

Meeting of the Board

21 – 24 October 2024 Songdo, Incheon, Republic of Korea Provisional agenda item 14 GCF/B.40/15/Add.01

15 October 2024

Accreditation Framework – Addendum I: Matrix of comments received and responses to comments

Summary

This document contains the response matrix for Board comments received on the draft document titled "Accreditation Framework".



Response matrix for Board comments received on the draft document "Accreditation Framework"

Commenters

1.	Denmark, Netherlands, Luxembour

2. Spain, New Zealand and Ireland

3. Germany

4. Finland, Hungary, Liechtenstein, Monaco, Switzerland

5. Sweden

6. CSO Observer

7. United States

8. Canada

Submitted by	Section	Text	Comment	Secretariat Response
Denmark, Netherlands, Luxembourg	I. Introduction, II. Policy rationale, III. Analysis of the policy proposal	Paragraphs 1, 3, 5, 17, 22	We fully agree on the need for simplifying and speeding up accreditation and scaling up the AE network (particularly DAEs).	Noted, this comment is aligned with the draft.
	I. Introduction, II. Policy rationale	Paragraphs 3, 8, 9, 10, 15	We understand the process, as designed now, is complex and time-consuming, involving multiple stages and iterations,	Noted, this comment is aligned with the draft.



Submitted by	Section	Text	Comment	Secretariat Response
			causing delays and frustration incountry.	
	I. Introduction, II. Policy rationale	Paragraphs 1, 2, 11, 17	For us, it is priority to significantly improve access to climate finance by removing the existing bottlenecks in the accreditation process.	Noted, this comment is aligned with the draft.
	N/A	N/A	We would like to emphasize that the GCF – established under the Paris Agreement to directly serve its implementation – could and should ask its partnering organizations to be Paris aligned before being accredited	Secretariat would welcome Board guidance on this matter.
	N/A	N/A	At the time of entering a project funded by the GCF, the Secretariat could test whether the accredited entity continue to be Paris aligned (as an alternative to re-accreditation).	Noted, and confirmed these directions are intended to guide further discussion on updates to the Monitoring and Accountability Framework (MAF).
	VI. Research and consultation	Paragraph 37	We seek further guidance on: How the suggested substantive changes to accreditation would impact the Accreditation Panel and its capacity going forward.	Roles and responsibilities will be further defined upon RAF adoption during the SOP development. The AP is a panel to the Board; Secretariat will be guided by the Board as per the role of the AP.



Submitted by	Section	Text	Comment	Secretariat Response
	II. Policy rationale, III. Analysis of the policy proposal IV. Impact assessment and implementation arrangements Annex IV	Paragraphs 15, 18(iii), 23, 24(e), and Annex paragraph ii.	We welcome efforts to streamline and simplify the accreditation process. We support several of the elements proposed including removing the need for re-accreditation and removal of the AMA process (assuming all appropriate safeguards are in place).	Noted, this comment is aligned with the draft.
Spain, New Zealand and Ireland	III. Analysis of the policy proposal IV. Impact assessment and implementation arrangements	Paragraphs 18(b)(ii), 24(a), 27	While we agree with removing capacity building from the accreditation process so there is a clear conceptualisation of and focus on the process of accreditation itself, this won't necessarily remove the need for capacity building and hence the time it takes for some entities to become accredited. To what extent are screening requirements different / simplified? To what extent will non-governmental organisations seeking accreditation have access to capacity building under the readiness support programme?	Screening requirements will be based on the analysis of potential impact of the risks they are designed to address, with the view to screen the essential requirements such as legal status, fiduciary, ESS and gender requirements at entry and remove duplications. The application of the rest of the standards will be done during the rest of the GCF business cycle. All this will be done without lowering the GCF standards. Candidate DAEs may access preaccreditation support, with NDA's support, through the Readiness Program's country window. Readiness resources will be available to all direct access accreditation candidates under the country allocation subject to NDA



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				request. Post accreditation, all direct access entities can request for readiness support through DAE window of the Readiness Program.
			It will be important to understand the benefits of the PSAA– what is the demand for this approach? What is the success of the approach in terms of managing risk? Is it possible that in the future this could be a more significant entry point for accreditation?	PSAA will be continued to be implemented as a pilot in parallel with implementation of RAF (when adopted). Lessons learnt from PSAA are and will continue to be used for RAF design and implementation. The first PSAA proposal and updates on implementation will be presented to the Board at B40.
Germany	N/A (general)	N/A (general)	We welcome the Revised Accreditation Framework as an important milestone to improve access to GCF funding as it intends to significantly reduce burden for applicants but also for the secretariat. We commend the efforts the secretariat already made in accrediting a remarkable number of entities, lastly mainly direct access entities. We appreciate the efforts of facilitating procedures while maintaining important standards. And we agree that accreditation is one of the key areas of potential harmonisation with other MCF.	Noted, this comment is aligned with the draft.



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	III. Analysis of the policy proposal	Paragraphs 18(a)(iii), 20(f)	We generally agree with the proposal of replacing re-accreditation with ex-post accountability mechanisms. However, it is important to keep in mind not to overload the development of funding proposals with the additional assessment of standards. It will be crucial to identify duplications and to simplify procedures.	Noted, and confirmed these directions are intended to guide the development of a screening requirements and MAF.
	Annex II: Accreditation Framework, VIII. Effective date, implementation arrangements and transitional arrangements	Paragraph 53	Could formerly accredited entities that did not go through the process of reaccreditation and / or declared that they do not wish to stay accredited be accredited without going through the process of accreditation again?	It is not intended that the revised accreditation framework will reinstate the accreditation of those accredited entities whose accreditation term had lapsed and were not extended pursuant to decision B.37/18, paragraph q, i.e. those accredited entities which notified the Secretariat prior to the date of the B.37/18 decision that it will not apply for re-accreditation; or any accredited entity which notified the Secretariat of its decision to opt out of the extension. Those entities would not be prohibited from applying for accreditation under the revised accreditation framework.
	N/A	N/A	The revised framework is currently not making any reference to the diversification of accreditation requirements e.g. by type / capacity of	Noted. To be further discussed and addressed during development of screening requirements.



