

CHF Allocation Revision/No-Cost Extension Request Form

The CHF Technical Secretariat will compile all requests for the Humanitarian Coordinator's final review and approval.

Requests sent directly to the HC will be delayed in processing.

For further CHF information please visit: <http://www.unocha.org/south-sudan/financing/common-humanitarianfund> or contact the CHF Technical Secretariat.

Instructions:

Complete this request form and submit to the CHF Technical Secretariat at CHFsouthsudan@un.org and copy kizit@un.org.

Any major changes made to the original allocation as stipulated in the approved project documents must have the endorsement of the cluster coordinator with final approval made by the Humanitarian Coordinator. No-cost extension requests should be well justified and submitted at least two weeks before expiration of approved project duration.

For CHF Technical Secretariat:

<input type="checkbox"/>	AA/ UNDP Informed	Date: _____	By: _____
<input type="checkbox"/>	Cluster Coordinator Informed	Date: _____	By: _____
<input type="checkbox"/>	Grantee Informed	Date: _____	By: _____
<input type="checkbox"/>	CHF Database Updated	Date: _____	By: _____

Allocation ID (CHF TS to fill in): 14/SA1/0422

Section 1 – Project Details

Date of Request	2 June 2014, resubmitted 23 June 14	Cluster	Health
Organization Name:	COSV	Contact Name:	Olore Peter Claver
Project Code:	SSD 14/H/60382	Date of Allocation:	16 th Jan 2014
Location:	Ayod County	Contact Email/Tel No.:	cosv.countryrjuba@gmail.com 0920429262
Duration (start and end date as PPA/agreement):	1 April 2014 – 30 June 2014	Amount Allocated:	US\$ 85,000
Project Title:	Enhancing emergency primary health care services among the vulnerable communities of Ayod County (Jonglei State)		

Section 2 – Revision Type/Reason for No-Cost Extension

<p>Type of Revision: Indicate the type (s) of revision being requested.</p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Significant change in activities</td> <td><input type="checkbox"/> Change in location</td> </tr> <tr> <td><input type="checkbox"/> Change in outputs</td> <td><input checked="" type="checkbox"/> Change in budget</td> </tr> <tr> <td><input type="checkbox"/> Change in target beneficiaries</td> <td><input type="checkbox"/> Change in recipient org</td> </tr> <tr> <td><input checked="" type="checkbox"/> Change in project duration/NCE</td> <td>Other Specify: _____</td> </tr> </table> <p style="text-align: center;">No. of month requested: 1 New end date: 31st July 2014</p>	<input type="checkbox"/> Significant change in activities	<input type="checkbox"/> Change in location	<input type="checkbox"/> Change in outputs	<input checked="" type="checkbox"/> Change in budget	<input type="checkbox"/> Change in target beneficiaries	<input type="checkbox"/> Change in recipient org	<input checked="" type="checkbox"/> Change in project duration/NCE	Other Specify: _____	<p>Reason for NCE: Indicate reason (s) for no-cost extension.</p> <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Insecurity</td> <td><input checked="" type="checkbox"/> Programmatic delays</td> </tr> <tr> <td><input checked="" type="checkbox"/> Inaccessibility</td> <td><input type="checkbox"/> Delays in finalizing PPA</td> </tr> <tr> <td><input type="checkbox"/> Staffing/recruitment delays</td> <td><input type="checkbox"/> Delays in disbursement of funds</td> </tr> <tr> <td><input type="checkbox"/> Internal admn delays</td> <td><input type="checkbox"/> Delays in organization's internal transfer of funds</td> </tr> <tr> <td><input type="checkbox"/> Procurement delays</td> <td><input type="checkbox"/> Delay in securing supplies from pipeline</td> </tr> </table> <p style="text-align: center;">Other Specify: _____</p>	<input checked="" type="checkbox"/> Insecurity	<input checked="" type="checkbox"/> Programmatic delays	<input checked="" type="checkbox"/> Inaccessibility	<input type="checkbox"/> Delays in finalizing PPA	<input type="checkbox"/> Staffing/recruitment delays	<input type="checkbox"/> Delays in disbursement of funds	<input type="checkbox"/> Internal admn delays	<input type="checkbox"/> Delays in organization's internal transfer of funds	<input type="checkbox"/> Procurement delays	<input type="checkbox"/> Delay in securing supplies from pipeline
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Section 3 – Level of Completion

Provide information what amount of grant and activities have been implemented. Exact amounts and percentages are not necessary approximate numbers are sufficient.

