

A. COVER PAGE

1. Fund Name: Joint SDG Fund

2. MPTFO Project Reference Number

3. Joint programme title: *Improving efficiency, effectiveness and equity in Public Expenditure in Jamaica for SDG acceleration.*

4. Short title: Accelerating sustainable financing towards SDG in Jamaica

5. Country and region: Jamaica, Latin America and the Caribbean

6. Resident Coordinator: RC a.i. Mariko Kagoshima, mkagoshima@unicef.org

7. UN Joint programme focal point: Vicente Teran, UNICEF vteran@unicef.org

8. Government Joint Programme focal point: Barbara Scott, Planning Institute of Jamaica, Barbara_Scott@PIOJ.gov.jm

9. Short description:

The Government of Jamaica (GoJ) has made significant strides in localizing and integrating the SDGs in its planning framework, evidenced by over 91% alignment with the country's Vision 2030 National Development Plan (NDP). The NDP is currently financed through the national budget; however, this financing model is challenged by tight budgetary constraints and limited fiscal space for additional debt.

The Joint Programme (JP) will strengthen the Public Finance Management capacity of the Ministries of Finance and Public Service; Education, Youth and Information; and Health and Wellness thereby ensuring efficient, effective and equitable resource allocation towards the achievement not only of the SDGs, but also of the country's national outcomes reflected in Jamaica Vision 2030. This increased capacity, together with diagnostic budget analyses, development of financial simulation models and budget tracking systems, will enable the reprioritization of funds to services which affect the most deprived and vulnerable populations including children and women and people with disabilities.

By building capacity, promoting accountable and transparent financial management systems and processes, and linking the budget programs of the country to the SDGs, the JP will contribute to achievement of SDG 16 and 17. The JP will thus accelerate progress to achieve SDGs 3 and 4, and in addition has the potential to contribute indirectly to SDGs 1, 8 and 10 by improving the health and education status of citizens, and focusing on the most marginalized groups of society. It will also contribute to achieving SDG 5 by prioritizing gender transformative interventions when conducting public expenditure analyses and defining key performance indicators.

This approach could be replicated in the future to cover more Ministries thereby impacting additional SDG targets.

10. Keywords:

- Public Financial Management
- Medium Term Results Based Budgeting
- SDGs aligned to the Vision 2030 Jamaica National Development Plan
- Efficient, effective and equitable resource allocation
- Transparency

- Results-based Budgeting
- Accountability

11. Overview of budget

Joint SDG Fund contribution	USD 992,425.00
Co-funding Resources UNICEF, PAHO, UNDP	USD 220,800
TOTAL	USD 1,213,225.00

12. Timeframe:

Start date	End date	Duration (in months)
<u>1/7/2020</u>	<u>30/6/2022</u>	<u>24</u>

13. Gender Marker: 2

14. Participating UN Organizations (PUNO) and Partners:

14.1 PUNO

- Convening agency: UNICEF
- Other PUNO: PAHO/WHO, UNDP

14.2 Partners

Government of Jamaica;

- **Planning Institute of Jamaica- Wayne Henry**, PHD (Director General) dg@PIOJ.gov.jm
- **Ministry of Finance and Public Service (MoFPS)-** Lorris Jarrett (Deputy Financial Secretary) lorris.jarrett@mof.gov.jm
- **Ministry of Education, Youth and Information (MoEYI)-** Grace McLean (Acting Permanent Secretary.) grace.mclean@moe.gov.jm
- **Ministry of Health and Wellness (MoHW)-** Dunstan Bryan (Permanent Secretary) dunstan.bryan@moh.gov.jm

International Financial Institutions:

- **World Bank-** Ozan Sevimli (Resident Representative) osevimli@worldbank.org
- **Inter-American Development Bank -** Adriana La Valley (Chief Operations), AdrianaLV@iadb.org

SIGNATURE PAGE

<p>Resident Coordinator a.i. <i>Name: Mariko Kagoshima</i> <i>Date:30/3/2020</i> <i>Signature and seal</i></p>	<p>National Coordinating Authority <i>Planning Institute of Jamaica</i> <i>(letter accompanying proposal)</i></p>
<p>Participating UN Organization (lead/convening) <i>Name of PUNO: UNICEF</i> <i>Name of Representative: Mariko Kagoshima</i> <i>Date:30/3/2020</i> <i>Signature and seal</i></p>	
<p>Participating UN Organization <i>Name of PUNO: PAHO/WHO</i> <i>Name of Representative: Dr.Bernadette Theodore-Gandi</i> <i>Date:30/3/2020</i> <i>Signature and seal</i></p>	
<p>Participating UN Organization <i>Name of PUNO: UNDP</i> <i>Name of Representative: Denise Antonio</i> <i>Date:30/3/2020</i> <i>Signature and seal</i></p>	

Abbreviations and Acronyms

ASTEP	Alternative Secondary Transition Education Programme
CAP	Career Advancement Programme
CDB	Caribbean Development Bank
GDP	Gross Domestic Product
GoJ	Government of Jamaica
ERP	Economic Reform Programme
IDB	Inter-American Development Bank
IFI	International Financial Institution
IMF	International Monetary Fund
JP	Joint Programme
KPI	Key Performance Indicator
MDA	Ministry, Department, Agency
MIND	Management Institute for National Development
MoEYI	Ministry of Education, Youth and Information
MoFPS	Ministry of Finance and Public Service
MoHW	Ministry of Health and Wellness
MTF	Medium term Socio-Economic Policy Framework
MTRBB	Medium term Results Based Budgeting
NDP	National Development Plan
NO	National Outcome
PAHO	Pan American Health Organisation
PER	Public Expenditure Review
PF4C	Public Finance for Children
PIOJ	Planning Institute of Jamaica
PFM	Public Financial Management
PSMP	Public Sector Modernization Programme
RBB	Results Based Budgeting
RC	Resident Coordinator
RCO	Resident Coordinator Office
RHA	Regional Health Authority
SC	Steering Committee
SDG	Sustainable Development Goal
SLA	Service Level Agreement
UNDP	United Nations Development Programme
UNICEF	United Nations International Children's Emergency Fund
UN MSDF	UN Multi country Sustainable Development Framework
WBG	World Bank Group
WHO	World health Organisation

B. STRATEGIC FRAMEWORK

1. Call for Concept Notes: SDG Financing (2/2019) – Component 1

2. Programme Outcome [pre-selected]

- Additional financing leveraged to accelerate SDG achievement (Joint SDG Fund Outcome 2)

3. UNDAF Outcomes and Outputs: The project is aligned to the United Nations Multi-Country Sustainable Development Framework in the Caribbean (2016), that in turn is aligned to SAMOA Pathway and the Jamaican Vision 2030 National Development Plan.

3.1 Outcomes

- Access to quality education and life-long learning increased, for enhanced employability and sustainable economic development.
- Universal access to quality health care services and systems improved.
- Capacities of public policy and rule of law institutions and civil society organizations strengthened.

3.2 Outputs *UNMSDF*

- Output 1.1.2 - Improved institutional capacity to ensure the availability of and demand for quality education services
- Output 2.1.1 - National capacity to integrate and improve access to sexual and reproductive health services targeting underserved populations increased
- Output 2.2.2 - Strengthened institutional capacity for delivery of quality health services for newborns and their caregivers
- Output 3.1.1 - National systems to collect, analyze and use data and evidence are able to regularly monitor and report on the situation of women and children and inform legal reform, policies and budgets
- Output 3.1.13 - National systems to collect, analyze and use disaggregated data and evidence enhanced to regularly monitor and report on priority/ vulnerable population and inform legal reform, policies and budgets

4. SDG Targets directly addressed by the Joint Programme

4.1 List of goals and targets

The project contributes directly to **SDG 17** (Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development) and **SDG 16** (Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions) by working on Target 17.9 and Target 16.6.

Target 17.9: Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the Sustainable Development Goals

- # of Ministries applying RBB principles and have functioning monitoring systems in place (baseline:0 target (2022):2 ministries and all their depending Agencies)
- # of education and health programmes that show efficiency gains (baseline:0 target (2022):6)

Target 16.6: Develop effective, accountable and transparent institutions at all levels

- Government budgeting system available to track expenditures by strategic targets (SDGs/Vision 2030) (Baseline:n/a target: (2022):Exists and publicly available)

4.2 Expected SDG impact

The JP will accelerate progress on achieving SDGs by improving the effectiveness of PFM institutions (SDG 16) and by building capacity to support the achievement of Jamaica Vision 2030 National Development Plan (SDG 17). Working on the financial capacities of MoEYI and MoHW to aid more efficient, effective and equitable public spending, the JP is expected to accelerate the progress in the following SDG targets:

- Target 4.1: By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes
- Target 4.2: By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education
- Target 4.5: By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations
- Target 4.A: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all
- Target 4.C: By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing state.

- Target 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age
- Target 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being
- Target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
- Target 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all
- Target 3.C: Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States

5. Relevant objective(s) from the national SDG framework

Jamaica has demonstrated its commitment to achieving sustainable development through its national development planning process and frameworks. Vision 2030 Jamaica National Development Plan, the country's first long-term national development plan, commenced implementation in 2009 and has been sustained through bi-partisan support. Vision 2030 Jamaica represents an integration of the three dimensions of sustainability, underpinned by the core principles of sustainable development and inclusive growth, equity and good governance. Another central guiding principle of the plan is people-centeredness. The achievement of the goals and outcomes is designed to improve the lives of all people and provide them with opportunities to achieve their fullest potential as change agents and beneficiaries in achieving social security, economic prosperity and safeguarding the planet.

The Joint Programme is aligned to 3 national outcomes spread across 2 national goals within Vision 2030 Jamaica.

- Goal 1: Jamaicans are empowered to achieve their full potential
 - A healthy and stable population
 - World-class education and training

- Goal 2 The Jamaican Society is secure, cohesive and just
 - Effective governance

6. Brief overview of the Theory of Change of the Joint programme

If the MoEYI and MoHW officials have the capacity to prepare a Results Based Budget which prioritizes expenditure to achieve the delivery of quality education and good health and well-being results, and **If** the MoFPS has the systems and processes in place to identify actual expenditure allocated to prioritized Vision 2030/SDGs targets so as to focus expenditure on strategic priorities and maximize SDG/Vision 2030 service delivery outcomes

Then the budget allocation and expenditure for education and health, will be both optimally used and attract higher allocations for priority targets.

Because a well performing PFM system improves allocative and operational efficiency and leads to more confidence from donors, partners, IFI's and the private sector to invest, and by doing this, increases the likelihood of achieving the SDGs.

C. JOINT PROGRAMME DESCRIPTION

1. Baseline and Situation Analysis

1.1 Problem statement (max 2 pages)

In 2013, following a long period of low and volatile growth coupled with large fiscal deficits and deteriorating debt dynamics, the Government of Jamaica (GoJ) embarked on a program of fiscal consolidation with the support of the International Monetary Fund (IMF), the Inter-American Development Bank (IDB) and the World Bank Group (WBG). The Government undertook an Economic Reform Programme (ERP) that included a wide range of reforms primarily to stabilize the economy, reduce debt, and fuel growth. Actions to achieve the objectives of this program included reducing the public debt, maintaining macroeconomic stability, facilitating job creation and improving labor force productivity.

Jamaica has succeeded in reducing its public debt-to-GDP ratio from 145 percent of GDP at the start of FY 2013/14 to 94.4 percent in FY 2018/19. Furthermore the national poverty rate has reduced from 24.6 percent in 2013 to 17.1 percent in 2016 as growth resumed. The rate of unemployment also fell to a historic low of 7.8 percent in April 2019, which is almost half the rate at the start of the reform program.

Notwithstanding the valiant efforts to improve the economic situation, Jamaica continues to grapple with several social development challenges including widespread poverty and inequality, high unemployment especially among females and youth, and one of the highest levels of crime and violence in the world, especially in poor and disadvantaged communities. These challenges are exacerbated by the diminishing fiscal space, the less than optimal allocation of resources across and within line ministries, as well as inefficiencies in service delivery implementation. Baseline information on the SDGs suggests that Jamaica still faces issues with certain education and health targets. In the Education sector, challenges include participation levels (especially among boys), lack of children progressing through the system, chronic under-performance and, in some cases, even the failure of children to complete their education¹. This is particularly evident in the higher dropout rates of boys at the upper secondary level, and from schools located in lower socio-economic communities in rural and urban areas. In the Health sector, challenges include persistently high teen-pregnancy rates and poor maternal and child-health outcomes, particularly the stagnation in the downward trend of maternal mortality and under-five mortality rates.

Diminishing Fiscal Space

The GoJ has made significant progress in fiscal management and has successfully put in place a fiscal rule to entrench fiscal discipline. Despite this, Jamaica remains one of the world's most indebted countries. A large proportion of revenue is dedicated to interest payments and salaries, resulting in the crowding out of social expenditure which compromises social outcomes and the achievement of the SDGs. In the 2019/20 budget, debt servicing costs amounted to roughly 34 percent of the total budget whereas the MoEYI and the MoHW received only 13.8 percent and 9.1 percent respectively. This means that Jamaica is challenged in adequately investing in its citizens and advancing Vision 2030 and the SDGs because it still has a relatively high debt burden.

Since it is unlikely that there will be additional resources available for social spending, it becomes increasingly important to improve the management of public finances so as to focus on strategic priorities and maximize service delivery outcomes. The GoJ introduced Medium Term Results Based Budgeting (RBB) in 2015 aiming to reform the budget process and better align spending with anticipated results. The objective of RBB is to link budgeting with Government policy priorities through a gradual transition from annual expenditure planning to a fully functional Medium Term Results Based expenditure framework which will improve accountability and ensure more efficient and effective allocation of resources.

