

## Annex II: Screening requirements and mapping of Initial Fiduciary Principles and Standards and other relevant policies

Part I sets out the screening requirements against which applicants will be assessed at accreditation under the revised accreditation framework. Part II illustrates, for information purposes, the stage at which the relevant fiduciary principles and standards, and the applicable requirements under the Revised Environmental and Social Policy, Interim Environmental and Social Safeguards of the Fund (ESS standards), Indigenous Peoples Policy and updated Gender Policy and Gender Action Plan 2020–2023 (updated Gender Policy) will be assessed after the revised accreditation framework becomes effective.

### **Part I: Screening requirements**

***Table 1: Screening requirements and their coverage of the Initial Fiduciary Principles and Standards<sup>1</sup> and other relevant policies (including Anti-Money Laundering and Countering the Financing of Terrorism Policy (AML/CFT Policy)<sup>2</sup> and standards, Policy on the Protection of Whistleblowers and Witnesses,<sup>3</sup> Policy on Prohibited Practices,<sup>4</sup>) and relevant requirements of Board decision B.10/06, paragraphs (i)<sup>5</sup> and (j).<sup>6</sup>***

Screening requirement	Relevant fiduciary standard/s or policy section
<p><b>Legal status</b></p> <p>The applicant has legal personality, the legal capacity and authority to enter into contracts, and can bear financial and legal responsibility for performing those obligations.</p>	<p>Accreditation prerequisite – the applicant entity has legal capacity and legal personality within the relevant jurisdiction that enables it to enter into agreements with GCF and undertake activities to be funded by GCF.</p> <p>Where a registration, licence or permit is required in order to be a GCF accredited entity, such registration, licence or permit should have been obtained prior to the accreditation decision. Any registration, licence or permit that may be required to undertake a specific activity under an</p>

<sup>1</sup> Decision B.07/02.

<sup>2</sup> Decision B.18/10.

<sup>3</sup> Decision B.BM-2018/21.

<sup>4</sup> Decision B.22/19.

<sup>5</sup> “Further decides that, recalling decision B.08/03, all international entities, as an important consideration of their accreditation application, shall indicate how they intend to strengthen capacities of, or otherwise support, potential subnational, national and regional entities to meet, at the earliest opportunity, the accreditation requirements of the Fund in order to enhance country ownership and that they report annually on these actions”.

<sup>6</sup> “Reaffirms that information on how the entity will contribute to the mandate of the Fund and any information considered material, particularly information with potential reputational risks to the Fund, shall be provided in the recommendation of the Accreditation Panel to the Board”.

Screening requirement	Relevant fiduciary standard/s or policy section
	approved funding proposal will be assessed during the programming stage.
<p><b>Corporate governance and internal control</b></p> <p>The applicant ensures that corporate governance arrangements and actors are in place with roles and responsibilities defined and is able to demonstrate a track record of effective and efficient organizational management in line with its mission and objectives.</p>	<p><b>Initial basic fiduciary standards</b></p> <p>Section 1.1 Key administrative and financial capacities</p> <ul style="list-style-type: none"> <li>- Subsection 1.1.1 General management and administrative capacities <ul style="list-style-type: none"> <li>o All items (2 (a-e))</li> </ul> </li> <li>- Subsection 1.1.3 Internal and external audit <ul style="list-style-type: none"> <li>o A. Independent audit committee <ul style="list-style-type: none"> <li>▪ All items (3-4)</li> </ul> </li> <li>o B. Internal audit <ul style="list-style-type: none"> <li>▪ All items (5 (a-i))</li> </ul> </li> <li>o C. External audit <ul style="list-style-type: none"> <li>▪ All items (6 (a-e))</li> </ul> </li> </ul> </li> <li>- Subsection 1.1.4 Control framework <ul style="list-style-type: none"> <li>o All items (7 (a-k))</li> </ul> </li> </ul>
<p><b>Financial management</b></p> <p>The applicant ensures that financial inputs and outputs are properly accounted for, reported and administered transparently in accordance with pertinent regulations and laws, and with the capacity for international transactions.</p>	<p><b>Initial basic fiduciary standards</b></p> <p>Section 1.1 Key administrative and financial capacities</p> <ul style="list-style-type: none"> <li>- Subsection 1.1.2 Financial management and accounting <ul style="list-style-type: none"> <li>o Items a-e</li> </ul> </li> </ul>
<p><b>Procurement</b></p> <p>The applicant ensures that procurement practices follow formal standards, guidelines and systems based on widely recognized processes, with specific guidelines for different procurement types, while promoting economy, efficiency and accountability.</p>	<p><b>Initial basic fiduciary standards</b></p> <p>Section 1.1 Key administrative and financial capacities</p> <ul style="list-style-type: none"> <li>- Subsection 1.1.5 Procurement <ul style="list-style-type: none"> <li>o Items 8 (a-b)</li> </ul> </li> </ul>