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			entity or typical project size. While streamlining and speeding up the accreditation process are important steps, we think being fit-for-purpose should also entail looking into how accreditation requirements can be diversified and simplified for certain entities, especially those located in LDCs and SIDS, beyond the PSAA pilot.	
Finland, Hungary, Liechtenstein, Monaco, Switzerland	N/A (general)	N/A (general)	Our seat has continuously advocated for a critical discussion on what our main goals are for the Accreditation System and how it should be modified accordingly. We have also called for a more strategic approach to accreditation, including discussions on who should be an AE rather than a first-come-first serve selection, and around possible caps for the number of institutions or for different institutions. While this proposal is going to a somewhat different direction, the core idea is the same: to speed up access by reducing the administrative burden and limiting the time accreditation takes. As a whole, we welcome the proposal and the intention to streamline accreditation to focus on its core function.	We welcome this comment, the Secretariat stands ready to engage further and to be guided by the Board on a more strategic approach to accreditation.



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	N/A	N/A	If we understand correctly, the RAF does not explicitly mention AE portfolio screening against the objectives of the GCF, the UNFCCC and the Paris Agreement. However, we believe such screening is key to ensuring the transformative nature of GCF funding, in line with the GCF's mandate, and should be specified under screening requirements / other key requirements (Annex II: Accreditation Framework paragraph 12(c)). In the past, reaccreditation served to ensure that reaccredited entities commit to reducing their exposure to fossil fuel investment across their portfolio. We would like the GCF to continue encouraging supporting accredited entities in their transition away from fossil fuels. Without reaccreditation, the right signals and requirements must be set during accreditation itself and reviewed as part of the MAF.	Noted, and confirmed these directions are intended to guide further discussion on updates to MAF.
	V. Analysis of the policy proposal VIII. Effective date, implementation arrangements and	Paragraph 24	We note there is a risk during the transition phase that the administrative burden increases significantly. This is noted in the paper prepared by the Secretariat. Paragraph 32 in Chapter V	Roles and responsibilities under the new framework will be further defined upon RAF adoption during the SOP development, as foreseen by transitional and implementation



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	transitional arrangements		on Budgetary implication should clearly indicate what the implications would be. In addition, in paragraph 24 states that "the Secretariat may engage external consultants" to undertake technical reviews. This could be better clarified what will be outsourced and why. Furthermore, moving some of the screening to the Funding Proposal phase needs to be planned carefully in order to keep high standards. This new Framework should help us to do things better and more efficiently but keep the quality high.	arrangements. Secretariat will monitor capacity impacts and adjust resourcing in the context of its multi-annual budgeting process. Rationalization of allocation of due diligence components throughout business cycle will help to reduce overlaps and duplications and allow more focus on the proposed funded activities, generating efficiency for the Secretariat and AEs. Specific targets will be developed in the policy implementation plan upon adoption, based on Secretariat implementation capacity assessment.
	VI. Impact assessment and implementation arrangements	Paragraphs 23(d), 24(b)	We are in favour of increasing the number of DAEs, in line with what was agreed in the USP-2. We also welcome the concept of self-nominations from private sector entities, which should help boost private sector engagement and may help bring new and innovative concepts on the table. However, we are concerned that it will be difficult, if not impossible, to manage the expected number of AEs (300 by 2027). Many of the current AEs have not programmed with GCF yet, or not even submitted a	Secretariat will be launching a broad communication campaign to provide guidance and clarification that accreditation does not amount to a promise of GCF resources. This would also facilitate achieving USP-2's target results of doubling the number of DAEs with approved GCF funding proposals via adding flexibility for GCF and the countries in identifying programming partners. At the same time, RAF foresees decoupling accreditation from



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			funding proposal or a concept note. By doubling the number of AEs, GCF partners would have to wait 8-10 years to get funding for a proposal, considering the number of FPs approved per year and the average size of GCF funding to FPs. This also means that most entities would have only one project with the GCF rather than becoming regular programming partners, leading to increased transaction costs, and reducing learning opportunities from one project to another. In other words, many of the bottlenecks and waiting times that are now at accreditation stage would be postponed to the project approval stage.	programming with GCF, making it a prerequisite rather than a promise.
	N/A	N/A	With this in mind, we look forward to hearing more from the Secretariat on how it plans to manage a high number of AEs as well as manage their expectations. Is there a risk of the Secretariat being burdened excessively in working on project proposals from a large number of (self-nominated) entities which are not the best strategic match for the Fund?	It is envisaged that accreditation is used purely as technical due diligence tool to check the institutional fit. Programming fit and entry of projects to the GCF pipeline will be determined on the basis of the strategic programming dialogue between the country, GCF and the AE/accreditation applicant.



