South Sudan
2013 CHF Standard Allocation Project Proposal

for CHF funding against Consolidated Appeal 2013

For further CHF information please visit http://unocha.org/south-sudan/financing/common-humanitarian-fund
or contact the CHF Technical Secretariat chfsouthsudan@un.org

This project proposal shall be submitted by cluster partners in two stages to the Cluster Coordinators and Co-coordinators for each project against which CHF funds are sought. In the first stage, before cluster defenses, applying partners fill sections I and II. The project proposal should explain and justify the activities for which CHF funding is requested and is intended to supplement information already available in the CAP Project Sheets. The proposals will be used by the cluster Peer Review Team in prioritizing and selecting projects for CHF funding during CHF Standard Allocation round. Partners should also fill and submit to cluster coordinator/ co-coordinator the CHF Project Summary (Annex 1). In the second stage projects recommended for funding by the CHF Advisory Board must complete Section III of this application and revised/update sections I and II if needed.

SECTION I:

CAP Cluster	**WASH**

CHF Cluster Priorities for 2013 Second Round Standard Allocation
This section should be filled by the cluster Coordinators/Co-coordinators before sending to cluster partners. It should provide a brief articulation of Cluster priority activities and geographic priorities that the cluster will recommend for funding from the CHF in line with the cluster objectives highlighted in the CAP 2013.

Cluster Priority Activities for this CHF Round

- Emergency water treatment units
- Rehabilitation of existing water points, where appropriate
- Drilling/construction of new water points, if appropriate
- Convert hand pumps to motorized boreholes w/ tap stands
- Emergency communal latrines
- Distribution of hygiene kits
- Emergency hygiene promotion training
- Pre-positioning of core pipeline
- Pre-positioning of refugee pipeline supplies in Maban and Yida
- Distribution of WASH NFIs

Cluster Geographic Priorities for this CHF Round

- Jonglei—Pibor, Ayod, Akobo, Pigi, Fangak
- Upper Nile—Renk, Makal (aka Malakal); host community in Maban; Longochuk, Maiwut, Baliet, Ulang
- Unity—Mayom, Abiemnom, Counties in Tri-State area
- Lakes—Counties in Tri-State area
- Warrap—Twic, Tonj Counties
- NBeG—Aweil East, Aweil North
- CES—Juba County

Project details
The sections from this point onwards are to be filled by the organization requesting CHF funding.

Requesting Organization:

Alaska Sudan Medical Project (ASMP)

Project CAP Code	**CAP Gender Code**
SSD-13/WS/55979/R/14573	1

CAP Project Title *(please write exact name as in the CAP)*

Old Fangak Clean Water Project

Project Location(s) - list State and County (payams when possible) where CHF activities will be implemented. If the project is covering more than one State please indicate percentage per State

State	**%**	*County/ies (include payam when possible)*
Jonglei	100	Fangak County, Old Fangak payam

Total Project Budget requested in the in South Sudan CAP	US$52,000
Total funding secured for the CAP project ***(to date)***	US$47,000

Funding requested from CHF for this project proposal	US$ 52,629

Are some activities in this project proposal co-funded (including in-kind)? Yes ☒ No ☐ *(if yes, list the item and indicate the amount under column i of the budget sheet)*

Direct Beneficiaries *(Ensure the table below indicates both the total number of beneficiaries targeted in the CAP project and number of targeted beneficiaries scaled appropriately to CHF request)*

	Number of direct beneficiaries targeted in CHF Project	**Number of direct beneficiaries targeted in the CAP**
Women:	**4,200**	**2,500**
Girls:	3,300	1,000
Men:	4,200	2,500
Boys:	3,300	1,000
Total:	15,000	6,000

Indirect Beneficiaries

35,000

Catchment Population (if applicable)

50,000

Implementing Partner/s (Indicate partner/s who will be sub-contracted if applicable and corresponding sub-grant amounts)

n/a

CHF Project Duration (12 months max., earliest starting date will be Allocation approval date)

8 months (15 Aug 2013 – 15 April 2014)

Contact details Organization's Country Office	
Organization's Address	Old Fangak, South Sudan
Project Focal	Jason Hahn, Jason.asmp@gmail.com,