The successful implementation of RBB across Government is taking longer than anticipated. There are still gaps in the MDAs' capacity to fully implement the reforms. This has resulted in the need for improvements in resource allocation to policy priority areas as well as efficiencies in service delivery.

¹ UNICEF and CAPRI, (2018), Situation Analysis of Jamaican Children

Persistent resource allocation and implementation inefficiencies: Education and Health

To reap the benefits of the budget reform initiatives requires capacity and capability within the MDAs. To date, there are capacity constraints to fully realizing the benefits of the RBB system. The National Medium Term Socio-Economic Policy Framework 2018 – 2021 prioritizes establishing mechanisms towards sustainable financing, strengthening the capacity for evidence-based decision making, and developing human capital in the state. In the quest for prioritizing investments towards achieving the SDGs, it is therefore necessary to strengthen capacity within MDAs on public finance management and RBB, especially in the health and education sectors.

Jamaica has been noted for its impressive investment in education which compares favourably with developed countries; however, the allocation of expenditure shows disparities. There remains a disconnect between policy priorities and expenditure allocations. For example, a priority in the Education Strategy is to increase access to early childhood education and development programmes, requiring more resource allocation in the sector to improve the quality of early childhood education and to implement the various life cycle-based intervention programmes. Yet, in 2019/2020, despite roughly 14 percent of the national budget (J\$109.4 billion) being allocated to the education sector, the early childhood sector received only 3.1 percent (J\$3.4 billion) of this. The lack of monitoring and evaluation capacity is also a challenge, as there are gaps in collecting information and data on the efficiency and effectiveness of long-standing programmes.

Although the MoEYI has been implementing RBB and there has been a concerted effort in the most recent budget to reduce the number of programmes to 5 with 18 sub-programmes, there are still weaknesses in the approach. There is no explicit policy context for the budget, and spending/policy trade-offs are unclear. The linkage between expenditure and results is also weak. The RBB should be providing better information on the link between government's policy priorities and plans, and the use of its resources. Strengthening the implementation of RBB would improve budget allocations to strategic priorities resulting in more efficient and effective service delivery.

Previously ranked eighth worldwide in terms of efficiency², the health system has also been challenged by the decreasing fiscal space. By almost every measure, public health expenditure has increasingly lagged behind comparator countries, and remains below levels recommended to achieve universal health coverage. Currently, public expenditure in health represents 3.47% of GDP, however international experience has shown that 6% of GDP is a useful benchmark and a necessary condition to achieve Universal Health (MoHW, 2019).

There are also weaknesses in the MoHW's distribution of expenditure. The Assessment of the Public Healthcare Delivery Services in Jamaica undertaken by the Pan American Health Organisation (2017) and the report on the Review of Public Health Expenditures developed by the World Bank (2017) outlined several deficiencies in the stewardship of the MoHW. These deficiencies include (i) inadequate capacity for health planning at the level of the Ministry and at the level of the Regional Health Authorities (RHAs) which has resulted in poor implementation of health policies; (ii) challenges to develop evidence-based policy and monitor outcomes; (iii) Lack of accountability and monitoring and evaluation at the RHA level hampers evidence-based decision making; and (iv) institutional arrangements for service delivery are challenged by poor reporting requirements, performance targets set on an ad hoc basis, and a lack of action for noncompliance with reporting or missed targets.

² Evans, D. B., Tandon, A., Murray, C. J., & Lauer, J. A. (2000). The comparative efficiency of national health systems in producing health: an analysis of 191 countries. *Geneva: World Health Organization*.

1.2 SDGs and targets (max 2 pages)

Promoting accountable and transparent financial management systems and processes, and linking the budget programs of the country to the SDGs, will provide more detailed information on specific expenditure allocated to the SDGs thus enabling reprioritization of funds to accelerate their achievement. The project contributes directly to **SDG 17** (Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development) and **SDG 16** (Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions) by working on Target 17.9 and Target 16.9

Target 17.9: Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the Sustainable Development Goals

- # of Ministries applying RBB principles and have functioning monitoring systems in place (baseline:0 target: 2 ministries and all their depending Agencies)
- # of education and health programmes that show efficiency gains (baseline:0 target for 2023: 6)

Target 16.6: Develop effective, accountable and transparent institutions at all levels

- Government budgeting system available to track expenditures by strategic targets (SDGs/Vision 2030) (Baseline: No target: Yes (2022))

Working on the financial capacities of MoEYI and MoHW to aid more efficient, effective and equitable public spending, the JP is expected to accelerate the progress on two key social SDGs, and contribute to poverty reduction and sustainable development. The new capacities will enable a paradigm shift towards more efficient spending within key social areas and increased budget allocations to address the needs of those communities and groups more in need (considering gender, disability and marginalized communities). The JP furthermore contains cross-linkages to other SDGs as follows:

SDG 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

Since Jamaica's independence in 1962, the country has made significant strides towards providing access to quality and equitable education for its citizens. Nonetheless, significant gaps remain in access to quality education. According to the World Bank's Human Capital Index Brief, a child born today in Jamaica, given prevailing investments in education and health, will only be 54 percent as productive as she could be if she had access to services on the global frontier of quality. A significant portion of this gap is attributable to low learning relative to years of schooling. Although Jamaicans on average complete 11.7 years of schooling, those years are equivalent to only 7.2 years of learning when benchmarked against top-performing systems. Under Vision 2030 Jamaica National Development Plan (2009–2030), the country is pursuing a path towards the achievement of "World Class Education and Training" resulting in a citizenry empowered to achieve its fullest potential. The strategic framework for the achievement of "World Class Education and Training" is closely aligned with the imperatives and targets of SDG 4.

SDG Targets Prioritized-MoEYI	Indicators - Baseline – Targets (2025)
Target 4.1: By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes	<ul style="list-style-type: none"> • Mean Score in Grade Six Achievement (GSAT)- Mathematics 57%(2016) Target 75% • Out of School adolescents - 4,000 Target -5,000 • % students in grade 11 who passed CSEC Examination on Mathematics 33% (2018) Target 50%
Target 4.2: By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education	<ul style="list-style-type: none"> • % Children Age 36-59 Who Are Developmentally On Track - 89% (93% girls/86% boys) Target:95% • % of MoEYI budget allocated to Early Childhood Education Baseline: 3.1% (2019) Target:5%
Target 4.5: By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations	<ul style="list-style-type: none"> • Net enrollment secondary (%) - Female 76% Male 72% (2018 UNESCO) Target: 90% (both sexes) • Ratio of Proportion of students in grade 11 who passed English and Mathematics CSEC Examination (male vs female) - 0.60 (2017) Target: 0.9 • Proportion of students in grade 11 who qualified to go to University in CSEC Examination: 36.2% (among 10 top performing schools: 98.1% and 10 lowest performing schools 2.5%) (2018)
Target 4.A: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all	<ul style="list-style-type: none"> • % of schools with access to adapted infrastructural and materials for students with disabilities Primary-13% Secondary-25% Target: 70% Primary Target 75% Secondary • % of schools with Internet for pedagogical purposes Primary-70% Secondary-100% Target 100%
Target 4.C: By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing state.	<ul style="list-style-type: none"> • Proportion of teachers who have received at least the minimum organized teacher training (e.g. pedagogical training) pre-service <ul style="list-style-type: none"> • Pre-primary 83% (2017)- Target: 100% Primary 93% (2017) Target: 100% Secondary 83% (2017) Target: 100%

SDG 3: Ensure healthy lives and promote well-being for all at all ages

Aligned with the Vision 2030 Jamaica National Development Plan, and by extension the SDGs, the Vision for Health 2030 Strategic Plan aims to improve the health and well-being of the population through 8 health impact goals which embrace the progressive realization of universal access to health and universal health coverage as a central approach. This will enable the consolidation of advances in maternal and child health and control of communicable diseases, reduce the burden of chronic diseases with innovative models of care that include prevention and health promotion, as well as reduce gaps in the access to and utilization of health services.

SDG Targets Prioritized-MoHW	Indicators - Baseline -Target 2025
Target 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age	<ul style="list-style-type: none"> • Under 5 Mortality Rate(2019)- 14 death per 1,000 newborn Target:10 per 1,000 • Neonatal Mortality Rate (2019) 10 death per 1,000 newborn Target:6 per 1,000
Target 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being	<ul style="list-style-type: none"> • Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease 2014 (67%) Target: 60% • Suicide mortality rate 2015 (2 per 100,00 population) Male:3.5 Female 0.6 Target: 1 per 100,00 population
Target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education	<ul style="list-style-type: none"> • Adolescent birth rate aged 15–19 years) per 1,000 women in that age group (2011)-72 per 1,000 adolescent girls Target: 45

Target 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines

- Population reporting having a health problem who do not seek formal health care services: 15.6% (Household survey) Target: 10%
- Out-of-pocket health expenditure vs % total expenditure (2016) 22.4% Target: 20%

Target 3.C: Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States

Public health expenditure as percentage of GDP Baseline (2019) 3.47% Target 2030 6%

Multiplier Effects of the JP

The JP furthermore contains cross-linkages to other SDGs as follows:

SDG 5: The JP will ensure gender equality by prioritizing gender transformative interventions when conducting public expenditure analysis. Further gender interventions include:

- Assisting MDAs to refine their Key Performance Indicators (KPIs) to include gender-informed indicators to assess programmes and ensure that disaggregation is considered as part of the RBB roll out;
- Reflecting gender in all training material and manuals;
- Tracking expenditure and efficiency of expenditures on gender transformative programmes (such as initiatives aimed to improve learning outcomes for boys, fighting gender stereotyping and toxic masculinities across the education sector, access to quality newborn and maternal health and gender-responsive adolescent health services).

It will thus contribute to several of the targets under SDG 5, including ensuring universal access to sexual and reproductive health and reproductive rights (5.6), and adopting and strengthening sound policies and enforceable legislation for the promotion of gender equality (5C).

SDG 10: The JP will focus on promoting equity under the 2030 Agenda transformative promise of Leave No One Behind (LNOB), prioritizing poverty eradication, ending discrimination and exclusion and reducing the inequalities and vulnerabilities that exclude people from development. It will do this by ensuring that all capacity building and expenditure tracking will include a focus on the distribution of resources across income groups so as to enable better targeted service delivery in a more equitable approach, and thereby reorient finances to programs and service delivery affecting the most disadvantaged groups, with a special focus on children with disabilities.

1.3 Stakeholder mapping and target groups

The following national Ministries, Department and Agencies (MDAs) will be involved in the design and implementation of the JP:

Ministry of Finance and Public Service (MoFPS)

The MoFPS has overall responsibility for developing Government's fiscal and economic policy framework; collecting and allocating public revenues and playing an important role in the socio-economic development of the country by creating a society in which each citizen has every prospect of a better quality of life. The MoFPS has embarked on the implementation of Medium-Term Results Based Budgeting (MTRBB) with the support of World Bank Strategic Public Sector Transformation Project. The objective of this process is to link budgeting with GoJ policy priorities through a gradual transition from annual expenditure planning to a medium-term results-based expenditure framework. The MTRBB reform was achieved with 50 MDAs presenting their 2019/2020 budgets with revised programs. However, additional support is still required to support MoFPS and MDAs to establish solid KPIs and strengthen their capacities for establishing monitoring frameworks and perform efficiency analyses of their expenditure.

Planning Institute of Jamaica (PIOJ)

The PIOJ is an agency of the Ministry of Finance and the Public Service (MoFPS) and is the foremost planning agency of the government that seeks to initiate and coordinate the development of policies, plans and programmes for the sustainable development of Jamaica. Therefore, PIOJ plays an important role in advising government on major issues related to economic, environmental and social policy and managing external cooperation agreements and programmes. As part of its coordinating role, PIOJ will play an instrumental role in coordination, facilitation and oversight of the activities under this project.

Ministry of Education, Youth and Information (MoEYI):

The MoEYI is responsible for providing quality education to the population and is one of the main drivers for national development and the achievement of the education and reduce violence against children targets of the SDGs and Vision 2030. The MoEYI has 15 agencies under its purview that directly or indirectly will also be targeted from this project. These include: the National Education Inspectorate, Jamaica Teaching Council; Overseas Examinations Commission; University Council of Jamaica; Nutrition Products Limited; Early Childhood Commission; Jamaica Library Service; National Council on Education; Overseas Examinations Commission (OEC); Council of Community Colleges of Jamaica (CCCJ); the National Council for Vocational Education and Training (NCVET); Vocational Training and Development Institute (VTDI) Jamaica Tertiary Education Commission (J-TEC); National Education Trust (NET); National College for Educational Leadership (NCEL); and National Parenting Support Commission (NPSC).

Ministry of Health and Wellness (MoHW)

The MoHW is responsible for providing quality health services and promoting healthy lifestyles and environmental practices. The Ministry, together with its Regional Health Authorities (RHAs), Agencies and related organizations make up the public health system and are responsible for health care delivery across the island. The MoHW has 4 Regional Authorities and several agencies under its purview that directly or indirectly will also be targeted from this project. These agencies include the Pesticides Control Authority; National Health Fund; Government Chemist; National Public Health Lab; National Blood Transfusion Service Jamaica; National Family Planning Board; National Council on Drug Abuse; Medical Council of Jamaica; Nursing Council of Jamaica; Dental Council of Jamaica; Pharmacy Council of Jamaica; and the Council of Professions Supplementary to Medicine.

UNICEF

UNICEF is a resident agency in Jamaica since 1964. The annual programme delivery is around US\$3 million, with 20 staff members. UNICEF has a multi-disciplinary team with expertise in education, child protection, social policy, adolescent health, monitoring and evaluation and communication. UNICEF also benefits from having a strong operational support team.