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	Annex II: Accreditation Framework, VII. Complementarity and coherence with other funds	Paragraph 50	We welcome that the RAF will consider opportunities to enhance complementarity and coherence through harmonization of requirements across the climate finance architecture but would like to see more concrete proposals in the policy, in line with the climate funds' action plan.	Noted, and confirmed these directions are intended to guide the development of a policy implementation plan.
	II. Policy rationale, III. Analysis of the policy proposal, and Annex II: Accreditation Framework	Paragraphs 16, 18(a)(ii), 18(b)(iii), 24 Annex 3: Paragraph 9(d)	We support the risk-based approach, as it should allow us to move away from a one-size-fits-all approach to AE screening, and to focus controls on more risky entities with less experience in implementing climate projects.	Noted, and confirmed these directions are intended to guide the development of screening requirements and policy implementation plan.
	N/A	N/A	Paragraph 20. Speaks of "direct and institutional access, entities", this seems to be an error and read "direct and international access entities" instead.	Noted and text edited.
	Annex II: Accreditation Framework, V. Accreditation process	Paragraphs 22, 27	There is little information about the internal process (i.e. role, responsibilities, tasks of and in the Secretariat); paragraph 22 only proposes to remove applicants who submit incomplete information and requires them to restart the process. This seems inefficient and risks clogging up the process even more. Instead, applicants	Noted, and confirmed these directions are intended to guide the discussion and development of SOP and policy implementation plan.



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			could be provided with at least one opportunity in the process to complement the information. In addition, other important aspects of the process, such as ensuring a single point of entry/contact, are missing.	
	III. Analysis of the policy proposal	Mentioned throughout document, most notably paragraphs 18(b)(ii), 24(a)	If DAE applicants do not meet screening requirements, they may seek support from the country support window under the Readiness and Preparatory Support Programme (RPSP). Given the private sector entities and non-governmental entities can self-nominate this will likely increase demand for the readiness resources and put pressure on the RPSP and NDA. The NDAs may need more guidance and support in this regard.	Noted, and confirmed these directions are intended to guide the discussion and development of SOPs and guidance documents under implementation arrangements.
	N/A	N/A	The paper does not inform about the role of the Accreditation Panel in the new system. Will it be part of the new system and how? The AP has played a very valuable role, and we wish to see it part of the process going forward.	Roles and responsibilities will be further defined upon RAF adoption during the SOP development. The AP is a panel to the Board; Secretariat will be guided by the Board as per the role of the AP.
	IV. Impact assessment and implementation arrangements;	Paragraphs 25	Paragraph 25 mentions the revision of the Monitoring and Accountability Framework: how far is this already focusing on results' achievement? Not mentioned under revision items. It is	All AEs need to report under existing MAF. MAF reform is now part of critical implementation arrangements for the revised accreditation framework. Updates to MAF are planned to enable



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	4.3 Effectiveness and implementation arrangements, and Annex II: Accreditation Framework, 5.1 Institutional accreditation steps; 5.3 Monitoring, accountability and learning	Annex II Paragraphs 40, 47	unclear whether the MAF will apply to accredited entities that have Board approved funding proposal only or to all accredited entities; paragraph 40 only requires the former to report compliance with GCF standards in accordance with the MAF, while paragraph 47 states that all must comply with the MAF.	more fit-for-purpose solution for monitoring partner performance and managing risks that arise during implementation, while decreasing the burden of corporate level reporting.
	V. Accreditation process	Paragraph 44	The policy (paragraph 46) could be clearer about E&S risk category updates; will the secretariat recommend any validated update to the Board for approval? If so, how and when? At Board meetings and/or through BBMs?	As foreseen by RAF, upgrade in ESS risks will need to be approved by the Board and be issued with an updated accreditation certificate reflecting the upgraded scope before they can submit funding proposals for activities that fall into the higher E&S risk category. The procedure will follow the same steps as for approval of accreditation.
	III. Analysis of the policy proposal	Paragraph 18(a)(ii)	The §18 a) ii) should be linked to the Risk Assessment Statement (RAS) and clarify which risks have to be integrated in the accreditation process. In paragraph 18, for example, prohibited practices are not mentioned.	Noted, and confirmed these directions are intended to guide further discussion on screening requirements, and further policy analysis.



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	Annex II: Accreditation Framework, V. Accreditation process	Paragraph 41	Paragraph 41 suggests that accredited entities are offered the opportunity to provide their comments on new and updated GCF policies, standards, and requirements which has been the practice in the current setting. However, given the number of entities will increase due to the new system it might be practical to consider carefully how to do this or whether this should be done in limited manner to keep the process and burden to the Secretariat limited. While we in general welcome broad stakeholder consultations, the Board ultimately shapes and decides on policies, standards, and requirements.	Noted, and confirmed these directions are intended to guide further discussion and policy analysis.
	Annex II: Accreditation Framework, 5.1 Institutional accreditation steps	Paragraphs 18(a), 19	There is a confusion between the mention of private sector in para18 step 1 a) and in para19 just below.	Please note that paragraph 18(a) discusses nominations of DAEs, while paragraph 19 mentions how private sector applicants can apply as a DAE or IAE.
	Annex II: Accreditation Framework, 5.1 Institutional accreditation steps		Paragraph 30, step 3 Board approval via non-objection: add what would happen in case of any objection.	If an institutional accreditation has been proposed for approval through the procedure for decisions between meetings and if an objection is received, then the standard procedure for dealing with the objection would be followed



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				(see Guidance in respect of the implementation of paragraph 43 of the Rules of Procedure of the Board and other related matters (B.32/11(b), annex XI).
Sweden	GCF/B.40/XX Page 1	Paragraph 30	Access to GCF is crucial and the accreditation system needs reform. In general, we welcome the proposal's bold approach to revise accreditation as well as the ambition of simplification. We believe the idea of off-loading a lot of the policy-review from the accreditation process is good. To simplify or even remove the legal form of the accreditation should be an administrative effectiveness reform improving access to GCF resources.	Noted, this comment is aligned with the draft.
	N/A	N/A	However, we also consider that the current accreditation system has several values which should be retained in a revised framework. One of these issues is the promotion of applicant organizations' Paris alignment in their overall activities. Our understanding is that this is part of the accreditation review. Our understanding is further that partner organizations' trajectory in de-carbonization is reviewed at re-	Noted, and confirmed these directions are intended to guide further discussion on updates to MAF.



