



Project Proposal

Organization	WARDI (WARDI Relief and Development Initiatives)					
Project Title	Provision of integrated Primary Health Care Services in Bulu Burto/Maxas Districts in Hiraan region					
CHF Code	CHF-DDA-3485-712					
Primary Cluster	Health	Secondary Cluster				
CHF Allocation	Standard Allocation 1 (Feb 2015)	Project Duration	12 months			
Project Budget	240,000.00					
HRP Details	HRP Code	SOM-15/H/71829	HRP Budget	490,000.00		
	HRP Project Ranking	A - HIGH	HRP Gender			
Project Beneficiaries	Marker			Men	Women	Total
	Beneficiary Summary			2,100	5,000	7,100
				Boys	Girls	Total
				4,300	5,000	9,300
				Total		16,400
	Total beneficiaries include the following:					
	Children under 5			4,500	4,500	9,000
	Pregnant and Lactating Women			0	4,300	4,300
Trainers, Promoters, Caretakers, committee members, etc.			40	60	100	
People in HE and/or AFLC			1,500	1,500	3,000	
Implementing Partners	Partner			Budget		
	WARDI			0.00		
				0.00		
Organization focal point contact details	Name: Hussein Abdi Isak Title: Chairman					
	Telephone: +252615501688 E-mail: wardiorg@yahoo.com					

BACKGROUND INFORMATION

<p>1. Project rationale. Humanitarian context: Give a specific description of the humanitarian situation in the target region based on newest data available (indicate source) (Maximum of 1500 characters)</p>	<p>The Humanitarian situation in the target locations are currently classified as being at critical. In its nutrition update December 2014, FSNAU warned earlier in the year that failed rains, rising food prices and security incidents in south and central regions was likely to worsen the food security, nutrition in the coming months. The health situation in the target districts reflects the critical situation of most of South Central Somalia where the delivery of health services has been deeply affected by the long crisis and the security problem. The humanitarian situation in the recent elaborated districts including Maxas is described as dire with low coverage of basic services; e.g. communicable disease burden is on the rise as witnessed by frequent disease outbreaks; one adult and three under five deaths were reported over the past three months mainly due acute water diarrhea, measles and ARI. An estimated 80% of target population do not have access to basic health care and the delivery system for health care services is highly fragmented. At the end of project a total of 16400 beneficiaries including children under five, PLW, elders.</p>
<p>2. Needs assessment. Describe the capacities in place, then identify the gaps (previous and new). Explain the specific needs of your target group(s) in detail. State how the needs assessment was conducted (who consulted whom, how and when?). List any baseline data</p>	<p>According to HMIS and IDSR data collected by health partners, Malaria, acute respiratory tract infections, AWD, malnutrition and anemia are among the top causes of morbidity and mortality. Nonetheless, injuries from gunshots and other forms of trauma have also been reportedly widespread and among the top causes of morbidity and mortality in the affected places. With basic service delivery systems and infrastructure already disrupted morbidity and mortality in the affected districts might exceed the epidemic threshold. The current scenario may be further exacerbated by outbreak of a new wave of fighting in the conflict affected areas in Bulu Burto areas. Access and utilization of health services remain limited in the target districts. Morbidity and mortality data (MICS 2006) showed that there are high maternal and neonatal mortality, this due to low coverage of EPI and poor quality of antenatal and postnatal care. One in four pregnant women attends at antenatal care. About 80% of women deliver at home, immunization coverage is low and there is high dropout rate. The situation is expected to deteriorate to serious based on the current fighting between government and opposed factions might cause displacement of persons. This group is highly vulnerable to shocks that could push them back to food security crisis. Lifesaving humanitarian assistance and livelihood support are vital 2015 to help meet immediate needs.</p>
<p>3. Activities. List and describe the activities that your organization is currently implementing to address these needs</p>	<p>WARDI is currently implementing the following projects in the targeted districts: (1) Belet Weyne and Mataban- WASH projects in partnership with CHF/OCHA, UNICEF and IOM. (2) Beletweyne and Mataban- Primary health care in partnership with CHF/OCHA, UNICEF and UNFPA (3) Beletweyne district-Integrated PHC in partnership with UNICEF (4) WARDI is the focal point of the WASH Hiran region hub supply, (5) WARDI is WASH cluster deputy chair of the Hiran region and Health cluster Chair of Hiran region. (6) The Organization manages Hiran region Cold chain in partnership with UNICEF (7) WARDI is regional focal point for health cluster in Hiran region</p>