UNICEF Jamaica already has several ongoing initiatives on Public Finance for Children (PF4C) that aim to improve the use of domestic resources for services of importance to children. In this vein, UNICEF has recently embarked on a joint project with World Bank to support MoEYI and MoFPS to conduct a Public Expenditure Review for the Education Sector.

UNICEF Jamaica also has a long-lasting collaborative relationship with MoEYI and some of its agencies with Joint Work Plans renew annually on areas related to early childhood education, special and inclusive education, primary and secondary education and child protection. UNICEF also works closely with MoHW to strengthen the access to, and quality of, health and related services and systems for children and adolescents.

Pan American Health Organization: PAHO/WHO

PAHO works with the Government of Jamaica to improve and protect people's health. PAHO is engaged in technical cooperation with Jamaica to fight communicable and noncommunicable diseases and their causes, to strengthen health systems, and to respond to emergencies and disasters. PAHO is committed to ensuring that all people have access to the health care they need, when they need it, with quality and without fear of falling into poverty. PAHO promotes the inclusion of health in all public policies and the engagement of all sectors in efforts to ensure that people live longer, healthier lives, with good health as their most valuable resource.

PAHO has developed an assessment of the public health system in Jamaica, identifying areas for restructuring the MoHW in order to improve the stewardship role of the MoHW and ensure the RHAs optimize the use of resources in the health sector. The PAHO assessment has further informed the development of the 10 year Strategic Plan for Health. PAHO has also provided technical support for the development of the National Health Insurance Plan.

UNDP

UNDP Jamaica supports the Government of Jamaica in achieving its development agenda in the areas of Sustainable Development, Democratic Governance and Peace-building, Gender Equality and Crisis Prevention and Recovery aligned to Vision 2030 Jamaica. UNDP has a diversity of demonstrated expertise in policy advice; planning; programme design and implementation (including Joint Programmes); monitoring and evaluation; partnership building; facilitation of participatory and consultative processes; coordination; research (including data management and dissemination); resource mobilization; financial and operations management; capacity development (including institutional strengthening); and innovation mapping. In addition, UNDP has solid expertise in women's empowerment, multi-stakeholder/partnership mapping and engagement; gender mainstreaming and addressing issues related to inequality.

With an average delivery of approximately US\$ 5 million annually, UNDP supports and implements a diversity of projects in Jamaica including supporting the MoFPS in change management and moving towards a centre of excellence to ensure fiscal efficiency and effectiveness. UNDP also works closely with the PIOJ to support Jamaica's development priorities. UNDP has also been instrumental in supporting the localization and advancement of the SDGs in Jamaica.

International Financial Institutions

World Bank Group (WBG):

Since 2013, the World Bank Group (WBG) has provided more than US\$500 million worth of development policy and investment financing to Jamaica. As part of the current Country Partnership Strategy, the WBG has engaged in a Public Sector Modernization Program (PSMP) to enhance the government's capacity and effectiveness with a loan of 35 million from 2014 to 2019. One of the components of this project is Strengthening the Budget Preparation Process and Results Based Budgeting. This JP will build on the efforts led by the World Bank to deepen the implementation of RBB with specific actions to increase efficiency and effectiveness of the expenditures of two of the largest Ministries (Education and Health). The World Bank, together with UNICEF, is also supporting the PER in the Education sector and in 2017 it completed a PER for the Health Sector whose results will be used in the interventions planned in this project.

Inter-American Development Bank (IDB)

IDB's 2016-2021 Country Strategy with Jamaica aims at supporting the Government's development agenda through addressing constraints to economic growth with a focus on three overarching strategic objectives: improve public sector management; increase private sector productivity and growth; and reinforce human capital protection and development.

IDB is supporting MoEYI in several instances complementary to this JP. IDB has embarked on a School financing study and recently undertook a diagnostic of the MoEYI's education sector reform, including a review over time of learning outcomes and accountability measures to improve sector performance. IDB is also a partner to WB and UNICEF in the implementation of the Public Expenditure Review of the Education Sector and will be a strategic partner to consolidate the changes aimed by this Joint Project.

2. Programme Strategy

2.1. Overall strategy

The 2018 Jamaica Voluntary Review Report³ recognizes that achieving the SDGs requires the prioritization of catalytic actions that can drive progress across multiple goals and targets simultaneously. It also states a need to establish mechanisms for the sustainable financing of the implementation of priorities aligned with the SDGs.

This Joint Programme (JP) is transformational (will deliver results at scale) as it supports increased transparency and accountability of MDAs to utilize budget allocations in a more efficient, effective and equitable manner towards the achievement not only of the SDGs, but also of the country's national outcomes. It will do this by building on the efforts of the Jamaica PSMP, supported by the World Bank since 2014, to improve planning, budgeting and implementation within the RBB context and provide detailed information and evidence for health and education fund allocations, actual expenditure and beneficiaries.

More specifically, the project aims to:

- (1) Provide support to two of the largest Ministries (MoHW and MoEYI) to improve their implementation of Results Based Budgeting (RBB) so as to reprioritize expenditure towards strategies and programmes that are more efficient and effective in supporting the achievement of SDGs;
- (2) Assist MoEYI and MoHW in conducting diagnostic budget analyses such as Public Expenditure Tracking Surveys or Value for Money Analysis to identify efficiencies, leakages and wastages in resource usage and highlighting areas where performance of service delivery in strategic areas is sub-optimal so they may take corrective action in this regard. For the MoEYI, these analyses will be linked to gender equality e.g. reducing dropout rates among boys through the Alternative Secondary Transition Education Programme (ASTEP) and the Career Advancement Programme (CAP), as well as equity and 'Leave No One Behind' e.g. the Special Education programme. Further areas for expenditure analyses will be identified from the ongoing Public Expenditure Review (PER) process. For the MoHW, selected targeted areas have been identified from the 2017 PER and the priorities stated in the MOHW 10 year Strategic Plan. These include the maternal and new born health programme, adolescent health and the decentralization process through the Regional Health Authorities;
- (3) Develop financial models for MoEYI and MoHW that will enable the planning team to cost the financial sustainability of policy options and assess the potential impact of certain expenditure decision on outcome indicators;
- (4) Assist the MoFPS to set up a budget tracking system to identify spending on priority Vision 2030 and SDG targets, which will begin to provide information on finances directed specifically at improving attainment rates.

Furthermore, by encouraging a more credible budget process where funds are channelled to priority areas in a coordinated manner, possibilities may arise for attracting additional funding for the education and health sectors from development partners as well as the private sector involved in education and health projects.

The JP is innovative in that it tackles the problem from a budget perspective, motivating MDAs to change their behaviours when formulating and implementing their budgets. Capacity will be created within the MDAs to allow for more effective budget processes with a particular focus on monitoring the implementation of budgets. The strategy moves away from working in silos to a more collaborative,

³ Presented to the ECOSOC High-Level Political Forum in July 2018

integrated approach where project managers, finance staff and human resource managers work together to identify budget priorities and take responsibility for implementation. It also aims to deepen the implementation of RBB in a more holistic manner than previous interventions by using a three-pronged approach to improving PFM which takes into account political, managerial and oversight functions. From a political perspective, deepening the RBB will allow government to be clearer on the link between policies, expenditure, and outcomes. From a managerial perspective, it encourages management within MDAs to be more committed to achieving policy results by linking resource allocations and key performance indicators. From an oversight perspective, it provides better information on the link between government's policy priorities and plans, and the use of its resources. Furthermore, once the JP has been implemented in these two MDAs it can easily be rolled out to additional MDAs without much additional cost.

By improving the capacity for PFM and RBB implementation, as well as providing more detailed information on expenditure allocations and performance information, the JP enables a paradigm shift towards increased budget allocations to both health and education thus accelerating progress on achieving SDGs 3 and 4. In addition, the JP has the potential to contribute indirectly to SDGs 1, 8 and 10 through improving the health and education status of citizens, and focusing on the most marginalized groups of society. The JP is guided by the core principle of 'Leaving No One Behind' as it takes an intersectional approach that will ensure interventions related to strategic areas of improvement address key social factors such as socio-economic status, gender and disability. The targeted budget analyses will focus on the distribution of expenditure across income groups, aiming to redistribute resources in a more equitable approach to programmes and service delivery affecting the most disadvantaged groups with the hope of reducing inequality over time. The JP will also contribute to SDG 5 by addressing gender disparities in education and promoting access to maternal and reproductive health care and health services for adolescents; SDG 16 through promoting accountable and transparent financial management systems and processes, and SDG 17 because capacity development and partnerships are the bedrock of this initiative including three different ministries, multiple government agencies collaborating with three UN Agencies (UNICEF, UNDP and WHO) and financial institutions such as the WB and IDB.

The UN Multi-Country Sustainable Development Framework (UN MSDF) for the English and Dutch Caribbean⁴ that extends from 2017-2021 establishes the framework for partnerships between the United Nations and governmental partners. The current JP aligns with these existing frameworks and will be an opportunity to further leverage, expand upon and consolidate these partnerships. The project will draw on the mandates and collaborative advantages of UNICEF, UNDP and PAHO/WHO existing programmes and their capacity to convene different actors and mobilize resources to support the progress of GoJ goals.

The JP aligns to UN and national priorities and initiatives, including:

- National Goals of Vision 2030 Jamaica:
 - Goal 1: Jamaicans are empowered to achieve their fullest potential.
 - Goal 3: Jamaica's economy is prosperous.
- Medium Term Socio-Economic Policy Framework (MTF) 2018-2021 National Outcomes:
 - National Outcome #1 – A Healthy and Stable Population
 - National Outcome #2 – World-Class Education and Training
 - National Outcome #6 – Effective Governance
- United Nations Multi-Country Sustainable Development Framework in the Caribbean
 - Outcome 1: Access to quality education and life-long learning increased, for enhanced employability and sustainable economic development
 - Outcome 3: Universal access to quality health care services and systems improved.
 - Outcome 5: Capacities of public policy and rule of law institutions and civil society organizations strengthened.

After the joint programme is completed, it is expected that the MoEYI and MoHW will continue to spearhead RBB strengthening, promote gender, child and vulnerable sub-group responsive budgets and build transparent and accountable mechanisms for efficient, effective and equitable budgeting and service delivery. To ensure sustainability, and the broadening of the approach to other MDAs, there is a need to

⁴ <https://www.undp.org/content/dam/unct/caribbean/docs/UN-MSDF-2017-5-spread.pdf>

explore further collaboration with International Financial Institutions and the possibility to contribute to larger joint programs with other existing and complementary projects of UN agencies, which can be scaled up with the infusion of the SDG funds to have a greater impact.

Working together with the MoFPS, this project has the potential to facilitate the extension of the advancements made with the two identified MDAs to additional MDAs thereby impacting additional SDG targets. This could be facilitated by a partnership with the Management Institute for National Development (MIND) which is an agency of the Office of the Cabinet responsible for providing public service training.

2.2 Theory of Change

If the MoEYI and MoHW officials have the capacity to prepare a Results Based Budget which prioritizes expenditure to achieve the delivery of quality education and good health and well-being results, and **If** the MoFPS has the systems and processes in place to identify actual expenditure allocated to prioritized Vision 2030/SDGs targets so as to focus expenditure on strategic priorities and maximize SDG/Vision 2030 service delivery outcomes

Then the budget allocation and expenditure for education and health will be both optimally used and, attract higher allocations for priority targets.

Because a well performing PFM system improves allocative and operational efficiency and leads to more confidence from donors, partners, IFI's and the private sector to invest, and by doing this, increases the likelihood of achieving the SDGs.

This theory of change is based on a set of assumptions which are vital for the successful realization of the proposed interventions, and which are based on a sound understanding of the current conditions in the country. The assumptions include:

- The GoJ continues the fiscal consolidation programme with support from partners such as the International Monetary Fund (IMF), the Inter-American Development Bank (IDB) and the World Bank Group (WBG).
- Transparency on financing and outcomes and accountability for the allocation and use of resources are in place to ensure incentives are conducive for effective use of the improved PFM system.
- The country's economy continues its path of low, but consistent, growth through government reforms, including the steady reduction of public debt, ensuring that social conditions continue to improve, as they have been in the last five years.
- Other components of the system outside of resource allocations, such as proper training, effective procurement systems, effective implementation of infrastructure, sound human resource management, staff retention and recruitment and availability of skills in the larger population, and good leadership, will be in place so that better resource management will result in better service delivery.
- Achieving the SDGs and implementation of RBB is prioritized at the political and administrative level.

Ten years down the line, it is envisaged that Jamaica will have a sound policy platform and development strategy at all levels of government, which is pro-poor, gender-sensitive and provides a vehicle for sufficient funding to provide adequate education services and health care for all citizens. In addition, all girls and boys should have access to complete free, equitable and quality early childhood development and care, as well as universal access to pre-primary, primary and secondary education which leads to relevant and effective learning outcomes. It is envisaged that most school leavers, regardless of gender, disability, socio-economic or cultural status can access tertiary and/or vocational training and/or be gainfully employed.

Within this long-term vision, this JP aims to develop effective, accountable and transparent institutions at all levels which promote the social, economic and political inclusion of all, and enhances international support for implementing effective and targeted capacity-building and leads to the implementation of all the SDGs, including through North-South, South-South and triangular cooperation.

