



PAN AMERICAN HEALTH ORGANIZATION  
WORLD HEALTH ORGANIZATION



## 126th SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., 26-30 June 2000

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*Provisional Agenda Item 5.2*

CE126/26 (Eng.)  
31 May 2000  
ORIGINAL: ENGLISH

### **EXTERNAL AUDITOR'S REPORT ON STRATEGIC PLANNING, MONITORING AND EVALUATION IN THE PAN AMERICAN HEALTH ORGANIZATION**

#### **1. Background**

Based on an offer by the External Auditor to undertake value for money studies for PAHO, the Director asked the External Auditor in 1999 to review the AMRO Planning and Evaluation System (AMPES). This coincided with the Director's objective of strengthening the strategic planning function, a goal included in his first speech to staff at the beginning of his second term.

The current approach to AMPES, launched in 1988, integrates the strategic planning, programming, budgeting, monitoring and evaluation of PAHO's technical cooperation. The "Logical Approach" was introduced in the late 1980's to improve the design and "evaluability" of technical cooperation projects and to establish a common approach to project management, throughout all levels of the Organization and for all projects, regardless of source of funding.

The report has been timely, coming as it did just before a planned review of the strategic planning process by the Director's Cabinet. In addition, the work plan of the Office of Analysis and Strategic Planning (DAP) for 2000 includes further development of several components of the planning process.

The review by the External Auditor is annexed to this document.

## **2. Comments on Findings and Recommendations of the Report**

### **2.1 *General***

We find the report an insightful review and an accurate reflection of the current practices in relation to the AMPES. It is particularly useful because the review includes all levels of the Organization. The close collaboration with users and managers throughout the process is reflected in the high level of feasibility of implementation of the recommendations. Commenting on selected aspects of the review provides an opportunity to update the Executive Committee on the current status of AMPES and the Director's plans in this area.

*Update on new AMPES software.* Reference is made throughout the document to the new version of the AMPES software, which is being developed. The final testing of the software will be completed in June and the commissioning plan calls for installation at Headquarters in July 2000 and completion of training of staff by the end of September. The Country Offices and Centers are more decentralized and the software for those units has to be linked with several other components of the Management Information System (OMIS and FAMIS). The testing and commissioning of that version of the new software will be completed in all field units by September 2001. A higher level of utilization for day-to-day management is expected because of the user-friendly Windows environment and the inclusion of new features, which respond to needs identified by users.

### **2.2 *Cost of the AMPES***

The Report states that the Office of Analysis and Strategic Planning (DAP) has estimated that the whole AMPES process costs \$5 million per year. This is a rough estimate made by DAP about two years ago based primarily on an estimate that 5% of staff time is devoted to planning, programming, monitoring and evaluating their work. This is largely accomplished through preparation and review of the biennial program budget; 2 six-month workplans; 1 six-month progress report; and an annual or biennial evaluation.

For 1998-1999, the cost of posts and local conditions was approximately \$80 million per year, not including national professionals or short-term consultants. Thus, the estimated annual cost of personnel time devoted to AMPES was \$4 million. An additional 25% of this cost was added for the cost of monitoring the process, maintaining the computerized systems that support these processes and the training of staff. The total estimated annual cost of using the AMPES of \$5 million represents only 2% of the total WHO and PAHO regular funds.

Given this cost, the Secretariat is pleased to note the finding of the Auditor that there was “universal acceptance of the need for a thorough planning system if PAHO is to deliver an effective program” of technical cooperation. More importantly the Secretariat is pleased with the evaluation that the AMPES is at least one of the best systems among United Nations organizations.

**2.3 *Supplementing Strategic and Programmatic Orientations (SPOs) with a small set of high-level objectives and performance measures against which its overall achievement can be assessed***

The Secretariat agrees with this recommendation as the need had already been identified when the protocol for the interim evaluation of the SPOs was developed last year. It is proposed to formulate a few objectively verifiable indicators by which the impact of each of the orientations could be measured. In addition, performance measures will be included in the next strategic plan.

**2.4 *Establish clear protocols with other major international organizations to minimize wasteful duplication of efforts***

PAHO has a long history of working closely with other international agencies around key problems or issues. In the case of the Expanded Program of Immunization this is an ongoing feature in which several agencies identify and coordinate complementary support around national and regional plans. Recently, the guidelines for preparation of the biennial program budget (BPB) 2002-2003 were modified to strengthen the analysis of other actors involved in technical cooperation in health at the country level. The guidelines also encourage the development of the strategy for technical cooperation, which avoids duplication of efforts among the international community and focuses on where the Organization can add value.

As the report points out, PAHO has moved further in this direction with the gaining of consensus with the international development banks to work in a coordinated way in selected areas. This is defined in the recently agreed "Shared Agenda" with the IDB and the World Bank, which will be signed in mid June. This agreement has the potential of increasing the areas of work and the partners to be included in this formal approach.

**2.5 *Establish a common approach to identifying non-staffing administrative activities***

The guidelines for the BPB require that all technical units develop a management project as project 01 and include all the necessary resources for the administration and

logistical support needed for technical cooperation. The Secretariat agrees that the guidelines for the formulation of the Management Project 01 need to be revised and made more specific. In addition, DAP will improve the evaluation criteria to ensure standardization of this project across all units and the inclusion of programming of key management components and development initiatives. It will also be necessary to monitor expenditures to ensure adherence to the agreed policy in this regard.

## **2.6 *Greater consistency in the quality and coverage of biennial plans***

The Secretariat accepts this recommendation. At the time of initial development and approval of the BPBs, the Country Program Analysts rigorously review the Country Office programs. The reviews of these by the regional technical units have varied in quality and the Secretariat is in the process of identifying an appropriate mechanism to address the challenges of frequent travel by regional technical advisers and the short timeframe for review.

Programs from regional technical, administrative and staff units are reviewed by DAP. DAP is currently implementing a strategy to facilitate the improvement of these BPBs with particular reference to the “evaluability” of the achievement of the purpose and expected results. All its planning officers were retrained in the Logical Approach in March and are assisting individual units to revise the current BPBs for 2000-2001. In addition selected units are being trained prior to the preparation of the BPBs 2002-2003. Furthermore, in the future, comments on regional plans will be sought from Country Offices.

## **2.7 *Extra-budgetary projects beyond the scope of the biennium: advice to units on how to use AMPES to record extra-budgetary funds***

This recommendation will be feasible to implement once the new Windows software supporting AMPES is available. That software will allow managers to program projects beyond the scope of the biennium.

With regard to the use of AMPES to record extrabudgetary funds, the guidelines emphasize the policy that only those funds committed at the time of preparation of the budget should be included. This issue has been incorporated into the intensive training program for all field offices, currently being implemented. It is expected that by the end of October all technical advisers and selected administrative personnel would have been trained in how to improve project management through more effective use of the information available in the management information systems for planning, finance and administration.