LOGICAL FRAMEWORK

Objective 1	To improve access to health care services to target beneficiaries in Bulu Burto and Maxas districts in Hiran region.
Outcome 1	Maternal and child health (MCH) service improved through quality and effective health services targeting 16400 direct beneficiaries with equal access to boys, girls, women and men in Hiran region
Activity 1.1	Provide primary health care services to host communities through two health center-Ceelgaab and Bog abeeso in Maxas and Buloburte districts respectively with equal access to boys, girls, women and men.
Activity 1.2	Rehabilitate two existing health facilities in Maxas and Buloburte to enable delivery of comprehensive Primary Health care services. support will include staff incentive, renovation of district cold chains, rehabilitation of rooms and toilets.
Activity 1.3	

Indicators for outcome 1		Cluster	Indicator description	Target
	Indicator 1.1	Health	Number of consultations per clinician per day by Health facility	30
	Indicator 1.2	Health	Number of health facilities supported	2
	Indicator 1.3	Health		0
Outcome 2	Reduced morbidity and mortality related communicable diseases through community-based prevention of and response to common illnesses			
Activity 2.1	Support and Expand Disease Surveillance& Response in the two health facilities in Hiran region.			
Activity 2.2	Provide diagnosis and treatment of common childhood illness with equal access to 4300 boys,5000 girls in Hiran region			
Activity 2.3	Conduct health promotion sessions and awareness campaign in two health facilities to 70 community members on the most common diseases including acute watery diarrhoea (AWD), malaria and malnutrition-related morbidity among the most vulnerable IDPs and their host communities ensuring equal participation of women, men			
Indicators for outcome 2		Cluster	Indicator description	Target
	Indicator 2.1	Health	Number of health facilities supported	2
	Indicator 2.2	Health	number of boys and girls treated	9300
	Indicator 2.3	Health	number of health promotion sessions conducted	2
Outcome 3	The capacity of 15 health care providers and 15 CHWs enhanced through training on common illnesses and IMCI.			
Activity 3.1	Provide a refresher training to 15 health care providers (8 women, 7 men) on common illnesses and integrated management of childhood illnesses, surveillance and response to communicable disease outbreaks.			
Activity 3.2	Train 15 community health workers (10 women,5 men). Training will include community mobilization,newborn and young child health messages, common illnesses and malnutrition-related morbidity, hygiene promotion, and response to disease outbreaks			
Activity 3.3				
Indicators for outcome 3		Cluster	Indicator description	Target
	Indicator 3.1	Health	Number of health workers trained on common illnesses and/or integrated management of childhood illnesses, surveillance and emergency preparedness for communicable disease outbreaks.	15
	Indicator 3.2	Health	Number of CHW trained on surveillance of common illnesses and malnutrition related morbidity	15
	Indicator 3.3			0

WORK PLAN

Implementation: Describe for each activity how you plan to implement it and who is carrying out what

WARDI proposes of continues of two health facilities (one in Bulburto and other one in Maxas) for a period of 12 months. the facilities will be provided with essential drugs, supplies to ensure steady supply. Routine immunization activities will be carried out in the facilities by trained nurses. Qualified nurses will be engaged to diagnose and treat common illnesses. Skilled midwives will provide antenatal and delivery services to reduce the high maternal and infant morbidity and mortality. The PHC officer will ensure the routine field activities are ongoing as required. To enhance the competence and service delivery WARDI will train 15 health workers on IMCI and BeMoC .The target communities will be involved from the project design, plan, implementation through series of meetings and other informal forums. Quarterly meetings will be held with the community members and other stakeholders to update them on project activities and get their valuable input on how best to achieve the desired goals. There is the risk of insecurity in the project area to avert this risk WARDI will closely engage the local leaders, government officials and the community to pre-empt any possible threat. The organization will adhere to the humanitarian principle of cause no harm at all times. The staff to be involved in the project include; 1. program manager 1(GA) 2. Finance officer(B9) 3. HMIS officer(B9) 4. midwives(B9) 5. Nurses(B9), 6. Auxiliary nurses(C11) 7. Vaccinators(C11).