Screening requirement	Relevant fiduciary standard/s or policy section
<p><b>Integrity</b></p> <p>The applicant defines and adheres to ethical standards that promote full transparency and accountability, to be upheld by employees and those contracted or functionally related to the organization.</p> <p>The applicant is committed, as an organization, to maintaining the highest levels of integrity/accountability and to preventing and combating prohibited practices in the implementation of funded projects.</p> <p>The applicant is committed to protecting whistle-blowers, providing publicly accessible avenues for confidential reporting of allegations, and it has, or commits to rely on, an objective investigation function that can capably and professionally investigate allegations of prohibited practices in Fund-related activity.</p> <p>The applicant has capacity and processes to conduct due diligence of prohibited practices (which may include screening against financial sanctions of the United Nations Security Council) on potential or existing counterparties with which it engages, including executing entities, implementing entities, or any other entity or person involved in project implementation, and to maintain/retain relevant records.</p> <p>If applicable, the applicant has processes (i) to have a person responsible for integrity risk management matters that also may include inter alia AML/CFT; (ii) to identify and mitigate compliance risks following a risk-based approach; (iii) to</p>	<p><b>Initial basic fiduciary standards and relevant policies</b></p> <ul style="list-style-type: none"> <li>• Section 1.2 Transparency and accountability <ul style="list-style-type: none"> <li>- Subsection 1.2.1 Code of ethics <ul style="list-style-type: none"> <li>○ All Items (a-c)</li> </ul> </li> <li>- Subsection 1.2.3 Capacity to prevent or deal with financial mismanagement and other forms of malpractice <ul style="list-style-type: none"> <li>○ All items (a-e)</li> </ul> </li> <li>- Subsection 1.2.4 Investigation function <ul style="list-style-type: none"> <li>○ All items (11 (a-d))</li> </ul> </li> <li>- Subsection 1.2.5 Anti-money-laundering and anti-terrorist financing <ul style="list-style-type: none"> <li>○ The entire standard covered</li> </ul> </li> </ul> </li> <li>• Basic capacity needed to fulfil counterparty obligations under the Policy on Prohibited Practices, AML/CFT Policy and standards, and Policy on the Protection of Whistleblowers and Witnesses</li> </ul>

<b>Screening requirement</b>	<b>Relevant fiduciary standard/s or policy section</b>
<p>monitor counterparty relationships and activities; and (iv) to provide training and advice on integrity risk matters.</p>	
<p><b>Project management</b></p> <p>The applicant is able to identify, formulate and appraise projects or programmes within the respective jurisdiction (subnational, national, regional or international, as applicable), including capabilities to examine and incorporate technical, financial, environmental, socioeconomic and legal aspects at the appraisal stage, and is guided by appropriate fiduciary oversight procedures.</p> <p>The applicant provides information on how it will contribute to the mandate of the Fund (e.g. policy or strategy on climate change/green growth/paradigm shift in place).</p>	<p><b>Initial specialized fiduciary standards and relevant decisions</b></p> <ul style="list-style-type: none"> <li>• Section 2.1 Project management <ul style="list-style-type: none"> <li>- Subsection 2.1.1 Project preparation and appraisal <ul style="list-style-type: none"> <li>○ All items (11 (a-d))</li> </ul> </li> </ul> </li> <li>• Requirements of decision B.10/06, paragraph (j)</li> </ul>
<p><b>On-lending/blending (if applicable)</b></p> <p>The applicant has (i) appropriate registration or licensing from relevant oversight bodies, and (ii) can demonstrate a track record, institutional experience and existing arrangements and capacities for on-lending/blending.</p>	<p><b>Initial specialized fiduciary standards</b></p> <p>Section 2.3 On-lending and/or blending</p> <ul style="list-style-type: none"> <li>- Item 16 (a); part of 16 (b), which is a requirement on an applicant's track record</li> </ul>
<p><b>International access applicant's support to direct access applicants (if applicable)</b></p> <p>The applicant indicates how it intends to strengthen capacities of, or otherwise support, subnational, national and regional entities to programme with GCF in order to enhance country ownership.</p>	<p>Relevant requirement of decision B.10/06, paragraph (i)</p>

**Table 2: Screening requirements and their coverage of the Revised Environmental and Social Policy,<sup>7</sup> ESS standards,<sup>8</sup> Indigenous Peoples Policy<sup>9</sup>, and updated Gender Policy<sup>10</sup>**

Screening requirement	Relevant policy or standard section
<p><b>Revised Environmental and Social Policy</b></p> <p>The applicant has a functional, inclusive, accountable, participatory and transparent environmental and social management system (ESMS) with commitment through a policy and effective framework to identify, assess, manage, and monitor environmental and social risks and impacts associated with an entity’s operations, projects or investments commensurate with the risk category.</p>	<p><b>Scope of application</b></p> <ul style="list-style-type: none"> <li>• Section 3.1, paragraph 4 (b) and Section 3.2, paragraph 5 (b) requirements at accreditation stage</li> <li>• Guiding principles, section IV, paragraph 8 (d), Fit-for-purpose approach</li> </ul> <p><b>General requirements for environmental and social risk management</b></p> <ul style="list-style-type: none"> <li>• Section 6.1, paragraphs 21 and 22, environmental and social standards and all relevant policies of GCF</li> <li>• Section 6.2, paragraph 23, level of detail and complexity of ESMS</li> <li>• Paragraphs 26, 33 and 35, entity’s accreditation level in environmental and social risk category</li> </ul>
<p>The applicant demonstrates commitment, a track record and consistency of the systems and approaches for environmental and social due diligence commensurate with the relevant risk category.</p>	<p><b>Overview of GCF roles and responsibilities</b></p> <ul style="list-style-type: none"> <li>• Section 5.1, paragraph 10, assessment of capacity of the entities using fit-for purpose approach</li> <li>• Section 6.4, paragraph 38 (a) and (b), Environmental and social due diligence of GCF, includes adequate investigation, review and assessment related to accreditation</li> </ul>

<sup>7</sup> Decision B.BM-2021/18.

<sup>8</sup> Decision B.07/02 (c).

<sup>9</sup> Decision B.19/11.

<sup>10</sup> Decision B.24/12.