**2.8 *Review the way in which plans of administrative and staff units are developed and used***

This year, DAP has initiated a program of work with the Administration and staff units to promote the use of the logical approach. Specifically, these units are being encouraged to use this planning approach to articulate the performance standards for improving the efficiency of routine work, and to specify the expected results and impact of proposed initiatives to improve the effectiveness and efficiency of the Organization. At the same time, DAP will seek to identify the peculiar needs of these units which are not addressed through the logical approach and investigate the feasibility of the Auditor's recommendation for the phasing of the development of plans. Based on the results of this program of work, DAP will make recommendations to the Director at the end of the year.

**2.9 *Review the way the Director's Cabinet meets to consider the biennial program budgets***

The Director has already accepted this recommendation, introduced in the interim report. At the end of 1999, the review of the BPBs focused on assessment of the extent to which the Purpose and Expected Results of 1998-1999 programs had been achieved and on approval of minor modifications to the 2000-2001 programs (approved by the Directing Council). To this end, a smaller corporate management review team, chaired by the Director, conducted the reviews. The results of the reviews were later presented to the Cabinet and a discussion held on the cross-cutting issues identified.

Preliminary evaluation has indicated that the efficiency of the process has been improved but that another mechanism would be needed for the collective review by the Cabinet of the technical achievements of the Organization. The process will be further refined for the upcoming reviews of the BPBs 2002-2003 in October, the purpose of which is different from that conducted last year. This review will need to ensure that the BPBs developed address the priorities identified, are within the framework of the Strategic and Programmatic Orientations, and are technically sound and feasible.

**2.10 *Efficiency, performance indicators and benchmarking not used in the planning process***

The recommendations made in this area are more challenging. While the Secretariat would agree that the issue of efficiency should be part of the planning process, this has been more difficult to operationalize. At present the review of the development plans for the units offers the best opportunity. While the Secretariat recognizes that this

should ideally be done at the time of the review and approval of the BPBs, the experience has been that the process takes too long, and the development plans are not accorded the in-depth review required. Further, to date the emphasis has been on the development plans of the country offices.

The Secretariat will need to expand the training to include the development and use of performance indicators and to introduce benchmarking into the management culture. In addition, all units would be required to submit development plans, and a more multidisciplinary, systematic approach to the review will be introduced.

It should be recalled that efficiency issues of individual country programs are addressed in detail at the time of transfer of PAHO/WHO Representatives and during the regular monitoring visits by the Country Program Analysts. Further, common issues are addressed collectively during the annual subregional managers meetings.

#### **2.11 *Linking staff costs to program costs***

This is the recommendation with which the Secretariat has the most difficulty. Attempts have been made in the past to link the cost of staff to the programs. However, the exercise became mostly a mathematical one, and a challenging one at that. The nature of technical cooperation does not lend itself to estimating the cost of staff, all of whom work in multiple project areas and in many countries.

The Director will revisit this approach to determine whether the reintroduction of this methodology will add value to the managerial process.

#### **2.12 *DAP should take a more strategic approach to program evaluation***

The Director fully agrees with this recommendation and has already increased the resources of DAP to achieve a more strategic approach to evaluation in general. Effective March 2000, an additional post was added to DAP to: (1) develop a mechanism for consolidating and analysing the results from the wide range of studies completed each year in order to inform the Cabinet of cross-cutting issues; (2) conduct or commission reviews of selected programs; and (3) increase the capacity for evaluation throughout the Organization.

With respect to (2) the Director has identified the evaluation of the Pan American Centers as a priority for this biennium. In addition, DAP is currently assessing different approaches to program evaluations in general, and in organizations similar to PAHO.

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CE126/26 (Eng.)  
Annex

**STRATEGIC PLANNING,  
MONITORING AND EVALUATION IN  
THE PAN-AMERICAN HEALTH  
ORGANIZATION**

**Report by the External Auditor  
April 2000**

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## Summary

### Introduction

- 1 This report records the results of a high-level review of PAHO's strategic planning, monitoring and evaluation framework. I conducted this review in my capacity as the external auditor of the organization. The review comprised field work in Washington and in seven country offices and centres.
- 2 The review sought to answer three key questions: whether PAHO's system for planning, monitoring and evaluation is theoretically sound; whether the system is operating as intended; and whether there is scope for further improvements. In arriving at the conclusions, my staff compared PAHO's system with ones existing in other major international and national organizations, interviewed senior PAHO staff based in Washington and in field offices and examined sampled products of the planning system, including the Strategic and Programmatic Orientations, Biennial Program Budgets and evaluation reports.

### **PAHO staff perceive strategic planning to be a costly but necessary undertaking**

- 3 PAHO spends an estimated \$5 million each year planning, monitoring and evaluating its work. It has a highly developed and well-understood process that links budgetary/financial planning and technical programming activities.
- 4 The preparation of a strategic plan for technical co-operation in health care which seeks to look some two to three years hence is an inherently complex matter. And the procedures for monitoring and evaluating progress on this work are inevitably difficult and onerous. While some of the staff interviewed were concerned at the level of effort required to manage this system there was a universal acceptance of the need for such a system, and its related procedures, if PAHO is to deliver an effective program of technical assistance.



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**PAHO's planning, monitoring and evaluation system meets, and in some key respects exceeds, best practice seen elsewhere within the UN system**

5 Overall planning directions are provided by the Strategic and Programmatic Orientations which are produced every four years. These are converted by PAHO's country, regional and administrative units into concrete programs of technical co-operation via the Biennial Program Plans. These plans are built around the well defined Logical Framework Approach to project management. This approach is widely used throughout the UN system and by many major development assistance organizations. While this is not the only approach which could be adopted to project and program management it is well suited to PAHO's technical co-operation work, is well understood by the staff interviewed and is used as an on-going management tool. There is considerable benefit in adopting a common approach to project management throughout the organization and I therefore endorse this practice.

6 In my audits of other UN organizations and specialised agencies I have reviewed a range of strategic planning systems. I believe that PAHO's system matches and in some key respects exceeds best practice seen elsewhere. Particularly strong features include:

- a clear link between the budgetary process and the programming process;
- the computerisation of much of the planning process and outputs;
- emerging links between the activity planning system and the staff appraisal system; and
- the commitment of senior staff, from the Director down, to planning and the on-going improvement of the planning system.

**There is scope for further refinement of the planning, monitoring and evaluation framework**

7 The Strategic and Programmatic Orientations identify the areas of health in which PAHO is involved and are a consensus document around which member states have agreed to coalesce. While recognising the rather different political aims that the Strategic Planning Orientations fulfil, I consider that this document could usefully be supplemented by a small set of high-level objectives and related performance measures

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through which the organization's effectiveness can be gauged. As part of this process, it is important that PAHO, in addition to consultation with member states, consults with other major international organizations to clearly delineate the areas where the organization can make the most impact.