Within its scope the JP will focus on the following interventions:

- Building the capacity of MoFPS officials, systems and processes to map Budget Programmes with SDGs and Vision 2030 targets and develop methodologies and train key staff within the MoFPS to analyze and track expenditure by target. This exercise will allow the GoJ to estimate budget allocations that contribute to accomplishing the Vision 2030 targets and the SDGs from a Management for Results perspective. This initiative will provide data on an annual basis to assess whether investments are aligned with government development priorities.
- Building the capacity of MoEYI and MoHW staff to prepare a comprehensive and realistic RBB which prioritizes efficient and effective use of available resources through setting up a dedicated RBB team within the Ministry. Capacity building opportunities will be provided for this RBB team, as well as user friendly planning, budgeting and monitoring guidelines.
- The MoEYI and MoHW will be supported to identify strategic areas of improvement in equitable resource allocations toward SDGs 3 and 4 which address gender and inclusive education and improve health sector outcomes. To achieve this, MoEYI and MoHW staff need to be able to use (simple) budget analysis and other diagnostic techniques. These should focus on areas of poor service delivery, bottlenecks in the financial flows and the diversion of resources away from their intended purposes. These areas will be identified jointly with Ministry officials based on the results of the ongoing Public Expenditure Review of the Education sector.
- Developing a financing model which ensures sustainability and maximizes the catalytic impact of funding, and is based on quantitative reference scenarios which project current and future investment requirements in education and health, so that these systems provide the supporting architecture for the financing of Jamaica, and the region’s economic growth.

Graphical Representation of the TOC



2.3 Expected results by outcome and outputs

JP Outcome 1

Improved efficiency, effectiveness and equity of education and health spending which prioritizes investments towards the realization of SDG 4 and the philosophy of “leaving no one behind” through building capacity on public financial management (PFM) and Results Based Budgeting (RBB) in the MoEYI.

JP Outputs

Output 1.1: Improved capacity of MoEYI staff to prepare a RBB which prioritizes expenditure to achieve the delivery of quality education (UNICEF lead)

Key results

- A dedicated RBB team established within the Ministry led by a RBB resident technical adviser
- Training conducted for key staff within the Ministry and its agencies on (i) improving the quality of Key Performance Indicators (KPIs) which are linked to both national priorities and SDGs; (ii) strengthening the capacity for monitoring and evaluation; and (iii) improving the allocation of resources which are aligned to key priorities
- Education specific planning, budgeting and monitoring guidelines developed

Output 1.2: Improved capacity of MoEYI staff to identify and act on strategic areas of improvement around SDG 4 including gender and inclusive education

Key results (UNICEF lead)

- Training conducted for key staff within the MoEYI (and their agencies) on Budget Analysis techniques
- Diagnostics conducted to assess the service delivery of at least 3 key programmes in priority areas by MoEYI staff. These might include the Textbook and Furniture Programme, programmes aimed to reduce the dropout rates, especially of boys (ASTEP and Career Advancement Programme) and the Special/Inclusive Education Programme

Output 1.3: A financial simulation model for education expenditure operational (UNICEF lead)

Key results

- A financial simulation model for education expenditure developed which is adapted to Jamaica, based on quantitative reference scenarios projecting the development of the education system needs and resource requirements according to policy assumptions and targets
- The financial sustainability of policy options and targets tested by the model

JP Outcome 2

Improved efficiency, effectiveness and equity of health spending which prioritizes investments towards the realization of SDG 3 and the philosophy of “leaving no one behind” through building capacity on public financial management (PFM) and RBB in the MoHW.

Output 2.1: Improved capacity of MoHW staff to prepare a Results Based Budget which prioritizes expenditure to achieve the delivery of good health and well-being whilst aligning the Regional Health Authorities (RHAs) with the National level

Key results

- A dedicated RBB team established within the Ministry led by a RBB resident technical adviser
- Training conducted for key staff within the Ministry and at RHAs on (i) improving the quality of Key Performance Indicators (KPIs); (ii) strengthening the capacity for monitoring and evaluation; and (iii) improving the allocation of resources which are aligned to key priorities
- Health specific planning, budgeting and monitoring guidelines developed

Output 2.2: Improved capacity of MoHW staff to identify and act on strategic areas of improvement around SDGs 3 including a gender and equity focus (UNICEF/ WHO lead).

Key results

- Training conducted for key staff within the MoHW (and the RHAs) on Budget Analysis techniques
- Diagnostics conducted to assess the service delivery of at least 2 key programmes in priority areas within the health sector by MoHW staff. These might include the Maternal Health Programme and the Adolescent Health Programme

Output 2.3: A financial model for health expenditure operational.

Key results

- National Health Accounts developed

- A Fiscal Space Study conducted with policy options for health financing

JP Outcome 3

Improved efficiency, effectiveness and equity of government spending to achieve the SDGs which are linked to its National Outcomes (NOs) as defined in Vision 2030 Jamaica, by improving the linkages of the country's budget programmes to the SDGs so as to clearly identify expenditure invested on the programmes and activities which relate to them.

JP Outputs

Output 3.1: Improved capacity of GoJ to identify expenditure on specific SDGs linked to NOs through mapping Budget Programmes and Key Performance Indicators to each of these (UNICEF/UNDP lead).

Key results

- Systems and processes developed to map Budget Programs with NOs and SDGs
- Training conducted for key staff within the MoFPS and POIJ to analyze and track expenditure on NOs and SDGS

By end of the 2 years, it is envisioned that the GoJ will have performed a thorough diagnosis of how much government is investing in actions related to the National Outcomes and SDGs using the systems designed for tracking specific expenditure. This analysis is now the backbone of the budget process and the MoFPS has increased spending on Vision 2030 and SDGs priority areas which were identified as under-resourced and where additional allocations are required. There will also be a significant shift in education and health budget allocations towards priority areas, targeting previously marginalized groups and ensuring a more equitable allocation towards achieving quality education and good health and well-being for all. There will be a dedicated team of MoEYI and MoHW staff who are capacitated in financial management, results-based budgeting and budget analysis techniques which will allow for deeper analysis and understanding of how expenditures meet policy objectives. Furthermore, there will be enhanced capacity for monitoring and evaluation to assess service delivery implementation. The analysis and recommendations for resource allocation will be informed by a financial simulation model which enables the financial sustainability of policy options to be tested.

It is expected that over the medium term, these interventions will result in enhanced capacity of MoEYI and MoHW staff in public financial management, results based budgeting and budget analysis which contributes to SDGs 3 and 4 especially 3.1, 3.8, 3.C, 4.1, 4.2 and 4.5 . Improving the equity, efficiency and effectiveness of budget allocations within the Education and Health sectors will enable a paradigm shift toward increased budget allocations to priority areas, specifically addressing marginalized youth, girls, and children with disability under the SDG principle of 'leave no one behind'. Furthermore, the progress on the above-mentioned SDGs will be improved by enhancing the capacity of the GoJ to specifically track expenditures on SDGs through the budgeting system.

The FY 2022/2023 national budget has shown increased allocations to most of the sectors relating to the achievement of the SDGs and its National Outcomes. In particular, allocations to the MoEYI and MoHW have increased 2% and 1.5% respectively. Although this is a marginal increase, there has been significant re-allocation of spending to priorities within the two budgets. The reallocation of expenditures is largely due to the ability of the MoFPS to track specific expenditures on the SDGs over the past year as well as linking them with the National Outcomes from Vision 2030. These results have been published and the MoFPS and the POIJ have committed to using this tracking system for further analysis to improve service delivery outputs.

The quality of the MoEYI budget submissions in 2021 and 2022 showed incremental improvement in using the RBB framework. Reporting from schools has been expanded to include a range of measures including gender parity and accommodation of vulnerable groups, including children from marginalized communities. The MoEYI has conducted deep-dive analyses into three areas i.e. the text book and furniture programme, Special Education Programme and investment targeting gender equality in primary and secondary and reducing the dropout rate among boys. The results from this analysis have highlighted where some of the inefficiencies lie and there has been a concerted effort to address these. There has already been a noticeable improvement in both of these programmes in that more schools are better

equipped with furniture and text books, thus resulting in better learning outcomes. There has also been a slight improvement in the dropout rate of boys and more boys are advancing to secondary education; from the research, improvements are in the rural areas and marginalized communities. There has also been improvements in the quality of budgets in the Agencies thus supporting the Ministry to improve its overall national outcomes.

The MoHW has also shown incremental improvement in their budget submissions in 2021 and 2022. Most significantly, the performance data they used in their RBB was measurable and aligned to SDG achievement. There is also better alignment of the RHA and national outcomes specifically in supporting the adolescent health programme which is delivered at the regional level. The deep dive analyses have resulted in increased allocations to maternal and adolescent health programmes over the past two years and there has been marginal improvements in the outcomes related to these two programmes.

There are, however, still weaknesses in data collection in both sectors. UNICEF and PAHO in collaboration with WB and IDB have run a number of capacity building sessions to assist the two Ministries in implementing a results matrix, with an accompanying data collection system at service delivery units (clinics and schools).

2.4 Budget and value for money

Historical trends suggest that consideration is not always given for the medium/long-term implications of decisions made in the short-term. Prior to the RBB approach, budgets in Jamaica were presented for the fiscal year in question, with only sparse reference to subsequent fiscal years and limited detail on major items, therein contributing to limited return on investment and in some cases no return at all. Furthermore, there has been an absence of in-depth consideration of the implementation lessons. The Debt Management Strategies spoke broadly to risks, but presented no Debt Sustainability Analysis. In the absence of the proposed levels of support and given the vast number of MDAs, there are challenges for the MoFPS to provide technical oversight of implementation activities of the 149 public bodies under its purview, to ensure consistency with national and sub-national results, as outlined within the Vision 2030 sector plan. Outside of the RBB system, and the institutional supports recommended, the government has only a partial picture of activities during any given fiscal year, which may result in narrow coverage, and misaligned expenditure targets within key sectors, such as health and education.

The JP has an advantage over other implementation strategies as it builds on the existing Medium Term Results Based Budgeting reform programme of the MoFPS. The JP will support the current RBB initiatives in the MoEYI and MoHW, by deepening the implementation of RBB thus enabling the two Ministries to achieve their targets related to national outcomes and the SDGs. Furthermore the JP intends working with all the agencies and the RHAs and thus broaden the scope of improving efficiency and effectiveness of spending. In addition, the experience and models developed for Health and Education could be rolled out to other ministries, in partnership with the Management Institute for National Development (MIND), at a lower cost and thereby achieve good value for money.

Alignment with SDGs provides a roadmap for the government to filter its processes in accordance with its priority values as outlined within Vision 2030, therein advancing its effort to realise more value for its spend in infrastructure and other social expenditure. The harmonisation between the government's strategic imperative of ensuring scale-up in the number of MDAs utilising the modalities under the RBB system, within the short to medium term, engenders an opportunity for inculcating a culture of ownership and a modification of behaviours which are results-oriented and driven. Furthermore, there is a strong emphasis on investments in up-front planning with careful attention to the anticipated outcomes rather than a heavy reliance on making short-term and potentially disjointed fiscal and social adjustments.

Despite the recent positive economic developments and the expected economic growth for 2020, the socioeconomic climate in Jamaica is fragile and will certainly be severely affected by the economic and social impact of the COVID 19 crisis. The country is poised to build on several strategic initiatives to ensure the most effective, efficient and equitable use of the scarce public resources. UNICEF, PAHO/WHO, UNDP have a track record of collaboration on joint programmes with the GoJ and are currently collaborating in a number of areas.

UNICEF already has several initiatives on Public Finance for Children (PF4C) and its multi-disciplinary team with expertise in education, child protection, social policy, adolescent health, monitoring and evaluation and communication will ensure strong support for the programme.

With the technical guidance from PAHO, the JP will work on realizing the key strategic outcome of the MoHW Vision for Health 2030 to improve the efficiency of the allocation and utilization of funds provided to the public health sector for the delivery of health care services. As stated in the National Health Services Act, 1997, service delivery is regionalized with the MoHW's four Regional Health Authorities (RHAs) responsible for delivering quality healthcare service in the four regions – North East, Western, Southern and South East.

The Vision for Health 2030 proposes that Service Level Agreements (SLAs) between the MoHW and the RHAs should be revised to improve accountability and performance. The SLAs should be strengthened in order to ensure they are performance driven and developed from the bottom up to better reflect the communities in which they serve.

The JP will potentially enhance existing systems of public expenditure management and planning while also fostering opportunities for the innovation of modern features that are informed by outcomes and are output oriented. Chief among the anticipated outcomes is strengthening the capacity of the MoFPS to rigorously monitor KPIs through the use of technological advances and specialised human resources. Moreover, opportunities exist to anchor best practises and methodologies by partnering with the Government's national training institute, exposing public sector workers and other Caribbean nationals to international best practice.

Improving the underlying systems of allocating and using GoJ financing for sustained improvements in SDGs, rather than using the funding to provide short-term interventions on addressing specific targets, will ensure long-term financial sustainability after the end of the JP.

The key outputs of the programme to improve the efficiency and effectiveness of health and education spending have a specific gender focus. Firstly, the aim is to improve the allocation of expenditure to priority areas which will include a gender specific focus. In the MoEYI, a priority is to improve the monitoring and evaluation processes as well as the key performance indicators. All of the KPIs will be assessed and revised to ensure that they have a gender-based focus and that all monitoring reports report on the outputs for education in a gender disaggregated manner. It will thus be possible to track the throughput of both boys and girls. In the case of Jamaica, one of the main issues is the dropout rates for boys and through this programme it is hoped that resources will be reprioritised so as to address this issue.

Similarly, in the MoHW, the project aims to improve the quality of the KPIs and the monitoring and evaluation processes with a priority focus on ensuring a gender-based focus for the KPIs as well as their inclusion in all monitoring and evaluation reports. Furthermore, the project has identified two areas in which to perform deeper analyses which have a specific gender focus. The first is a deeper analysis on the maternal health programme aimed at reducing the incidence of maternal mortality. The second deeper analysis will focus on adolescent health which aims to reduce the incidence of teenage pregnancies.

The PUNO contribution to the JP is US\$220,800 dollars compared to the JP budget of US\$1,213,225 dollars.