<b>Screening requirement</b>	<b>Relevant policy or standard section</b>
The applicant has an accessible and legitimate institutional mechanism, policy and/or process to receive and handle complaints and grievances in relation to GCF-financed activities.	<b>Grievance redress mechanisms</b> <ul style="list-style-type: none"> <li>Section 7.3, paragraphs 76 and 79</li> </ul>
<b>ESS standards</b>  The applicant has a functional, inclusive, accountable, participatory and transparent ESMS with commitment through a policy and effective framework to identify, assess, manage, and monitor environmental and social risks and impacts associated with an entity's operations, projects or investments commensurate with the risk category.	<b>Environmental and social safeguards 1 (ESS1)</b> <ul style="list-style-type: none"> <li>Requirements of an effective ESMS</li> </ul>
<b>Indigenous Peoples Policy</b>  The applicant demonstrates awareness at the accreditation stage and commitment within the ESMS to meet the requirements of and comply with the Indigenous Peoples Policy at the funded activity stage.	<b>Overview of GCF roles and responsibilities in accreditation</b> <ul style="list-style-type: none"> <li>Section VI, paragraph 25, GCF is responsible for determining the capacity of the entities to implement this Policy</li> <li>Section VI, paragraph 28, Compliance is applicable to the activities</li> <li>Section VIII, paragraph 87, Fit-for-purpose accreditation approach</li> </ul>
<b>Updated Gender Policy</b>  The applicant demonstrates gender policy, strategy or any other commitment to meet the principles and requirements of the GCF updated Gender Policy and track record of such commitment.	<b>Policy requirements</b> <ul style="list-style-type: none"> <li>Section VI, paragraph 6.1               <ul style="list-style-type: none"> <li>25 (a) assessment of entities taking into account their commitment and capacity to meet the principles and requirements of the Gender Policy</li> </ul> </li> </ul>

**Part II: Supplementary tables, for information purposes, mapping Initial Fiduciary Principles and Standards, Revised Environmental and Social Policy, ESS standards, Indigenous Peoples Policy and updated Gender Policy**

***Table 3: Mapping of the Initial Fiduciary Principles and Standards (assessment at accreditation or programming stage)***

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	<b>I. Initial basic fiduciary standards</b>		
	1.1 Key administrative and financial capacities		
1	Underlying principles of the Fund’s initial basic fiduciary standards for administrative and financial capacities are: (a) financial inputs and outputs are properly accounted for, reported, and administered transparently in accordance with pertinent regulations and laws, and with due accountability; (b) information relating to the overall administration and management of the entity is available, consistent, reliable, complete and relevant to the required fiduciary standards; and (c) operations of the entity show a track record in effectiveness and efficiency.		
	1.1.1 General management and administrative capacities		
2	Clear and formal definition of the main “corporate governance” actors of the entity and of their respective roles and responsibilities (for example, oversight authorities, audit committee, regulators, governing board, executive body, internal audit body, external audit body, etc.)	Yes	
2 (a)	Existence of adequate internal oversight bodies and transparent rules regarding the appointment, termination and remuneration of members of such committees	Yes	
2 (b)	A consistent, clear and adequately communicated organization chart available, which describes, as a minimum, the entity’s key areas of authority and responsibility, as well as well-defined reporting/delegation lines	Yes	
2 (c)	A consistent and formal process to set objectives and to ensure that the chosen objectives support and align with the mission of the entity	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
2 (d)	Indicators to measure defined objectives and internal documents demonstrating that organization-wide objectives provide clear guidance on what the entity wants to achieve; and	Yes	
2 (e)	A general management plan that also includes processes to monitor and report on the achievement of set objectives	Yes	
	1.1.2 Financial management and accounting		
(a)	Financial statements follow the Generally Accepted Accounting Principles (GAAP) and are prepared in accordance with recognized accounting standards, such as the International Financial Reporting Standards (IFRS), or the International Public Sector Accounting Standards (IPSAS) in the case of public entities, or other equivalent standards	Yes	Potentially yes, if a long gap between accreditation and programming
(b)	The entity has in place a clear and complete set of financial statements that provide information on: (i) a statement of assets, liabilities and fund balances (statement of financial position); (ii) a statement of financial performance (income and expenses/revenue and expenditure); (iii) a statement of changes in financial position or a statement of changes in reserves and fund balances; (iv) a statement of cash flows; (v) a description of the accounting policies used explaining the accounting framework used; and (vi) appropriate notes and disclosures in annexes to the financial statements, in particular explaining the accounting framework used, the basis of preparation of the financial statements, and the specific accounting policies that are necessary for a proper understanding of the financial statements	Yes	Potentially yes, if a long gap between accreditation and programming
(c)	Financial statements are reported periodically, consistent with previous reporting periods, and allow for comparison among reporting periods	Yes	Potentially yes, if a long gap between accreditation and programming
(d)	The entity uses accounting and financial information systems based on the accounting principles and procedures indicated in paragraph (a) above and how the accounting policies of the entity are adapted to the nature and complexity of its activities	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
(e)	Transparent and consistent payment and disbursement systems are in place with documented procedures and clear allocation of responsibilities. The entity has also legal and operational capacity to receive international payments from the Fund's Trustee and to make payments to the Fund's Trustee	Yes	Yes
(f)	A track record in the preparation and transparent use of business plans, financial projections and budgets, and the ability to continuously monitor performance and expenditure against these; and		Yes
(g)	Resources, systems and procedures (including fiduciary accounts, as appropriate) are in place that ensure proper financial reporting over the use of funding received from the Fund		Yes
	1.1.3 Internal and external audit		
	A. Independent audit committee		
3	An independent audit committee or comparable body is appointed and fully functional and oversees the work of the internal audit function as well as the external audit firm as it relates to the audit of financial statements, control systems and reporting	Yes	
4	The audit committee or comparable body is guided and mandated by written terms of reference that address its membership requirements, duties, authority, accountability and regularity of meetings	Yes	
	B. Internal audit		
5	Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organization's operations. It helps an organization accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes (as defined by the Institute of Internal Auditors)	Yes	
5 (a)	The internal audit function has a documented terms of reference or charter, reviewed and approved formally by senior management and the	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	audit committee, that outlines its purpose, authorized functions and accountability		
5 (b)	The internal audit function is carried out in accordance with internationally recognized standards such as those prescribed by the Institute of Internal Auditors or other equivalent standards	Yes	
5 (c)	Auditors and/or entities that provide internal auditing services adhere to ethical principles of integrity, objectivity, confidentiality and competency, which is supported by specific legal arrangements to this effect	Yes	
5 (d)	The internal audit function is independent and able to perform its respective duties objectively. It is headed by an officer specially assigned to this role with due functional independence, who reports to a level of the organization that allows the internal audit activity to properly fulfil its responsibilities	Yes	
5 (e)	The internal audit function has a documented description of the annual audit planning process, including a risk-based methodology for preparing an audit plan. The audit plan outlines the priorities of the function and is consistent with the organization's goals	Yes	
5 (f)	The chief audit officer shares information and coordinates activities with relevant internal and external parties (including external financial statement auditors) ensuring proper coverage and a minimization of duplication of efforts	Yes	
5 (g)	The internal audit function disseminates its findings to the corresponding senior management units and business management units, which are responsible for acting on and/or responding to recommendations	Yes	
5 (h)	The internal audit function has a process in place to monitor the response to its recommendations; and	Yes	
5 (i)	A process is in place to monitor and assess the overall effectiveness of the internal audit functions, including periodic internal and external quality assessments	Yes	
	C. External audit		