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			accreditation. We think this is an important measure, helping GCF to collaborate with partners who are actively engaging in the transition away from fossil fuels and who in their actions and development share the objectives of GCF and the Paris Agreement.	
	Annex II: Accreditation Framework, III: Accreditation principles	Paragraph 9(d)	We support the risk-based approach, as it should allow GCF to move away from a one-size-fits-all approach to AE screening, and to focus controls on more risky entities with less experience in implementing climate projects.	Noted, and confirmed these directions are intended to guide the development of screening requirements and further policy analysis.
	N/A	N/A	The paper does not address the role of accreditation Panel (AP) in the new system. Will the panel be part of the new system and if so, how far? The AP has played a very valuable role, and we wish to see it part of the process going forward.	Roles and responsibilities will be further defined upon RAF adoption during the SOP development. The AP is a panel to the Board; Secretariat will be guided by the Board as per the role of the AP.



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CSO Observer			Shifting more accreditation assessment responsibilities to the Secretariat and scrapping the Accreditation Panel (if that is what is being proposed, since this is not made explicit) is misguided as the benefits of doing so is not supported by evidence. Scrapping or reducing the role of the AP would rob the GCF of expertise and remove the governance/integrity advantages of an arms-length assessment. It is not clear that this would result in efficiency improvements, and the proposal lacks a clear transition plan to ensure that the Secretariat would have sufficient resources or expertise to take on these functions. Is the plan or ultimate goal to dissolve the Accreditation Panel?	Roles and responsibilities will be further defined upon RAF adoption during the SOP development. The AP is a panel to the Board; Secretariat will be guided by the Board as per the role of the AP.
	Annex II: Accreditation Framework, IV: Screening requirements	Paragraph 10	The main simplifications proposed do not address the difficulties that direct access entities (DAEs) face but appear to retreat from a fit-for-purpose approach to more of a 'one size fits all' screening (the only remaining differentiation relates to Environmental and Social Safeguards capacity). The GCF currently sets a very high bar in its requests for documentation from even the smallest	Screening requirements will be based on the analysis of potential impact of the risks they are designed to addressed, with the view to addressing the critical ones at entry and to apply the rest of the standards during the rest for the GCF business cycle as appropriate. This is intended to remove duplications, simplify accreditation and apply standards at the right time



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			public and non-profit entities, yet the proposal is silent on how to simplify these requirements in a 'fit-for-purpose' manner to enable more entities to engage in micro/small scale, low-risk activities. The new accreditation structure may crowd out such entities altogether. Moreover, it also does not address the fact that even when DAEs are accredited (as there are more DAEs than IAEs accredited), they still struggle to receive funding and have funding proposals presented to the Board and approved.	without lowering the GCF standards. Please also note that RAF foresees decoupling accreditation from programming with GCF, making it a prerequisite rather than a promise. Programming fit and entry of projects to the GCF pipeline will be determined on the basis of the strategic programming dialogue between the country, GCF and the AE/accreditation applicant.
	N/A (general)	N/A (general)	In the technical session, the Secretariat cited that this approach was a function of the GCF's commitment to speed and efficiency in the Updated Strategic Plan 2024-2027, but it is important to note that speed is an operational priority designed as part of the "GCF's commitment to access". Access and accreditation should not be conflated; if this accreditation framework does not serve to improve access to actual funds, measured by DAEs having more approved funding proposals (in line with the doubling goal in the USP 2024-2027),	RAF would facilitate achieving USP-2's target results of doubling the number of DAEs with approved GCF funding proposals via adding flexibility for GCF and the countries in identifying programming partners. At the same time, RAF foresees decoupling accreditation from programming with GCF, making it a prerequisite rather than a promise.



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			then its substantial risks must be judged not as a trade-off, but a fundamental misstep in the pursuit of the appearance of access.	
	IV. Impact assessment and implementation arrangements	Paragraph 23(c)	Replacing the current accreditation process with a pass/fail screening and eliminating accreditation conditions altogether also appears to contradict the goal of supporting DAEs, since it removes the possibility that entities could become accredited even if they have some policy or evidence gaps that remain to be filled. This will likely result in fewer DAEs not more.	Screening requirements will be based on the analysis of potential impact of the risks they are designed to addressed, with the view to addressing the critical ones at entry and to apply the rest of the standards during the rest for the GCF business cycle as appropriate. This is intended to remove duplications, simplify accreditation and apply standards at the right time without lowering the GCF standards. Applicants will have an opportunity to address the gaps against GCF requirements at the most technically feasible stage of GCF business cycle. Candidate DAEs will have access to preaccreditation support, with NDA's support, through the country window; and when accredited, to post-accreditation support, including to close