Contact details Organization's HQ	
Organization's Address	PO Box 230183, Anchorage, Alaska, 99523, USA
Desk officer	Jason Hahn, Jason.asmp@gmail.com,

Person	+1-907-229-9139; +254-713-746-075
Country Director	Stephen Ayul, ayuljak@gmail.com +211-956-845-324; +882-164-333-9172
Finance Officer	Josie Hickel, josiehickel@pebblepartnership.com, +1-907-244-3291

	+1-907-229-9139; +254-713-746-075
Finance Officer	Josie Hickel, josiehickel@pebblepartnership.com, +1-907-244-3291

SECTION II

A. Humanitarian Context Analysis

Briefly describe (in no more than 300 words) the current humanitarian situation in the specific locations where CHF funded activities will be implemented. Provide evidence of needs by referencing assessments and key data, including the number and category of the affected population[1]

Jonglei State is in a water crisis. According to the 2011 South Sudan Statistical Yearbook, over 42% of water carriers in Jonglei State travel more than 30 minutes to secure potable water, and only 0.1% of the population has drinking water on premises. This burden primarily affects women, who collect and transport 99% of the water.

The catchment area of served by the PHCC in Old Fangak is in the middle of this crisis, with a high disease burden due to water-borne illnesses. Old Fangak is home to the only PHCC in the region and receives thousands of referred patients on a yearly basis, who walk from as far as Ayod County, which is 75 km away. Old Fangak payam has four functioning water wells to serve a wider catchment area of over 50,000 people, well below the South Sudanese government's recommended guidelines. As a result, the vast majority of people in the catchment area rely on water from the Zaref River, swamps or hand-dug wells. This area includes payams on the west side of the Zaref River towards Fagwir, who have absolutely no access to clean water points.

Most patients seeking treatment in Old Fangak are the young and the old, and those sick with malaria, hepatitis, tuberculosis, diarrheal diseases and kala-azar. Fangak County is a world epicenter of kala-azar, which is deadly if not treated. Many patients from nearby bomas arrive dehydrated, emaciated, and near death; their health problems exacerbated by lack of potable water. These referred patients strain the supply of existing clean water in Old Fangak. Clean water sources in outlying bomas will help remedy this problem.

B. Grant Request Justification

Briefly describe (in no more than 300 words) the reasons for requesting CHF funding at this time. Explain how CHF funding will help address critical humanitarian gaps in your cluster. Explain the value added by your organization (e.g. geographical presence). Indicate if any other steps have been taken to secure alternative funding.

Working in Old Fangak is logistically daunting. It is remote and isolated; there are no roads to the village, and mobilizing supplies is challenging. As a result, few NGOs operate in the area, and no other NGOs are currently involved in borehole drilling near Old Fangak.

ASMP has been building an organizational capacity in Old Fangak since 2008 to fulfill critical humanitarian gaps. By building an infrastructure on the ground, improving our supply chain, training locals, strengthening ties with the community and having staff on the ground year-round, we have built the organizational efficacy needed to scale up WASH operations. This last season, ASMP drilled two new boreholes in Old Fangak- both are the best producing wells in the area. In addition we repaired existing wells with the local WASH Committee, and have partnered with Medair and Solidarites to build pit latrines, including 25 new latrines this year.

ASMP has a strong presence in the region, and good partnerships with tribal leaders, the local RRC Coordinator, the County Commissioner, and Dr. Jill Seaman, the Director of Old Fangak's PHCC. With the mission of "saving lives through health, water and agriculture," we have been able to make a significant humanitarian impact in the region. We are a grass-roots organization that relies on local labor and volunteers to keep costs low, and we focus on training locals in all projects to ensure long-term sustainability. We are committed to maintaining a long-term presence in Fangak County.

Ninety percent of ASMP's funding comes from individual donors; a percentage of these funds are designated for WASH projects. In addition, ASMP conducts focused campaigns, including a GlobalGiving on-line campaign that raised over $16,000 for clean water projects this last year. ASMP actively engages its donors on a year-round basis in order to fund WASH projects.

