

Requesting Organization :	Real Medicine Foundation		
Allocation Type :	2nd Round Standard Allocation		
Primary Cluster	Sub Cluster	Percentage	
NUTRITION		100.00	
		100	
Project Title :	Management of Acute Malnutrition in Emergency in Ayod County of former Jonglei State		
Allocation Type Category :	Frontline services		
OPS Details			
Project Code :	SSD-17/H/103511	Fund Project Code :	SSD-17/HSS10/SA2/N/INGO/6542
Cluster :	Nutrition	Project Budget in US\$:	230,999.65
Planned project duration :	6 months	Priority:	Not Applicable
Planned Start Date :	01/08/2017	Planned End Date :	31/01/2018
Actual Start Date:	01/08/2017	Actual End Date:	31/01/2018
Project Summary :	<p>RMF is the only nutrition partner implementing integrated nutrition programs in Ayod County in partnership with UNICEF and WFP. The humanitarian situation in Ayod is deteriorating due to ongoing insurgency in the northern part of Jonglei. The fighting between Juba government and SPLA IO reached Ayod in February 2017 and active combat continued till the end of March causing massive displacement and RMF nutrition centres in Katdalok in Kuach-deng, Mogok in Mogok Payam and Yian in Pajiek Payam were all vandalized and nutrition supplies including compound items looted. RMF then suspended its OTP/TSFP in Katdalok and Yian and OTP/TSFP/SC in Mogok while continued to response to the malnutrition crisis in its remaining active sites- 3 OTPs, 3 TSFPs and 1 SC which are registration high number of beneficiaries and exerting pressure on the limited number of capacitated nutrition team and nutrition supplies. Part of Kuach-deng is now under the Juba government and has no civilian population, some people have started returning to Mogok & others moved toward Wai where World Vision ceased operation in May 2017.</p> <p>A recent FSNMS round 18 puts the GAM rate for Ayod to 17.7% which is critical and above threshold level of 15% and also the most recent FewsNet report shows Ayod is IPC level 4, emergency. This project is designed to enable RMF scale up its response in Ayod through re-establishing an OTP/TSFP & a SC in Mogok, an OTP/TSFP in Wai and strengthening the existing nutrition centers in Gorwai, Jiech and Pagil to reach more beneficiaries and prevent under malnutrition for the most vulnerable at risks. This funding will not only strengthen the OTP, TSFP and SC activities but will also strengthen Community Outreach activities and mobile services. Through the ongoing PCA with UNICEF and FLA with WFP, RMF will continue to get nutrition supplies from UNICEF and WFP for the scale plan.</p> <p>RMF will work closely with WASH, health and FSL partners to ensure synergies and combat the the life threatening malnutrition crisis in Ayod County. The collaboration with county health department and health partner will ensure that necessary services are provided on HIV/AIDS and STIs for community at risk and RMF will integrate information on HIV and STIs transmission and prevention in their routine health education conducted at the facility and the community levels to create awareness on HIV transmission and prevention.</p> <p>RMF will continue to implement its waste management policy; ensuring routine segregation of medical and regular wastes and deposing is done appropriately. Will actively involve the community and discourages the community from deforestation instead encouraging planting of trees, use of cow dung as source of animal manures during crop planting to increase soil fertility and improves soil structure and productivity and promotes the planting of leguminous plants e.g beans, groundnuts and cowpeas as they increase soil nutrients.</p> <p>RMF will continue with its approach of focusing on a person as a whole by providing medical/physical/emotional/economic & social support, accountability & feedback mechanism to ensure complains from the affected population registered and addressed promptly/appropriately. Always encourages the participation of the affected population in management and implementation of the project, all our team on the ground are South Sudanese nationals and some are recruited from the affected populations. RMF team meets and discusses with the Payam administration, local areal leaders/chiefs regularly about the progress, challenges, lessons learnt & way forward. RMF approach ensures transparency in our work, and is shared with the affected population.</p> <p>This proposal is designed in a such that all acute malnourished children (boys/girls) under 5 (SAM & MAM) & Pregnant and Lactating Women to benefit from the project without discrimination. Generally the whole community in the catchment area will be benefi</p>		
Direct beneficiaries :			

Men	Women	Boys	Girls	Total
0	4,203	2,374	2,571	9,148

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	949	1,028	1,977
Pregnant and Lactating Women	0	1,681	0	0	1,681
Internally Displaced People	0	883	593	642	2,118
People in Host Communities	0	1,639	832	901	3,372

Indirect Beneficiaries :

Indirectly the whole population of Ayod County and different communities from the neighboring Counties will benefit from this designed program.