- 8 All units within PAHO are required to develop a biennial program budget for non-staffing costs which translate the Strategic Planning Orientations into specific programs of technical co-operation. The examination confirmed that the process was widely valued and identified a number of potential improvements. Individual plans could be strengthened by providing more contextual information, by identifying the threats to success and by a closer focus on efficiency. While the country and regional programmes find the planning framework useful, administrative units are more sceptical of its utility for their activities and there is a need to reconsider how their activities can be better integrated within the planning framework.
- 9 Once the plans are developed they are then subjected to varying levels of internal analysis and scrutiny. Regional plans are not as rigorously challenged as country plans. There is a need to strengthen the central analytical capacity and to review the way in which the Director's cabinet considers the plans of different parts of PAHO's operations.
- 10 All units are expected to monitor progress against their plans on a regular basis. My examination confirmed that reports are being generated and being used as a basis for re-thinking and revising programs. Their use as a monitoring tool would be strengthened by focusing more on those areas of programs which were not performing as planned and seeking to explain unexpected variations.
- 11 While the monitoring reports help PAHO know whether what was planned has been carried out, they do not necessarily help answer questions of effectiveness. For this more detailed evaluation studies are required. At the program level, PAHO has generated considerable evaluative information - often as a requirement of projects receiving external funds. PAHO currently lacks a way of collating this information, of assessing its value, acting on recommendations where warranted and of disseminating findings

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across the organization. Nor does PAHO ensure that all aspects of its activities are periodically and independently examined.

## **Conclusions:**

12 My examination has confirmed the theoretical soundness of PAHO's planning framework and has shown that the system is being used substantively as intended in headquarters, country offices and regional centres. The system is in a constant state of evolution and there is scope for further refinements. The following recommendations are proffered as a contribution to this evolution.

## **Recommendations:**

### **On how PAHO identifies its key goals and priorities:**

- PAHO should consider supplementing the SPOs with a small series of high-level objectives and performance measures against which its overall achievement can be assessed.
- It is vital that PAHO establishes clear protocols with other major international organizations to minimise wasteful duplication of efforts and ensure that the maximum benefits are obtained from scarce international health resources. PAHO's recent moves in this direction are to be commended.

### **On the development of unit plans – the Biennial Program Budget:**

- PAHO should seek to achieve greater consistency in the quality and coverage of biennial plans.
- Biennial planning documents should indicate who has been consulted, how the plan complements the actions of counter-part organizations, the threats to a plan's success and how these will be managed.
- PAHO should examine the scope for developing a common approach to the treatment of non-staffing administrative activities and costs in BPBs .

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- For projects which are expected to continue beyond the biennial planning period, in particular for those projects in receipt of extra-budgetary funds, it should be possible to record the expected project completion date and the promised funding expected after the end of the current biennial.
  - The plans should show what extra-budgetary funds have been obtained and what extra-budgetary funds are being sought.
  - Clear advice needs to be provided on how to use AMPES to record extra-budgetary funds and how to produce monitoring reports for funding bodies.
  - PAHO should review the way in which the plans of administrative and staff units are developed and used.

**On the scrutiny of plans:**

- PAHO should review the way in which the Director's cabinet meets to consider the Biennial Program Budgets.

**On the dissemination of information, training and support to staff:**

- More training should be provided to country and headquarters staff in the use of the AMPES computer system
- The Analysis and Strategic Planning Unit should take a more proactive stance in helping managers obtain the kinds of management reports they need to better run their areas.
- More information should be disseminated to staff on the constraints faced by the organization in its budget setting process.

**On the further development of the planning system:**

- As part of developing their Biennial Program Budgets, all technical co-operation units should be asked to identify how they will achieve greater efficiency in the use of funds.

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- PAHO should investigate the feasibility of linking staff costs to program costs to identify the full cost of different programs and sub-programs.

**On monitoring progress:**

- The AMPES computer system should be used to generate exception reports showing which projects are running over budget or running over time.
- Performance data reported on AMPES should be periodically validated.

**On the evaluation of performance:**

- I understand that the Director intends to streamline the systems for internal evaluations of country offices and endorse this move.
- PAHO should take a more strategic approach to program evaluation. The role of the Analysis and Strategic Planning Unit could be extended to include oversight of evaluation within PAHO. Greater use should be made corporately of existing evaluations commissioned by external agencies and the results made more widely available. A rolling system of reviews should be planned to ensure that all areas of PAHO's operations are periodically, independently evaluated.

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## Part 1 Background

### Introduction

- 1.1 The Pan-American Health Organization (PAHO) is an international agency specialising in health. Its mission is *to co-operate technically with member countries and to stimulate co-operation among them in order that, while maintaining a healthy environment and charting a course to sustainable development, the peoples of the Americas may achieve health for all and by all*. Its fundamental purposes are *to promote and co-ordinate the efforts of the countries of the region to combat disease, lengthen life and promote the physical and mental health of their people*. It fulfils its technical co-operation remit by working alongside national officials in Ministries of Health and other Ministries. It seeks to address traditional health needs, through for example assistance with the procurement of low cost vaccines, as well as dealing with emerging health problems, for example obesity. PAHO provides technical co-operation on a wide range of issues, including women's health, disaster preparedness and co-ordination, maternal and child health and nutrition.
- 1.2 The organization serves as the American regional office of the World Health Organization and has its origins in the early twentieth century with the formation by the Second International Conference of American States in 1902 of the Pan American Sanitary Bureau. PAHO is governed by the Pan American Sanitary Conference which meets once every four years, the Directing Council which meets once each year that the Conference does not meet and the Executive Committee which meets twice a year (Figure 1). The organization has a biennial budget made up of quotas from its 38 member governments, an allocation from the World Health Organization, and extra-budgetary funds provided by individual governments, multilateral agencies, non-government organizations and the private sector. In 1998-99, the extra-budgetary funds represented some 42 per cent of the organization's \$250 million annual expenditure.

**Figure 1: PAHO's governing structures**

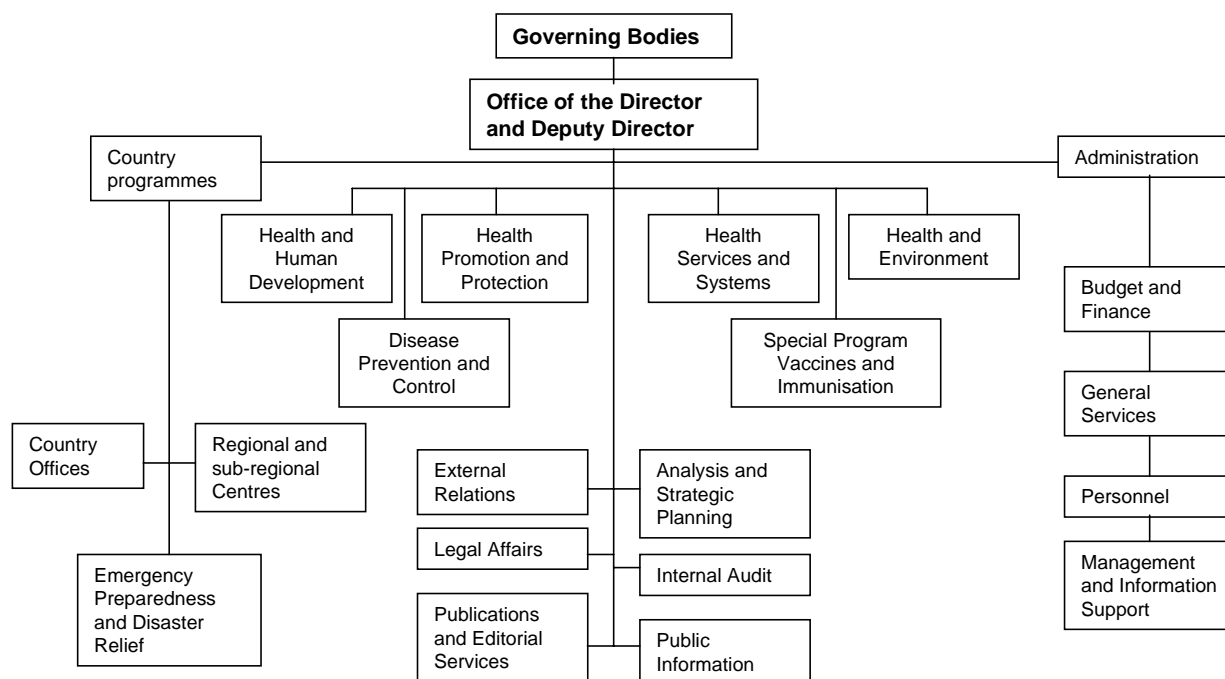
| <b>Governing body</b>                   | <b>Role</b>  | <b>Meeting frequency</b> | <b>Participants</b>   |
|---|--|--------------------------|---|
| <b>Pan American Sanitary Conference</b> | Defines general policies<br>Elects Director<br>Approves strategic orientations and program priorities  | Every four years         | All member governments  |
| <b>Directing Council</b>                | Reviews and approves the program and budget  | Once a year              | All member governments  |
| <b>Executive Committee</b>              | Considers technical and administrative matters, including the program and budget<br><br>Receives report from sub-committee on planning and programming | Twice yearly             | Representatives of nine member governments elected by the Conference or Council |