C. Project Description (For CHF Component only)

i) Contribution to Cluster Priorities

Briefly describe how CHF funding will be used to contribute to the achievement of the cluster priority activities identified for this allocation.

This CHF funding will allow ASMP to drill and construct three new water wells for un-served, needy populations in Fangak County. The three communities who will receive boreholes as a result of this project have never had access to clean water. This year a University of Alaska Public Health graduate student conducted a water usage and practices survey in the villages surrounding Old Fangak, and determined most households were more than 450 meters away from a clean water point. Beyond this threshold distance, her thesis concluded, the burden of carrying well water is too great and women access non-clean water sources.

The water usage survey also concluded that there is a lack of clean water containers, and hygienic water storage practices are not always followed. As a result, ASMP will distribute hygienic water jerry cans and provide training in hygienic practices of fetching and storing clean water.

In addition, ASMP will rehabilitate existing wells as needed in Old Fangak. Two of the community wells are aging and may need further maintenance and repair in order to ensure an uninterrupted clean water supply for the village. ASMP will also sample test all wells in the area to ensure that well water is continuing to meet WHO standards.

Sustainability of water points in Fangak County will be ensured through the hands-on training of six well-drillers and the strengthening and training of the local WASH Committee.

Sanitation will be improved by constructing a medical incinerator to dispose of bio-hazardous medical waste from the PHCC. CHW staff will receive training in operation and maintenance of the incinerator.

[1] To the extent possible reference needs assessment findings and include key data such as mortality and morbidity rates and nutritional status, and how the data differs among specific groups and/or geographic regions. Refer situation/data/indicators to national and/or global standards.

CHF will be vital in helping ASMP accomplish these goals in Fangak County. This investment will allow ASMP to scale up our successful WASH activities to bring clean water and sanitation to a wider, un-served sector of the region.

ii) Project Objective

State the objective/s of this CHF project. Objective/s should be Specific, Measurable, Achievable, Relevant and Time-bound (SMART)

This project will increase access to clean water in Fangak County by approximately 15,000. It will provide training to well drillers and will strengthen and provide training to the existing community WASH Committee in Old Fangak. It will improve sanitation conditions in Old Fangak, and will promote hygienic water practices to communities in Fangak County. These objectives will be measured by the completing the Proposed Activities as outlined below.

ASMP has the human resources, infrastructure and organizational capacity to implement these interventions within a 6 month time period. Monitoring and reporting will ensure maximum implementation and output measurements.

iii) Proposed Activities

List the main activities to be implemented with CHF funding. As much as possible link activities to the exact location of the operation and the corresponding number of direct beneficiaries (broken down by age and gender to the extent possible).

This project will:

- Construct three new boreholes using ASMP's lightweight, portable drill rig on the ground in Old Fangak. These boreholes will be fitted with India Mark II hand pumps and properly tested for output and water quality. These three wells will de drilled in the bomas of Galillee, Nonimec, and across the Zaref River to serve bomas towards Fagwir.
  - Galillee: approx. 3,000 people (approx. 840 men, 840 women, 660 age 0-14 boys, 660 age 0-14 girls)
  - Nonimec: approx. 4,000 people (approx. 1120 men, 1120 women, 880 age 0-14 boys, 880 age 0-14 girls)
  - Across Zaref River: 8,000 people (approx. 2240 men, 2240 women, 1760 age 0-14 boys, 1760 age 0-14 girls)
- Assess and rehabilitate existing water wells in Old Fangak as needed. (Serving approximately 10,000 people in Old Fangak and the immediate vicinity: approx 2,800 men, 2,800 women, 2,200 age 0-14 boys, 2,200 age 0-14 girls).
- Sample all water wells in Old Fangak with the involvement of the WASH Committee and compare water quality to WHO standards.
- Further research on water use practices building upon the research conducted last year, including researching gender issues related to water usage. The findings will inform future program goals.
- Provide hands-on training to 6 well drillers (6 males, 18-35 years old).
- Strengthen and provide training and tools to the local Old Fangak WASH Committee for the purposes of water point rehabilitation and future maintenance on the new wells drilled in nearby bomas. This Committee, led by Peter Chuit, has worked with ASMP on previous rehabilitation projects. ASMP will supply new repair kits to the Committee. (6 males, all ages).
- Construct medical incinerator to properly dispose bio-hazardous medical waste from Old Fangak's PHCC (to benefit entire village of Old Fangak, 10,000 people).
- Train four CHW's (2 males, 2 females) in the proper use and maintenance of medical incinerator.
- 20 families will receive clean jerry cans, and training from CHWs on their use and hygienic maintenance