Catchment Population:

The whole population of Ayod County 175,125 projected from 2008 South Sudan Population and Housing Census will benefit from this project and people from the neighboring counties as the population displacement continues due to ongoing insurgency.

Link with allocation strategy :

Following the resumption of hostility in Ayod County in February 2017, there has been massive population displacement, food insecurity and number of life lost due to severe hunger and armed conflict. RMF approach is to respond to the worsening humanitarian situation in Ayod through provision of lifesaving nutrition services for acute malnourished children (boys and girls) under 5 and Pregnant and Lactating Women and avert further malnutrition crisis propagated by external shock.

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$

Other funding secured for the same project (to date) :

Other Funding Source	Other Funding Amount

Organization focal point :

Name	Title	Email	Phone
Dr. Taban Martin Vitale	Team Leader	Taban.Vitale@realmedicinefoundation.org	+211.954.732.012

BACKGROUND

1. Humanitarian context analysis

Most parts of Ayod County are controlled by the SPLA IO and only Ayod center under the SPLA IG. In late February 2017, fighting between the two opposing forces reached to Ayod County and continued until March affecting mainly three Payams (Kuach-deng, Mogok and Pajiek) of Ayod County. RMF nutrition centers; Katdalok in Kuach-deng Payam, Mogok in Mogok Payam and Yian in Pajiek Payam were all vandalized and nutrition supplies/compound items looted during the insurgency and all the three sites remained non-functional. The armed insurgency caused mass displacement of the populations, displaced persons are now integrated with the host communities, it is believed about 10,000 took refuge in Gorwai, 8,000 in Jiech and 6,000 in Pagil although it is difficult to ascertain the actual number in that conflict area where security situation is still fluid and people are still moving from one place to another. The humanitarian situation in Ayod County keeps worsening as fighting is ongoing in the neighboring County Urur. There is continuous population displacements from one territory to another seeking for safety, loss of livelihood and interference with agricultural production now coupled with inflation rate of over 900%, prices of essential foodstuffs have increased so high that most households are not able to afford even the basic food commodities leading to deteriorating food security and worsening the malnutrition situation.

According to South Sudan nutrition cluster report (2016 survey matrix), 46,177 and 74,323 children below the age of five are estimated to be SAM and MAM cases respectively in Jonglei State, of which 4,672 and 10,641 SAM and MAM children respectively are in Ayod County. A recent FSNMS round 18 puts the GAM rate for Ayod to 17.7% which is critical and above threshold level of 15%. The situation has further been worsened following the withdrawal of World Vision from Wai and COSV from Jiech and Pagil in May and October 2016 respectively leaving enormous gaps in service delivery and therefore, the need to scale up nutrition response in Ayod to reduce the GAM rate to acceptable level. The most recent FewNet report shows Ayod is IPC level 4, emergency.

RMF's three sites (Katdalok, Mogok and Yian) remained close and our active sites (Gorwai, Pagil and Jiech) are registering more number of beneficiaries than before and we believed this number will continue to increase as the displaced persons integrated in the host communities begin to access services. And also overtime the population may increase as the whole security situation is unpredictable. This will exact pressure on the limited number of capacitated nutrition staffs and as well as supplies. Some of the people started returning to Mogok while others are moving towards Wai where World Vision had stopped operation hence exposing the population at risk since services are not available which may contribute to morbidity and mortality due to malnutrition and co-infections.

For the past three years the communities in Ayod have never cultivated due to insecurity and depend on the GFD supplied by WFP which has been irregular and not adequate to match the nutrition needs of the whole populations. Now most people have moved to the riverside where they feed on wild fruits/leaves. We have heard and seen that there is severe food insecurity in the area, local authority reported loss of lives due to hunger and this will continue if response is not directed to the area. As a culture, the communities don't report such deaths occurring in the community, this is also complicated by the fact that most of the health facilities are non-functional. In February, RMF registered 6 cases of mortality in its OTP due to severe hunger. This is an opposition area where getting actual number of deaths due to hunger is difficult but is reality.

