard, and the requirements are explained. The partner self-scores, based on policies, procedures and systems in place within its organization.
- At the conclusion of the webinar, the national CSO finalizes the PSEA self-assessment and uploads it to the UNPP “Other Information” tab in a zipped file. The partner informs the UNICEF programme counterpart that the self-assessment is available on the UNPP.
- Office staff who have been trained in use of the toolkit and assessments reviews the self-assessment from the partner using the [Methodology for Review of Assessments](#). The reviewer either confirms that the supporting documents evidence the existence of the policies, procedures and systems, or requests additional supporting documents or clarification from the partner using the [Template for Feedback to CSO Partners](#).
- The partner informs the office when additional supporting documents have been uploaded to the UNPP.
- Office staff reviews additional supporting documents or clarifications and finalizes the ratings for all core standards. Office staff informs the partner of the final outcome of the verification process using the [Template for Feedback to CSO Partners](#).
- In the final feedback email, the partner is asked to upload the final feedback email into the UNPP “Other Information” tab.
- Regional Office (RO) IP Management Specialists in collaboration with RO PSEA focal points provide oversight and quality assurance of this process. For initial reviews, and until the process is well established, they review the draft feedback to national CSOs before it is sent to the partner, for quality and consistency in the application of the methodology.
- At the discretion of the RO, the quality review process may be waived if relevant. For example, where there is a full time PSEA Focal Point responsible for PSEA Assessments in the office.

5. Implementing partner risk management

- Offices should analyse the current value of cash and supplies disbursed with Government and CSOs, that are mid-implementation and may be affected by changes due to COVID-19.
- For new partnerships, priority is given to implementing partners with successful UNICEF partnership experience and proven ability to implement the activities and deliver on results as per prior programmatic and financial assurance activities.
- To the extent possible, and if alternatives are available, offices should limit developing partnerships with significant/ high risk CSOs.

- If a partnership agreement is to be signed with a first-time CSO partner (i.e. no valid PCA or SSFA in place), then (a) screening against the UN Security Council Sanctions List, (b) due diligence verification and (c) PSEA Assessment are conducted. Manual sanctions screening is waived for all CSOs with profiles on the [UNPP](#), as they undergo an automated screening process. Due diligence verification is waived for all CSOs with profiles on the UNPP that have successfully undergone due diligence verification by another UN agency. The PSEA assessment is waived for any new partner who has previously completed the UNHCR PSEA Checklist within the past 24 months.
- If new micro assessments cannot be completed or if the existing one has expired, offices assume high risk as per the current requirements. If the IP is not micro assessed and the agreement includes procurement by the partner above US\$5,000, a simplified remote procurement assessment should be conducted.
- Offices may require more detailed reporting by implementing partners, including statement of expenditures and more frequent reporting on indicators.
- If the implementation of activities is hampered and there are already large outstanding balances, Offices may amend the schedule of DCTs until the implementing partner partially or fully reports on outstanding balances and may consider changing the cash transfer modality to direct payment and/or reimbursement if there is no negative impact on programme implementation.

6. Assurance

6.1. Programmatic assurance / field monitoring

- Offices should discuss with each implementing partner what programmatic assurance could realistically be possible considering various scenarios (e.g. partial restriction of movement, full lock-down).
- Offices should adopt a risk-based approach to programmatic assurance, considering various variables such as the implementing partner risk rating, amount of funds transferred, programmatic assurance already performed as part of the ongoing programme document/ work plan, type of intervention (i.e. upstream versus downstream) and potential restriction of movement scenarios.
- Offices should prioritize and must conduct programmatic assurance for interventions that contribute directly to saving lives and where the consequences of failure are high. For other interventions, offices should consider reducing the frequency of field monitoring or postponing it for those interventions where the consequences of programme failure are low.
- Programmatic assurance requirements are postponed for implementing partners that will receive less than or equal to US\$ 50,000 in 2020 or that have undergone a programmatic visit in the previous 12 months for the same intervention that has resulted in no significant findings and recommendations.
- Offices should assess the possibility to utilize alternative and/or remote methods for programmatic assurance of partnership activities/results/supply-use, including:
 - Direct verification with implementing partners and beneficiaries using RapidPro, UReport, ONA, KoBo Collect or other digital data collection systems.

- Remote direct verification with beneficiaries in high SEA risk contexts or related to implementation by high SEA risk rated partners including SEA-related questions.
- Obtaining time/GPS tagged digital evidence (photos / video feeds / satellite / drone images).
- Triangulating data from Accountability to Affected Populations (AAP) mechanisms.

6.2. Financial assurance

- Scheduled spot checks and audits for medium and low risk implementing partners are postponed. The HACT Focal Point updates the office assurance plan accordingly. The HACT focal point and/or supply focal point should notify the service providers and amend the contract accordingly.
- Offices should adopt a risk-based approach to financial assurance, considering various variables such as the implementing partner risk rating, amount of funds transferred, programmatic assurance already performed as part of the ongoing programme document/work plan, type of intervention (i.e. upstream versus downstream) and potential restriction of movement scenarios).
- For HACT significant and high-risk partners, offices (or selected service providers) should, as much as is realistically possible, conduct spot checks remotely, by obtaining detailed list of transactions and requesting digital supporting documents for the sample selected (scanned copies).
- For HACT significant and high-risk partners, offices should consider requesting statements of expenditures to support FACE forms and review them for unusual or unbudgeted transactions. Offices can select some samples for review before approving the transaction.
- Offices to consider the materiality of cash transfers. If medium risk partners receive significant direct cash transfers as determined by the HACT Focal Point and Deputy Representative – Operations, offices may apply the above recommended procedures.