iv). Cross Cutting Issues

Briefly describe how cross-cutting issues (e.g. gender, environment, HIV/AIDS) are addressed in the project implementation.

The construction of new water points and servicing of existing wells will decrease the water-bearing burden on women. Closer water sources will allow them more time taking care of their families, and will decrease their exposure to unsafe exposures including insecurity (assault and gun violence) and environmental hazards such as snake bites.

v) Expected Result/s

Briefly describe (in no more than 100 words) the results you expect to achieve at the end of the CHF grant period.

This project will bring clean water to people in Fangak County who have never had potable water before. This will have the immediate effect of decreasing the disease burden, including helping prevent diarrheal deaths in children under 5, and will improve the general health of the population.

Training of local South Sudanese well-drillers and maintenance technicians will put villagers on a path of sustainability by ensuring new water sources are *sustainable,* and building an infrastructure so locals will soon be able to construct their own new water points.

Sanitation will be improved through implementation of a medical incinerator.

List below the output indicators you will use to measure the progress and achievement of your project results. At least three of the indicators should be taken from the cluster defined Standard Output Indicators (SOI) (annexed). Put a cross (x) in the first column to identify the cluster defined SOI. Indicate as well the total number of direct beneficiaries disaggregated by gender and age.

SOI (X)	#	Output Indicators (Ensure the output indicators are consistent with the output indicators that will be used in the results framework section III of this project proposal).	Target (indicate numbers or percentages) (Targets should be disaggregated by age and sex as per the standard output indicators list and add-up to the number of direct beneficiaries identified page 1)
X (2)	1.	New/ additional water points constructed • Including training of six local drillers	3 boreholes in Old Fangak 6 well drillers To benefit approximately 15,000 people in three outlying villages of Old Fangak. Including (approx.): • 4,200 men, 4,200 women • 3,300 age 0-14 girls, 3,300 age 0-14 boys
X (3)	2.	Existing water points rehabilitated • Assess all water points in Old Fangak • Rehabilitate water points as needed	• 1-3 water points rehabilitated To benefit the Old Fangak population.

			• 1,400 men, 1,400 women • 1,100 age 0-14 boys, 1,100 age 0-14 boys
X (10)	3.	Community members trained on management of water, sanitation and hygiene services. A. 6 local WASH committee members receive further training on borehole rehabilitation and water testing. B. 20 families will receive clean jerry cans for water transport and storage. In collaboration with Community Health Workers (who will also assist in translation), families will be instructed in proper hygienic use of cans to prevent cross-contamination. C. 4 Community Health Workers will be instructed in proper operation and maintenance of medical incinerator to improve sanitation.	A. 100% (6) male; age 18+ B. 100% (20) female; all ages C. 50% (2) male, 50% (2) female CHW's; age 18+
X (7)	4.	People served by solid waste management. • A medical incinerator will provide proper destruction of medical waste from the PHCC to improve sanitation in the village.	1 medical incinerator built Old Fangak PHCC serving the community approximately 5,000. • 1,400 men, 1,400 women • 1,100 age 0-14 boys, 1,100 age 0-14 boys
	5.	No, of water quality tests undertaken	7 water wells (4 existing and 3 new) will be tested
	6.	No. of research projects conducted on water use practices	1 study on water use practices completed in Old Fangak
	7.	Training and tools provided to Old Fangak WASH Committee	At least 1 training and 'some' tools provided to Old Fangak WASH Committee

vi) Implementation Mechanism

Describe planned mechanisms for implementation of the project. Explain if it is implemented through implementing partners such as NGOs, government actors, or other outside contractors.