Amount of Funds Spent as of **31 May 2014**

Amount of Funds Unspent as of **31 May 2014**

Amount of Funds Committed But Not Spent by **31 May 2014**

Percentage of Activities Completed as of **2 June 2014**

\$ 17,500.00	21%
\$ 67,500.00	79%
\$ 67,500.00	79%
20%	

Section 4

This section is for the approving official's review.

OCHA South Sudan:

Endorsed by **Mr. Vincent Lelei**, OCHA Head of Office, South Sudan

Review Date

Deputy Humanitarian Coordinator, South Sudan

Approved by **Ms. Sue Lautze**, DHC/FAO Representative, South Sudan

Review Date

Section 5 – Revision Description and Justification

Description and justification of requested change	
<p>Please describe the requested changes to the original allocation and provide detailed background and justification for the proposed revision. CHF revision requests have to be submitted to the Humanitarian Coordinator for any significant changes in the following allocation parameters: major activities, implementation targets, location, allocation amount, recipient organization and/or recipient project, and project duration.</p> <p>To reallocate funds to a new project, please provide a detailed explanation for why the new project was chosen to receive the reallocation.</p> <p>Please provide revision details in the revision table in section 6 of this document.</p>	
<p>With restricted access to opposition areas since war outbreak, Ayod County since Jan till March 2014 was restricted too due to worsening security situations. Ayod PHCC and other 6PHCUs worked with limited resources, as supplies could not be delivered. In March, when restrictions were lifted, following cease fire signed in Jan 23rd, field implementations started. COSV delivered some drugs and COSV team stayed in Ayod for 2 weeks in April, to resume normal humanitarian operations. However, with attacks that was threatening Ayod, staffs were evacuated on 18th April, and fighting that destroyed COSV compound and other program assets (Vehicles, V-sat, staff houses, drug supplies, including some health facilities, etc), occurred in the fighting of 27th and 28th April. COSV eventually lost contact with COSV local field staffs and CHD till May 13th when COSV went for IRNA in Jiech and confirmed the presence of some CHD and COSV staffs. The Community of Kuachdeng and Ayod also were found to have relocated to Jiech, Mogok, Canal, and Gorwai, where services are being re-directed now (and as proposed period of this NCE). The program staffs were not paid since January up to May when payment resumed, mainly due to security restrictions imposed on carrying cash to field. Some COSV regional staffs were hindered from accessing field locations as violence threatened their nationality. As of now, Ayod County is split into two authorities (SPLA and SPLA-IO), making access a delicate balance of approval to be granted. COSV can only access Jiech, Pagil and Menime by flight, as the facilities are the only ones near a recently used airstrip that are accessible.</p> <p>As a way forward, COSV plans to re-open a coordination base in Jiech, and strengthen CHD coordination from Jiech too. At the same time, COSV has proposed to ECHO for support of International staff recruitment in boosting field program management and rapid responses. As a alternative to ECHO support, COSV is working to re-align job roles for expatriate staffs at Juba to increase field movement in bridging the gap for humanitarian coordination and to guarantee corporation of local community and authority. COSV team has already started accessing Jiech and is in discussion with authorities for a new office space. NCE will support recovery of most needed essential health services after the fights. The activities which were planned to be implemented at Ayod PHCC (the main referral facility in Ayod) will be re-directed to strengthen capacity of clinical and diagnostic services in Jiech where majority of the Community have relocated to.</p> <p>The following are the budget changes for implementation into the next three months:</p> <p>A. Budget lines that result reduced more the 20% or canceled in the amended budget:</p> <p>6.0: VEHICLE OPERATING AND MAINTANANCE COST</p> <p>6.1 Fuel for generators (EPI); and 6.2 Generator maintenance (EPI): – these budgets have been cancelled as a result of destruction to PHCC assets reported, that includes generators and cold chain equipments. However, a 1700USD and 745USD respectively had been spent. (-1300 USD, and -1075 USD respectively)</p> <p>7.0: OFFICE EQUIPMENT AND COMMUNICATION</p> <p>7.4 Internet and V-Sat – Following the destruction to the internet in Ayod, the budget shall be transferred. (-721 USD)</p> <p>B. Increase of costs more the 20%</p> <p>1.0: RELIEF ITEMS and TRANSPORTATION</p> <p>1.2: Transport of drugs, equipments, reagents and material – The budget increased due to increased utilization of flight to deliver supplies to remote facilities in the middle of rainy season. Cost of flights increased too, due to limited number of charter aircrafts approved to fly in opposition areas. (+2,355USD)</p> <p>7.0: OFFICE EQUIPMENT AND COMMUNICATION</p> <p>7.3 Phone and Thuraya – The budget line will increase to support purchase of Thuraya for Jiech team, in facilitating IDSR reporting. (+722 USD)</p>	
<p>List activities that were implemented during project period:</p> <p>Most of the activities are planned to be implemented within the all duration of the project.</p> <p>The following activities are ongoing:</p> <ol style="list-style-type: none"> 1) Procurement and provision of basic PHCC/PHCU equipment, basic laboratory supplies and other essential drugs specific missing in MoH or RRHP (IMA) kit; 2) Transport from Juba and field distribution of supplies to facilities, the routine and emergency supplies; 3) Carrying out clinical consultation for Case detection (OPD/Maternity); 4) Provision of Laboratory diagnostic services at PHCCs for case confirmation; 5) Conducting routine immunization in facilities; 6) Conducting routine support supervision 	<p>List outstanding activities:</p> <p>The following activity has not yet been carried out, and efforts are being made to implement in the next one month as access remains feasible:</p> <ol style="list-style-type: none"> 1) Trainings for health staffs on key elements of emergencies that includes: Emergency preparedness and communicable disease control and outbreak response; Emergency obstetrical care, and MISP (minimum initial service package-MISP). 2) Supporting maintenance of cold chain facilities, and drug stores (<i>focusing on Jiech</i>) 3) Carrying out Mobile immunization in hard to reach locations or IDP settlements. 4) Conducting Health awareness on major topics of; hygiene promotion, rational drug use, and other common disease conditions of public health importance. & HIV/AIDS 5) Supporting referral through medevac and road ambulance services; 6) Carry out weekly IDSR