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				the gaps identified via further due diligence and via dedicated DAE window.
	N/A	N/A	Replacing the current accreditation process and deemphasizing compliance with critical policies or the need for an AE to have an independent grievance redress mechanism shifts the risks to the exact people that the GCF should be benefitting-rights-holders on the frontlines including communities, women, and Indigenous Peoples, among others.	Noted, and confirmed these directions are intended to guide the development of a screening requirements and MAF.
	III. Analysis of the policy proposal, and Annex II: Accreditation Framework	Paragraph 20(c), Annex II paragraph 11(c)	Downgrading and de-prioritizing gender criteria from the accreditation process, to potentially only be considered at the project/programme level, undermines a key pillar of the GCF approach.	Gender requirements are neither downgraded nor deprioritised, these are maintained and included in screening requirements, as mentioned in Section 2.2 – Substantive changes, paragraph 20(c).
	Annex II: Accreditation Framework		Scrapping the re-accreditation process in favor of 'ex-post accountability mechanisms' moves around a problem rather than solving it. De-linking the new performance assessment from accreditation status sounds significant on paper, but any credible assessment would still need to retain the possibility	RAF foresees updating MAF to be a more fit-for-purpose solution for monitoring partner performance and managing risks that arise during implementation, and delinking accreditation status from entities' performance, rather putting emphasis on linking performance to further



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			of imposing conditions to address underperformance/non-compliance with deaccreditation as its ultimate sanction. So the core changes actually relate to (1) who conducts the assessment (responsibility is shifted from AEs and the Accreditation Panel to the Secretariat, although the capacity/resource questions that this raises are not really addressed) and (2) the scope of what is assessed. Rather than scrapping re-accreditation, it would make sense to differentiate the process to reduce the burden on smaller entities without compromising its rigor in relation to larger actors, including maintaining a check that larger entities' overall emissions trajectories and policies are aligned with the GCF goal of promoting a paradigm shift towards low emission and climate-resilient development pathways.	programming. Roles and responsibilities under the new framework will be further defined upon RAF adoption during the SOP development.
	VI. Research and consultation	Paragraphs 35, 36, 37, 38	Lack of a transparent evidence base for the proposed changes - with the proposal relying on an external report, produced by consultants, with no clear indication of whether or how the knowledge and experience of GCF	In developing the RAF, the Secretariat drew upon a review of operational experience and lessons learned from prior reviews and independent evaluations; externally contracted study on the potential to enable AEs to apply



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			stakeholders, including DAEs and the AP were integrated.	their own systems and policies; internal audit on the accreditation process. The secretariat also consulted the Accreditation Committee of the GCF Board, the independent Accreditation Panel and independent units. Consultations with external stakeholders, such as AEs and national designated entities, have been conducted.
	I. Introduction	Paragraph 3	Recommend clarifying if "stretched" refers to number of staff to implement the accreditation process, the process itself as designed, or some combination of factors.	Noted. In essence the language refers to the combination of the factors above; further details could be provided on request.
United States	I. Introduction	Paragraphs 3, 4	Recommend being clear if the inefficiencies referenced here are the same described in paragraph 4, or other.	Noted; the inefficiencies referenced are the same described above.
	II. Policy rationale	Paragraph 8	Is this because the current AEs cannot deliver the projects/services required by countries? How does it not serve developing countries?	Current accreditation system is not able to provide developing countries with the partners of choice to program with GCF at necessary scale and speed.
	II. Policy rationale	Paragraph 10	Recommend being clear when the SEC resources are the limiting factor versus AE capacity.	As mentioned in the text, a combination of high demand and limited Secretariat capacity has resulted in a prolonged accreditation review; accreditation



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				candidates' capacities and responsiveness (or lack thereof) contributed to the extended processing time.
	II. Policy rationale	Paragraph 10	These statements suggest the "demand" is from AEs to be accredited versus demand from developing countries for additional partners. It remains unclear how increasing the number of AEs will help the GCF meet its goals/targets and how the GCF will manage expectations among AEs for funding.	It is both. in line with USP-2, over 100 developing countries where programming needs make it feasible to have an AE will have a national candidate either accredited or receiving capacity-building support by 2027, subject to the national programming needs and existing capacities, including 48 applications from developing countries without an AE that are currently in the accreditation pipeline. This would also facilitate achieving USP-2's target results of doubling the number of DAEs with approved GCF funding proposals through strengthened climate programming capacity and increasing the allocation of GCF resources through DAEs.
	II. Policy rationale	Paragraph 15	Does the SEC have data from surveys or other means to understand what % of developing countries do not feel they have "partners of choice" currently accredited and if all those in the queue for accreditation would meet the	The statements are based on discussions and verbal feedback expressed by NDAs, accreditation candidates and other stakeholders from developing countries during strategic engagements, such as Regional



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			demand? These statements speak to the "demand side" of the equation, but the framework does not provide data to support - quantitative or qualitative.	Dialogues, programming conferences, COP bilaterals, and country visits.
	II. Policy rationale	Paragraph 16	Does this shift the rate limiting step to a different place in the project/partner pipeline? Is the SEC sufficiently staffed at the project phase to continue to make efficiency improvements?	Balancing risk controls by applying appropriate risk controls at the appropriate time in the GCF programming cycle would lead to significant efficiency gains; assessment of the capacity and resources of the Secretariat will be undertaken to ensure the gain materialize.
	II. Policy rationale	Paragraph 17	This suggests there is a steady state for the network - what does that look like?	RAF foresees that in line with USP-2, over 100 developing countries where programming needs make it feasible to have an AE will have a national candidate either accredited or receiving capacity-building support by 2027, subject to the national programming needs and existing capacities, including 48 applications from developing countries without an AE that are currently in the accreditation pipeline.
	III. Analysis of the policy proposal	Paragraph 18(a)(iii)	Recommend elaborating on these mechanisms.	Noted, per section 4.3, the intent is to develop ex post accountability mechanisms as a part of the monitoring and accountability framework (MAF)