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
6	The external financial audit function ensures an independent review of financial statements and internal controls (as defined by the International Federation of Accountants) (IFAC)).	Yes	
6 (a)	The entity has appointed an independent external audit firm or organization	Yes	
6 (b)	The work of the external audit firm or organization is consistent with the recognized international auditing standards such as International Standards on Auditing (ISA), or other equivalent standards	Yes	
6 (c)	In cases where the entity is subject to external audits carried out by a national audit institution or other form of public independent inspection body, provisions should be made so that the external audits are guaranteed independence and impartiality, including through formal terms of reference, and are conducted periodically	Yes	
6 (d)	The entity exhibits all necessary provisions and arrangements to ensure that an annual audit opinion on the financial statements and/or, as appropriate, on all financial resources received from the Fund and administered by the entity, is issued by the external auditor and made public; and	Yes	
6 (e)	The external auditor makes regular reports of observations with respect to accounting systems, internal financial controls, and administration and management of the organization. Audits and management progress reports are reviewed by the audit committee or comparable body annually	Yes	
	1.1.4 Control framework		
7	The Committee of Sponsoring Organizations (COSO) of the Treadway Commission defines internal control as a process, effected by an entity's board of directors, management and other personnel, designed to provide reasonable assurance regarding the achievement of objectives in the following categories:		
7 (a)	Effectiveness and efficiency of operations	Yes	
7 (b)	Reliability of financial reporting	Yes	
7 (c)	Compliance with applicable laws and regulations	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
7 (d)	A control framework that has been adopted and that is documented and includes clearly defined roles for management, internal auditors, the board of directors or comparable body, and other personnel	Yes	
7 (e)	A control framework that covers the control environment (“tone at the top”), risk assessment, internal control activities, monitoring, and procedures for information-sharing	Yes	
7 (f)	A control framework that defines roles and responsibilities pertaining to the accountability of fiscal agents and fiduciary trustees	Yes	
7 (g)	At the institutional level, risk-assessment processes are in place to identify, assess, analyse and provide a basis for proactive risk responses in each of the financial management areas. Risks are assessed at multiple levels, and plans of action are in place for addressing risks that are deemed significant or frequent	Yes	
7 (h)	The control framework guides the financial management framework	Yes	
7 (i)	Procedures are in place for identifying internal controls and assessing the details of the controls annually in core financial management areas, including: (i) budgeting; (ii) accounting; (iii) internal control; (iv) funds flow (including disbursements, cash management, unused fund close-out); (v) financial reporting; and (vi) auditing arrangements		
7 (j)	Provisions for regular oversight of the procurement function with consistent monitoring and follow-up on review reports evidence that a risk management process exists and allows management to identify, assess and address existing or potential issues that may hamper the achievement of the entity’s objectives; and	Yes	
7 (k)	Duties are segregated where incompatible. Related duties are subject to a regular review by management; response is required when discrepancies and exceptions are noted; and segregation of duties is maintained between settlement processing, procurement processing, risk management/reconciliations, and accounting	Yes	
	1.1.5 Procurement		

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
8	Procurement processes in the applicant entity cover regular procurement relating to the general operations of the entity as well as procurement in the context of the implementation and execution of funding proposals approved by the Fund. These should include formal standards, guidelines and systems based on widely recognized processes and an internal control framework to ensure fair and transparent procurement processes	Yes	
8 (a)	Formal internal guidelines and a procurement policy that promote economy and efficiency in procurement through written standards and procedures that specify procurement requirements, accountability, and authority to take procurement actions	Yes	
8 (b)	Specific procurement guidelines are in place with respect to different types of procurement managed by the entity, such as consultants, contractors and service providers	Yes	
8 (c)	Specific procedures, guidelines and methodologies as well as adequate organizational resources for overseeing, assessing and reviewing the procurement procedures of beneficiary institutions, executing entities or project sponsors are in place		Yes
8 (d)	Procurement performance in the implementation of Fund's approved funding proposals is monitored at periodic intervals, and there are processes in place requiring a response when issues are identified		Yes
8 (e)	Procurement records are easily accessible to procurement staff, and procurement policies and awards are publicly disclosed		Yes
8 (f)	Evidence of transparent and fair procurement policies and procedures that are consistent with recognized international practice, including such provisions and practices as: (i) non-discrimination and equal treatment of candidates; (ii) dispute resolution procedures; (iii) obligation to use and adherence to tendering procedures; (iv) best value for money; and (v) adequate ex-post communication and publication of beneficiaries		Yes
	1.2 Transparency and accountability		
9	Underlying principles are: (a) protection and commitment against mismanagement and fraudulent, corrupt and wasteful practices; (b) disclosure of		