Review remarks by cluster coordinator.	Name of reviewer	Dr. Julius Wekesa
Explain the rationale to endorse or reject the request		
<p>Ayod has been one of the most challenging counties to work in due to insecurity. With massive population displacement and damage to the facilities, the partner couldn't implement planned activities. With some access to the displaced population in surrounding areas including Jiech, the partner requires additional time to utilize the resources allocated to serve these communities. The cluster therefore has no objection to this request. I am available to provide any further clarifications whenever required.</p>		
Review remarks by CHF Technical Secretariat:	Name of reviewer	David Throp
<p>CHF TS reviewed the request for NCE and allocation revision and asked Health cluster coordinator to include his review remarks.</p> <p>CHF TS supports approval of the request based on the justification provided.</p>		

6 - Revision Details			
Original CHF Allocation(s) Details of the original CHF allocations (please insert information from allocation tables).		Proposed Revised Allocation(s) Details on proposed revised allocations.	
Output	<ol style="list-style-type: none"> 1) Total direct beneficiaries (Women, Girls, Men, Boys) - 14,150 (4,806 Women; 2,502 Girls; 3,580 Men; 3,262 Boys) 2) Number of consultations, 5 years or older (Men, Women) - 8,106 (4,546 Women; and 3,560 Men) 3) Number of <5 consultations (Boys, Girls) - 5,758 (2,499 Girls; and 3,259 Boys) 4) Number of births attended by skilled birth attendants - 18 births 5) Proportion of communicable diseases detected and responded to within 72 hours - 95% of outbreaks 6) Percentage DPT3 coverage in children under 1 - 50% 7) % of pregnant women receiving at least 2nd dose of TT vaccination - 65% 8) Number of antenatal clients receiving IPT2 second dose - 248 Women 9) Number of health workers trained in MISP / communicable diseases / outbreaks / CMR (Women, Men) - 22 (6 Women; 16 Men) 10) Number of emergency referrals supported - 16 (6 Women; 3 Girls; 4 Men; 3 Boys) 	Output	The proposed amendment does not forecast any change in the outputs
Key Activities	<ol style="list-style-type: none"> 1) Procurement and provision of basic PHCC/PHCU equipment, basic laboratory supplies and other essential drugs specific missing in MoH or RRHP (IMA) kit; 2) Transport from Juba and field distribution of supplies to facilities, the routine and emergency supplies; 3) Carrying out clinical consultation for Case detection (OPD/Maternity); 4) Provision of Laboratory diagnostic services at PHCCs for case confirmation; 5) Supporting referral through medevac and road ambulance services; 6) Supporting maintenance of cold chain facilities, and drug stores 7) Conducting routine immunization in facilities; 8) Carrying out Mobile immunization in hard to reach locations or IDP settlements. 9) Trainings for health staffs on key elements of emergencies that includes: Emergency preparedness and communicable disease control and outbreak response; Emergency obstetrical care, and MISP (minimum initial service package-MISP). 