Source: Pan American Health Organization

PAHO's supreme governing body meets every four years.

1.3 PAHO operates through a network of 29 field offices, ten regional centres and a headquarters based in Washington (Figure 2). The organization employs some 2,100 staff in the field and 700 in headquarters. Headquarters is structured to provide a range of administrative supports to field offices as well as specialist programme advice. Field offices are headed by a country representative and are responsible for developing, in close co-operation with counterparts in national Ministries of Health, local technical co-operation programmes. The field offices vary in size with Brazil, the largest employing 50 staff and smaller offices, for example, Surinam employing less than 10 staff. Some field offices are responsible for managing PAHO's programme in several countries, for example the office in Jamaica also serves Bermuda and the Cayman Islands.

**Figure 2 PAHO's administrative structure**



Source: Pan American Health Organization

PAHO operates through a headquarters, country offices and regional and sub-regional centres

## Scope and methodology

1.4 This report examines the way PAHO plans, monitors and evaluates its work. It focuses on the activities of the Divisions and staff based in Washington as well as the how the planning system operates in the field offices of the organization and in the specialist regional and sub-regional centres. In undertaking this review, I sought to address three main questions:

- is PAHO's system for planning, monitoring and evaluation theoretically sound?;
- is the system operating as intended?; and
- what scope is there for further improvements?

1.5 My staff interviewed a sample of staff from each of the distinct parts of the Washington office: technical co-operation divisions, country program management, and administration as well as staff from different levels including members of the directorate,



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divisional heads, program co-ordinators, analysts and specialists. They did not specifically interview staff from the support offices but consider that the problems they face will be the same as for administration. As part of their routine financial audit work, my staff visited 3 country offices and 4 centres and interviewed relevant staff. They interviewed external experts and consultants with a background in health planning and evaluation and familiarity with the activities of PAHO. In addition, they examined a broad cross section of the products of the planning system including guidelines, biennial plans, annual evaluations and six monthly work plans as well as external evaluations and internal monitoring reports. In forming my opinion on PAHO's planning system I drew on my experience in auditing other international agencies and best practice guides produced by several national governments.

## **Planning context**

- 1.6 PAHO operates in a complex constantly evolving environment. It recognises that its budget is relatively small when set against the enormous health problems still evident in the Americas. It is dependent on the goodwill and support of member countries for much of its regular finances and for its access to health officials in Ministries of Health and other national agencies. Some 50 per cent of its regular budget is tied to staffing and much of the remainder to on-going program commitments. Consequentially, its flexibility to re-deploy either staffing or regular program funds is limited.
- 1.7 In addition, PAHO operates in a crowded field of international health programs with interests and objectives which frequently overlap with the roles of PAHO. The field includes the major international development agencies such as the World Bank and UNICEF, national development assistance agencies, such as United States Agency for International Development and the Canadian International Development Agency, non-government organizations such as Medecin san Frontier, Oxfam and Save the Children as well as specialist medical and trade associations. Establishing coherence and real partnerships with such a plethora of players and identifying a precise and agreed niche for PAHO is extremely difficult and time consuming. Where such partnerships have been effectively forged and when other parties have provided extra-budgetary resources to

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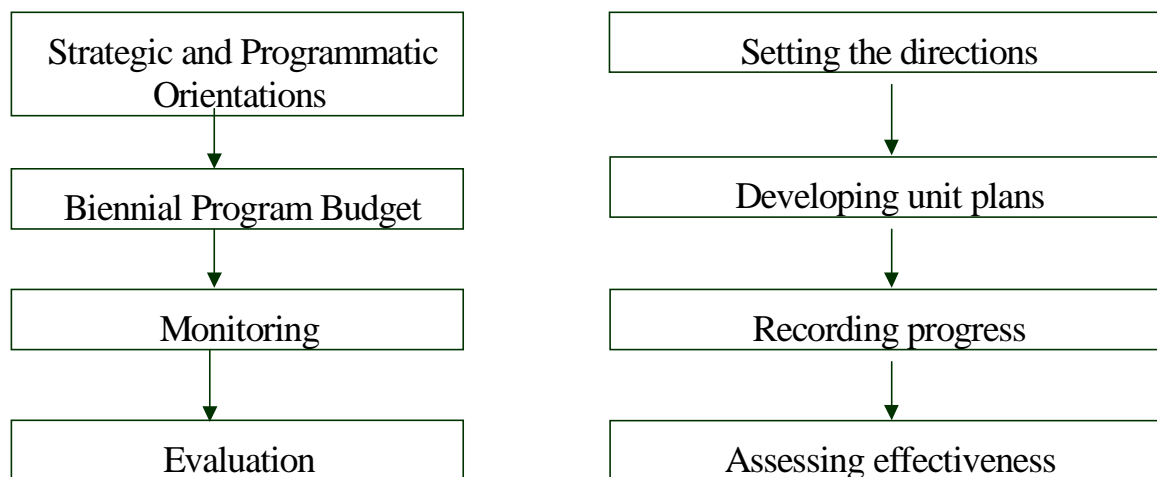
PAHO, incorporating the differing planning horizons and accountability arrangements into PAHO's planning cycle adds further complexity.

- 1.8 In this context, the preparation of a strategic plan for technical co-operation in health care which seeks to look some three to four years ahead, and the associated monitoring and evaluation, requires substantial effort from staff and is a costly matter. PAHO's Analysis and Strategic Planning unit estimates that the whole process costs some \$5 million per year. While some of the staff interviewed were concerned at the level of effort required to manage this system there was a universal acceptance of the need for a thorough planning system if PAHO is to deliver an effective program of technical assistance.