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	any form of conflict of interest (actual, potential or perceived); and (c) code of ethics, policies and culture that drives and promotes full transparency and accountability		
10	Transparency and accountability are to be demonstrated through an effective combination of fully functional policies, procedures, systems and approaches. The following standards outline the key standards to demonstrate fiduciary alignment with the above principles		
	1.2.1 Code of ethics		
(a)	The organization has in place either a documented code of ethics that defines ethical standards to be upheld, listing the parties required to adhere to the standards, including employees, consultants, and independent experts; or alternatively, a set of clear and formal management policies and provisions are in place to define expected ethical behaviour by all individuals contracted or functionally related to the organization	Yes	
(b)	All individuals with a functional and/or contractual relationship to the organization are made aware of such codes of ethics or policies/provisions as appropriate	Yes	
(c)	The organization has in place an ethics committee or has allocated such functions to other relevant instances within the organization	Yes	
	1.2.2 Disclosure of conflict of interest		
(a)	The organization has a disclosure policy, or equivalent administrative provisions to this effect, that establishes the necessary mandatory financial disclosures of possible, actual, perceived or apparent conflicts of interest by identified parties as appropriate; and		Yes
(b)	The policy, or equivalent administrative provisions, specifies prohibited personal financial interests and describes the principles under which conflicts of interests are reviewed and resolved. It should also describe sanction measures for parties that do not disclose such conflicts on a proactive basis where a conflict of interest is identified		Yes

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	1.2.3 Capacity to prevent or deal with financial mismanagement and other forms of malpractice		
(a)	Demonstrated experience and track record in accessing financial resources from national and international sources, as appropriate	Yes	
(b)	Evidence of tone or statement from the governing bodies or senior management of the organization emphasizing a policy of zero tolerance for fraud, financial mismanagement and other forms of malpractice by staff members, consultants, contractors, or from any other relevant party associated directly or indirectly with the general operations of the entity, and particularly in relation to the implementation of approved funding proposals	Yes	
(c)	Avenues and tools for reporting suspected ethics violations, misconduct, and any kind of malpractice, which should be complemented by provisions and mechanisms protecting whistle-blowers and individuals reporting such violations	Yes	
(d)	Evidence of an objective investigation function for allegations of fraud and corruption, which includes procedures in the organization to process cases of fraud and mismanagement, undertake necessary investigative activities and generate periodic reports for information and follow-up by the ethics function; and	Yes	
(e)	General management policies promote an organizational culture that is conducive to fairness, accountability and full transparency across the organization's activities and operations	Yes	
	1.2.4 Investigation function		
11	The investigation function provides for the independent and objective investigation of allegations of fraudulent and corrupt practices (using widely recognized definitions such as those agreed by the International Financial Institutions Anti-Corruption Task Force) in all operations of the entity as well as allegations of possible entity staff misconduct	Yes	
11 (a)	The investigation function has publicly available terms of reference that outline the purpose, authority and accountability of the function. This	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	function may be assigned to a dedicated organizational component within the entity's structure or to another appropriate element of the organization		
11 (b)	To ensure functional independence, the investigation function is headed by an officer who reports to a level of the organization that allows the investigation function to fulfil its responsibilities objectively	Yes	
11 (c)	The investigation function has published guidelines for processing cases, including standardized procedures for handling complaints received by the function and managing cases before, during and after the investigation process; and	Yes	
11 (d)	The investigation function has a defined process for periodically reporting case trends. To enhance accountability and transparency, case trend reports and other information are made available to senior management and relevant business functions to the extent possible	Yes	
	<i>1.2.5 Anti-money-laundering and anti-terrorist financing</i>	Yes	
	<b>II. Initial specialized fiduciary standards</b>		
12	The Fund's specialized fiduciary criteria refer to institutional capacities that will qualify the applicant entities to undertake specialized activities depending on the nature and scope of their mandate within the Fund's operations		
	<b>2.1 Initial specialized fiduciary standards relating to project management</b>		
13	The underlying principles are: (a) ability to identify, formulate and appraise projects or programmes; (b) competency to manage or oversee the execution of approved funding proposals, including the ability to manage executing entities or project sponsors and to support project delivery and implementation; (c) capacity to consistently and transparently report on the progress, delivery and implementation of the approved funding proposal		
	<b>2.1.1 Project preparation and appraisal</b>		
13 (a)	Track record of capability and experience (including appropriate tendering procedures for project proposals) in the identification and	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	design of projects or programmes within the respective jurisdiction (subnational, national, regional or international, as applicable)		
13 (b)	Capacity to clearly state project objectives and outcomes in preparing funding proposals and to incorporate key performance indicators with baselines and targets into the project design	Yes	Yes (focus on application)
13 (c)	Ability to examine and incorporate technical, financial, economic and legal aspects as well as possible environmental, social and climate change aspects, and relevant assessments thereof, into the funding proposal at the appraisal stage; and	Yes	Yes (focus on application)
13 (d)	Appropriate fiduciary oversight procedures are in place to guide the appraisal process and ensure its quality and monitoring of follow-up actions during implementation	Yes	
	<b>2.1.2 Project oversight and control</b>		
(a)	Operational systems, procedures and overall capacity to consistently prepare project implementation plans, including project budgets, reporting guidelines and templates to be used by executing entities or project sponsors		Yes
(b)	Operational capacity and organizational arrangements to continuously oversee the implementation of the approved funding proposal in order to regularly assess project expenditure against project budget as well as to monitor and identify opportunities for improving project performance against its budget and timelines		Yes
(c)	Appropriate reporting capabilities and capacities to appropriately publish implementation reports; and		Yes
(d)	Operational systems and overall capacity to conduct necessary activities relating to project closure, including due reporting on results achieved, lessons learned and recommendations for improvement, as well as capacity to disseminate results and make key findings publicly available		Yes
	<b>2.1.3 Monitoring and evaluation</b>		