2. Needs assessment

A recent (April) WFP Rapid Response Mechanism mission conducted in Normanyang, a village about 4-5 hours walk from RMF OTP/TSFP centre in Pagil puts the Proxy GAM at 34.2% and that conducted in Karmoun about 4 hours walk from RMF Jiech site puts the Proxy GAM at 48.1% far from the acceptable level. However the GAM rate in the two locations still remains questionable as the MUAC assessment were done during General Food Distribution (GFD) where populations normally move from various parts of the Counties to the distribution point to receive the supplies.

RMF is in the process of conducting nutritional SMART survey in Ayod, we are in the advance stage and NIWG is so supportive and the assessment will be conducted in Mid-August and that will give us the true picture of malnutrition situation in Ayod. The survey will cover the whole of Ayod County and the result will be representative of the County.

3. Description Of Beneficiaries

The primary beneficiaries are all children under five (boys and girls) with acute malnutrition (SAM and MAM), Pregnant and Lactating Women. Caregivers will also benefit from IYCF services. Indirectly the whole community both the host and IDPs will benefit from the integrated response approach.

A total of 841 SAM and 1533 MAM children (boys) below 5 years of age, and a total of 911 SAM and 1660 MAM children (girls) below 5 years of age will benefit from the program directly. And a total of 4203 PLW will benefit from the project directly.

4. Grant Request Justification

RMF is the only nutrition partner implementing integrated nutrition programs in Ayod County in partnership with UNICEF and WFP. The humanitarian situation in Ayod is deteriorating due to ongoing insurgency in the northern part of Jonglei. In February and March 2017, fighting between Juba government and SPLA IO devastated parts of Ayod mainly Kuach-deng, Mogok and Yian. RMF nutrition treatment centers (3 OTPs, 3 TSFP and 1 SC) were all vandalized and nutrition supplies and compound items looted by the armed youths during the active combat which led to the suspension of operation in Mogok, Yian and Katdalok. RMF continued to respond to the malnutrition crisis in its remaining active sites- 3 OTPs/TSFPs (1 each in Jiech, Pagil and Gorwai) and a SC in Gorwai, these active sites now registration high number of beneficiaries and exerting pressure on the limited number of capacitated nutrition team and nutrition supplies. Part of Kuach-deng is now under the Juba government and civilian population moved toward Gorwai where RMF has an OTP/TSFP and SC. Some people have started returning to Mogok and others moving towards Wai where World Vision ceased operation in May 2017 hence exposing the population at risk since services are not available which may contribute to morbidity and mortality due to malnutrition and co-infections.

With the GAM rate of 17.7% which is critical and above threshold level of 15% and IPC level 4 from also the most recent FewNet, there is enormous need to strengthen the existing nutrition treatment centers and scale up through re-establishing the suspended sites starting with Mogok and Wai and strengthening the Community Outreach activities and mobile services. This will ensure that more vulnerable groups at risk are reached with nutrition lifesaving services and under nutrition prevented.

RMF has a strong presence in Ayod County and has active PCA with UNICEF and FLA with WFP and will continue to get nutrition supplies from UNICEF and WFP for the scale plan. With the resources from SSHF, RMF will maintain the existing and re-establish the suspended sites and strengthen the system to provide lifesaving nutrition services for acute malnourished children under 5 and PLW and promote IYCF services and prevent under nutrition.

5. Complementarity

The response designed under this project will complement the existing RMF nutrition intervention in Ayod and the scale plan will open up more nutrition treatment sites and strengthen the existing ones to reach more beneficiaries, improve quality of life, prevent under nutrition among the populations at risk and reduce mortality due to malnutrition and its underlining causes among children under five of ages (boys and girls).

LOGICAL FRAMEWORK

Overall project objective

- Provide lifesaving nutrition services to acutely malnourished children (boys and girls) less than five years of age at least 75% SAM and 60% MAM and 60% pregnant and lactating women (PLW) in the affected areas (Ayod County) through re-establishing 2 OTPs/TSFPs (one each in Mogok and Wai) and 1 SC in Mogok while strengthening the existing 3 OTPs, 3 TSFPs and 1 SC which are registering significant increase of beneficiary numbers due to IDPs and worsening food insecurity for the population in Ayod County.
- Increased access to integrated programmes preventing under-nutrition for most vulnerable at risk, including enhancing IYCF for 60% PLW, BSFP for 30% under five.