### The planning framework

- 1.9 To cope with this complexity, PAHO has developed a planning, monitoring and evaluation framework known as the American Planning, Programming, Monitoring and Evaluation System (AMPES). The framework comprises the four key elements described in Figure 1.

**Figure 3: Key features of PAHO's strategic planning, monitoring and evaluation framework**



Source: External Auditor

**PAHO has the major components of a sound planning, monitoring and evaluation framework**

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**PAHO has the major components of a sound planning, monitoring and evaluation framework**

- 1.10 PAHO has made a long-term commitment to planning which has been endorsed and supported by the Director and senior management. Together they have established a planning, monitoring and evaluation framework which in most major ways effectively provides the organization with a workable tool for identifying needs, allocating resources and monitoring outputs. The framework is expected to apply across the whole organization such that all field and regional technical co-operation units, all specialist units and all administrative units are expected to operate within the same broad framework and to use the same planning tools and forms. In drawing up plans all units are given indicative budgets and must link planned activities against that budget before being able to expend funds. Where PAHO has been able to attract additional or extra-budgetary funds from foundations, national governments or other sources, then these are included within the planning framework.
- 1.11 Over time, PAHO has computerised the diverse elements of AMPES. This has made it easier to update and amend plans and encouraged the sharing of plans across different units and programs. Computerisation of the plans has made it possible in field offices to link planning and budgeting in a way which ensures that money cannot be spent on activities which are not part of the plan. Through the design of the new software system the organization is already committed to making improvements in the usability of the system which are expected to be available in mid-2000. My staff reviewed PAHO's internal report, *Requirements Analysis for a Program Planning, Execution and Evaluation System* dated September 1997. I endorse in particular the recommendations on the earmarking of funds in advance of formal obligation, issuing sub-ceilings to lower levels and providing scope for the use of multi-biennial allotments for extra-budgetary funds. With the introduction of earmarking of funds there will be a much closer link between budgetary and planning for headquarters activities, mirroring to some extent the benefits expected in field offices.
- 1.12 The development, implementation and progressive refinement of the planning framework are major achievements in a world where, too often, the relative importance of planning

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within an organization waxes and wanes, and where planning and finance systems often occupy rival solar systems.

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## Part 2 PAHO's system in practice

- 2.1 The following sections examine each of the four core elements of PAHO's planning, monitoring and evaluation system. The first section looks at how PAHO identifies its key goals and priorities. The second section examines how these goals are translated into the programs and activities undertaken by individual units. The third section reviews the organization's approach to monitoring and the final section examines how PAHO assesses its effectiveness.

### Setting the directions

- 2.2 Each four years PAHO publishes its Strategic and Programmatic Orientations (SPOs) which describe the key areas of work which will be pursued by the organization. The SPO is derived from the Global Programme of Work issued by the World Health Organization (WHO) and adapted to reflect the health needs and opportunities existing in the Americas. The process of developing the SPOs is lengthy and involves extensive dialogue across the whole of PAHO, consultation with country counter-parts, particularly Ministries of Health, and a review of past performance. The final document is ratified by PAHO's supreme governing authority, the Pan American Sanitary Conference. Interviews with PAHO staff confirmed that they felt included in this process.
- 2.3 The SPOs are to a large extent a mechanism for establishing broad agreement between member states on PAHO's agenda and serve as a vehicle around which support for PAHO can coalesce. This is an important role but results in a long list of orientations of widely differing levels of specificity. The translation of these orientations into concrete programs and the establishment of relative priorities between the orientations is the responsibility of the senior management team.

### There is scope for supplementing the Strategic Planning Orientations with a small set of high level objectives and related performance measures

- 2.4 While the SPOs help identify and legitimise PAHO's areas of work, they are too broad and too numerous to serve as high-level objectives against which the organization's performance could be assessed. Best practice in public administration in a wide range of

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countries increasingly seeks to ensure that organizations have clearly defined objectives which can be used to assess overall effectiveness. Such objectives are expected to be measurable, albeit using qualitative measures as well quantitative measures, internally consistent, encompassing the breadth of activity of an organization and relate to outcomes over which the organization can reasonably be expected to have influence. They should also be few in number and consistent over time to enable an organization's performance to be assessed.

- 2.5 The organization may find it helpful to view the SPOs as the key mechanism for shaping and identifying the areas of health work which are to be pursued but supplement these with a small set of high-level objectives based on PAHO's mission, as a basis for evaluating overall effectiveness. In developing objectives it is important that PAHO makes a clear distinction between its objectives and the health goals of the Americas. While the publishing of timely, reliable, comparative statistics on the state of health in the Americas could be one of the objectives of the organization, the achievement of, for example, a reduction in the incidence of tuberculosis, is primarily a goal for the medical authorities of individual countries.
- 2.6 Given PAHO's mission (paragraph 1.1) high level objectives might make reference to increasing the transfer and use of high quality information on health issues between member states or providing increased opportunities for medical staff in the region to acquire and apply new skills and knowledge in areas of health need identified by PAHO. Performance indicators could then be developed to enable PAHO to report on its performance. In some cases the data are already available to the organization through its routine monitoring work. In other cases, follow up work on a sample of participants of training programmes, and their employers, might be necessary to gauge PAHO's impact.

**Recommendation:**

- PAHO should consider supplementing the SPOs with a small series of high-level objectives and performance measures against which its overall achievement can be assessed.

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### **PAHO needs to agree with other international agencies where its efforts in the health field can add the most value**

- 2.7 The organization is currently in discussion with major international agencies, including the World Bank, with a view to developing clearer agreements about how best to co-operate in improving health in the Americas. In the past there does not appear to have been a systematic attempt to seek the views of, and develop a consensus with, other key stakeholders despite the importance of developing partnerships with international development agencies and with major national donors and the potential for unnecessary duplication. While such a process might have been difficult, it would have helped foster stronger external links and helped clarify where PAHO can add the most value.

#### **Recommendation:**

- It is vital that PAHO establishes clear protocols with other major international organizations to minimise wasteful duplication of efforts and ensure that the maximum benefits are obtained from scarce external health resources. The organization's recent moves in this direction are to be commended.

### **Developing unit plans – the Biennial Program Budget**

- 2.8 All units within PAHO are required to develop a biennial program budget (BPB) for non-staffing costs which translate the SPOs and other policy statements into specific programs of technical co-operation. The units are given an indicative budget in which to plan their program but have the option of developing proposals, for inclusion in their plans, to bid for additional funds. Guidelines have been established for the preparation and content of the BPBs for each of the following types of units:

- Country technical co-operation units
- Regional technical co-operation units (including headquarters divisions, Pan American centres and special programs)
- Units subordinate to the Office of the Director/Deputy Director and the Office of the Assistant Director; and
- Administrative units

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- 2.9 In developing the biennial plans, units are expected to consult with counterparts, review previous results and consider the actions and plans of other key stakeholders. Once produced the draft plans are expected to be reviewed by other relevant units before being submitted to PAHO's senior management board (the Director's cabinet) for approval and eventual submission to PAHO's governing body. Country plans are reviewed by country analysts and by divisions and, similarly, divisional plans are reviewed by country staff. The process of developing BPBs is managed by the Analysis and Strategic Planning Unit (DAP).
- 2.10 The plans are built around the well defined and widely used concepts of the Logical Framework Approach to project management. This approach is used in the UN system, the European Union and by many national development assistance agencies. It clearly links organizational goals, program goals, sub-program goals, activities, success indicators and costs and includes fields identifying when activities are expected to start and finish, who is the responsible officer and what assumptions effect likely outputs. The framework is capable of being aggregated in many different ways and being further disaggregated to develop six monthly work plans identifying unique tasks.