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
14	The monitoring function detects, assesses, and provides management information about risks relating to projects, particularly those deemed to be at risk		Yes
15	The evaluation function assesses the extent to which projects, programmes, strategies, policies, sectors or other activities achieve their objectives and contribute to the initial results areas of the Fund. The goal of evaluation is to provide an objective basis for assessing results, to provide accountability in the achievement of objectives, and to learn from experience (and to detect any deviation from project planning in the early stages)		Yes
	<b>A. Monitoring</b>		
(a)	Operational and organizational resources are available to implement monitoring functions, policies and procedures consistent with the requirements of the Fund's monitoring and evaluation guidelines		Yes
(b)	The roles and responsibilities of the monitoring function are clearly articulated at both the project and entity/portfolio levels. The monitoring function at the entity/portfolio level is separated from the project origination and supervision functions. Tools for reporting on project monitoring are available and monitoring results are periodically published		Yes
	<b>B. Evaluation</b>		
(a)	Independent evaluations are undertaken by an established body or function as part of a systematic programme of assessing results, consistent with relevant requirements and related Fund policies		Yes
(b)	The evaluation function follows impartial, widely recognized, documented and professional standards and methods		Yes
(c)	The evaluation body or function is structured to have the maximum independence possible from the organization's operations, consistent with the structure of the entity, ideally reporting directly to the board of directors or comparable body. If its structural independence is limited, the evaluation body or function has provisions that ensure transparent reporting to senior management		Yes

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
(d)	An evaluation disclosure policy is in place. Evaluation reports are disseminated as widely as possible, at a minimum to all parties directly or indirectly involved in the project or programme. To enhance transparency, reports are available publicly to the extent possible		Yes
	<b>2.1.4 Project-at-risk systems and related project risk management capabilities</b>		
(a)	A process or system, such as a project-at-risk system, is in place to flag early on when a project has developed problems that may interfere with the achievement of its objectives, and to respond accordingly to redress the problems		Yes
(b)	Availability of an independent risk management function differentiated from project implementation and project supervision responsibilities		Yes
(c)	Risk assessment: (i) demonstrated capabilities to undertake the assessment of financial, economic, political and regulatory risks during the implementation stages; and (ii) demonstrated ability to integrate risk mitigation and management strategies into the funding proposal at all levels listed above, and to exercise such strategies during the implementation stage.		Yes
	<b>2.2 Grant award mechanisms</b>		
	<b>2.2.1 Transparent eligibility criteria and evaluation</b>		
(a)	The grant award mechanism is organized in a fully transparent manner that guarantees impartiality and equal treatment to all applicants		Yes
(b)	The evaluation process is based solely on the criteria for exclusion, eligibility, selection and award pre-announced in the call for proposals		Yes
(c)	Eligibility evaluation performed on the basis of the criteria stated in the call for proposals		Yes
(d)	All stages are formally documented through standardized checklists and forms		Yes
(e)	There is an evaluation committee that: (i) evaluates the applications to make a recommendation for award and rejections in accordance with the		Yes

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
	pre-announced criteria; and (ii) works in accordance with the formal rules of procedure		
	2.2.2 Grant award decision and procedures		
(a)	The grant award decision is taken by the person or body who is legally authorized to sign grant agreements on behalf of the awarding body		Yes
(b)	The grant award decision is based on the grant award proposal prepared by the evaluation committee		Yes
(c)	If the grant award does not follow evaluation committee's recommendation, the departing decision is adequately justified and documented		Yes
(d)	The grant decision states the following: (i) subject and overall amount of decision; (ii) name of beneficiaries, title of granted activity, grant amount awarded, and the reason(s) for this choice; and (iii) name(s) of application(s) rejected and reason for their rejection(s)		Yes
(e)	Checks have been undertaken to guarantee that one and the same activity only results in the award of one grant to any one beneficiary		Yes
(f)	No grant is awarded retrospectively for activities already started or completed at the time of the application		Yes
(g)	All applicants are notified in writing of grant award outcome; and		Yes
(h)	Rejected applications result in rejected applicants receiving reason(s) for rejection with reference to the pre-announced criteria		Yes
	2.2.3 Public access to information on beneficiaries and results		
(a)	Grant-awarding entity makes the grant award results public		Yes
(b)	Results made public within a reasonable timeframe following the grant award decision		Yes
(c)	The following information should be included (at a minimum): (i) name, address and nationality of the beneficiary; (ii) purpose of the grant; and (iii) grant amount awarded and, where applicable, the maximum co-financing rate of the cost		Yes
	2.2.4 Transparent allocation and implementation of financial resources		

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
(a)	There is a system in place to provide assurance on the reality and eligibility of activities to be carried out with the grant award as well as the legality of the underlying operations		Yes
(b)	There is a system in place to recover funds unduly paid		Yes
(c)	There is a system in place to prevent irregularities and fraud		Yes
(d)	The grant-awarding entity monitors the implementation of funded programme activities and supports beneficiaries through counselling and advice		Yes
(e)	There are sufficient possibilities for the beneficiary to contact the grant-awarding entity		Yes
(f)	The grant-awarding entity carries out on-site visits to monitor the implementation of individual projects		Yes
(g)	Those on-site visits are used to support the beneficiary, gather and disseminate best practices and establish/maintain good relations between the awarding entity and the beneficiary entity		Yes
(h)	There are clear procedures about procurement rules the grant beneficiary is required to apply, if any		Yes
(i)	The amount of the grant is finalized only after the grant-accepting entity has accepted the final report and accounts		Yes
(j)	There are procedures in place for the suspension, reduction, or termination of the grant if the beneficiary fails to comply with its obligations		Yes
	<i>2.2.5 Good standing with regard to multilateral funding</i>		Yes
	<b>2.3 On-lending and/or blending</b>		
16	Additional specialized criteria for on-lending and blending will apply for intermediaries and IEs that wish to use those financial instruments with the Fund's resources. The following list suggests possible on-lending and blending capacities for consideration during the accreditation process:		
16 (a)	Appropriate registration and/or licence from a financial oversight body or regulator in the country and/or internationally, as applicable	Yes	