NUTRITION

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Deliver quality lifesaving management of acute malnutrition for the most vulnerable and at risk.	SO1: Save lives and alleviate the suffering of those most in need of assistance and protection	50
Increase access to integrated programmes preventing under nutrition for the most vulnerable and at risk.	SO1: Save lives and alleviate the suffering of those most in need of assistance and protection	50

Contribution to Cluster/Sector Objectives : The RMF design respond plan for Ayod County will significantly provide quality CMAM/IYCF services through re-establishment of suspended OTP/TSFP/SC and strengthening the existing nutrition treatment centers and intensifying community outreach activities, this lifesaving nutrition services will benefit acute malnourished children under 5 of age and pregnant and lactating women. The scale up plan will increase access to the most vulnerable at risk and prevent further under nutrition.

The IYCF mother to mother support groups will continue to provide IYCF information to the community and most people will be reached with adequate IYCF messages.

RMF will collaborate and work together with WASH, Health and FSL partners on the ground to ensure synergies and integrated approach in achievement the overall goals of this project. Collaboration with County Health Department and health actor on the ground will strengthen the referral system and response to HIV/AIDS in emergency.

Outcome 1

Access and utilization of quality lifesaving nutrition services for management of identified malnourished children (boys and girls) less than five years and PLW improved.

Output 1.1

Description

Number of functioning CMAM sites providing lifesaving nutrition services for acute malnourished children less than 5 years of age and PLW

Assumptions & Risks

- Security situation in Ayod County improves and remains stable
- Availability of nutrition supplies from UNICEF and WFP
- Logistic cluster continues to airlift the nutrition supplies to the CMAM sites
- Weekly UNHAS flight to Ayod remains operational

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	NUTRITION	[Frontline] Number of nutrition sites providing integrated OTP and TSFP services in the same site					5

Means of Verification : List of functioning CMAM sites
RMF monthly OTP and TSFP report

Activities

Activity 1.1.1

Re-establish 2 OTPs/TSFPs (1 each in Mogok & Wai) while strengthening the existing 3 OTPs/TSFPs (1 each in Pagil, Jiech and Gorwai) all to provide quality CMAM & IYCF services

Activity 1.1.2

Re-establish Mogok SC while strengthening that in Gorwai all providing quality in patient care for SAM children with medical complications

Output 1.2

Description

Number of beneficiaries accessing OTP, TSFP and SC services

Assumptions & Risks

Security situation in Ayod County improves and remains stable
 Availability of nutrition supplies from UNICEF and WFP
 Logistic cluster continues to airlift the nutrition supplies to the CMAM sites

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	NUTRITION	[Frontline] Estimated number of girls and boys (6-59 months) newly admitted with SAM in OTPs and treated with RUTF supplies from the pipeline			841	911	1,752

Means of Verification : Screening register & reports of RMF
 OTP registration books of RMF

Indicator 1.2.2	NUTRITION	[Frontline] Estimated number of girls and boys (6-59 months) newly admitted with MAM and treated with RUSF supplies from the pipeline			1,533	1,660	3,193
-----------------	-----------	---	--	--	-------	-------	-------

Means of Verification : Screening register & reports of RMF
 TSFP registration books of RMF

Indicator 1.2.3	NUTRITION	[Frontline] Number of PLWs with acute malnutrition newly admitted for treatment in TSFP		1,343			1,343
-----------------	-----------	---	--	-------	--	--	-------

Means of Verification : Screening register & reports of RMF
 Registration books of RMF (TSFP register)
 Monitoring/Field visits report of WFP

Indicator 1.2.4	NUTRITION	[Frontline] Number of children (6-59 months) screened and referred for treatment of either SAM or MAM			2,374	2,571	4,945
-----------------	-----------	---	--	--	-------	-------	-------

Means of Verification : Screening register & reports of RMF
 Registration books of RMF (OTP/TSFP register)
 Monitoring/Field visits report of UNICEF