**PAHO's biennial planning processes meet, and in some key respects exceed, best practice seen elsewhere within the UN system**

- 2.11 While there are many approaches to planning, the one adopted by PAHO is suited to PAHO's technical co-operation work and is well understood by the staff interviewed. It is viewed by most of those interviewed as dynamic, necessary and effective, albeit with continuing scope for refining. There is considerable benefit in adopting a single approach to project management throughout the organization and I therefore endorse this practice.
- 2.12 The biennial planning system (AMPES) is being widely and creatively used by the headquarters units, country programmes and centres. Inevitably, the extent of use and the way it is being used varies. Nevertheless, there was near unanimity at all levels that the system is working and is valued. In many organizational contexts, there tend to be divisions between head offices and field offices; that this was not the case in PAHO with its widely dispersed management challenge is remarkable. In one case, where one centre



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clearly did not use AMPES, this was related to a wider debate on the extent to which the Centre should follow central PAHO procedures, rather than a fundamental critique of the framework.

- 2.13 The technical co-operation divisions all appear to have devoted considerable efforts to reviewing past performance, undertaking situation analyses and identifying major technical co-operation directions for the future. The extent to which this process has involved consulting with key external and internal stakeholders appears to be more variable and is not currently recorded in the BPB. The content of the BPBs vary and the situational analyses within plans do not always indicate what counter-part organizations are doing and how this will effect PAHO's work. It is also difficult to identify the likely threats to a plan's delivery and it would not appear that the plans are subject to any clear risk analysis identifying which parts of the plans might be difficult to achieve and how such difficulties might be managed. No mention is made in the plans of resources or actions promised by other stakeholders. A better use of the assumptions field would help clarify this and make it easier to evaluate programs and activities.
- 2.14 An examination of a cross-section of 12 country biennial plans showed similar strengths and weaknesses.
- Most plans provided adequate contextual information covering a country's demographic profile, key economic and political development, a comprehensive coverage of key health indices and trends, and key national developments in the health sector;
  - A few indicated how the work of the Ministry of Health was co-ordinated with the health activities of other government bodies, for example, in relation to environmental health issues;
  - Trends in national health budgets were only identified in one third of the plans;
  - Insufficient attention was given to how PAHO's efforts fit with the actions of counter-part organizations. It was not clear what other international agencies were

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involved in funding health initiatives within a country nor what levels of funds were involved;

- Limited information was provided on what is happening to the Ministry of Health's budget; and
- Mention was rarely made of the outcomes of reviews of past activities.

2.15 To complete AMPES, PAHO staff are expected to list the sources of evidence which will be used to judge whether an activity has been successfully completed or an objective met. This part of the plan, however tends not to be completed as thoroughly. In many cases there were no measurable targets listed against objectives and activities and where there were these tended to be couched in terms of the number of activities completed rather than whether the activities had any impact. There would appear to be greater scope to use a mix of quantitative and qualitative measures. For example, to assess the impact of some training programmes, it would be helpful to not only record the number (and percentage) of participants who reached the required level but also to follow up a sample to assess whether they had used the skills and whether they and their employers considered the training to have helped improved subsequent work performance. Similarly with health promotion activities merely producing materials or even disseminating them is of little use unless there is evidence that the messages contained in the materials is having an impact. Behavioural change is complex and notoriously difficult to attribute to a single cause. However, those developing health education materials and conducting campaigns need, at least, to collect data to assess the extent to which the materials are reaching target audiences and to seek measures of the extent to which the audience can re-call the messages.

2.16 The way the non-staffing administrative costs of country offices and centres are treated in the BPBs vary widely. In some case a BPB will contain a separate project line showing clearly what non-staffing administrative activities are planned and their costs. In others these costs will be subsumed within other project lines. For those offices and centres which separately identify non-staffing administrative costs, the proportion of the total country or centre budget allocated to such activities varies substantially; in the sample

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selected for this review it ranged from eight per cent to 26 per cent. While this range may reflect the different ways country offices and centres record different activities, it does make it more difficult to compare and contrast the plans. If field offices were to adopt a common approach to identifying non-staffing administrative activities, perhaps using standard sub-project headings for example staff development, IT enhancements, marketing, cross project evaluation and research, vehicles, and offices running costs, then the transparency of this is part of the plan would be enhanced.

- 2.17 Centres are expected to submit their BPBs, one week after a country BPB. As centres should in most cases reflect what is in country plans, this time table is very short. Centres suggested that the country plans could be available on the intranet at an earlier stage or there should be a longer gap between the submission of the two documents.
- 2.18 There would appear to be some degree of uncertainty about whether the BPBs should include extra-budgetary funds already secured or identify priority areas or projects for which the regional units will be seeking extra-budgetary funds. Where units have taken a more inclusive view of the planning process and both shown what can be achieved with existing resources and identified gaps for future funding, this has proved useful in securing extra-budgetary funds from donors. There are difficulties incorporating multi-year funded projects within the scope of the biennial planning process.
- 2.19 While planning on a biennial basis fits PAHO's managerial structures, it does not always fit the cycle of programme activity. However, there would appear to be scope to incorporate within the PAHO forms when a project or activity is expected to be completed and when extra-budgetary funds are likely to be exhausted.
- 2.20 Once the biennial plan has been produced practice in keeping the plan up to date also varies. While there is a need to freeze the approved version of the plan as a basis for future monitoring and evaluation, there is also a need to keep the plans up to date when, for example, extra-budgetary resources are secured and additional projects or activities can be commenced. Staff are hopeful that new software will make it easier and quicker to use. Building in ways of automatically entering commonly used codes would also help reduce the labour intensity.

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- 2.21 The use of the plan as a routine management tool varies, with the larger units with bigger budgets, at head office and country levels using the plans on a more regular basis. Most of those who only use the plan as a periodic review tool find that it is useful to stop every six months and take stock of what has been completed and what needs to be done.
- 2.22 In a somewhat contradictory way, some staff commented that having the plan gave them some way of resisting pressures to suddenly take on tasks which were not in the plan, while others felt that the achievement of the plans were often effected by the unexpected – a request from a new Minister of Health or a sudden emergency.

### **Recommendations:**

- PAHO should seek to achieve greater consistency in the quality and coverage of biennial plans.
- Biennial planning documents should indicate who has been consulted, how the plan complements the actions of counter-part organizations, the threats to a plan's success and how these will be managed.
- PAHO should examine the scope for developing a common approach to the treatment of non-staffing administrative activities and costs in BPBs .
- For projects which are expected to continue beyond the biennial planning period, in particular for those projects in receipt of extra-budgetary funds, it should be possible to record the expected project completion date and the promised funding expected after the end of the current biennial.
- The plans should show what extra-budgetary funds have been obtained and what extra-budgetary funds are being sought.
- Clear advice needs to be provided on how to use AMPES to record extra-budgetary funds and how to produce monitoring reports for funding bodies.