Paragraph no.	Fiduciary standards	Accreditation stage	Programming stage
16 (b)	Track record, institutional experience and existing arrangements and capacities for on-lending and blending with resources from other international or multilateral sources	Yes	Yes (track record specific to the project and other requirements)
16 (c)	The creditworthiness of the institution making on-lending or blending arrangements		Yes
16 (d)	Due diligence policies, processes and procedures in place		Yes
16 (e)	Financial resources management, including analysis of lending portfolio of the intermediary		Yes
16 (f)	Public access to information on beneficiaries and results		Yes
16 (g)	Investment management, policies and systems, including in relation to portfolio management		Yes
16 (h)	Capacity to channel funds transparently and effectively, and to transfer the Fund's funding advantages to final beneficiaries		Yes
16 (i)	Financial risk management, including asset liability management		Yes
16 (j)	Governance and organizational arrangements, including relationships between the entity's treasury function and the operational side		Yes
16 (k)	For intermediaries or IEs that blend grant awards: (a) There are clear procedures about the grant award rules that the implementing partner is required to apply; or (b) If the intermediary or IE uses its own rules, the minimum requirements are satisfactory		Yes

**Table 4: Mapping of the relevant sections of the Revised Environmental and Social Policy, ESS standards, Indigenous Peoples Policy and updated Gender Policy (assessment at accreditation or programming stage)**

Paragraph no.	Policies and standards	Accreditation stage	Programming stage
	<b>Revised Environmental and Social Policy</b>		
4 (b)	Support the decision-making of GCF, particularly regarding the accreditation of entities, the provision of support, and the design, development, approval, implementation, and review of GCF-financed activities.	Yes	
5 (b)	At the entities level, the policy sets out the requirements for accredited entities working with GCF to establish and maintain robust, systematic, accountable, inclusive, gender- responsive, participatory and transparent systems to manage risks and impacts, from GCF-financed activities, pursuant to this policy and the ESS standards adopted by GCF. These requirements complement the accreditation framework and are considered in the accreditation and reaccreditation processes.	Yes	
	<b>Guiding principles</b>		
8 (d)	In the context of the GCF accreditation process, the approach recognizes the roles of a wide range of entities, which can differ according to the scope and nature of the activities of the entities, and their capacity to manage environmental and social risks and impacts. GCF enables entities to access various levels of support differentiated by their capacities in meeting fiduciary and environmental and social safeguards requirements.	Yes	
	<b>Overview of roles and responsibilities</b>		
10	In relation to the accreditation of entities, GCF is responsible for determining the capacity of the entities to manage environmental and social risks and impacts of GCF-financed activities following the GCF accreditation framework. GCF will assess the commitment, track record and consistency of the systems and approaches used by the entities and intermediaries with the ESS standards using the fit-for-purpose approach. As necessary, GCF will collaborate with the entities on measures to improve their capacities, including the deployment of necessary support and assistance through the GCF Readiness and Preparatory Support Programme.	Yes	
	<b>General requirements for environmental and social risk management</b>		
21	GCF operates through accredited entities, including those functioning as financial intermediaries. These entities are tasked to deliver upon the objectives of GCF through	Yes	

Paragraph no.	Policies and standards	Accreditation stage	Programming stage
	the supported activities while ensuring that the fiduciary, environmental and social standards of the GCF are met. Accredited entities will have in place environmental and social management systems that specify their capacities, standards and processes for screening, identifying, assessing, managing, and monitoring the potential environmental and social risks and impacts pursuant to the ESS standards of GCF and this policy.		
22	The accreditation of entities will be conducted pursuant to the accreditation framework. Under the accreditation framework, GCF examines, in line with the ESS standards and all relevant GCF policies, the adequacy of the applicant’s environmental and social management system and the track record of implementing such a system. The accreditation process will also allow the entities to access GCF support at a level commensurate to their institutional capacity to undertake the assessment and management of environmental and social risks and impacts.	Yes	
	<b>Environmental and social management system</b>		
23	The accredited entities will put in place an effective environmental and social management system to assess the environmental and social risks and impacts associated with the activities and the means to subsequently manage these effectively and equitably. The environmental and social management system of the accredited entities will be in accordance with the requirements of the GCF ESS standards and applicable policies of GCF as determined in the accreditation and appropriate to its role as an implementing entity (which may include a project execution role), an intermediary entity, or both. The accredited entities will maintain and continuously improve the environmental and social management system on which their accreditation was approved. The level of detail and complexity of the management system, and the staff and financial resources allocated to it, will be adequate to manage the expected level of risks and impacts of the activities to be financed. The staff of the accredited entities, including those who may be part-time or externally acquired (e.g. consultants) will have the necessary expertise in all areas covered by the ESS standards of GCF to carry out their responsibilities. The environmental and social management system forms one of the important considerations in the accreditation of the entities and is also the basis of the due diligence of activities	Yes	Yes (application of ESMS for due diligence of activities proposed for financing, implementation and monitoring)