Improving the efficiency and effectiveness of spending in MoYEI and MoHW, through the activities of the project, will hopefully result in more funding available to achieve the SDGs in these ministries by leveraging co-financing from the Government itself. Furthermore, the success of the programme will build foundations for leveraging additional financing toward achieving the SDGs from international financing institutions such as the World Bank, the Inter-American Development Bank (IDB) and the Caribbean Development Bank (CDB). The IDB is currently supporting the MoEYI to upgrade information technology systems within to improve use of data for policy and decision making. It also has an Early Childhood Innovation Development fund which could assist with this priority within the MoEYI. The CDB's investments in education also include, amongst others, a focus on improving access to quality early

childhood development as well promoting gender-equitable access to non-traditional occupational areas which would complement the current JP proposal.

The JP also provides an opportunity for the PUNOs to cooperate in a joint programme in a cost-effective integrated approach.

2.5 Partnerships and stakeholder engagement

Leadership by government is vital to the success of implementation and post project absorption. The joint programme will be thus be led by a government led-multi-stakeholder steering committee (SC) which will be created as the key governance structure for the programme. The participation of the Ministry of Finance and Public Service will facilitate the expansion of the effects of this project to further ministries in the future. The SC will be co-chaired by the Government of Jamaica (entity to be decided) and its membership will include representatives from:

- The Ministry of Finance and Public Service
- The Ministry of Education, Youth and Information
- The Ministry of Health and Wellness
- Planning Institute of Jamaica
- UNICEF
- UNDP
- PAHO/WHO
- World Bank
- IDB

The SC may invite additional stakeholders to participate in planning, deliberation, and monitoring roles of the Committee, i.e. representatives from parishes, academic and research institutions or private sector, as necessary.

The main tasks of the SC are to guide and oversee the implementation of the JP by fulfilling the following roles and responsibilities:

- Ensure proper communication and coordination;
- Approve annual programme work plans, review output-level results, and adjust implementation set-up;
- Review and approve periodic and annual joint programme narrative reports;
- Approve any programmatic or budgetary (revisions of less than 25 per-cent of the value of the budget) revisions within the limits of the approved programme document;
- Ensure that the Programme is proactively managing and mitigating risks; and
- Manage stakeholder relationships at the country-level.

Contribution of United Nations Agencies

Under the leadership of the UN Resident Coordinator in Jamaica, the JP builds on complementarities and brings together the added value of 3 UN Agencies: UNICEF, PAHO/WHO and UNDP.

UNICEF

In over 100 countries UNICEF takes a hands-on approach to helping governments make budget decisions that lead to adequate investment and continually improve budget equity, efficiency, effectiveness and transparency for greater impact. Ensuring that scarce resources are used in the most efficient and effective way possible and on impactful programmes that generate the highest positive social returns for the most vulnerable people, guarantees that services are delivered to everyone in need and at the lowest possible cost. UNICEF has vast experience to assess the efficiency and effectiveness of social spending through expenditure tracking surveys and cost-effectiveness studies, and supports fiscal space analyses to help countries develop and implement sustainable and responsible financing strategies for key social sectors, and ensure progress toward achieving the SDGs with equity.

UNICEF Jamaica already has several ongoing initiatives on Public Finance for Children (PF4C) that aim to improve the use of domestic resources for services of importance to children. In this vein, UNICEF has recently embarked on a joint project with World Bank to support MoEYI and MoFPS to conduct a Public Expenditure Review for the Education Sector in the first half of 2020.

UNICEF Jamaica Lifelong learning programme supports the Government of Jamaica to improve education and development outcomes and create more equitable and inclusive learning environments for boys and girls focusing on 1) strengthen national frameworks, policies, plans and standards to increase access to high-quality, equitable, inclusive and holistic early childhood development (ECD); 2) Improve the capacity of national and sub-national entities in education planning, the collection and use of data, system monitoring and budgeting; and 3) Strengthen the organizational capacity of key stakeholders to design and deliver equitable, inclusive and relevant education services, transitioning strategies and protective learning environments.

UNICEF Jamaica Health program has two goals that aim to strengthen the access to, and quality of, health and related services and systems for children and adolescents.

Pan American Health Organization: PAHO/WHO

PAHO is the specialized international health agency for the Americas. The MoHW and the PAHO/WHO have jointly developed and agreed on the Country Cooperation Strategy 2017-2022 and the Biennial Workplan 2020/2021, which is aligned with the Ten-Year Strategic Plan of the MoHW "Vision for Health 2030".

The agreed strategic actions for technical collaboration between the MoHW and PAHO include the following:

- The implementation of Service Level Agreements (SLAs) that are performance driven and developed through a bottom up approach, should further guide the improvement of performance at the regional level.
- The restructuring of the MoHW to strengthen its steering role and focus on quality of care; to establish a monitoring and evaluation division to report on the performance of the health facilities; as well as an Internal Audit Unit to examine and report on efficacy and efficiency of the administrative and management processes in each organization within the public health sector.

UNDP

UNDP has established its global Finance Sector Hub to provide services across seven strategic areas of engagement on financing the SDGs, as well as launching four flagship initiatives to bring greater momentum to the systemic changes needed to mobilise and align public and private finance behind the SDGs. UNDP has expertise to support governments on rapid integrated assessment of country planning documents to test alignment with the SDGs; SDG budgeting, coordination and institutional frameworks; and integrating SDGs into medium to long term policies and plans strengthening monitoring and reporting systems and analysis on budgetary impact on SDG targets. This expertise will be critical to achieve the results under outcome 3 of the JP aimed at improving the linkages of the country's budget programmes to the SDGs so as to clearly identify expenditure invested on the programmes and activities which relate to them.

UNDP in collaboration with UNICEF, the RCO and other UN agencies is already providing the Government of Jamaica with an online reporting and monitoring platform to track development indicators of the Vision 2030 Jamaica. Hence, the Joint Programme will ensure that KPIs relating to education and health are tracked as overall impact on progress towards the SDGs. UNDP is also supporting the Government in innovative financing for achieving the goals of Vision 2030 and the SDGs. Hence, the Joint Programme will complement work that is already being done. In addition, UNDP is also providing support to the Government in localizing the SDGs and Vision 2030 at the local and community levels. A lot of work has been done in landing the SDGs at the national level, but work should continue at the local level. Therefore, this Joint Programme will enable the MoFPS, the MoEYI and the MoW to track results not only at the national levels but also at the local levels.

Strategic contributions from other partners

UNICEF, UNDP and PAHO will continue to collaborate and draw expertise from actors such as the WB and IDB who are engaged in PFM reforms and sector work in Health and Education. Consultations were held with these role-players during the drafting of this JP. More specifically the JP aims to build on the efforts of the WB program on Public Sector Modernization and ensure harmonization of all reforms. Both the IDB and the WB will be consulted as strategic partners and called upon to share expertise in consolidating the changes aimed by the JP intervention.

SDGs Partners Engagement

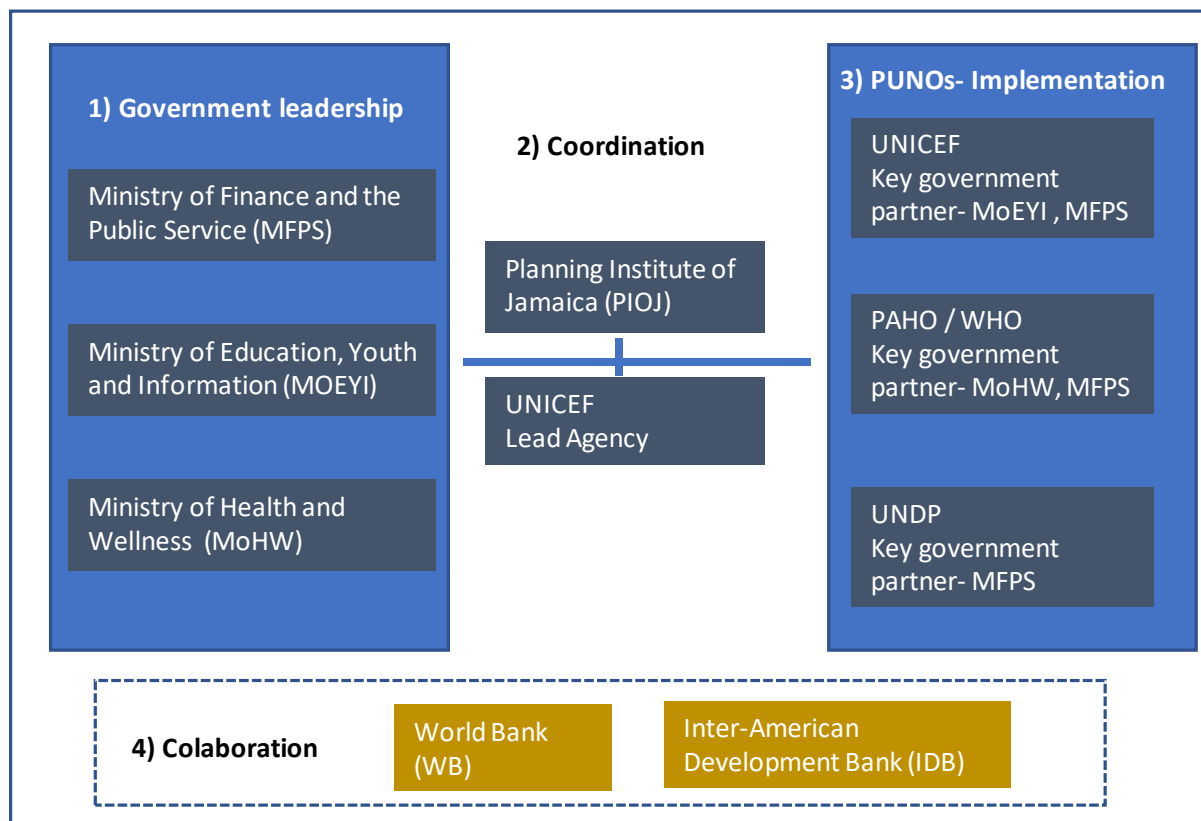
Global Joint SDG fund donors present in the country will be recognized in all communications and publications. Those present in the country will be regularly consulted and informed on the programme implementation and will be invited to participate in related events.

3. Programme implementation

3.1 Governance and implementation arrangements (max 3 pages)

The JP is multidimensional and requires high levels of coordination and information sharing among implementing agencies, government institutions and international financial institutions such as the World Bank and Inter-American Development Bank. Effective governance arrangements include establishing a multi-agency steering committee, supported by a project management office that coordinates the dissemination of information to each agency and enables whole-of-package reporting to the steering committee. The activities of the overall project are interdependent and therefore all agencies need to be aware of delays and/or issues across initiatives to manage risks to their own initiatives.

The programme management arrangements are summarized in the diagram below.



Official collaboration between the UNICEF, UNDP, PAHO/WHO, MoFPS, MoEYI and MoHW will be formalised in an agreed governance structure, such as an exchange of letters at the Representative and Ministerial level. The roles, responsibilities and information-sharing requirements between the United Nations Agencies and the Ministries should be further clarified and agreed through the Steering Committee.

Roles and responsibilities will be clearly described and agreed on at the policy level, and also at the technical level. An approach to managing whole-of-package risks and stakeholders to ensure adequate coordination and effective delivery will be agreed on.

Governance arrangements will be periodically reviewed and adjusted to meet the demands of the initiative and resourcing requirements and ensure continued commitment.

The Planning Institute of Jamaica is the lead government entity through which the programme will be anchored. The lead UN organization for the Joint Program is UNICEF. UNICEF will be responsible for coordination of programmatic activities and narrative reporting. UNICEF will coordinate and compile annual work plans and narrative reports, coordinate monitoring of annual targets, calls and reports on Steering Committee meetings, facilitates audits and evaluation, and reports back to the Steering Committee; This will be done through the establishment of a programme coordination position under the supervision of UNICEF (lead agency). The Programme coordinator will report to the Steering committee and under its guidance will ensure that the project planning, review, monitoring, evaluation, reporting and coordination among the various partners is effective and timely.

The UN Agencies which include UNICEF, PAHO/WHO, and UNDP will lead the implementation of specific components of the programme. The agencies have their own technical and administrative capacity to assume the responsibility for mobilizing and effectively applying the required inputs in order to reach the expected outputs. The PUNOs will assume overall management responsibility and accountability for their specific components of the programme and must follow all policies and procedures established for its own operations. UN agencies will also be responsible for (i) providing project assurance services (ii) the recruitment of staff where applicable (iii) overseeing financial expenditures against project budgets and (iv) ensuring that all activities including procurement and financial services are carried out in strict compliance with organization and donor procedures.

UN agencies will identify institutions to support the implementation of specific activities for the programme and provide technical assistance. All responsible parties are directly accountable to the respective UN agencies in accordance with the terms of their agreement or contract.

The UN Resident Coordinator Office played a key role in the selection of the area of the current joint programme in consultation with the government counterparts. In the implementation of the JP, the UN RC will provide leadership and oversight and ensure an harmonious relation among the parties and that progress on the joint programme is regularly reported to the UN Country Team. The project will strengthen the position of UN delivering as one with the collaboration of three resident UN Agencies with the same aim and goal on accelerating SDG progress through better and more efficient spending.

The programme will be managed under the supervision of a Programme coordinator that will ensure the day-to-day management and coordination of the programme and communication with Steering Committee, Resident Coordinator Office and the SDG fund. The coordinator will work closely with the participating UN Agencies to provide support to their implementation and monitor progress. A part-time administrative support assistant will support project administration, management and technical support as required.