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### **Plans for administrative units are not embedded within the system**

2.23 While administrative units comply with the requirements of AMPES, they rarely use their plans, do not see the value of them and feel unconnected with the planning undertaken by the countries, centres and regions. I consider that PAHO needs to give some attention to this issue and that the plans of the administrative units should be more fully embedded within the overall planning framework. In part this might be aided, if the plans of the country and regional units were to identify more clearly the administrative services and support they required in order to deliver their plans. The development and production of administrative plans could run slightly behind the other plans enabling the administrative plans to take up issues raised in the other plans. The content of the administrative plans should be made more relevant. For example, instead of a contextual analysis, units could be asked to identify how they intend to monitor and improve the quality of the service they deliver to the rest of the organization and how they propose to achieve efficiency gains. This section would also provide an opportunity to flag up and justify any proposed new initiatives. Again a reference to risks and how these are to be addressed would be helpful. These comments would apply equally to those units reporting to the Director and Deputy Director although they were not specifically examined in the review.

#### **Recommendation:**

- PAHO should review the way in which the plans of administrative and staff units are developed and used.

### **A unified planning and staff review system is emerging**

2.24 While the staff evaluation system (PPES) has been developed later and parallel to the planning system, the two systems are converging faster than expected. Managers are making sure that the tasks contained in the six monthly work plans and the individual staff objectives coincide making staff reporting easier. A number of managers told my staff that, in looking to use the AMPES objectives for PPES, they had realised that the AMPES objectives needed to be better clarified. The focus in the personnel evaluation system on SMART objectives is therefore leading to greater precision in the way tasks

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are described in the planning system. This unexpectedly quick take up, and one led by managers and program co-ordinators, is clearly a positive factor.

### **The extent of scrutiny of the BPBs plans prior to approval vary**

2.25 The extent to which the BPBs are subjected to external scrutiny varies. Headquarters staff are occasionally involved in working in country with country staff to help develop the country plans. The country plans are reviewed by country analysts and comments on these plans are sought from regional technical co-operation staff. Headquarter plans, on the other hand, do not appear to undergo the same level of analysis. While I recognise that the Analysis and Strategic Planning Unit provides written advice to the Director on these plans and that the Director convenes a meeting of Divisional Directors to collectively scrutinise the plans, I believe that more rigorous analysis would be beneficial. Across the organization there is a feeling that the major review meeting could be more efficient and my staff observed at the meeting a reluctance by Divisional Directors to comment critically on each others plans. PAHO might therefore like to experiment with alternative ways of reviewing the plans. For example, the cabinet meeting could be preceded by bilateral meetings between each Divisional Director and the Director backed with an open briefing analysing the key issues raised by the plan. This should facilitate a shorter and more informal discussion of key strategic issues at the full cabinet meeting.

### **Recommendation:**

- PAHO should review the way the Director's cabinet meets to consider the Biennial Program Budgets.

### **Training and support on planning needs strengthening**

2.26 The Analysis and Strategic Planning Unit has undertaken sought to provide training for PAHO staff on the planning software and the use of 'Logframe'. However, in both field offices and headquarters, staff believe that there has been insufficient training. There would appear to be a need to boost the training support, particularly in terms of disseminating best practice on how to use the planning tools to maximum effect. There is

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a perception that senior managers are not all using the information contained in AMPES to maximum effect and the Analysis and Strategic Planning Unit may need to take a more proactive approach to identifying the kind of management reports required by different managers. In addition, there is a need to keep the software manual up to date. While I recognise that the revision of the manual has been put on hold while the current system is migrating to Windows, it would appear not to have been updated for many years. When done this should be put on the intranet and updated frequently. To increase ownership of the planning system, and to ensure that changes reflect the practical requirements of the different units the Subcommittee on Planning and Programming could be asked to take responsibility for managing these refinements and consulting staff across the organization.

**Recommendations:**

- More training should be provided to country and headquarters staff in the use of AMPES.
- The Analysis and Strategic Planning Unit should take a more proactive stance in helping managers obtain the kinds of management reports they need to better run their areas.

**Staff do not fully understand how the budget is established and the constraints faced by PAHO**

2.27 The resources PAHO devotes to different country, centre and headquarters technical co-operation programmes is a reflection of the complex history of the organization. Much of the budget is committed to permanent staff positions and to programs which have no clear sunset clauses. Any overt attempts to re-deploy resources between country programs is politically contentious and difficult to manage. In this context I recognise the difficulty of redressing imbalances in funding. At the same time, there is evidence that the organization has sought to incrementally adjust funding allocations by moving posts when they become vacant, by not automatically passing on cost of living increases to some programs and by reserving a small percentage of the budget each year for new initiatives and priorities. This is particularly evident at headquarters where it has been

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possible to give greater prominence to some emerging areas of activity, for example, to the immunisation program by separating this out as a directorate. Changes are also being made within the programs managed by individual directorates, even if relative allocations over time have remained fairly consistent.

- 2.28 The extent of movement which has been achieved both within and between countries, centres and headquarters is not fully appreciated by staff and there is a degree of scepticism about the budget setting system. To some extent this could be addressed through improved communication and a clearer articulation of priorities – so that staff knew which areas were seen as priorities and where the organization wished to re-deploy resources even if this was not immediately possible.

**Recommendation:**

- More information should be disseminated to staff on the constraints faced by the organization in its budget setting process.

**Questions of efficiency receive limited attention in the planning process**

- 2.29 Although out-going country representatives are expected to report on what they have done to increase efficiency, no mention is made in the plans of how units intend to improve efficiency or ensure value for money. It would appear that there is scope for a more overt reference to costs in reviewing the effectiveness of units and their work. As part of this it may prove helpful to provide training at country, centre and regional level on the development and use of performance indicators and on the use of benchmarks to identify ways of achieving best value. There may also be scope for setting targets of the level of efficiency improvements expected.
- 2.30 While it is currently possible to identify the non-staffing costs of different programs funded through PAHO, current systems do not allocate staffing costs to programs. As a result it is difficult for PAHO to accurately track where it uses some 50 per cent of its resources. This limits the organization's capacity to fully cost activities and is a notable omission in the levels of management control exercised by PAHO.



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2.31 It is increasingly common, even in organizations predominantly reliant on professional staff, to develop resource management systems which enable staff to record the amount of time they spend on major areas of work. This helps the organization appreciate where it is using its resources and how much key activities cost. In PAHO's case it would be helpful to know the total expenditure on specific projects in country or the total expenditure on specific SPOs. If such a system were introduced at the project level, it would not impose a massive burden on staff as country offices rarely operate more than 14 separate project lines and the majority of staff would work across a much smaller number of projects. The introduction of a system for attributing staff time to specific projects would give PAHO, and its Governing Bodies, a clearer appreciation of where all its resources were being spent.