Project workplan for activities defined in the Logical framework

Activity Description	Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Month 11-12
Activity 1.1 Provide primary health care services to host communities through two health center-Ceelgaab and Bog abeeso in Maxas and Bulburte districts respectively with equal access to boys, girls, women and men.	X	X	X	X	X	X
Activity 1.2 Rehabilitate two existing health facilities in Maxas and Bulburte to enable delivery of comprehensive Primary Health care services. support will include staff incentive, renovation of district cold chains, rehabilitation of rooms and toilets.	X	X				
Activity 1.3	X	X	X	X	X	X
Activity 2.1 Support and Expand Disease Surveillance& Response in the two health facilities in Hiran region.	X	X	X	X	X	X
Activity 2.2 Provide diagnosis and treatment of common childhood illness with equal access to 4300 boys,5000 girls in Hiran region	X	X	X	X	X	X
Activity 2.3 Conduct health promotion sessions and awareness campaign in two health facilities to 70 community members on the most common diseases including acute watery diarrhoea (AWD), malaria and malnutrition-related morbidity among the most vulnerable IDPs and their host communities ensuring equal participation of women, men		X				
Activity 3.1 Provide a refresher training to 15 health care providers (8 women, 7 men) on common illnesses and integrated management of childhood illnesses, surveillance and response to communicable disease outbreaks.	X					
Activity 3.2 Train 15 community health workers (10 women,5 men). Training will include community mobilization,newborn and young child health messages, common illnesses and malnutrition-related morbidity, hygiene promotion, and response to disease outbreaks		X				
Activity 3.3						

M & E DETAILS

Activity Description	M & E Tools to use	Means of verification	Month (s) when planned M & E will be done											
			1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1 Provide primary health care services to host communities through two health center-Ceelgaab and Bog abeeso in Maxas and Buloburte districts respectively with equal access to boys,girls,women and men.	- Contact details - Field visits - Photo with or without GPS data	Monthly HMIs, report, weekly IDSR			X			X		X				X
Activity 1.2 Rehabilitate two existing health facilities in Maxas and Buloburte to enable delivery of comprehensive Primary Health care services. support will include staff incentive,renovation of district cold chains, rehabilitation of rooms and toilets.	- Field visits - Photo with or without GPS data	photos before and after rehabilitation			X			X		X				X
Activity 1.3	- Data collection - Distribution monitoring - Photo with or without GPS data				X			X		X				X
Activity 2.1 Support and Expand Disease Surveillance& Response in the two health facilities in Hiran region.	- Contact details - Data collection	Monthly HMIs, report, weekly IDSR			X			X		X				X
Activity 2.2 Provide diagnosis and treatment of common childhood illness with equal access to 4300 boys,5000 girls in Hiran region	- Contact details - Data collection	Monthly HMIs, report, weekly IDSR			X			X		X				X
Activity 2.3 Conduct health promotion sessions and awareness campaign in two health facilities to 70 community members on the most common diseases including acute watery diarrhoea (AWD), malaria and malnutrition-related morbidity among the most vulnerable IDPs and their host communities ensuring equal participation of women, men	- Distribution monitoring - Photo with or without GPS data	Monthly HMIS report			X			X		X				
Activity 3.1 Provide a refresher training to 15 health care providers (8 women, 7 men) on common illnesses and integrated management of childhood illnesses, surveillance and response to communicable disease outbreaks.		Training report,modules					X							
Activity 3.2 Train 15 community health workers (10 women,5 men). Training will include community mobilization,newborn and young child health messages, common illnesses and malnutrition-related morbidity, hygiene promotion, and response to disease outbreaks	- Contact details	training report,modules					X							
Activity 3.3														