- New boreholes will be constructed under leadership of an ASMP lead drilling volunteer and a contracted professional borehole driller. A team of 6 local apprentice drillers will receive hands-on training in well drilling. Day laborers will provide support in digging mud pits, transporting and setting up well drilling and installation equipment.
- Existing boreholes and hand pumps will be rehabilitated as needed by the local WASH Water Committee under consultation by ASMP's drilling contractor and the ASMP Project Manager. The WASH Committee will be given the proper tools, supplies and support as needed.
- A medical Incinerator will be constructed by ASMP volunteers, Project Manager, and local laborers. Instruction of CHWs about proper use of medical incinerator will be collaboration between ASMP's Project Manager and the PHCC Clinic Director.
- Hygienic water jerry cans will be distributed in communities receiving new water points by ASMP Project Manager and a lead volunteer. Training will include proper hygienic use of jerry cans to avoid cross-contamination, as well as further instruction as to the health benefits of well water versus river water.
- A research volunteer will conduct further research on water usage practices in Fangak County, including further studying gender issues.

ASMP will implement this program through its proven method of utilizing volunteers, and local staff and apprentices under the guidance of an experienced well-drilling contractor and a committed professional volunteer geologist.

vii) Monitoring and Reporting Plan

Describe how you will monitor and report on the progress and achievements of the project. Notably:

1. Explain how will you measure whether a) Activities have been conducted, b) Results have been achieved, c) Cross-cutting issues have been addressed, and d) Project objectives have been met
2. Indicate what monitoring tools and technics will be used
3. Describe how you will analyze and report on the project achievements
4. Ensure key monitoring and reporting activities are included in the project workplan (Section III)[2].

1. Successful completion of new boreholes will be assessed and recorded by the ASMP country Project Manager and ASMP Program Director.
    a. Activities of Fangak County implementing teams will be recorded by the country Project Manager who will report to Program Director, the focal point contact for this project.
    b. Results, including the number of water wells and flow rates, the number of trainings conducted, implementation of medical incinerators, and other key outputs will be recorded by the country Project Manager who will report to Program Director.
    c. Cross-cutting issues will be addressed by the inclusivity of apprenticeship trainings, water hygiene trainings, and the further assessment of water use practices in Old Fangak, which will be conducted by a volunteer dedicated to this task.
2. Output and quality of new water points and rehabilitated water points will be assessed by measuring sustainable flow rates and quality of water. The country Project Manager will record all information and report to Program Director. Records and logs will be kept of all trainings held for well-drilling apprentices and WASH Committee members. Written documentation

[2] CHF minimum narrative reporting requirements will include the submission of a final narrative report and where applicable a narrative mid-term report. Narrative reports will include a progress on the project achievements using the outputs indicators listed in this project proposal.

and photos will be taken of all project activities.

3. Completion of project objectives will be assessed by the local Project Manager in collaboration with the Program Director. These assessments will be made on-site after consultation with all team members. Reports will be given to the Program Director, who will analyze and further report the activities of ASMP to other partners.
4. The Program Director will ensure timely completion of narrative reports including project achievements based on output indicators as required in a timely manner.

D. Total funding secured for the CAP project
Please add details of secured funds from other sources for the project in the CAP.

Source/donor and date (month, year)	**Amount** (USD)
GlobalGiving Clean Water campaign donors (July, 2013)	$7,000
Individual private donors to ASMP	$40,000
Pledges for the CAP project	
ASMP continues to actively solicit pledges.	TBD

SECTION III:

The logical framework is a tool to present how the implementation of CHF funded activities and their results (outputs and outcomes) will contribute to achieving higher level humanitarian results (project and cluster objectives) and how these results will be measured.
Fill in the logical framework below for this project proposal ensuring the information provided is in accordance with the strategies and activities described in the narrative section of this proposal, in particular section C.