A joint programme document will be developed and signed off by the Resident Coordinator and the Government of Jamaica. The programme that will include a common detailed workplan agreed by all participating UN agencies and government counterpart. Each agency will account for the income received to fund its programme component in accordance with its financial regulations and rules. Each UN organization will be responsible for auditing its own contribution to the programme as part of its existing regulation and rules.

3.2 Monitoring, reporting, and evaluation

Reporting on the Joint SDG Fund will be results-oriented, and evidence based. Each PUNO will provide the Convening/Lead Agent with the following narrative reports prepared in accordance with instructions and templates developed by the Joint SDG Fund Secretariat:

- *Annual narrative progress reports*, to be provided no later than one (1) month (31 January) after the end of the calendar year, and must include the result matrix, updated risk log, and anticipated expenditures and results for the next 12-month funding period;
- *Mid-term progress review report* to be submitted halfway through the implementation of Joint Programme⁵; and
- *Final consolidated narrative report*, after the completion of the joint programme, to be provided no later than two (2) months after the operational closure of the activities of the joint programme.

The Convening/Lead Agent will compile the narrative reports of PUNOs and submit a consolidated report to the Joint SDG Fund Secretariat, through the Resident Coordinator.

The Resident Coordinator will be required to monitor the implementation of the joint programme, with the involvement of Joint SDG Fund Secretariat to which it must submit data and information when requested. As a minimum, joint programmes will prepare, and submit to the Joint SDG Fund Secretariat, 6-month monitoring updates. Additional insights (such as policy papers, value for money analysis, case studies, infographics, blogs) might need to be provided, per request of the Joint SDG Fund Secretariat. Joint programme will allocate resources for monitoring and evaluation in the budget.

Data for all indicators of the results framework will be shared with the Fund Secretariat on a regular basis, in order to allow the Fund Secretariat to aggregate results at the global level and integrate findings into reporting on progress of the Joint SDG Fund.

PUNOs will be required to include information on complementary funding received from other sources (both UN cost sharing, and external sources of funding) for the activities supported by the Fund, including in kind contributions and/or South-South Cooperation initiatives, in the reporting done throughout the year.

PUNOs at Headquarters level shall provide the Administrative Agent with the following statements and reports prepared in accordance with its accounting and reporting procedures, consolidate the financial reports, as follows:

- Annual financial reports as of 31st December each year with respect to the funds disbursed to it from the Joint SDG Fund Account, to be provided no later than four months after the end of the applicable reporting period; and
- A final financial report, after the completion of the activities financed by the Joint SDG Fund and including the final year of the activities, to be provided no later than 30 April of the year following the operational closing of the project activities.

In addition, regular updates on financial delivery might need to be provided, per request of the Fund Secretariat.

After completion of a joint programme, a final, *independent and gender-responsive*⁶ evaluation will be organized by the Resident Coordinator. The cost needs to be budgeted, and in case there are no remaining funds at the end of the joint programme, it will be the responsibility of PUNOs to pay for the final, independent evaluation from their own resources.

The joint programme will be subjected to a joint final independent evaluation. It will be managed jointly by PUNOs as per established process for independent evaluations, including the use of a joint evaluation steering group and dedicated evaluation managers not involved in the implementation of the joint programme. The evaluations will follow the United Nations Evaluation Group's (UNEG) Norms and Standards

⁵ This will be the basis for release of funding for the second year of implementation.

⁶ [How to manage a gender responsive evaluation, Evaluation handbook](#), UN Women, 2015

for Evaluation in the UN System, using the guidance on Joint Evaluation and relevant UNDG guidance on evaluations. The management and implementation of the joint evaluation will have due regard to the evaluation policies of PUNOs to ensure the requirements of those policies are met and the evaluation is conducted with use of appropriate guidance from PUNOs on joint evaluation. The evaluation process will be participative and will involve all relevant programme's stakeholders and partners. Evaluation results will be disseminated amongst government, development partners, civil society, and other stakeholders. A joint management response will be produced upon completion of the evaluation process and made publicly available on the evaluation platforms or similar of PUNOs.

3.3 Accountability, financial management, and public disclosure

The Joint Programme will be using a pass-through fund management modality where UNDP Multi-Partner Trust Fund Office will act as the Administrative Agent (AA) under which the funds will be channeled for the Joint Programme through the AA. Each Participating UN Organization receiving funds through the pass-through has signed a standard Memorandum of Understanding with the AA.

Each Participating UN Organization (PUNO) shall assume full programmatic and financial accountability for the funds disbursed to it by the Administrative Agent of the Joint SDG Fund (Multi-Partner Trust Fund Office). Such funds will be administered by each UN Agency, Fund, and Programme in accordance with its own regulations, rules, directives and procedures. Each PUNO shall establish a separate ledger account for the receipt and administration of the funds disbursed to it by the Administrative Agent.

Indirect costs of the Participating Organizations recovered through programme support costs will be 7%. All other costs incurred by each PUNO in carrying out the activities for which it is responsible under the Fund will be recovered as direct costs.

Funding by the Joint SDG Fund will be provided on annual basis, upon successful performance of the joint programme.

Procedures on financial transfers, extensions, financial and operational closure, and related administrative issues are stipulated in the Operational Guidance of the Joint SDG Fund.

PUNOs and partners must comply with Joint SDG Fund brand guidelines, which includes information on donor visibility requirements.

Each PUNO will take appropriate measures to publicize the Joint SDG Fund and give due credit to the other PUNOs. All related publicity material, official notices, reports and publications, provided to the press or Fund beneficiaries, will acknowledge the role of the host Government, donors, PUNOs, the Administrative Agent, and any other relevant entities. In particular, the Administrative Agent will include and ensure due recognition of the role of each Participating Organization and partners in all external communications related to the Joint SDG Fund.

3.4 Legal context

Agency name: UNICEF

Agreement title: Standard Basic Cooperation Agreement between UNICEF and the Government of Jamaica

Agreement date: 15 February 1995

Agency Name: United Nations Development Programme

Agreement Title: Standard Basic Assistance Agreement between UNDP and the Government of Jamaica

Agency Title: UNDP

Agreement Date: 1976

Agency name: PAHO/WHO

Agreement title: PAHO/WHO Country Cooperation Strategy Jamaica 2017-2022

Agreement date: 2017

Annex 1. List of related initiatives

Name of initiative/project	Key expected results	Links to the joint programme	Lead organization	Other partners	Budget and funding source	Contract person (name and email)
Public Expenditure Review-Education	(i) the state of knowledge on learning outcomes in Jamaica assessed, (ii) the efficiency of public spending and resource allocation in the education sector and opportunities for optimization	JP will provide the opportunity to conduct deep dives on the findings and recommendations from PER	UNICEF & World Bank	IDB	100,000 (UNICEF-World Bank (staff time)	Vicente Teran, vteran@unicef.org Ozan Sevimli osevimli@worldbank.org
Brain Building Boost project	Support training for Early Childhood Institution (ECI) practitioners in mixed ability, early stimulation-based teaching and learning to enable them to better support enrolment of children with disabilities from as early as possible.	UNICEF supported the Early Childhood Commission (MoEYI) to ensure greater inclusion within the First 1000 Days that began with the launch of the Brain Builder Boost project	UNICEF		240,000 (UNICEF)	Vicente Teran, vteran@unicef.org
Baby Friendly Hospital Initiative	100% of hospitals are certified as Baby Friendly Hospitals	JP has component link to newborn and maternal health programme	UNICEF	PAHO	100,000 (UNICEF)	Vicente Teran, vteran@unicef.org
Adolescent Health and HIV Systems Strengthening	Address gaps in health education, service delivery and access to services among adolescent boys and girls.	JP has component link to adolescent health programme withing MoHW	UNICEF	PAHO, UNAIDS	200,000 (UNICEF)	Vicente Teran, vteran@unicef.org
Care model for NCDs	Improved access to health services, in particular for the most vulnerable groups of the population Strengthened information systems for health	Consolidation of the output 2.1 Improved capacity of the MoHW to prepare RBB which prioritizes expenditure to delivery of quality health services while aligning Regional Health Authorities with National Level	MoHW	IDB, PAHO/WHO	150.000 USD IDB Loan	Casimiro Dias, Canhaccas@paho.org
Quality Strategy	Improved access to quality health services	Consolidation of the output 2.2 Improved capacity of the MoHW to identify and act on strategic areas of improvement around SDG3, including a gender and equity focus.	MoHW	PAHO/WHO	30.000 USD PAHO/WHO	Casimiro Dias, Canhaccas@paho.org

<p>Advancing the SDGs through Vision 2030</p>	<p>1.Increased capacity of the Government to monitor, evaluate and report on progress towards the attainment of the SDGs and the goals of Vision 2020 Jamaica. 2.Increased capacity of the PIOJ to measure the contribution of international development partner support/ assistance towards the achievement of Vision 2030</p>	<p>The development of both the Online Platform and the ECMIS has laid the foundation within Government to strategically identify development gaps by sectors including for Education and Health. These systems will further contribute mapping investment in the NDP which complements the JP outcomes.</p>	<p>UNDP</p>	<p>Resident Coordinator Office, UNICEF</p>	<p>217,500.00USD (UNDP)</p>	<p>Richard Kelly richard.kelly@undp.org</p>
<p>Localizing the SDGs: Global Goals, Local Action</p>	<p>1.Strengthened coordination mechanism for the monitoring of the SDGs 2.Improved awareness of the SDGs and their alignment to Vision 2030 Jamaica National Development Plan.</p>	<p>The project enabled the Govt. to establish the existing SDG coordinating mechanism which will enable the attainment of the outcomes set out in the JP.</p>	<p>UNDP</p>		<p>278,000.00USD (UNDP)</p>	<p>Richard Kelly richard.kelly@undp.org</p>

Annex 2. Results Framework

2.1. Targets for Joint SDG Fund Results Framework

Joint SDG Fund Outcome 2: Additional financing leveraged to accelerate SDG achievement

Result / Indicators	Baseline	2021 Target	2022 Target	Means of Verification	Responsible partner
Joint SDG Fund Outcome 2: Additional financing leveraged to accelerate SDG achievement					
Indicator 2.1: Ratio of financing for integrated multi-sectoral solutions leveraged in terms of scope ⁷	To be compiled in the first 6 months	tbc	tbc	tbc	UNICEF, UNDP, PAHO
Indicator 2.2: Ratio of financing for integrated multi-sectoral solutions leveraged in terms of scale ⁸	To be compiled in the first 6 months	tbc	tbc	tbc	UNICEF, UNDP, PAHO
Joint SDG Fund Output 4: Integrated financing strategies for accelerating SDG progress implemented					
Indicator 4.1: #of integrated financing strategies that were tested (disaggregated by % successful / unsuccessful)	0	3 financing strategies for SDG acceleration with MoEYI, MoHW and MOFPS initiated	3 strategies (MoEYI, MoHW and MOFPS successfully implemented	Project evaluation	UNICEF, UNDP, PAHO
Indicator 4.2: #of integrated financing strategies that have been implemented with partners in lead	0	3 strategies lead by 3 ministries	3 strategies lead by 3 ministries	Project evaluation	UNICEF, UNDP, PAHO

Joint SDG Fund Operational Performance Indicators

- Level of coherence of UN in implementing programme country⁹
- Reduced transaction costs for the participating UN agencies in interaction with national/regional and local authorities and/or public entities compared to other joint programmes in the country in question
- Annual % of financial delivery
- Joint programme operationally closed within original end date
- Joint programme financially closed 18 months after their operational closure

⁷Additional resources mobilized for other/ additional sector/s or through new sources/means

⁸Additional resources mobilized for the same multi-sectoral solution.

⁹ Annual survey will provide qualitative information towards this indicator.

- Joint programme facilitated engagement with diverse stakeholders (e.g. parliamentarians, civil society, IFIs, bilateral/multilateral actor, private sector)
- Joint programme included addressing inequalities (QCPR) and the principle of “Leaving No One Behind”
- Joint programme featured gender results at the outcome level
- Joint programme undertook or draw upon relevant human rights analysis, and have developed or implemented a strategy to address human rights issues
- Joint programme planned for and can demonstrate positive results/effects for youth
- Joint programme considered the needs of persons with disabilities
- Joint programme made use of risk analysis in programme planning
- Joint programme conducted do-no-harm / due diligence and were designed to take into consideration opportunities in the areas of the environment and climate change

