

# **Project Title: Consultant to Develop an Electronic System to Track Revenues and Optimise Budget Execution**

## **1. Overview of The Clinton Health Access Initiative**

The Clinton Health Access Initiative, Inc. (CHAI) is a global health organization committed to saving lives and reducing the burden of disease in low-and middle-income countries (LMICs). CHAI's goals also include strengthening the capabilities of governments and the private sector in LMIC's to create and sustain high-quality health systems that can sustainably succeed.

CHAI was founded in 2002 in response to the HIV/AIDS epidemic to dramatically reduce the price of life-saving drugs and increase access to these medicines in the countries with the highest burden of the disease. Over the following two decades, CHAI has expanded its focus. Today, along with HIV, CHAI works in conjunction with partners to prevent and treat infectious diseases such as COVID-19, malaria, tuberculosis, and viral hepatitis, among others. CHAI's work has also expanded into cancer, diabetes, hypertension, and other non-communicable diseases, and we work to accelerate the rollout of lifesaving vaccines, reduce maternal and child mortality, combat chronic malnutrition, and increase access to assistive technology. We are investing in horizontal approaches to strengthen health systems through programs in human resources for health, digital health, and health financing. With each new and innovative program, our strategy is grounded in maximizing sustainable impact at scale, ensuring that governments lead the solutions, programs are designed to scale nationally, and learnings are shared globally.

At CHAI, our people are our greatest asset, and none of this work would be possible without their talent, time, dedication and passion for our mission and values. We are a highly diverse team of enthusiastic individuals across 40 countries with a broad range of skills and life experiences. Learn more about our exciting work: <http://www.clintonhealthaccess.org>.

## **2. Project Description and Challenges in Public Financial Management Systems**

Through the United Kingdom government's Foreign and Commonwealth Development Office (FCDO), CHAI Zimbabwe is a recipient country for the Global Fund (GF) Accelerator Program, which aims to maximise the impact of FCDO's contribution to the GF and other Global Health Initiatives. The grant's vision aligns with the Lusaka Agenda, which proposes five long-term shifts and priorities needed for the long-term evolution of GHI Investments. These investments should focus on strengthening primary health care (PHC) through resilient health systems, ensuring sustainable domestically funded health systems, and improving coordination to achieve equitable health outcomes across health system building block pillars. To achieve these outcomes, CHAI is currently providing technical assistance to the MoHCC and Health Services commission across three priority areas:

- Priority Area 1: Strengthening Health Systems for Better Primary Health Care
- Priority Area 2: Strategic Coherence and Efficiency

### ➤ Priority Area 3: Building/Mainstreaming Sustainability across GHI Portfolios and Beyond

Zimbabwe's health sector has achieved measurable progress in implementing the Public Financial Management System (PFMS), transitioning from paper-based processes to SAP-powered digital workflows. This shift has enhanced fiscal transparency and improved tracking of critical programs like HIV/TB initiatives and Results-Based Financing (RBF). Furthermore, the shift from line-based to program-based budgeting (PBB) approach has improved resource allocation processes, where budgets are now tied to specific outcomes and objectives. Despite these achievements, several gaps and challenges exist in the utilisation of budgets and tracking of revenues received at all health system levels

At the national level, a significant gap is often suboptimal disbursements of budgets from national treasury (often below 20% of allocations per quarter), often caused delayed tax revenue collections among other factors. In addition, program managers and other personnel at the MoHCC responsible for the raising, allocation and utilisation of domestic resources face challenges in their ability to utilise and understand available resources under their departments. This often results in suboptimal utilisation of treasury disbursements, which further results in lower future disbursements from treasury since previous disbursements were not yet fully utilised. Challenges also exist in Public Sector Investment Program (PSIP) projects, which is a fund allocated from the Ministry of Finance and Economic Development (MoFED) to other line ministries for infrastructure developmental projects. The inability to track and monitor the progress and development stages of these projects often results in delayed disbursement of resources, with disbursements relying on the stages of the projects developments.

The subnational level also faces challenges in utilizing resources allocated and tracking various revenues received. These challenges include:

- **Operational Barriers:** Intermittent internet connectivity (also caused by frequent power outages without a reliable backup system) disrupts real-time data updates, while high staff turnover compromises institutional knowledge retention.
- **Process inefficiencies:** Misaligned procurement-finance workflows create payment delays, with invoices often stalled for months between departments.
- **System Limitations:** Despite PFMS capabilities, most districts still rely on fragmented Excel systems for Health Services Fund (HSF) tracking, leading to reconciliation challenges and reporting discrepancies.