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				reform, to be presented to the Board at B.42.
	III. Analysis of the policy proposal	Paragraph 18(b)(iii)	Recommend spelling out that policies found to be acceptable at accreditation must remain acceptable over the course of engagement.	This is addressed via section 5,2 of the Accreditation Framework (paragraph 37): "AEs will be responsible for maintaining compliance with the screening requirements and applicable GCF policies, standards and requirements".
	III. Analysis of the policy proposal	Paragraph 18(b)(iv)	It's unclear what is meant by delinking accreditation status from entity performance. If an entity fails to perform to GCF standards, there needs to be scope for GCF to address including by revoking accreditation.	Noted, the intention is to further elaborate on this issue as a part of the monitoring and accountability framework (MAF) reform, to be presented to the Board at B.42.
	III. Analysis of the policy proposal	Paragraph 18(b)(v)	This is a priority - have you conferred with peers on this approach?	Noted, the intention is to implement consultations with peers upon RAF adoption.
	III. Analysis of the policy proposal	Paragraph 20(e)	Further information appreciated.	Analysis is underway, as part of screening requirements development, of the level and nature of risk controls applied for accreditation, with the view to focus accreditation as a technical due diligence tool.



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	III. Analysis of the policy proposal	Paragraph 20(h)	This should be elaborated further so the intended meaning is clear. How will the SEC manage AE expectations?	The Secretariat will be launching broad communication campaign to provide guidance and clarification that accreditation does not amount to a promise of GCF resources.
	III. Analysis of the policy proposal	Paragraph 20(j)	How much would PSAA approach differ from 1) proposed accreditation or 2) proposed new approach to project level due diligence?	Currently, PSAA combines requirement of institutional accreditation (at the level appropriate for the proposed funded activities) and project level due diligence. Proposed accreditation and new approach towards project review would further re-allocate, streamline and simplify (to the extend feasible) the risk management toolkit, making it coherent throughout full project cycle, including implementation and postimplementation.
	III. Analysis of the policy proposal	Paragraph 22(a)(ii)	Should we refer here to the strategic plan goal of doubling the number of DAEs that are programming? I don't see it so far in the doc, and seems like a useful thing to tie-in.	This is noted and has been addressed in the text.



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	III. Analysis of the policy proposal	Paragraph 23(c)	Would this mean that applicants with deficiencies would all be tracked to readiness or would you accredit some and address at program stage.	Applicants that are unable to meet screening requirements will be guided to fill in gaps identified via screening; direct access applicants will have access to Readiness resources (subject to NDA request) for pre-accreditation support.
	IV. Impact assessment and implementation arrangements	Paragraph 24(b)	Good. However, it does not address the fundamental question if the "backlog" of applicants is sufficient to meet the goals of the GCF and countries. Are these the right partners? Do they fill accreditation gaps?	Under RAF, accreditation will be refocused as an essential institutional due diligence mechanism; institutional fit and entry of projects to the GCF pipeline will be determined on the basis of the strategic programming dialogue between the country, GCF and accreditation candidates prior to application submission to determine whether the applicant is ready to undergo the process or may require preparedness support under readiness.
	IV. Impact assessment and implementation arrangements	Paragraph 24(c)	Will be important to elaborate how GCF project review processes need to change.	Addressed in the text, stating that lessons learned from PSAA will be incorporated into project-level assessments.



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	IV. Impact assessment and implementation arrangements 4.2 Broader impact assessment	Paragraph 24(f)	Same comment as above. Would these be done in-house or outsourced?	The Secretariat will be responsible for these checks but may augment its capacity to support it in undertaking such assessments if needed. Roles and responsibilities will be further defined upon RAF adoption during the SOP development.
	IV. Impact assessment and implementation arrangements 4.3 Effectiveness and implementation arrangements	Paragraph 25(d)	This term is often used to refer to project level recourse mechanisms. Suggest rephrasing. Also, it seems remediation options not suggested is to revoke or downgrade accreditation. Revocation should be an option where GCF has found material non-compliance that caused harm. Downgrade maybe an option in some cases.	Noted, and confirmed these directions are intended to guide further discussion on updates to MAF.
	IV. Impact assessment and implementation arrangements 4.3 Effectiveness and implementation arrangements	Paragraph 27	Are IAEs able to access support?	Details will be further elaborated when SOP and guiding documents will be developed upon RAF adoption, including in close cooperation with readiness team. Currently, the helpdesk is dedicated to Readiness support which is not available for IAEs.



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	V. Budgetary implications	Paragraph 32	Thank you for this section on budget implications. However, it remains unclear what "surge" means and for how long. Better rough estimates will also help the board understand budgetary trade-offs.	Secretariat will monitor capacity impacts and adjust resourcing in the context of its multi-annual budgeting process.
	V. Budgetary implications	Paragraphs 33, 34	Please elaborate.	As above, Secretariat will monitor capacity impacts and adjust resourcing in the context of its multi-annual budgeting process; the overall demand for readiness resources in terms of both scope and content will also be monitored and factored into future updates of the Readiness and Preparatory Support Programme (Readiness Programme) strategy and budget.
	VII. Monitoring and review	Paragraph 40(b)	Isn't the more relevant metric accredited DAEs which are programming?	Under RAF, accreditation will be refocused as an essential institutional due diligence mechanism; accreditation is not a promise to program with GCF but rather a pre-requisite to programming.