OTHER INFORMATION

Coordination with other Organizations in project area	Organization	Activity
	1. UNICEF	provision EPI supplies and drugs
	2. WHO	Technical support and emergency kits
	3. OXFAM	Management of Moderate Acute Malnutrition
	4. WARDI	Act as regional health focal point and support coordination meetings.
	5. IOM	Provision of safe drinking water
	6. UNFPA	SupportBeMOC training and RH kits
	7. Protection Cluster	UNFPA will support GBV stop center

Gender theme support	Yes
Outline how the project supports the gender theme	As per the Somalia Health Policy, emergency health interventions are free and are not discriminatory; therefore both girls and boys as well as men and women will be targeted equally with no discrimination, including on the basis of gender. However, sexual and reproductive health interventions will specifically target women of reproductive age, pregnant and lactating women.Other services that will be offered including outpatient services and health education will also target men.

Select (tick) activities that supports the gender theme	<input checked="" type="checkbox"/> Activity 1.1: Provide primary health care services to host communities through two health center-Ceelgaab and Bog abeeso in Maxas and Buloburte districts respectively with equal access to boys,girls,women and men.
	<input checked="" type="checkbox"/> Activity 1.2: Rehabilitate two existing health facilities in Maxas and Buloburte to enable delivery of comprehensive Primary Health care services. support will include staff incentive,renovation of district cold chains, rehabilitation of rooms and toilets.
	<input type="checkbox"/> Activity 1.3:
	<input checked="" type="checkbox"/> Activity 2.1: Support and Expand Disease Surveillance& Response in the two health facilities in Hiran region.
	<input checked="" type="checkbox"/> Activity 2.2: Provide diagnosis and treatment of common childhood illness with equal access to 4300 boys,5000 girls in Hiran region
	<input checked="" type="checkbox"/> Activity 2.3: Conduct health promotion sessions and awareness campaign in two health facilities to 70 community members on the most common diseases including acute watery diarrhoea (AWD), malaria and malnutrition-related morbidity among the most vulnerable IDPs and their host communities ensuring equal participation of women, men
	<input checked="" type="checkbox"/> Activity 3.1: Provide a refresher training to 15 health care providers (8 women, 7 men) on common illnesses and integrated management of childhood illnesses, surveillance and response to communicable disease outbreaks.
	<input checked="" type="checkbox"/> Activity 3.2: Train 15 community health workers (10 women,5 men). Training will include community mobilization,newborn and young child health messages, common illnesses and malnutrition-related morbidity, hygiene promotion, and response to disease outbreaks
<input checked="" type="checkbox"/> Activity 3.3:	

BUDGET

A:1 Staff and Personnel Costs	1.1 International Staff										
	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF	

1.1.1									
1.1.2									
1.1.3									
1.1.4									
1.1.5									
1.1.6									
1.1.7									
1.1.8									
1.1.9									
1.1.10									
Subtotal						0.00	0.00	0.00	

Budget Narrative:**1.2 Local Staff**

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
1.2.1	Senior Programe Manager(75%)	1	4000	12	Month	48,000.00	12,000.00	36,000.00	75.00
1.2.2									
1.2.3									
1.2.4									
1.2.5									
1.2.6									
1.2.7									
1.2.8									
1.2.9									
1.2.10									
Sub Total						48,000.00	12,000.00	36,000.00	

Budget Narrative:**B:2 Supplies, Commodities, Materials**

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
2.1.1	Renovation of two MCHs	1	9000	1	Lump Sum	9,000.00	0.00	9,000.00	100.00
2.1.2	Training of 15 health staff on IMCI guidelines.	1	3625	1	Lump Sum	3,625.00	0.00	3,625.00	100.00
2.1.3	Training of 15 CHWs on maternal,newborn and child health messages.	1	3625	1	Lump Sum	3,625.00	0.00	3,625.00	100.00
2.1.4	Community mobilization workshop	2	1000	1	Lump Sum	2,000.00	0.00	2,000.00	100.00
2.1.5	other staff cost	1	148440	1	lump sum	148,440.00	0.00	148,440.00	100.00
2.1.6	Medical supplies	1	9079.6	1	lumpsum	9,079.60	0.00	9,079.60	100.00
2.1.7	Furniture for 2 MCH	1	1920.4	1	Lumpsum	1,920.40	0.00	1,920.40	100.00
2.1.8									
2.1.9									
2.1.10									
Sub Total						177,690.00	0.00	177,690.00	