Indicator 1.2.5	NUTRITION	[Frontline] Number of girls and boys (6-59 months) with SAM screened for malaria and tested positive and treated			168	182	350
-----------------	-----------	--	--	--	-----	-----	-----

Means of Verification : Screening register & reports of RMF
 Registration books of RMF (OTP/TSFP register)
 Monitoring/Field visits report of UNICEF

Activities

Activity 1.2.1

Conduct routine screening of children under 5 years of age and PLW both at the facility and community for sign of acute malnutrition

Activity 1.2.2

Conduct routine community mobilization and mass screening of children under 5 and PLW for sign of acute malnutrition

Activity 1.2.3

Provide treatment for identified SAM and MAM children and PLW with provided RUSF and RUTF from the pipeline

Activity 1.2.4

Conduct routine screening of SAM and MAM children for malaria and treat and refer appropriately

Output 1.3

Description

Number of nutrition staffs trained and providing quality CMAM services

Assumptions & Risks

Security situation in Ayod County improves and remains stable
 Availability of nutrition supplies from UNICEF and WFP
 Logistic cluster continues to airlift the nutrition supplies to the CMAM sites
 Weekly UNHAS flight to Ayod remains operational

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.3.1	NUTRITION	[Frontline] Number of nutrition sites having required number of OTP and TSFP staff					5

Means of Verification : Training report
 Records of the # of people trained & involved in IYCF

Activities

Activity 1.3.1							
Conduct 5 days training on CMAM/IYCF for 34 RMF nutrition staffs and 10 CHD staffs							
Activity 1.3.2							
Conduct basic CMAM/IYCF training for 52 community nutrition volunteers							
Activity 1.3.3							
Conduct regular supportive supervision to all the TFP sites to support and mentor nutrition staffs on CMAM/IYCF guidelines							
Output 1.4							
Description							
Number of nutrition ICEs conducted at the facility and the community							
Assumptions & Risks							
Security situation in Ayod County improves and remains stable Weekly UNHAS flight to Ayod remains operational							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.4.1	NUTRITION	[Frontline] Number of health, WASH, nutrition sessions conducted by community nutrition workers					1,008
Means of Verification : Monthly activity report							
Activities							
Activity 1.4.1							
Conduct routine education sessions on nutrition, health and WASH at the facility and community levels							
Output 1.5							
Description							
The proportion of treatment outcomes of the beneficiaries (SAM and MAM) enrolled on OTP/SC and TSFP.							
Assumptions & Risks							
Security situation in Ayod County improves and remains stable Availability of nutrition supplies from UNICEF and WFP Logistic cluster continues to airlift the nutrition supplies to the CMAM sites Weekly UNHAS flight to Ayod remains operational							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.5.1	NUTRITION	[Frontline] Percentage of SAM discharged cured (cure rate) out of the total discharged from TFP (OTP/SC) services					75
Means of Verification : Screening register & reports of RMF Registration books of RMF (OTP/TSFP register) Monitoring/Field visits report of UNICEF							
Indicator 1.5.2	NUTRITION	[Frontline] Percentage of MAM discharged cured (cure rate) out of the total discharged from TSFP services					75
Means of Verification : Screening register & reports of RMF Registration books of RMF (OTP/TSFP register) Monitoring/Field visits report of UNICEF							
Indicator 1.5.3	NUTRITION	[Frontline] Percentage of SAM discharged died (death rate) out of the total discharged from TFP (OTP/SC) services					10
Means of Verification : Screening register & reports of RMF Registration books of RMF (OTP/TSFP register) Monitoring/Field visits report of UNICEF							
Indicator 1.5.4	NUTRITION	[Frontline] Percentage of MAM children died (death rate) out of the total discharged from TSFP					10
Means of Verification : Screening register & reports of RMF Registration books of RMF (OTP/TSFP register) Monitoring/Field visits report of UNICEF							

Indicator 1.5.5	NUTRITION	[Frontline] Percentage of SAM children defaulted (defaulter rate) out of the total discharged from TFP (OTP/SC)						15
-----------------	-----------	---	--	--	--	--	--	----

Means of Verification : Screening register & reports of RMF
Registration books of RMF (OTP/TSFP register)
Monitoring/Field visits report of UNICEF

Indicator 1.5.6	NUTRITION	[Frontline] Percentage of MAM children died (death rate) out of the total discharged from TSFP						15
-----------------	-----------	--	--	--	--	--	--	----

Means of Verification : Screening register & reports of RMF
Registration books of RMF (OTP/TSFP register)
Monitoring/Field visits report of UNICEF

Activities								
Activity 1.5.1								
Prepare weekly and monthly activity report and share with nutrition cluster, UNICEF, WFP and MOH.								