### 3. Purpose of the Assignment and Scope of Work

To integrate the recent innovations and address the PFMS-related challenges, this consultancy initiative marks a pivotal shift from basic compliance to creating practical management tools. The assignment requires the consultant to design a multifunctional system that will result in strengthened PFMS through improved budget execution and tracking of revenues at all health system levels. The system designed should be multifunctional and allow for adequate financial reporting and production of standardised financial statements and outputs (general ledger, trial balance, income statement, statement of financial

position, cash flow statement, etc.). In addition, the system should produce other financial information that will inform other exercises, including for resource mapping and expenditure tracking (RMET), the National Health Accounts (NHA), the National AIDS Spending Assessment (NASA), Public Expenditure and Public Financial Reviews, among others. The outputs will include:

### **3.2 An Electronic Financial Reporting System to Improve Budget Execution and Revenue Tracking at all Health System Levels**

#### **3.2.1 Deliverables for the PFMS-Linked System to Strengthen Budget Execution**

The revised system must be able to:

- Enable program managers and other personnel responsible for raising and allocating resources to periodically track and view budget disbursements and utilisation to date
- Streamline procurement processes and track their statuses to minimize delays.
- Track existing creditors and ensure prompts and timelines are given to the status of their outstanding payments
- Integrated Gantt-Charts to track the status of PSIP projects and ensure a streamlined payment mechanism is developed based on stages of completion
- Develop protocols for easier access of the PFMS for subnational-level officials
- Any other critical budget execution issues identified from the initial assessment report, and initial pilot of the system.

#### **3.2.2 Deliverables for the PFMS-Linked System to Strengthen Revenue Tracking**

The revised system must be able to:

- Ensure a standardised accounting method using the International Public Sector Accounting Standards (IPSAS) to record revenues received from all sources is developed, while being compatible with the national-level SAP-based system for easier recording.
- Track current debtors and provide mechanisms to allow for adequate follow-up, ensuring compatibility with the MoFED debtors module.
- Track funds from virements using the existing MoFED processes for their initiation.
- Any other critical budget execution issues identified from the initial assessment report, and initial pilot of the system.

#### **3.2.3 Cross Cutting Deliverables and Sustainability Tools**

- Training conducted for subnational-level officials on the revised system
- Training manuals and SOPs on the revised PFMS system

## **4. Expected Outputs and Deliverables**

Deliverables	Start	End
<b>PFMS linked system to strengthen budget execution, with the following capabilities and functionalities:</b>		
➤ Track and view budget disbursements and utilisation to date	01/11/25	30/11/25
➤ Track the status of procurement processes	01/11/25	30/11/25
➤ Track existing creditors and process related steps regarding their payment progress	01/11/25	30/11/25
➤ Gantt charts on the status of PSIP projects, and the steps needed for payment based on progress made	01/11/25	30/11/25
➤ Protocols/functionalities for easier PFMS access and authorisation for subnational level officials	01/11/25	30/11/25
➤ Implementation and addressing of other issues identified during the pilot of the system and situational review report.	01/11/25	30/11/25
<b>PFMS linked system to strengthen revenue reporting with the following capabilities and functionalities:</b>		
➤ Develop an accounting-based system for revenue reporting that conforms to the IPSAS standards, and is easily compatible with SAP	01/11/25	30/11/25
➤ Track existing debtors, with additional prompts on the status of their payments, and follow-up recommendations	01/11/25	30/11/25
➤ Enable tracking of the virement flows from different programs, sub programs and departments	01/11/25	30/11/25
➤ Implementation and addressing of other issues identified during the pilot of the system and situational review report.	01/11/25	30/11/25
<b>Cross-Cutting Deliverables and Sustainability Tools</b>		
➤ Training manual on the revised PFMS system	01/11/25	30/11/25
➤ SOPs on using the revised PFMS system	01/11/25	30/11/25

## 5. Qualifications of the Successful Individual Contractor

- Professional or educational qualification in information technology/systems, with demonstrated ability in computer programming. Candidates with accounting and public health experience have an advantage
- At least 7 years of experience and a proven track record in implementing digital health solutions and designing systems related to financial management in developing countries.
- Strong technical and analytical skills, with a high proficiency in working with tools for report writing, presentations and analytics (such as Microsoft Office Suite).
- Experience in projects/programmes focused on health systems strengthening and building the capacity of stakeholders on resilient, and sustainable systems for health (RSSH) would be an asset.
- Entrepreneurial mindset and an ability to work independently on complex projects and solve challenging problems in a high-pressure, fast-paced environment.
- Experience working and communicating with government officials and multilateral organizations
- Ability to work independently without extensive structural or operational support (handle multiple tasks simultaneously, set priorities, delegate, and work independently)
- Excellent business-oriented oral and written communication skills
- Ability to work with teams across time zones and locations

## 6. Bid Structure

Required Item	Max Pages
Cover letter	1 page
Technical proposal	5 pages
Financial proposal	2 pages
CV/s	2 pages