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	VII. Monitoring and review	Paragraph 40(c)	Is there a baseline study that should be referenced?	Currently no baseline study available; could be foreseen as a part of transitional arrangements.
	Annex II: Accreditation Framework, II. Definitions	Paragraph 5	Recommend specifying if this definition includes private sector and NGOs.	Noted, to be elaborated and aligned with other strategic documents.
	Annex II: Accreditation Framework, II. Definitions	Paragraph 7	This definition doesn't seem to include private sector institutions and NGOs. But several are accredited in the IAE category. This definition suggests an IAE has a high capacity and is a large organization. However, experience has suggested there are IAEs are bespoke. This could apply to a small AE that is headquartered in an advanced economy.	Noted, to be elaborated and aligned with other strategic documents. Definitions of access modalities (international versus direct) do not intend to disqualify certain types of applicants from applying for accreditation. All applicants, regardless of access modality, will be assessed against the screening requirements to be able to partner with GCF.



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	IV. Screening requirements	Paragraph 12(c)	This seems vague. How will "other" be determined and at what stage defined?	These are planned to be defined as a part of development of screening requirements.
	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps	Paragraph 17(b)	Report is a decision for go/no go? Will the board receive all the nominations - both for approval and rejection or only those deemed for approval?	These details are to be elaborated in the SOP upon RAF adoption; as per current framework, the Board may receive recommendations for the applicants both recommended and not recommended for accreditation.
	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps Step 1: Nomination and application	Paragraph 21	Only public sector ones need the nomination letter?	Confirmed.



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	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps Step 1: Nomination and application	Paragraph 22	What is the appeal process look like for applicants that believe they were not judged correctly? Additionally, please clarify that the applicant will be formally notified of their status via email (or the means of communication) of their formal status and rejection. This step needs to be clear.	Currently, there is no appeal process for the Board decisions, including those on accreditation. The intent is to keep existing practice. Text amended to include language on notifications (please refer to updated paragraph 22).
	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps Step 2: Screening and report	Paragraph 28	All DAEs or only those nominated initially? Is there an avenue for IAEs or non-public DAEs to seek readiness support? Is it contemplated to have a RPSP allocation for those applicants who were not nominated by a country?	All direct access applicants, both public and private sector, that do not meet the screening requirements may seek support from the nominating country or countries through the country support window under the Readiness Programme. Currently there is no provisions for IAEs to obtain support via Readiness resources. To ensure country ownership of accreditation processes and alignment of programming priorities, both nominated and self-nominated direct access applicants need NDA support to access readiness resources for preaccreditation support via country window.



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	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps Step 2: Screening and report	Paragraph 29	This needs to include a step where applicants will be formally notified of the decision and how they will be notified of their status and the decision to move forward or not.	Text amended to include language on notifications (please refer to updated paragraph 22), to be further elaborated via SOP development.
	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps Step 3: Board approval	Paragraph 30	Will the board receive a list of applicants not recommended for accreditation as well? Or given confidentiality issues, at least data on how many entities applied and were not advanced?	These details are to be elaborated in SOP upon RAF adoption; as per current framework, the Board may receive recommendations for the applicants both recommended and not recommended for accreditation.



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	Annex II: Accreditation Framework, V. Accreditation Process 5.1 Institutional Accreditation steps Post-accreditation	Paragraph 34	How will the SEC convey to the AE their relative status/assessment findings?	As per section 5.1, pargaraph 25, upon completion of the screening process, the Secretariat will issue a screening report to the applicant entity with the following information: Confirmation that the entity meets the screening requirements and is recommended for accreditation by the Board for the accreditation scope indicated in its application; or Confirmation that the entity does not meet the screening requirements, with identification of the areas where the screening requirements were not met. The report may also include observations that do not pertain directly to meeting the screening requirements but can help the applicant to further develop its institutional or programming capacities to engage with GCF on climate change programming.



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	Annex II: Accreditation Framework, V. Accreditation Process 5.2 Maintaining accreditation & accreditation upgrade	Paragraph 46	Suggest that the paper contemplate accreditation downgrades or accreditation termination situations.	Noted, and confirmed these directions are intended to guide further discussion on updates to MAF.
	Annex II: Accreditation Framework, V. Accreditation Process 5.2 Maintaining accreditation & accreditation upgrade	Paragraph 41	Is this the only contemplated situation where the Secretariat could terminate accreditation? What would the Secretariat do if through the ex-post accountability mechanism or other accountability mechanisms GCF found that the AE was not implementing projects in accordance with GCF standards?	Noted, and confirmed these directions are intended to guide further discussion on updates to MAF
Canada	N/A (general)	N/A (general)	We welcome the efforts to streamline the policy and to make it less capacity-intensive for prospective partners. While we welcome the lowered barrier to entry to the GCF, we also would like to ensure that the GCF continues to partner with entities that have the capacity and	The Monitoring and Accountability Framework (MAF) reform is one of the critical implementation arrangements for the revised accreditation framework. Planned updates aim to provide a more fit-for-purpose solution for monitoring partner performance