Paragraph no.	Policies and standards	Accreditation stage	Programming stage
	proposed for financing that confirms how the environmental and social management system is translated to specific risk avoidance and mitigation measures.		
26	GCF will review the environmental and social screening of the activities proposed for GCF financing and confirm the environmental and social risk category assigned by the accredited entity based on the screening. In reviewing, GCF will confirm that the risk category of the proposed activity is appropriate to the risk level at which the entities have been accredited and consistent with the accredited entities' requirements, the GCF ESS standards, and the considerations and definitions set out in paragraphs 27 to 34 of this policy. If it is inconsistent, GCF will require the accredited entity to reflect the appropriate category. Only activities with risk categories that are within the accredited entity's accreditation level will be considered for GCF financing.		Yes (GCF will assess, and finance activities aligned with risk category of entity's accreditation level)
33	GCF will require accredited entities to assign the appropriate environmental and social risk categories to activities in a manner consistent with the accreditation framework of GCF.		Yes
35	The accreditation of the entities is based on the definitions of risk categories of Category A, Category B and Category C for activities and I1, I2 and I3 for intermediaries. Entities and intermediaries accredited to Category A or I1 can propose for funding those activities with assessed environmental and social risk categories of up to Category A or I1. Entities and intermediaries accredited to Category B or I2 can propose activities with assessed risk categories of up to Category B or I2 only. Entities accredited to Category C, or I3 can only propose for funding Category C or I3 activities.	Yes (entity level assessment of environmental and social risk category level for accreditation)	Yes (project / programme level environmental and social risk category assessment)
<b>Environmental and social due diligence of GCF</b>			
38 (a)	Adequate investigation, review, and assessment related to accreditation as well as to the consideration of funding proposals.	Yes (due diligence at accreditation stage for entity level ESMS)	Yes (due diligence at funding proposal stage)
38 (b)	Assessing the environmental and social management systems of the entities and how these are applied to the activities, the effectiveness and independence of the grievance	Yes	

Paragraph no.	Policies and standards	Accreditation stage	Programming stage
	redress mechanism of the accredited entities and implementing entities, disclosure of information, and the meaningful and timely consultations with all stakeholders.		
	<b>Grievance redress mechanisms</b>		
76	The approach of GCF is to provide for grievance and redress at GCF, accredited entity, and activity levels. GCF requires that accredited entities inform the communities affected, or likely to be affected, by the GCF-financed activities about the grievance and redress mechanisms at all three levels, at the earliest opportunity of the stakeholder engagement process and in an understandable format and in all relevant languages. The details for sending complaints containing the contact information and the appropriate modes by which these will be received will be provided by the accredited entities to the communities and disseminated with other involved institutions.	Yes (institutional level independent grievance redress mechanism)	Yes (activity level grievance redress mechanism)
79	GCF recognizes that local or project level grievance mechanism can provide an effective and direct remedy to complainants, and encourages the use of such mechanisms whenever possible. This recognition does not limit in any way the ability of complainants to access the GCF independent Redress Mechanism directly. Persons who allege that they have been affected by activities that do not comply with the accredited entities' own policies and procedures should have the right to access the accredited entities' own grievance redress mechanisms and/or those at the project or activity level, if separate. It is the responsibility of the accredited entities to require and ensure that their grievance mechanisms and the activities' grievance mechanisms are functioning effectively, efficiently, legitimately, and independently in a manner that is accessible, equitable, predictable, transparent, and that allows for continuous learning.	Yes (institutional level independent grievance redress mechanism)	Yes (activity level grievance redress mechanism)
	<b>ESS standards</b>		
ESS	ESS1: Requirements of an effective ESMS: The ESMS will incorporate the following elements: (i) policy; (ii) identification of risks and impacts; (iii) management programs; (iv) organizational capacity and competency; (v) emergency preparedness and response; (vi) stakeholder engagement; and (vii) monitoring and review. ESS2-8: triggered at project/programme level.	Yes (ESS1)	Yes (ESS1-8)
	<b>Indigenous Peoples Policy</b>		
25	In relation to the accreditation of entities, GCF is responsible for determining the capacity of the entities to implement this Policy. Where capacities exist, GCF will	Yes (commitment)	Yes (policy requirements)

Paragraph no.	Policies and standards	Accreditation stage	Programming stage
	assess the consistency of the system and approach used by the entities and intermediaries with this Policy. As necessary, GCF will collaborate with the entities on measures to improve their capacities, including the deployment of available support and assistance.	and awareness)	and compliance at funded activity stage)
28	GCF will require accredited entities to comply with their obligations specified in their accreditation, this Policy and any IPP or Indigenous Peoples Planning Framework (IPPF), applicable state laws and regulations, and obligations of the state directly applicable to the activities under relevant international treaties and agreements. Where the accredited entities fail to comply with these requirements, GCF will work with the accredited entities to develop and implement corrective actions that will bring the activities back into compliance. Where the accredited entities fail to re-establish compliance within a time frame and manner that are mutually agreed upon, GCF may exercise its remedies under its legal agreement with the accredited entities.		Yes
87	Through the accreditation process, and taking into account the fit-for-purpose accreditation approach, accredited entities will be required to ensure compliance with this Policy. They will also be required to have policies, procedures and competencies in place with which to implement this Policy. After accreditation, and at the activity level, the accredited entities, through their own rules, policies and procedures, will be responsible for implementing this Policy as it relates to the GCF-financed activities through in-country project identification and implementation as well as for results reporting.		Yes
<b>Updated Gender Policy</b>			
25 (a)	GCF is responsible for dedicating financial, human and other resources as required to implement the Gender Policy, specifically: (a) GCF will ensure that entities applying to be accredited by GCF are assessed in and considered for accreditation in accordance with the accreditation framework and taking into account their commitment and capacity to meet the principles and requirements of the Gender Policy.	Yes	
25 (b)	GCF will ensure that under the accreditation master agreements and funded activity agreements with AEs, the AEs are required to comply with the requirements of the Gender Policy.		Yes