Budget Narrative:**C:3 Equipment**

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
3.1.1									
3.1.2									

3.1.3										
3.1.4										
3.1.5										
3.1.6										
3.1.7										
3.1.8										
3.1.9										
3.1.10										
Sub Total							0.00	0.00	0.00	

Budget Narrative:

D:4 Contractual Services

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF	
4.1.1										
4.1.2										
4.1.3										
4.1.4										
4.1.5										
4.1.6										
4.1.7										
4.1.8										
4.1.9										
4.1.10										
Sub Total							0.00	0.00	0.00	

Budget Narrative:

E:5 Travel

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF	
5.1.1	Vehicle rent	1	1700	12	Month	20,400.00	0.00	20,400.00	100.00	
5.1.2	Monitoring visits	1	1050	1	Lump Sum	1,050.00	0.00	1,050.00	100.00	
5.1.3										
5.1.4										
5.1.5										
5.1.6										
5.1.7										
5.1.8										
5.1.9										
5.1.10										
Sub Total							21,450.00	0.00	21,450.00	

Budget Narrative:

F:6 Transfers and Grants to Counterparts

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
-6.1.1									
-6.1.2									
-6.1.3									
-6.1.4									

	6.1.5										
	6.1.6										
	6.1.7										
	6.1.8										
	6.1.9										
	6.6.10										
	Sub Total						0.00	0.00	0.00		
Budget Narrative:											
G:7 General Operating and Other Direct Costs	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF	
	7.1.1	Office stationeries	1	460	1	Lumpsum	460.00	0.00	460.00	100.00	
	7.1.2	office rent	1	500	12	Month	6,000.00	4,200.00	1,800.00	30.00	
	7.1.3	Communication	1	500	12	Month	6,000.00	4,200.00	1,800.00	30.00	
	7.1.4	Utility cost	1	800	1	lumpsum	800.00	0.00	800.00	100.00	
	7.1.5										
	7.1.6										
	7.1.7										
	7.1.8										
	7.1.9										
	7.1.10										
		Sub Total						13,260.00	8,400.00	4,860.00	
Budget Narrative:											
TOTAL							260,400.00	20,400.00	240,000.00		
H.8 Indirect Programme Support Costs	Code	Budget Line Description					Amount(USD)	Organization	CHF	%charged to CHF	
	8.1.1	Indirect Programme Support Costs					0.00	0.00	0.00	0.00	
	GRAND TOTAL							260,400.00	20,400.00	240,000.00	
Other sources of funds											
	Description		Amount	%							
	Organization		20,400.00	7.83							
	Community		0.00	0.00							
	CHF		240,000.00	92.17							
	Other Donors	a)	0.00								
		b)	0.00								
	TOTAL		260,400.00								
LOCATIONS											
Region	District	Location	Standard Cluster Activities			Activity	Beneficiary Description	Number	Latitude	Longitude	P.Code
Hiraan	Bulo Burto	Bulo Burto	Capacity building, Disease surveillance, Drug distribution, Health facilities supported, Infrastructure construction or rehabilitation (Health centre, latrines, hand washing facilities, water etc.), Hygiene promotion, Immunisation campaign, Primary health care services, consultations			MCH services	WCBA,children under five,men	10200	3.851941	45.565115	NA-3803-D13-001
Hiraan	Bulo Burto	Maxaas				PHC services	WCBA,children under five,men	6200	4.39202	46.0884	NB-3815-Q24-001
TOTAL								16,400			
DOCUMENTS											
Document Description											
1. budgetary guidelines and BOQ template											
2. WARDI Budget and BOQ											
3. revised WARDI BOQ											

4. 712 WARDI- Budget and BoQ- final