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			expertise to implement effective and impactful climate projects. As such, we would request more details on the new role of Monitoring and Accountability Framework to ensure strong results and compliance with policies.	and managing risks during implementation, while also reducing the burden of corporate-level reporting.
	N/A (general)	N/A (general)	Canada would specifically highlight the importance of effective implementation of the GCF's ESS standards, including the Gender Policy and Indigenous People's Policy. While moving screening requirements to the project proposal process may alleviate initiative burden on accreditation, projects must continue to comply with the GCF's high standard for ESS implementation and ensure that GCF projects do no harm.	As noted in one of the accreditation principles, highlighted in Annex II, paragraph 9 of the revised Accreditation Framework is an adherence to GCF standards. Revision of the Accreditation Framework will not lower adherence to GCF standards of ESS implementation in programming but rather re-distribute their application in GCF business cycle to avoid duplications.
	N/A (general)	N/A (general)	While complementarity and coherence are mentioned, few concrete examples are given demonstrating how the new policy is more coherent/complementary with the accreditation processes of other Funds. This is an opportunity to ensure these new processes are more closely aligned with other Funds that we should not miss.	Noted, and confirmed these directions will be used to guide further development of preparatory, and critical implementation arrangements of RAF.



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	N/A (general) and Paragraph 53. in Annex II.	N/A (general)	We would encourage the Secretariat to be as clear as possible on additional policy changes required for implementation of the policy and the direction of these changes to ensure there are no surprises in the future that could derail the Revised Access Framework coming into effect. Specifically, proposed changes to the Monitoring and Accountability Framework should be as clear as possible at this time.	As noted in Annex II, paragraph 53 of the revised Accreditation Framework, a comprehensive communication plan to increase understanding of the changes introduced by the accreditation framework to all categories of accreditation applicants, AEs and external stakeholders (potential applicants, partners, etc.) will also be developed and implemented. This comment is also noted, and confirmed these directions are intended to guide further discussion and consultations on updates to MAF.
	Annex II: Accreditation Framework, VIII. Effective date, implementation arrangements and transitional arrangements	Paragraph 52(b)	Will the revisions in the accreditation framework affect the existing ToR for the Accreditation Panel? If so, how, and when will they be effective?	Roles and responsibilities will be further defined upon RAF adoption during the SOP development. The AP is a panel to the Board; Secretariat will be guided by the Board.



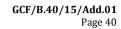
Submitted by	Section	Text	Comment	Secretariat Response
	Annex II: Accreditation Framework, VIII. Effective date, implementation arrangements and transitional arrangements	Paragraph 53	In general, the policy describes a large number of changes to processes and procedures. Given the recent reorganization of the Secretariat, have these new/changed processes been mapped to responsibilities in the newly arranged Secretariat?	According to the new structure Department of Investment Services is identified to be responsible for accreditation and entity relations function. Further roles and responsibilities will be mapped upon RAF adoption during the SOP development.
	Annex II: Accreditation Framework, V. Accreditation Process	Paragraphs 31, 32	In the technical session, reference was made to the fact that Readiness funds could be used to build the capacities of Access Entities. How will the needs for capacity building be determined?	Accreditation candidates that do not meet screening requirements will be issued a screening report with identification of the areas where the screening requirements were not met. Direct access candidates will be guided to seek National Designated Authority (NDA) support to access Readiness funds for capacity building to meet screening requirements, under the country Readiness allocation. For accredited entities needing further capacity development to meet GCF requirements during project development cycle, Readiness funds would be available through the DAE window.



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	III. Analysis of the policy proposal	Paragraph 18(b)(iv)	As raised during the technical session, the document states that under the revised Monitoring and Accountability Framework for accredited entities, accreditation status will be de-linked from entities' performance (paragraph 18(b)(iv)). It would be useful to clarify this in the document as what the word "performance" means here.	'Performance' is this context is understood as programming with GCF in alignment with GCF policies, standards, and results framework.
	Annex II: Accreditation Framework, VIII. Effective date, implementation arrangements and transitional arrangements	Paragraph 51	In paragraph 51, we would like to see more clarity on which of the sub-items are being adopted as part of the current decision: is this just paragraph a? Moreover, sub-paragraph C would also benefit from more detail – is there a policy that needs to be updated?	As provided in the draft decision text (Annex I to the document), the RAF will become effective on the date falling three (3) months after the Board adopts the last of the following (the "Effective Date"): (a) Screening requirements for accreditation referred to in section IV. "Screening requirements" of the Accreditation Framework; (b) A decision regarding the approach to legal arrangements with accredited entities specific to accreditation; (c) An updated policy on fees for accreditation; and



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				(d) Updates to the monitoring and accountability framework. Draft decision also requests the Secretariat to present updates to the monitoring and accountability framework for the Board's consideration at its forty-second meeting.
	IV. Impact assessment and implementation arrangements	Paragraph 24	In paragraph 24 – Would the Project/Programme cycle therefore need to be updated?	RAF implementation foresees integration of the accreditation framework and associated policy changes into existing operational procedures and guidance as needed, included, as necessary, project/programme cycle review.
	IV. Impact assessment and implementation arrangements	Paragraph 25(a)	In paragraph 25(a) – We note that the body of this paragraph seems unrelated to the title. It is also unclear who is reporting on what.	Text in the paragraph refers to corporate-level reporting as foreseen by current MAF.





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	Annex II: Accreditation Framework, V. Accreditation Process	Paragraph 29	In paragraph 29 – Does this mean that applicants who do not meet screening requirements must re-start the process from the back of the line?	Accreditation candidates that do not meet screening requirements will be issued a screening report with identification of the areas where the screening requirements were not met. Direct access candidates will be guided to seek National Designated Authority (NDA) support to access Readiness funds for capacity building to meet screening requirements, under the country Readiness allocation. Any applicant that does not meet screening requirements may submit a new application for screening when areas identified in the screening report have been addressed.