#### **Recommendations:**

- As part of the Biennial Program Budgeting process all technical co-operation units should be asked to identify how they will achieve greater efficiency in the use of funds.
- PAHO should investigate the feasibility of linking staff costs to program costs to identify the full cost of different programs and sub-programs.

#### **Recording progress – monitoring**

##### **PAHO's system for monitoring progress against plans is functioning well**

2.32 All units are expected to monitor progress against their plans on a regular basis. The results of this monitoring are documented in annual and biennial evaluation reports which provide an opportunity for the units to not only review progress but to explain variations from planned activities and to identify any changes which are needed to the plan. In the units interviewed this system was seen to be working well. Managers valued the discipline of being expected to periodically take stock of progress. For those in receipt of extra-budgetary funds, the computerised progress reports made it easier to comply with the reporting requirements of external donors.

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2.33 Analysis of the annual evaluation reports revealed scope for improving the consistency of these reports and reducing their volume. Extracting best practice from the sampled evaluation reports suggest that the following issues need to be covered in future reports:

- a brief summary of any major political, economic, social or environmental changes which have effected the delivery of the plan eg a devastating earthquake, a massive injection of World Bank funds into health or changes within a Ministry of Health;
- a comparison between planned and actual program expenditure and an explanation of major variations;
- a comparison between current year and previous year expenditure on administration and an explanation of major variations;
- an more detailed breakdown of targets which were not met, the reasons the targets were not met and any plans to remedy slippages; and
- an overview of any major developments in the management of the programme.

2.34 Not many units appeared to be using the system to its fullest as a management tool. Given that the system records expected dates of completions and expected budgets, one would have expected to see more use of trend and exception reports for example on the proportion of activities not completed in time or the proportion of activities running over budget. When the AMPES system migrates to a Windows environment, the system is expected to become more user friendly. This will provide an opportunity for the Analysis and Strategic Planning Unit to take on a more proactive role in working with managers to demonstrate the types of monitoring reports available on the system and to identify the requirements of individual managers, at unit and director levels. At the moment the AMPES system generates a vast amount of paper work – more consideration needs to be given to identifying which reports, and parts of reports, most help managers manage.

2.35 The performance data recorded on AMPES is a key management control in PAHO yet there would appear to be no formal system in place to periodically validate the performance data reported by technical co-operation units at country, centre and regional

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level. I understand that occasionally PAHO's internal auditors have checked the veracity of recorded information on performance as part of county audits, but this is not currently a routine part of all such audits.

**Recommendations:**

- AMPES should be used to generate exception reports showing which projects are running over budget or running over time.
- Performance data reported on AMPES should be periodically validated.

**Assessing effectiveness - evaluation**

**Better use could be made of the wealth of evaluation material being produced**

- 2.36 In addition to monitoring reports, units have access to a variety of other forms of documented evaluation findings. Country representatives and centre managers regularly conduct reviews of their programs, often involving workshops with counter-parts. Country analysts visit each country once or twice a year, as well as when a country representative leaves, to review progress and during these visits will seek feedback on the effectiveness of programme provision from key counterparts. In addition, there are periodic examinations of administrative systems in country and visits by internal audit. I understand that the Director is currently reviewing the level of scrutiny of country programs with a view to streamlining the process and reducing the number of separate reviews and this is something I would endorse.
- 2.37 Independent external evaluations will sometimes be requested by external donors and, at times, these evaluations will include a review of general funds as well as extra-budgetary funds. In addition, PAHO convenes a range of conferences and meetings with external experts and stakeholders to review programs or activities in which PAHO has been involved, for example the review of Hurricane Mitch.
- 2.38 While much of the monitoring of progress against work plans is necessarily focused on easy to record outputs, rather than the more difficult outcomes and impacts, there is evidence in some areas of the emergence of a more sophisticated approach to evaluation.

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For example, at the start of some programs base line data were identified and recorded in order to facilitate a thorough evaluation over time.

- 2.39 There is, however, no current system for ensuring that the results of this plethora of evaluative work are brought together to inform the on-going management and development of PAHO. Evaluation work is not co-ordinated across PAHO and there is no central repository of evaluation findings. As a result it is difficult to be sure that all aspects of the organization's operations are subjected to periodic independent review and there is a risk that lessons emerging from the different evaluation arrangements are not being disseminated as widely as they could. There is currently no formal system for considering findings, deciding on lines of action and ensuring follow through.

**Recommendations:**

- I understand the Director intends to streamline the systems for internal evaluations of country offices and endorse this move.
- PAHO should take a more strategic approach to program evaluation. The role of the Analysis and Strategic Planning Unit could be extended to include oversight of evaluation within PAHO. Greater use should be made corporately of existing evaluations commissioned by external agencies and the results made more widely available. A rolling system of reviews should be planned to ensure that all areas of PAHO's operations are periodically, independently evaluated.

## Appendix 1: PAHO units interviewed

|                         |   |
|-------------------------|---|
| <b>Headquarters</b>     | Emergency Preparedness and Disaster Relief  |
|                         | Health Promotion and Protection   |
|                         | Health Systems and Service  |
|                         | Management and Information Support  |
|                         | Analysis and Strategic Planning   |
|                         | Budget and Finance  |
|                         | Personnel   |
| <b>Regional centres</b> | Caribbean Food and Nutrition Institute (CFNI), Jamaica                              |
|                         | Latin American and Caribbean Centre on Health Sciences Information (BIREME), Brazil |
|                         | Pan American Foot-and-Mouth Disease Centre (PANAFTOSA), Brazil                      |
|                         | Pan American Institute for Food Protection and Zoonoses, (INPPAZ), Argentina        |
| <b>Field offices</b>    | Jamaica Country Office  |
|                         | Brazil Country Office   |
|                         | Argentina Country Office  |

## Appendix 2: PAHO plans and evaluations examined

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|---------------------------------------|---|
| <p>Biennial Program Budgets (BPB)</p> | <p>Countries: Argentina, Barbados, Brazil, Chile, Costa Rica, Guatemala, Guyana, Jamaica, Mexico, Nicaragua, Peru, Surinam, Trinidad and Tobago, Venezuela</p> <p>Centres: BIREME (Latin American and Caribbean Centre on Health Sciences Information, CAREC (Caribbean Epidemiology Centre), CFNI (Caribbean Food and Nutrition Institute), CALP (Latin American Centre for Perinatology and Human Development)</p> <p>Headquarters: Division of Health Systems and Services Development (HSP), Division of Health Promotion and Protection (HPP), Division of Health and the Environment (HEP), Department for Emergency Preparedness and Disaster Relief (PED), Department of Analysis and Strategic Planning (DAP), Department of Budget and Finance (ABF),</p> |
| <p>Annual Evaluation Reports</p>      | <p>Countries: Bahamas, Dominican Republic, Jamaica, Panama, Paraguay, Trinidad and Tobago</p> <p>Centres: BIREME (Latin American and Caribbean Centre on Health Sciences Information, CFNI (Caribbean Food and Nutrition Institute),</p> <p>Headquarters: Division of Health Systems and Services Development (HSP), Division of Health Promotion and Protection (HPP), Division of Health and Human Development (HDP), Division of Health and the Environment (HEP), Special Program for Vaccines and Immunisation (SVI)</p>   |