Outcome 2								
Healthy nutrition behaviours promoted at the facility and community level and under-nutrition prevented among most vulnerable at risk and IYCF enhanced.								

Output 2.1								
-------------------	--	--	--	--	--	--	--	--

Description								
Proportion of PLW and caregivers provided with adequate IYCF messages and healthy nutrition behaviours								

Assumptions & Risks								
<ul style="list-style-type: none"> • Security situation in Ayod County improves and remains stable • Weekly UNHAS flight to Ayod remains operational 								

Indicators								
			End cycle beneficiaries				End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target	
Indicator 2.1.1	NUTRITION	[Frontline] Number of pregnant and lactating women and caretakers of children 0-23 months reached with IYCF-E interventions		4,203			4,203	

Means of Verification : • Monthly activity report

Activities								
Activity 2.1.1								
Conduct regular education on health including HIV awareness, WASH and nutrition with more focus on IYCF messages at facility and community levels.								

Output 2.2								
-------------------	--	--	--	--	--	--	--	--

Description								
Number of trained IYCF mother to mother support group								

Assumptions & Risks								
Security situation in Ayod County improves and remains stable Availability of nutrition supplies from UNICEF and WFP Weekly UNHAS flight to Ayod remains operational								

Indicators								
			End cycle beneficiaries				End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target	
Indicator 2.2.1	NUTRITION	[Frontline] Number of functional mother-to-mother support groups					30	

Means of Verification : Monthly activity report
Training report

Activities								
Activity 2.2.1								
Train and form 10 IYCF mother to mother support groups while maintaining the existing 20.								

Output 2.3								
Description								

Number of nutrition staffs trained and providing quality IYCF services

Assumptions & Risks

Security situation in Ayod County improves and remains stable
 Availability of nutrition supplies from UNICEF and WFP
 Logistic cluster continues to airlift the nutrition supplies to the nutrition sites
 Weekly UNHAS flight to Ayod remains operational

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.3.1	NUTRITION	[Frontline] Number of health workers trained in Infant and Young Child Feeding	54	42			96

Means of Verification : Training report
 Records of the # of people trained & involved in IYCF

Activities

Activity 2.3.1

Conduct basic IYCF training for 52 community nutrition volunteers

Output 2.4

Description

World breastfeeding week organized and celebrated

Assumptions & Risks

Security situation in Ayod County improves and remains stable
 Weekly UNHAS flight to Ayod remains operational

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.4.1	NUTRITION	Number of nutrition sites participated in the celebration of world breastfeeding week.					5

Means of Verification : RMF activity report
 Weekly and monthly report

Indicator 2.4.2	NUTRITION	[Frontline] Number of pregnant and lactating women and caretakers of children 0-23 months reached with IYCF-E interventions		500			500
-----------------	-----------	---	--	-----	--	--	-----

Means of Verification : Weekly activity report

Activities

Activity 2.4.1

To organize the celebration of the world breastfeeding week in each Payam of Ayod County.

Outcome 3

System and capacity strengthened and equitable evidenced based nutrition intervention provided.

Output 3.1

Description

Number of nutritional SMART survey conducted in Ayod County and result validated by the NIWG.

Assumptions & Risks

Security situation in Ayod County improves and remains stable
 Logistic cluster able to airlift the survey team to all the selected clusters in Ayod
 Weekly UNHAS flight to Ayod remains operational

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	NUTRITION	[Frontline] Number of pre and post SMART surveys undertaken					1