7. Transaction processing / cash transfers

- Request for funds: offices should place an increased scrutiny on deciding how much funds and/or supplies can be sent to implementing partners, carefully assessing what can realistically be implemented on a quarterly basis, considering various scenarios (e.g. partial restrictions of movement, full lock-down).
- Fund requests and releases should not exceed a 3-month period, even for low risk implementing partners.
- If implementing partners are encountering problems to physically sign the FACE forms and new PDs, an e-mail approval from the IP's authorized official should be accepted as temporary measure. If implementing partners have adopted Adobe electronic signature or similar technology for digital signatures, these are accepted in lieu of physical signature.
- Scanned copies of FACE forms and PCA/PD/SSFA will be accepted.
- On UNICEF approval signatures, offices can explore the use of digital signatures and accept e-mails from certifying, approving and verifying officers specifically mentioning the FACE/PRQ number in VISION which will be accepted by GSSC for processing.

- If a DCT has gone over 6 months or is anticipated to exceed 6 months due to a complete lock down where implementing partners are unable to move around or organize trainings and meetings, as a special measure, offices may enter reprogramming for 3 months as long as the grant is still effective. Offices refer to the requirements of [UNICEF's procedure on subsequent payment of direct cash transfers \(DCT\) to implementing partners with unliquidated DCT older than six months.](#)
- Recognizing that the situation is constantly evolving, offices are recommended to re-assess the status regularly with implementing partners. If the situation remains unclear regarding when activities can resume and the programme is not considered critical and can be postponed, the Programme Document may be terminated and the DCT balance should be returned.

8. eTools use and adoption

- eTools adopting offices are also recommended to utilize the breadth of information contained in eTools to inform the coordination and implementation of programming and assurance activities with partners during the COVID-19 pandemic.
- Offices in the process of adopting eTools can conduct trainings on specific modules via webinars for staff, implementing partners and third-party users.
- It is suggested to cover 1-2 modules during each webinar to ensure targeted messaging and use of each of the various eTools modules.
- To facilitate online trainings, a list of available resources and guides for each of the eTools modules can be accessed via the following link: eTools [online resources and guides](#).
- Following the webinars, offices should develop action plans to ensure the integration of eTools as part of the offices implementing partnership management processes.

9. Other considerations

- If the pandemic significantly impacts programme implementation, offices discuss the impact and measures taken with key donors, particularly for grants expiring in less than 6 months. Following guidance from PPD, donor agreements are amended if needed.
- If the pandemic significantly impacts the underlying operations and stability of the implementing partner, offices recommended to assess impact to UNICEF's programme, including their criticality, on a partner-by-partner basis and may consider exceptional measures, in consultation with the RO, DAPM and EMOPS.
- Scorecard indicators related to IP management and HACT remain unchanged and will be closely monitored and evaluated by the RO and DPAM at mid-year. Management should anticipate that the pandemic may result in offices not being able to meet the key performance indicators.
- At a global level, UNICEF is strongly engaged in collective dialogue, through the IASC and bilaterally with CSOs on streamlining processes to provide the most effective and least burdensome case by case negotiation where possible, to allow staff to focus on programme delivery. This also includes outreach and discussions with donors to support a common approach to funding flexibility for existing and new funding. We are committed

to sharing onward any new flexibility with downstream CSO partners, including further guidance on cascading of more flexible resources.

10. Key focal points

The RO Implementing Partnership Management Specialists are the main focal points related to implementing partnership management and provide support to country offices on all matters related to implementing partnerships, risk management and assurance, including on this guidance note.

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DOCUMENT MANAGEMENT INFORMATION PAGE

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Responsible Business Owner	DAPM, Programme Implementation Unit
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Document Summary	This guidance note intends to provide suggested approaches and considerations on implementing partnership management to country and regional offices related to the unique challenges during the COVID-19 pandemic, including country movement restrictions, that impact upon programme delivery.
Topics Covered	<ul style="list-style-type: none"> • Implementing partnership management considerations with CSOs Cash transfers • Implementing partners risk management • Assurance over cash transfers to implementing partners • Cash transfers to implementing partners • eTools
Links to Relevant Policy and Procedures	UNICEF Emergency Procedures for Coronavirus (COVID-19) HACT Framework (UNDG) UNICEF HACT Policy UNICEF Financial and Administrative Policy 5: Cash Disbursement Policy on Conduct Promoting the Protection and Safeguarding of Children UNICEF's procedure on subsequent payment of direct cash transfers (DCT) to implementing partners with unliquidated DCT older than six months. Instructions on Subsequent Payment of an Advance when there is an existing Outstanding DCT Advance UNICEF Procedure on Impairment and Write-off of Direct Cash Transfers UNICEF Procedure for Country and Regional Office CSO Implementing Partnerships UNICEF Procedure for Managing Risks of Sexual Exploitation and Abuse in Implementing Partnerships eTools online resources and guides