LOGICAL FRAMEWORK		
CHF ref./CAP Code: SSD-13/WS/55979/R/14573	**Project title:** Old Fangak Clean Water Project	**Organisation**: Alaska Sudan Medical Project (ASMP)

	Cluster Priority Activities for this CHF Allocation: *What are the Cluster Priority activities for this CHF funding round this project is contributing to:*	**Indicators of progress:** *What are the key indicators related to the achievement of the CAP project objective?*	**How indicators will be measured:** *What are the sources of information on these indicators?*	
Overall Objective	• New/ additional water points constructed • Existing water points rehabilitated • Community members trained on management of water, sanitation and hygiene services. • People served by solid waste management.	• Construction of three new boreholes in bomas around Old Fangak Payam. • Rehabilitation of existing water wells in Old Fangak • Water quality testing of all water wells in the community • Further research on water use practices including researching gender issues related to water usage. • Provide hands-on training to 6 well drillers • Strengthen and provide training and tools to the local Old Fangak WASH Committee • Construct medical incinerator to dispose bio-hazardous medical waste from the PHCC • Train four CHW's in the proper use and maintenance of medical incinerator.	• Number of new boreholes constructed • Number of water wells rehabilitated • Number of wells tested and results of water tests • Number of well drillers trained, number of days receiving training • Number of supplies given to WASH Committee and trainings performed • Number of medical incinerators constructed • Number and names of families given jerry cans and receiving instruction on hygienic water practices will be recorded • Number of CHW's in the proper use and maintenance of medical incinerator.	

Purpose	**CHF Project Objective:** *What are the specific objectives to be achieved by the end of this CHF funded project?* • Increase access to clean water in Fangak County by approximately 15,000. • Provide training to well drillers and will strengthen and provide training to the existing community WASH Committee in Old Fangak. • Improve sanitation conditions in Old Fangak • Promote hygienic water practices to communities in Fangak County	**Indicators of progress:** *What indicators will be used to measure whether the CHF Project Objectives are achieved. Indicators may be quantitative and qualitative* • Number of beneficiaries served by new water wells and rehabilitated water wells • Number of well drillers trained, number of days receiving training • Number of supplies given to WASH Committee and trainings performed • Construction of medical incinerator • Decrease in medical waste in community • Jerry cans distributed to 20 families • Instructions given on hygienic water practices	**How indicators will be measured:** *What sources of information already exist to measure this indicator? How will the project get this information?* • New water well location, output and quality will be documented and photographed • Rehabilitated water points, output and quality will be documented and photographed • Names and hours of training received by well drilling trainees will be documented • Medical incinerator location will be documented; photos taken • Number and names of families given jerry cans and receiving instruction on hygienic water practices will be recorded	**Assumptions & risks:** *What factors not under the control of the project are necessary to achieve these objectives? What factors may get in the way of achieving these objectives?* • Logistics and shipping challenges could delay or halt delivery of supplies needed to complete objectives • Environmental factors such as floods could delay implantation of objectives • Security situation could deteriorate and delay or halt activities
Results	**Results - Outcomes (intangible):** *State the changes that will be observed as a result of this CHF Project. E.g. changes in access, skills, knowledge, practice/behaviors of the direct beneficiaries*. • Improved health due to increased number of families accessing potable water • Improved health as a result of improved water sources, hygienic practices and sanitation • Increase capacity of locals to construct boreholes and repair water sources	**Indicators of progress:** *What are the indicators to measure whether and to what extent the project achieves the envisaged outcomes?* • A decrease in number of water borne illnesses in the catchment area • Improved skills and capacity of locals in drilling boreholes and repairing water wells	**How indicators will be measured:** *What are the sources of information on these indicators?* • Observation of PHCC clinic staff on the number of water borne illnesses, including diarrhea, reported • Demonstration of improved abilities by locals to construct boreholes and repair water wells as observed by ASMP	**Assumptions & risks:** *What factors not under the control of the project are necessary to achieve the expected outcomes? What factors may get in the way of achieving these objectives?* • Under-utilization of clean water sources by locals due to behavioural barriers
	Immediate-Results - Outputs (tangible): *List the products, goods and services **(grouped per areas of work)** that will result from the implementation of project activities. Ensure that the outputs are worded in a manner that describes their contribution to the outcomes.* • Three new water wells bring potable water to 15,000 families • Existing water points in Old Fangak rehabilitated to serve 5,000 people • Community members trained on management of water, sanitation and hygiene services. • People served by solid waste management. • 1 study completed on water use practices in targeted communities	**Indicators of progress:** *What are the indicators to measure whether and to what extent the project achieves the envisaged outputs?* *Ensure the indicators identified in Section II (v) of this proposal are adequately inserted in this section.* • Number of new water wells constructed • Number of water points rehabilitated • Number of well drilling apprentices trained; number of total days of training • Number of families receiving clean jerry cans and training in hygienic water practices • Number of medical incinerators constructed • Number of CHW's trained in medical incinerator operation • Number of water use practice studies completed	**How indicators will be measured:** *What are the sources of information on these indicators?* • ASMP staff will record: • New water well location, output and quality will be documented and photographed • Rehabilitated water points, output and quality will be documented and photographed • Names and hours of training received by well drilling trainees will be documented • Medical incinerator location will be documented; photos taken • Number and names of families given jerry cans and receiving instruction on	**Assumptions & risks:** *What factors not under the control of the project are necessary to achieve the expected outcomes? What factors may get in the way of achieving these objectives?* • Logistics and shipping challenges could delay or halt delivery of supplies needed to complete objectives • Environmental factors such as floods could delay implantation of objectives Security situation could deteriorate and delay or halt activities