Means of Verification : Weekly activity report
 Validated survey report

Activities

Activity 3.1.1							
To conduct nutritional SMART survey in Ayod County, produce and disseminate the final report							
Outcome 4							
Adequate nutritional care provided following multi-selector collaborations.							
Output 4.1							
Description							
Number of nutrition sites with well-furnished WASH equipment							
Assumptions & Risks							
Security situation in Ayod County improves and remains stable Weekly UNHAS flight to Ayod remains operational							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 4.1.1	NUTRITION	[Frontline] Number of health, WASH, nutrition sessions conducted by community nutrition workers					610
Means of Verification : Registration books of RMF (OTP/TSFP register) Monitoring/Field visits report of UNICEF Screening register & report from the sites							
Indicator 4.1.2	NUTRITION	Number of facility with installed hand washing equipment					5
Means of Verification : Monthly activity report Facility registration book							
Activities							
Activity 4.1.1							
Conduct education information at the facility and community levels discouraging open defecation, encouraging use of pit latrines to reduce WASH related illness like diarrheal diseases.							
Activity 4.1.2							
To procure and install hand washing equipment at the facility							
Activity 4.1.3							
To provide clean safe drinking water at the facility especially OTP for appetite test							
Output 4.2							
Description							
Number of nutrition sites supporting HIV positive clients (children and PLW)							
Assumptions & Risks							
Activity report OTP/SC/TSFP registers							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 4.2.1	NUTRITION	[Frontline] Number of health, WASH, nutrition sessions conducted by community nutrition workers					610
Means of Verification : Weekly and monthly activity report HF registers							
Indicator 4.2.2	NUTRITION	Number of nutrition staffs trained on HIV/AIDS					34
Means of Verification : Training report Record of the number of people trained and involved in HIV activities							
Activities							
Activity 4.2.1							
To establish a robust referral system linking HIV positive patients (children and PLW) to the health facility for comprehensive care.							

Activity 4.2.2							
Educate the HIV positive patients on nutrition, WASH related illness and preventive measure including exclusive breastfeeding.							
Activity 4.2.3							
To provide nutritional supplements to HIV positive patients.							
Activity 4.2.4							
To conduct basic training on HIV/AIDS for the nutrition staffs							
Output 4.3							
Description							
Number of affected population participating in the nutrition intervention programing							
Assumptions & Risks							
Security situation in Ayod County improves and remains stable Availability of nutrition supplies from UNICEF and WFP Logistic cluster continues to airlift the nutrition supplies to the CMAM sites Weekly UNHAS flight to Ayod remains operational							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 4.3.1	NUTRITION	[Frontline] Percentage of PLWs/care givers who are aware of their rights and entitlements with respect to nutrition programs					60
Means of Verification : Monthly activity report Facility registration book							
Indicator 4.3.2	NUTRITION	[Frontline] Percentage of PLWs who consider the complaints mechanisms effective, Confidential and safe.					75
Means of Verification : Monthly activity report Facility registers							
Activities							
Activity 4.3.1							
Establish complaint and feedback mechanisms in all nutrition sites							
Activity 4.3.2							
Raise awareness and provide information for the beneficiaries on their rights and entitlement in the nutrition sites and in the community							
Activity 4.3.3							
Involve communities in design, implementation, monitoring and evaluation on the nutrition project							
Additional Targets : Recovery rate >75% (SPHERE) Defaulter rate <15% (SPHERE) Death rate <10% (SPHERE)							

M & R						
Monitoring & Reporting plan						

RMF has a Nutrition program manager at national level designated to oversee the nutrition program in Ayod County. He frequently conducts supportive supervision, mentorship and training at the field sites. The Program manager works hand in hand with M&E Coordinator who compiles all nutrition data from the field sites. RMF will recruit an additional nutrition manager to support the existing one to support the scale up plan. At the field level, each of the RMF Nutrition center is headed by a Nutrition officer who is a relocatable staff recruited from Juba. The nutrition officers have medical background which is an added advantage, he/she works with the CMAM nurses who are also a relocatable staff from Juba. The Nutrition assistants and IYCF counselors are locally recruited staffs who support the nutrition program implementation.

The Nutrition officers at the field sites generate reports on a weekly and monthly basis. He/she then shares these reports with the M&E Coordinator in Juba. The M&E Coordinator then compiles the report from the different sites and feeds these reports into the nutrition data set NIS. The Nutrition program manager cleans the report before sharing it with nutrition cluster, UNICEF and WFP nutrition focal points. He also shares the report with SMOH nutrition focal points. In line with good reporting procedures and tools, RMF has adapted the use of the Nutrition information system (NIS).