2.2. Joint programme Results framework

Result / Indicators	Baseline	2021 Target	2022 Target	Means of Verification	Responsible partner
JP Outcome 1: Improved efficiency, effectiveness and equity of education spending which prioritizes investments towards the realization of SDG 4 and the philosophy of “leaving no one behind” through building capacity on public financial management (PFM) and RBB in the MoEYI.					
Indicator 1.1: Increased investment for SDG 4/Vision 2030 education targets	0	2%	10%	Project evaluation	UNICEF
Indicator 1.2: Efficiency gains promoted by JP activities	0	0	5 million dollars	Project evaluation	UNICEF
Output 1.1 Improved capacity of MoEYI staff to prepare a RBB which prioritizes expenditure to achieve the delivery of quality education					
Indicator 1.1.1 Key Staff trained in RBB	0	60 Key MoEYI and agency staff trained RBB Education Guidelines produced	60 Key MoEYI and agency staff trained	Project progress reports	UNICEF
Indicator 1.1.2 Revised KPIs	0% of programmes have KPI revised	50% of programmes have KPI revised	100% of programmes have KPIs revised and reflecting gender sensitivity; monitoring report produced	Project progress reports	UNICEF
Indicator 1.1.3 MoEYI budget submission is fully aligned with RBB principles	tbc	2021 budget submission includes RBB principles	2022 budget submission is fully aligned with RBB principles	Project progress reports	UNICEF
Output 1.2 Improved capacity of MoEYI staff to identify and act on strategic areas of improvement around SDG 4 including gender and inclusive education					
Indicator 1.2.1 Trained staff on budget analysis techniques	0	25 MoEYI and agency staff trained on		Project progress reports	UNICEF

		budget analysis techniques			
Indicator 1.2.2 Diagnostic reports produced	0	Diagnostics initiated by trained staff	3 diagnostic reports produced	Project progress reports	UNICEF
Output 1.3 A financial simulation model for education expenditure operational					
Indicator 1.3.1 Model developed and tested	Non existent	Model developed	Financial sustainability of policy options and targets tested	Project progress reports	
JP Outcome 2: Improved efficiency, effectiveness and equity of health spending which prioritizes investments towards the realization of SDG 3 and the philosophy of "leaving no one behind" through building capacity on public financial management (PFM) and RBB in the MoHW.					
Indicator 2.1: Increased investment on SDG 3/Vision 2030 health targets	0	2%	10%	Project evaluation	PAHO, UNICEF
Indicator 2.2 Efficiency gains promoted by JP activities	0	0	5 million dollars	Project evaluation	PAHO, UNICEF
Indicator 2.3 MoHW budget submission is fully aligned with RBB principles	tbc	2021 submission includes RBB principles	2022 submission is fully aligned with RBB principles	Project evaluation	PAHO, UNICEF
Output 2.1 Improved capacity of MoHW staff to prepare a RBB which prioritizes expenditure to achieve good health and well being					
Indicator 2.1.1 Key Staff trained in RBB	0	60 Key MoHW, RHAs and agency staff trained RBB Health Guidelines produced	60 Key MoHW, RHAs and agency staff trained	Project progress reports	PAHO, UNICEF
Indicator 2.1.2 KPIs revised		50% of programmes have KPI revised	100% of programmes have KPIs revised and reflecting gender sensitivity; monitoring report produced	Project progress reports	PAHO, UNICEF
Output 2.2 Improved capacity of MoHW staff to identify and act on strategic areas of improvement around SDG 4 including gender and inclusive education					
Indicator 2.2.1 Trained staff on budget analysis techniques		25 Key MoHW and agency staff trained on budget analysis techniques	2 diagnostics initiated led by MoHW staff trained	Project progress reports	PAHO
Indicator 2.2.2 Diagnostic reports produced			2 diagnostic reports	Project progress reports	PAHO
Output 2.3 A financial model for health expenditure developed					
Indicator 2.3.1 Improved Health expenditure information		National Health Accounts developed	Fiscal Space study conducted	Project progress reports	
JP Outcome 3: Improved efficiency, effectiveness and equity of government spending to achieve the SDGs and the National Outcomes (NOs) as defined in Vision 2030 Jamaica, by improving the linkages of the country's budget programmes to national targets so as to clearly identify expenditure invested on the programmes and activities which relate to them.					
Indicator 3.1 Budget programmes linked to priority SDG/Vision 2030 targets	non existent	Partial linkage of budget programmes to SDG/Vision 2030 targets	Full linkage of budget programmes to SDG/Vision 2030 targets	Project evaluation	UNDP, UNICEF

Output 3.1 Improved capacity of GoJ to identify expenditure on specific National SDGs linked to NOs through mapping Budget Programmes and Key Performance Indicators to each of these					
Indicator 3.1.1 Staff trained to track and analyse expenditure	0	20 staff in MoFPS and POIJ trained in tracking and analysing expenditure on SDGs and NOs	MoFPS and PIOJ assigned staff to work on SDG/Vision 2030 tracking system	Project progress reports	UNDP, UNICEF
Indicator 3.1.2 Tracking reports produced	0	Methodology developed	Initial tracking and analysis report produced	Project progress reports	UNDP, UNICEF

Annex 3. Gender marker matrix

Indicator		Score	Findings and Explanation	Evidence or Means of Verification
<i>N°</i>	<i>Formulation</i>			
1.1	Context analysis integrate gender analysis	2	The proposed budget analysis techniques and diagnostic reports for Health and Education include a gender analysis of inequality and discrimination using sex-disaggregated and gender sensitive data	Project Results Matrix
1.2	Gender Equality mainstreamed in proposed outputs	3	For both the Health and Education sector all KPIs will be revised to reflect gender disaggregation and sensitivity. The MoFPS will also be able to track expenditure and efficiency of expenditures on gender transformative programmes.	Project Results Matrix
1.3	Programme output indicators measure changes on gender equality	2	There are output level indicators related to gender equality specifically for the budget diagnostic analyses which will have a gender focus; for capacity building related outputs, the number of trainees will be disaggregated by sex;	Project Results Matrix
2.1	PUNO collaborate and engage with Government on gender equality and the empowerment of women	2	PUNO has engaged with both the MoEYI and the MoHW and agreed on diagnostic analyses on issues affecting women and children including Maternal Health, teenage pregnancies and inclusive education	Project Results Matrix
2.2	PUNO collaborate and engages with women's/gender equality CSOs	0	There has been no engagement with CSOs	
3.1	Program proposes a gender-responsive budget	3	Almost all of the activities and outputs for Health and Education have a gender-sensitive component and the activities and outputs for the MoFPS will promote a gender sensitive RBB	Project Results Matrix
Total scoring		12		

Annex 4. Budget and Work Plan

4.1 Budget per UNSDG categories

UNDG BUDGET CATEGORIES	UNICEF		PAHO-WHO		UNDP		TOTAL	
	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)
1. Staff and other personnel	100,000	165,000	15,000	40,000	10,000	15,800	125,000	220,800
2. Supplies, Commodities, Materials			0		0			
3. Equipment, Vehicles, and Furniture (including Depreciation)	2,500		0		0			
4. Contractual services	240,000		170,000		85,000			
5. Travel	0		0		0			
6. Transfers and Grants to Counterparts	100,000		80,000		0			
7. General Operating and other Direct Costs	80,000		10,000		35,000			
Total Direct Costs	522,500		275,000		130,000			
8. Indirect Support Costs (Max. 7%)	36,575	19,250	9,100	64,925				
TOTAL Costs	559,075	165,000	294,250	40,000	139,100	15,800	992,425	220,800
1st year	324,745		171,468				496,213	0
2nd year	234,330		122,782		139,100		496,212	0

The majority of the Joint SDG Fund (50 percent) is for contractual services to carry out the following activities:

- Conduct training for key staff within the MoEYI and MoHW on PFM and RBB
- Develop sector specific guidelines on planning, budgeting and monitoring guidelines
- Conduct training for key staff within the MoEYI and MoHW on budget analysis techniques
- Assistance to conduct diagnostics to assess the service delivery of at least 3 key programmes in priority areas within the education and health sectors
- Develop financial models and test the financial sustainability of policy options and targets
- Develop methodology adapted to the GoJ needs to track expenditure by key SDG and Vision 2030 targets
- Train staff and assist in conducting the first measurement of expenditures by targets

These activities aim to build capacity of MoFPS, MoEYI and MoHW staff and allow them to enhance the efficiency, effectiveness and equity of public expenditure management for SDG acceleration.

The remainder of the Joint SDG fund is allocated to transfers and grants to counterparts (18 percent), support staff for the project (13 percent) and general operating costs and equipment (13 percent). These allocations are to ensure adequate technical advice and support as well as general project coordination and management.

66 percent of the budget is expected to be consumed in the first year of the project and 34 percent in the second year.

4.2 Budget per SDG targets

SDG TARGETS		%	USD
SDG 16	16.6: Develop effective, accountable and transparent institutions at all levels	100%	1,213,225
SDG 17	17.9: Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the Sustainable Development Goals	100%	1,213,225
SDG 3	3.2: By 2030, end preventable deaths of newborns and children under 5 years of age	28%	335,000
	3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being		
	3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes		
	3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all		
	3.C: Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States		
SDG 4	4.1: By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes	26%	310,000
	4.2: By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education		
	4.5: By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations		
	4.A: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all		
	4.C: By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing state.		
SDG 5	5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences	7%	90,000
	5.C Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels		

The entire budget of \$1,213,225, together with all of the activities, is aimed at developing effective, accountable and transparent institutions as well as implementing effective and targeted capacity-building. The Education sector targets (SDG4) and Health sector targets (SDG3) receive 26 and 28 percent of the budget respectively for specific sector interventions, as well as the sectors receiving benefits from capacity-building and enhancing institutional capacity. The percentage allocation specifically for gender equality (SDG 5) is 7 percent which amounts to \$90,000.

4.3 Work plan

Outcome 1			Improved efficiency, effectiveness and equity of education spending which prioritizes investments towards the realization of SDG 4 and the philosophy of "leaving no one behind" through building capacity on public financial management (PFM) and RBB in the MoEYI .																	
Output	Annual target/s		List of activities	Time frame								PLANNED BUDGET					PUNO/s involved	Implementing partner/s involved		
	2021	2022		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Overall budget description	Joint SDG Fund (USD)	PUNO Contributions (USD)	Total Cost (USD)					
Output 1.1 Improved capacity of MOEYI staff to prepare a Results Based Budget which prioritizes expenditure to achieve the delivery of quality education	60 Key staff trained Guidelines Produced 50% of programmes have revised KPIs 2021 budget submission includes RBB principles	60 Key staff trained 100% of programmes have KPIs revised Monitoring report produced 2022 budget submission is fully aligned with RBB principles	Establish a dedicated RBB team in the MoEYI											1 position as RBB coordinator/ resident technical adviser at MoEYI x 2 years	80,000		80,000	UNICEF	MoEYI, MoFPS, WB	
			Conduct training for key staff within the Ministry and Agencies on PFM and RBB												Organization of 3 training /workshops (MDAs) on RBB and Monitoring results for 2 groups (MoEYI, MDAs) = total 6 training (includes DSA facilitator)	35,000		35,000	UNICEF	MoEYI, MoFPS, WB
			Develop Education Planning, Budgeting and Monitoring Guidelines													Public Finance expert consultant to facilitate training and develop Education Planning, Budgeting and Monitoring guidelines for MOEYI	40,000		40,000	UNICEF
Output 1.2 Improved capacity of MOEYI staff to identify and act on strategic areas of improvement around SDG 4 including gender and inclusive education	25 MoEYI and agency staff trained on budget analysis techniques Diagnostics initiated by trained staff	3 diagnostic reports produced	Conduct training for key staff on Budget Analysis techniques											Budget Analysis Techniques training for key staff	10,000		10,000	UNICEF	MoEYI	
			Conduct diagnostics to assess the service delivery of at least 3 key programmes in priority areas within the education sector including the Text Book and Furniture Programme and programmes aimed to reduce the dropout rates, especially of boys, and special education												Public Expenditure Tracking Survey on a flagship programme (e.g Textbook and furniture)	50,000		50,000	UNICEF	MoEYI
															Budget Analysis (deep dive) on investment targeting gender equality in primary and secondary education	30,000		30,000	UNICEF	MoEYI
															Budget Analysis (deep dive) on investment on Special / Inclusive Education	30,000		30,000	UNICEF	MoEYI
Output 1.3 A financial simulation model for education expenditure developed		Financial Simulation model developed Policy options tested on model	Develop a financial simulation model for education expenditure											Consultancy to develop financial simulator based on the results of the PER conducted in 2020	35,000		35,000	UNICEF	MoEYI, WB	
			Test the financial sustainability of policy options and targets using the model																	
TOTAL Outcome 1																310,000		310,000		
Outcome 2			Improved efficiency, effectiveness and equity of health spending which prioritizes investments towards the realization of SDG 3 and the philosophy of "leaving no one behind" through building capacity on public financial management (PFM) and RBB in the MoHW.																	
Output	Annual target/s		List of activities	Time frame								PLANNED BUDGET					PUNO/s involved	Implementing partner/s involved		
	2021	2022		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Overall budget description	Joint SDG Fund (USD)	PUNO Contributions (USD)	Total Cost (USD)					
Output 2.1 Improved capacity of MoHW staff to prepare a Results Based Budget which prioritizes expenditure to achieve the delivery of good health and well-being	60 Key MoHW, RHAs and agency staff trained RBB Health Guidelines produced 50% of programmes have KPI revised	60 Key MoHW, RHAs and agency staff trained 100% of programmes have KPIs revised and reflecting gender sensitivity Monitoring report produced	Establish a dedicated RBB team in the MoHW											1 position as RBB coordinator/ resident technical adviser at MoHW x 2 years	80,000		80,000	PAHO	MoHW, MoFPS, WB	
			Conduct training for key staff within the Ministry and RHAs on PFM and RBB												Organization of 3 training/workshops on RBB and Monitoring results for 2 groups (MoHW & Regional Health Authorities and MDAs) = total 6 training	35,000		35,000	UNICEF - PAHO	MoHW, MoFPS, WB
			Develop Health Planning, Budgeting and Reporting Guidelines													Public Finance expert consultancy to facilitate training and develop Health Planning Budgeting and Monitoring guideline	40,000		40,000	UNICEF - PAHO
Output 2.2 Improved capacity of MoHW staff to identify and act on strategic areas of improvement around SDG 3 including a gender and equity focus	25 Key MoHW and agency staff trained on budget analysis techniques 2 diagnostics initiated led by MoHW staff trained	2 diagnostic reports produced	Conduct training for key staff on Budget Analysis techniques											Budget Analysis Techniques training for key staff	10,000		10,000	PAHO	MoHW	
			Conduct diagnostics to assess the service delivery of at least 2 key programmes in priority areas within the health sector including the Maternal Health Programme and the Adolescent Health Programme												Budget Analysis (deep dive) on Adolescent Health Programme	30,000		30,000	PAHO- UNICEF	MoHW
															Budget Analysis (deep dive) on Maternal and Health programme	30,000		30,000	PAHO- UNICEF	MoHW
Output 2.3 A financial model for health expenditure developed	National Health Accounts developed	Fiscal Space study conducted with Policy options	National Health Accounts developed											Consultancy to develop National Health Accounts	55,000		55,000	PAHO	MoHW	
			A Fiscal Space Study conducted with policy options for health financing												Consultancy for conducting a Fiscal Space Study	55,000		55,000	PAHO	MoHW
TOTAL Outcome 2																335,000		335,000		