			hygienic water practices will be recorded	
	Activities: *List in a chronological order the key activities to be carried out. Ensure that the key activities will results in the project outputs.* • Construction of three new boreholes in project area • Provide hands-on training to 6 well drillers • Rehabilitation of existing water wells in Old Fangak as needed; approximately 2 • Water quality testing of all existing water wells, new water wells and rehabbed water wells in Old Fangak • Strengthen and provide training and tools to the local Old Fangak WASH Committee • Construct medical incinerator to dispose bio-hazardous medical waste from the PHCC • Train four CHW's in the proper use and maintenance of medical incinerator. • Research project into water use practices	**Inputs:** *What inputs are required to implement these activities, e.g. staff time, equipment, travel, publications costs etc.?* • Staff purchases necessary equipment and supplies, arranges for transportation to Old Fangak • Volunteers and contractors perform necessary travel to Old Fangak to oversee implementation of activities • Staff present in Nairobi, Juba and Old Fangak perform logistics of transporting additional supplies and volunteers to project area • Volunteers and local staff and apprentices transport materials to borehole sites to conduct • Identify and recruit local well drilling apprentices and medical incinerator operators • ASMP volunteers, staff and apprentices construct boreholes and medical incinerator • Assist Committee in identifying wells needing upkeep and repair; assist in those activities as needed • Lead ASMP volunteer conducts water usage survey • ASMP staff/volunteers test water wells for water quality		**Assumptions, risks and pre-conditions:** *What pre-conditions are required before the project starts? What conditions outside the project's direct control have to be present for the implementation of the planned activities?* • Funding needs to be in place to purchase materials and transport to Old Fangak • Necessary transport and logistical chains need to be operational to carry out activities • Security situation needs to be safe for volunteers and staff to operate in project areas • Environment (i.e. lack of floods) needs to be suitable to carry out activities

PROJECT WORK PLAN

This section must include a workplan with clear indication of the specific timeline for each main activity and sub-activity (if applicable).
The workplan must be outlined with reference to the quarters of the calendar year.

Project start date:	**15 August 2013**	**Project end date:**	**15 April 2014**

Activities	**Q3/2013**			**Q4/2013**			**Q1/2014**			**Q2/2014**			**Q3/2014**		
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Activity 1 Purchase all materials needed for Project Activities		X	X												
Activity 2 Ship necessary items to Fangak County				X											
Activity 3 Volunteers and contractor arrive in Old Fangak to begin borehole drilling operations					X										
Activity 4 Perform borehole drilling and well implementation, including training					X	X									
Activity 5 Distribute hygienic jerry cans, including water hygiene training							X								
Activity 6 Rehabilitate water points as needed, including training							X	X							
Activity 7 Construct medical incinerator, including training on proper use and maintenance							X	X							
Activity 8 Complete all activities in project, including monitoring and reporting								X	X						
Activity 9 Submit final reports as needed										X					