10) Conducting routine support supervision 11) Conducting Health awareness on major topics of; hygiene promotion, rational drug use, and other common disease conditions of public health importance. & HIV/AIDS 12) Preparing and sending weekly IDSR report 	Key Activities	<p>The proposed amendment only forecast change in key activity locations, following the relocation of community after fighting in Ayod on 27th – 28th April. The activities will include:</p> <ol style="list-style-type: none"> 1) Procurement and provision of basic PHCC/PHCU equipment, basic laboratory supplies and other essential drugs specific missing in MoH or RRHP (IMA) kit; 2) Transport from Juba and field distribution of supplies to facilities, the routine and emergency supplies; 3) Carrying out clinical consultation for Case detection (OPD/Maternity); 4) Provision of Laboratory diagnostic services for case confirmation; 5) Supporting referral through medevac; 6) Supporting maintenance of cold chain facilities, and drug stores 7) Conducting routine immunization in facilities; <i>(focus will be on Jiech PHCU as other cold chain infrastructure were destroyed during fighting, while Wau PHCU remains in-accessible)</i> 8) Carrying out Mobile immunization in hard to reach locations or IDP settlements. 9) Trainings for health staffs on key elements of emergencies that includes: Emergency preparedness and communicable disease control and outbreak response; Emergency obstetrical care, and MISP (minimum initial service package-MISP). 10) Conducting routine support supervision 11) Conducting Health awareness on major topics of; hygiene promotion, rational drug use, and other common disease conditions of public health importance. & HIV/AIDS 12) Preparing and sending weekly IDSR report

Locations (specify county):	Ayod County - Jonglei		Locations (specify county):	The proposed amendment does not forecast any change in the County location. However, following fighting in Ayod town from 27 th -28 th April, the community relocated to remote villages (Boma) of; Jiech, Mogok, Canal, Pagil - where activities will be focused in the NCE.		
Beneficiaries:	Women: 4,806 Girls: 2,502 Men: 3,580 Boys: 3,262 TOTAL: 14,150 Indirect beneficiaries: 157,242		Beneficiaries:	The proposed amendment does not forecast any change in the beneficiaries: Women: 4,806 Girls: 2,502 Men: 3,580 Boys: 3,262 TOTAL: 14,150 Indirect beneficiaries: 157,242		
Duration:	3 months (1 April 2014 – 30 June 2014)		Duration	4 months (1 April 2014 – 31 July 2014)		
Indicative CHF Budget:	Relief Items and Transportation	31,301	Indicative CHF Budget:	Relief Items and Transportation	33,759	
	Personnel	22,740		Personnel	22,740	
	Staff Travel	2,400		Staff Travel	2,400	
	Training/Workshop/Seminar/Campaign	2,750		Training/Workshop/Seminar/Campaign	2,750	
	Contracts/ Sub grant	-		Contracts/ Sub grant	-	
	Vehicle Operating and Maintenance Costs	6,600		Vehicle Operating and Maintenance Costs	4,245	
	Office Equipment and Communication	10,059		Office Equipment and Communication	10,059	
	Other Costs	2,700		Other Costs	2,700	
	Programme Support Costs (PSC)	5,506		Programme Support Costs (PSC)	5,506	
	Audit cost (NGOs only)	842		Audit cost (NGOs only)	842	
	Total:	85,000		Total:	85,000	