

Memorandum on Gavi's programme audit in the Republic of Togo

The attached audit report sets out the conclusions on the programme audit of Gavi's support to the Government of Togo's national immunisation programmes, as managed by the Ministry of Health, Public Hygiene and Access to Universal Health Coverage (MSHPAUS).

The audit was conducted by Gavi's programme audit team between June and August 2021. It reviewed the period from 1 January 2018 to 31 December 2020. The audit scope covered the MSHPAUS's management of Gavi grants, the Expanded Programme on Immunisation, and vaccine supply management processes.

The audit report's executive summary (pages 3 to 5) sets out the key conclusions, details of which are described in the body of the audit report. These included:

1. There is an overall rating of **needs significant improvement** in managing Gavi's support, which means that "one or few significant issues were noted. Internal controls, governance and risk management practices have some weaknesses in design or operating effectiveness such that, until they are addressed, there is not yet reasonable assurance that the objectives are likely to be met."
2. Fourteen weaknesses were identified relating to weaknesses in: governance, oversight and operations, and non-compliance with Partnership Framework Agreement requirements.
3. Key findings included the following elements:
 - a. Shortcomings were observed in a dysfunctional Inter-agency Coordination Committee, as well as weaknesses in the execution of the Annual Workplan planning process, thus delaying the adoption and operationalisation of these Workplans;
 - b. The MSHPAUS's Division of Control and Internal Audit needs to implement suitable processes to effectively carry out its mandate, while improving coordination with the Internal Audit unit from the Programme Management Unit (PMU-FM), as the latter also managed Gavi's Health Systems Strengthening funding;
 - c. Shortcomings in internal controls were noted including: the monitoring of programme advances, fixed asset accounting and management and archiving of digital records;
 - d. The PMU-FM is several years behind schedule in the digitisation of supporting accounting records, while the storage and archiving of accounting records remains an issue for the sites visited at the Regional Directorate of Health level;
 - e. Insufficient application of inventory good practices and an ineffective vaccine supply management framework contributed to the absence of reliable vaccine stock records;
 - f. Stock count discrepancies were identified by the audit between the closing balance and opening balances of vaccines between periods, combined with a lack of reports or inventory summaries, as well as poor documentation and investigation of stock discrepancies.
 - g. Staff concerned were not trained on Standard Operating Procedures for 'Effective Vaccine Management', leading to miscellaneous vaccine and stock management practices;
 - h. Preventative and curative maintenance of cold chain equipment needs to be strengthened, by instilling the regular execution and compliance with maintenance plans and contracting specialised maintenance service providers;
 - i. Not all supervision visits planned in the Immunisation Division's Comprehensive Multi-Year Plan were carried out, and there was no systematic follow up of weaknesses identified;
 - j. Discrepancies were identified between primary records and data input into the 'District Health Information Software', raising concerns over the reliability of immunisation data reported by the country.

The results of the programme audit have been discussed and agreed with the Ministry of Health and Public Hygiene, including their commitment to remediate the identified issues.

The Gavi Secretariat continues to work with the MSHPAUS to ensure that the implementation of the action plan to address the audit findings is assumed by them.

Geneva, October 2022

PROGRAMME AUDIT – AUDIT REPORT

THE TOGOLESE REPUBLIC

DECEMBER 2021



1. Executive Summary

1.1. Audit ratings per category and finding

Section*	Finding	Risk*	Page
4.1	Governance and management arrangements		11
4.1.1	Deficiencies noted in the functioning of the governance bodies	■	11
4.1.2	Weak planning process of the programmed activities	■	12
4.1.5	Deficiencies identified in the internal control framework	■	13
4.2	Financial and accounting management		14
4.2.1	Weaknesses in the management of advances and the treasury function	■	14
4.2.2	Insufficient storage space for accounting records and delays in referencing supporting documents	■	15
4.2.3	Weaknesses in financial accounting and management of fixed assets	■	16
4.3	Vaccine supply management		17
4.7.1	Lack of training on standard operating procedures and infrequent evaluations	■	17
4.4.1	Incoherent records in the stock system, and low level of system utilisation at the decentralised level	■	18
4.4.1	Stock counts conducted irregularly and results not documented	■	20
4.4.1	Unexplained gaps between SMT closing and opening stock records at the central level	■	21
4.5.1	Cold Chain preventative and curative maintenance done irregularly	■	23
4.5.3	Inadequate cold chain equipment management and physical security	■	25
4.6	Monitoring and evaluation		27
4.5.1	Irregular supervision	■	
4.6	Data Management		29
4.6.1	Incoherent data records and ineffective quality control over certain districts' inputs	■	29

Section*	Finding	Risk*	Page
4.6	Procurement		31
4.6.1	Procurement management	■	31

1.2. Overall audit opinion

Needs significant improvement – the Internal controls, governance and risk management practices have some weaknesses in design or operating effectiveness such that, there is not yet reasonable assurance that the objectives are likely to be met.