Outcome 3			Improved efficiency, effectiveness and equity of government spending to achieve the SDGs which are linked to its National Outcomes (NOs) as defined in Vision 2030 Jamaica, by improving the linkages of the country's budget programmes to the SDGs so as to clearly identify expenditure invested on the programmes and activities which relate to them.																		
Output	Annual target/s		List of activities	Time frame								PLANNED BUDGET				PUNO/s involved	Implementing partner/s involved				
	2021	2022		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Overall budget description	Joint SDG Fund (USD)	PUNO Contributions (USD)	Total Cost (USD)						
Output 3.1 Improved capacity of GOJ to identify expenditure on specific National SDGs linked to NOs through mapping Budget Programmes and Key Performance Indicators to each of these	20 staff in MoFPS and POIJ trained in tracking and analysing expenditure on SDGs and Nos	MoFPS and POIJ assigned staff to work on SDG/Vision 2030 tracking system	Develop systems and processes to map Budget Programmes with SDGs and Vision 2030											Consultancy to develop methodology adapted to the Goj needs to track expenditure by key SDG and Vision 2030 targets	40,000		40,000	UNDP	MOFPS, PIOJ		
			Produce first SDG /Vision 2030 budget analysis												Consultancy firm to Conduct the first measurement of expenditures by targets and training to staff	45,000		45,000	UNDP	MOFPS, PIOJ	
			Conduct training for key staff within the MoFPS and POIJ to analyze and track expenditure on SDGS / Vision 2030													Organizing training and working sessions with relevant Ministries	20,000		20,000	UNDP	MOFPS, PIOJ
			Initial tracking and analysis report produced													Publication and Launch of First SDG /Vision 2030 Tracking analysis	15,000		15,000	UNDP	MOFPS, PIOJ
			TOTAL Outcome 3												120,000		120,000				
Joint programme management			List of activities	Time frame								PLANNED BUDGET				PUNO/s involved	Implementing partner/s involved				
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Overall budget description	Joint SDG Fund (USD)	PUNO Contributions (USD)	Total Cost (USD)						
Pprogramme Support			Programme management staff											Project Coordinator-100% - 2 years	85,000	15,000	100,000	UNICEF	PAHO , UNDP		
														Office Equipment for programme coordinator ICT@ \$3000 each, Furniture \$500 each, telephone \$100 each	2,500	0	2,500	UNICEF			
															Finance /Administrative Assistant (50%) * 2 years	15,000	25,000	40,000	UNICEF		
															Finance /Administrative Assistant (25%) * 2 years	15,000	15,000	30,000	PAHO		
															Finance /Administrative Assistant (20%) * 2 years	10,000		10,000	UNDP		
			Independent Evaluation	Independent and gender-responsive evaluation										Consultancy to conduct an independent evaluation	35,000		35,000	RCO, UNICEF, PAHO, UNDP	PIOJ		
				Staff and personnel -Technical Assitance											NoC Education Specialist ct (10%)- UNICEF		20,000	20,000	UNICEF		
															NoC Health Specialisth (10%) - UNICEF		20,000	20,000	UNICEF		
															Social Policy Consultant (25%) - UNICEF		25,000	25,000	UNICEF		
															Deputy Representative P4-UNICEF (5%)		25,000	25,000	UNICEF		
															Operations officers-UNICEF (10%)		10,000	10,000	UNICEF		
															M&E Specialist (UNICEF) (5%)		10,000	10,000	UNICEF		
															PAHO Advisor Health Systems and Services (5%)		20,000	20,000	PAHO		
														UNDP Programme Specialist (10%)		15,800	15,800	UNDP			
												UNDP Programme Associate (10%)		10,000	10,000	UNDP					
												UNDP Finance Associate (10%)		10,000	10,000	UNDP					
			TOTAL Management costs											162,500	220,800	383,300					

Annex 5. Risk Management Plan

The key assumptions that underlie the risk management approach are that:

- There is political will and commitment by the government, specially by MoEYI, MoHWS and MoFPS
- GOJ is committed to the successful implementation of Results Based Budgeting
- Understanding by key stakeholders of the linkages between the overall culture of violence direct relation to family violence and VAWG and children.
- Staff from MDAs involved in the project are interested and motivated
- Political stability and enabling environment prevail
- Ending of Covid 19 emergency and requirements for social distancing





Risks	Risk Level: (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare - 1	Impact: Essential - 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person
Contextual risks					
Human and economic impact of Covid 19 emergency	Very high	5	5	Trainings are postponed until the COVID 19 emergency is resolved Budget areas to be prioritized may change according to the line ministries needs The project could prioritize the analysis and the development of tools for the public finance system to absorb shocks	UN Joint Team
Jamaica faces the annual threat of storms, rainfall-induced landslides, seismic events and other natural disasters, all of which can have significant fiscal impacts.	High	4	3	The project will increase the capacity of the government to measure the investment in climate change adaptation targets and DRR investments as well as emergency relief.	UN Joint Team

2020 General Elections	High	4	2	Continuous consultations with key national and local Government institutions and mainstreaming of the human security approach in development strategies should keep national focus on advancing human security	Resident Coordinator UN Joint Team
Programmatic risks					
Insufficient ownership/buy-in from Government decision-makers could delay or impede achievement of programme results	Medium	3	3	The relevant decision-makers and national partners are participants in the design, implementation and monitoring of the programme. Key entities will participate on the Programme Steering Committee.	Resident Coordinator UN Joint Team
Unavailability of data	Medium	3	3	Develop materials to support MDAs to collect and document data appropriately for future exercises	UN Joint Team
Sustainability of the outcomes	Medium	3	3	The programme is designed using an empowerment (bottom up) approach to promote sustainability of programme results. The objectives of the programme are already aligned to priorities of the government and the IFIs such as WB and IDB.	UN Joint Team
Institutional risks					
Some institutions, especially those which have participated in capacity development activities in other projects may experience 'overload' and view this initiative as another distraction from their 'real' jobs.	Medium	3	3	Demonstrate the value-added possible from full acceptance and participation.	UN Joint Team

				Share information on good practices in other countries	
Insufficient human resources and limited capacity to make full use of the available institutional strengthening	Medium	3	3	Use methodologies and structure activities to facilitate the existing organizational resources. Conduct a midterm assessment with partners to assess progress and take corrective measures.	UN Joint Team
Fiduciary risks					
Crises (national disasters) may absorb resources and technical expertise needed for the programme	Medium	2	3	Programme employs a robust risk management strategy with financed mitigation measures	RCO



SIGNATURE PAGE

<p>Resident Coordinator a.i. Name: Mariko Kagoshima Date: 30/3/2020 Signature and seal</p> <p><i>Mariko Kagoshima</i></p> 	<p>National Coordinating Authority Planning Institute of Jamaica (letter accompanying proposal)</p> <p><i>[Signature]</i></p> <p>PLANNING INSTITUTE OF JAMAICA 16 OXFORD ROAD KINGSTON 5</p>
<p>Participating UN Organization (lead/convening) Name of PUNO: UNICEF Name of Representative: Mariko Kagoshima Date: 30/3/2020 Signature and seal</p> <p><i>Mariko Kagoshima</i></p> 	
<p>Participating UN Organization Name of PUNO: PAHO/WHO Name of Representative: Dr. Bernadette Theodore-Gandi Date: 30/3/2020 Signature and seal</p> <p><i>Bernadette Gandi</i></p> 	
<p>Participating UN Organization Name of PUNO: UNDP Name of Representative: Denise Antonio Date: 30/3/2020 Signature and seal</p> <p><i>Denise Antonio</i></p> 	



Planning Institute of Jamaica

16 Oxford Road, Kingston 5, Jamaica West Indies
Telephone: (876) 960-9339 Facsimile: (876) 906-5011
Email: info@pioj.gov.jm Website: pioj.gov.jm



31 March 2020

Miss Mariko Kagoshima
UN Resident Coordinator *ad interim*
Office of the UN Resident Coordinator
1-3 Lady Musgrave Road
Kingston 5

Dear Miss Kagoshima:

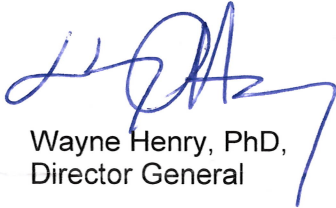
Re: Endorsement of UN Joint SDG Fund - Component 1 – Improving Efficiency, Effectiveness and Equity in Public Expenditure in Jamaica for SDG Acceleration

In my capacity as Director General of the Planning Institute of Jamaica, I confirm that the above mentioned proposal is in accordance with the country's national development priorities as outlined in Vision 2030 Jamaica: National Development Plan as well as Jamaica's Roadmap for Sustainable Development Goals (SDGs) Implementation.

Accordingly, I am pleased to endorse the above proposal which has significant potential towards the achievement of the SDGs in Jamaica.

The Government of Jamaica looks forward to a positive outcome of this submission and stands ready to work closely with the UN and other partners for the success of this project.

Yours sincerely,



Wayne Henry, PhD,
Director General

Fund Transfer Request Form

to the Multi-Partner Trust Fund Office, UNDP



To be completed by the RC Office on behalf of Participating Organization(s)					
To:	Jennifer Topping	From:	Mariko Kagoshima		
Title:	Executive Coordinator	Title:	Resident Coordinator a.i., Jamaica		
email address:	jennifer.topping@undp.org	Email address:	mkagoshima@unicef.org		
Joint programme focal point	Vicente Teran	Email address:	vteran@unicef.org		
Joint programme title :	Improving efficiency, effectiveness and equity in Public Expenditure in Jamaica for SDG acceleration.	Participating UN Organization's (PUNO) Focal point & email (cc'd)			
		PUNO	PUNO focal point name	PUNO focal point email	
		UNICEF	Mariko Kagoshima	mkagoshima@unicef.org	
Joint programme no:	FC1 2020 JAM	PAHO/WHO	Dr. Bernadette Theodore-Gandi	gandiber@paho.org	
Country:	Jamaica	PUNO3	Denise Antonio	denise.antonio@undp.org	
Theme (Call)	SDG Financing - Component 1				
Notes/ Special Instructions, if any:					
Amounts in USD - insert into the table and please do NOT use decimals.					
Participating UN Organization(s), as applicable <i>(Use English Acronym)</i>	Total Approved Allocation *	Total previously transferred amount (if applicable)	Amount Requested at this time	Remaining Balance after this request	Total Committed to date[1]
A	B	C	D = (A - B - C)	E	
UNICEF	559,075.00	-	324,745.00	234,330.00	#N/A
PAHO-OMS	294,250.00	-	171,468.00	122,782.00	#N/A
UNDP	139,100.00	-	-	139,100.00	#N/A
		-		-	#N/A
		-		-	#N/A
Grand Total:	992,425.00	-	496,213.00	496,212.00	#N/A
<i>Please check here if there is a change in the overall budget allocation:</i>					
<small>[1] legally binding contracts signed, including multi-year commitments which may be disbursed in future years, prevailing guidelines.</small>					
Total amount committed as percentage of total amount received (% calculated, E/B) must be 75% or greater to request next installment					#N/A
Joint programme end date (operational closure) as approved by the Joint SDG Fund Operational Steering Committee: Month/Year: <u>June, 2022</u>					
I hereby confirm that the funds requested are calculated in accordance with the approved Work Plan & Joint Programme Document. * I also certify that the copy transmitted to the MPTF Office is a true copy of the original which is secured by the RC Office. I have received documentation from Participating Organizations demonstrating Committed amounts as indicated in column E above where applicable. I also confirm that the PUNOs' indirect cost does not exceed 7%.					
Signature	_____			Date:	<u>23 June, 2020</u>
Name:	<u>Mariko Kagoshima</u>				
Title:	<u>Resident Coordinator ad interim</u>				
<small>*Attach signed Joint Programme document with budget breakdown by PUNO and year. ** Please submit soft copy along with signed version</small>					

Summary of Revisions Made in the Final Joint Programme Document

Country name: Jamaica

Joint Programme Title: *Improving efficiency, effectiveness and equity in Public Expenditure in Jamaica for SDG acceleration.*

No	Comments from Joint SDG Fund evaluators (see checklist for quality assurance)	Notes from UNCT about how and where in the JP document (e.g. page number) the comments have been addressed
1	Complete the contact details of the national partners listed in section 14.2	Contacts to all partners are listed in section 14.2 <ul style="list-style-type: none"> •Planning Institute of Jamaica- Wayne Henry, PHD (Director General) •Ministry of Finance and Public Service (MoFPS)- Lorris Jarett (Deputy Financial Secretary) •Ministry of Education, Youth and Information (MoEYI)- Grace McLean (Acting Permanent Secretary.) •Ministry of Health and Wellness (MoHW)- Dunstan Bryan (Permanent Secretary) •World Bank- Ozan Sevimli (Resident Representative in Jamaica) •Inter-American Development Bank- Adriana La Valley (Chief of Operations, Jamaica office)
2	Update timelines and budget of UNDP activities to align with payment calendar	Based on the request to send only one payment to UNDP that has a contribution of 139,100, a decision was taken by the agency to conduct the bulk of their planned activities in the second year. This has been reflected in the Final Joint Programme document (timeline and budget-sections Annex 4.1 and Annex 4.3)
4	One minor error in the Fund Transfer Request Form to be corrected.	Inserted the end date of the JP as June 2022
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