So as to reduce the risks associated with the findings, the team raised 14 recommendations, requiring the implementation of the remedial action plan.

* The audit ratings attributed to each section of this report, the level of risk assigned to each audit finding and the level of priority for each recommendation, are defined in Annex 3 of the audit report.

1.3. Executive Summary

The main findings relating to the management of funds and vaccines are summarised below.

Governance and management arrangements

The governance mechanisms framing the management of Gavi's grants, cover both financial and programmatic issues, and are designed around an organisational structure aimed at operationalising immunisation programmes across all the health system.

The shortcomings identified by the Gavi programme audit mainly relate to certain dysfunctions of the Inter-Agency Coordination Committee (ICC), and weaknesses in the implementation of the Annual Work Plan (AWP) planning process, undermining the timely adoption and operationalisation of the AWP's concerned.

An internal control framework was designed to prevent and monitor for any failures in the management of Gavi programmes by the Ministry of Health, Public Hygiene and Universal Access to Care (MSHPAUS), in order to mitigate any weaknesses or adverse effects thereon. This internal control framework needs to be strengthened by the Management Control and Internal Audit Division (DCGAI) by putting in place suitable tools to enable the division to carry out its mandate effectively. In addition, there needs to be better coordination and synergy between the DCGAI and the Internal Audit unit from the Project Management Unit (PMU-FM) in order to achieve this.

Financial and accounting management

The audit team did not question any transactions based on the sample of expenditures it reviewed (see section 1.4. Audit finding quantification). This highlights considerable improvement when compared to Gavi's prior 2014 audit which largely focused on financial management and identified ineligible expenditures totalling approximately USD 200,000. Nevertheless, some shortcomings in internal controls were still noted. These relate to the monitoring of programme advances, the accounting and management of fixed assets and the archiving of digital records.

A summary of the bank and cash situation was not shared with Gavi every three months, as mandated by the Grant Management Requirements, and programme advances were not always justified within the maximum deadline, as specified by the tripartite contractual agreement. Similarly, the management of fixed assets was not undertaken using asset module provided, within the integrated accounting system.

In addition, the digitisation of supporting accounting records by the PMU-FM is several years

behind schedule. Finally, the storage and archiving of accounting records remains an issue for the sites visited at the Regional Directorate of Health level.

Vaccine supply management

The audit team noted the absence of reliable vaccine stock records, due to the insufficient application of inventory good practices (e.g., irregular physical stock counts, a lack of reports or inventory summaries, poor documentation of any discrepancies from stock counts – as demonstrated by the audit team's own inventory checks) and an ineffective control framework.

The audit team's analysis of the Stock Management Tool illustrated the impact of poor-quality data, potentially resulting in sub-optimal decision-making on the management and replenishment of vaccines. Significant discrepancies between the year-end closing stock and opening stock vaccine balances were identified, which were not followed up or investigated further.

Other data anomalies, including excessive days of stock out (up to 365 days for certain antigens) and overstocked quantities (155% for the Measles containing vaccine in 2020) remained unexplained.

The vaccine handling management framework and its operationalisation was a concern, due to delays in conducting the next Effective Vaccine Management assessment and because the staff concerned were not trained on the Standard Operating Procedures (SOP).

In addition, the preventive and curative maintenance of cold chain equipment must be strengthened, by instilling regular execution and compliance with maintenance plans, and by the contracting of specialised maintenance service providers.

Monitoring and evaluation

The Immunisation Division's Comprehensive Multi-Year Plan (cMYP) provides for supervision visits across the health system, from the top to bottom. These supervisions should make it possible to identify weaknesses and problems in order to implement the continuous improvement of practices.

However, the audit team found that supervision visits were conducted irregularly, and there was no systematic feedback of trip reports and weaknesses identified, from the sub-national level back to the central level Immunisation Division.

Furthermore, recommendations made in the supervision reports were not followed up during subsequent supervision visits.

Data Management

Since 2018, DHIS2 (District Health Information System) has been deployed in Togo as the main tool for managing health information across all levels of the health system.

The audit team noted inconsistencies in the immunisation data reported by some districts (including negative wastage rates) calling into question the data quality and integrity, and making it difficult to rely upon. In particular, this was due to a lack of effective controls over the health facilities' data input into DHIS2.

Procurement

The audit did not identify any significant findings or improvements in relation to the procurement and contracting management process.