RMF has been coordinating and will continue to coordinate the nutrition interventions in Ayod County with the nutrition cluster, UNICEF, WFP and MOH at national and State levels. Basing on the signed agreements with clear scope of work (work plan) RMF will ensure that no duplication exist and will report to relevant Donors based on the activities stipulated in the signed project documents. The M&E coordinator with support of the nutrition program managers will support the field based staffs to aggregate the data based on the indicators set in each project documents, will share the monthly progress report with the cluster, UNICEF and WFP without duplicating.

RMF will ensure that all the nutrition sites use the updated and standardized M&E tools approved by the national MOH of South Sudan, will refresh nutrition staffs on the appropriate use of the tools and proper reporting. Will upgrade some of the sites to use computers for data entry and reporting.

The data that RMF shares with the cluster, UNICEF, WFP and MOH will to monitor the nutrition evolution in the area. Under this grant RMF will strengthen its M&E system further to support the scale up plan.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Re-establish 2 OTPs/TSFPs (1 each in Mogok & Wai) while strengthening the existing 3 OTPs/TSFPs (1 each in Pagil, Jiech and Gorwai) all to provide quality CMAM & IYCF services	2017								X	X			
	2018												
Activity 1.1.2: Re-establish Mogok SC while strengthening that in Gorwai all providing quality in patient care for SAM children with medical complications	2017								X				
	2018												
Activity 1.2.1: Conduct routine screening of children under 5 years of age and PLW both at the facility and community for sign of acute malnutrition	2017								X	X	X	X	X
	2018	X											
Activity 1.2.2: Conduct routine community mobilization and mass screening of children under 5 and PLW for sign of acute malnutrition	2017								X	X	X	X	X
	2018	X											
Activity 1.2.3: Provide treatment for identified SAM and MAM children and PLW with provided RUSF and RUFT from the pipeline	2017								X	X	X	X	X
	2018	X											
Activity 1.2.4: Conduct routine screening of SAM and MAM children for malaria and treat and refer appropriately	2017								X	X	X	X	X
	2018	X											
Activity 1.3.1: Conduct 5 days training on CMAM/IYCF for 34 RMF nutrition staffs and 10 CHD staffs	2017								X	X			
	2018												
Activity 1.3.2: Conduct basic CMAM/IYCF training for 52 community nutrition volunteers	2017								X	X			
	2018												
Activity 1.3.3: Conduct regular supportive supervision to all the TFP sites to support and mentor nutrition staffs on CMAM/IYCF guidelines	2017								X	X	X	X	X
	2018	X											
Activity 1.4.1: Conduct routine education sessions on nutrition, health and WASH at the facility and community levels	2017								X	X	X	X	X
	2018	X											
Activity 1.5.1: Prepare weekly and monthly activity report and share with nutrition cluster, UNICEF, WFP and MOH.	2017								X	X	X	X	X
	2018	X											
Activity 2.1.1: Conduct regular education on health including HIV awareness, WASH and nutrition with more focus on IYCF messages at facility and community levels.	2017								X	X	X	X	X
	2018	X											

Activity 2.2.1: Train and form 10 IYCF mother to mother support groups while maintaining the existing 20.	2017								X	X				
	2018													
Activity 2.3.1: Conduct basic IYCF training for 52 community nutrition volunteers	2017								X	X				
	2018													
Activity 2.4.1: To organize the celebration of the world breastfeeding week in each Payam of Ayod County.	2017								X					
	2018													
Activity 3.1.1: To conduct nutritional SMART survey in Ayod County, produce and disseminate the final report	2017								X					
	2018													
Activity 4.1.1: Conduct education information at the facility and community levels discouraging open defecation, encouraging use of pit latrines to reduce WASH related illness like diarrheal diseases.	2017								X	X	X	X	X	
	2018	X												
Activity 4.1.2: To procure and install hand washing equipment at the facility	2017								X	X	X	X	X	
	2018	X												
Activity 4.1.3: To provide clean safe drinking water at the facility especially OTP for appetite test	2017								X	X	X	X	X	
	2018	X												
Activity 4.2.1: To establish a robust referral system linking HIV positive patients (children and PLW) to the health facility for comprehensive care.	2017								X	X	X	X	X	
	2018	X												
Activity 4.2.2: Educate the HIV positive patients on nutrition, WASH related illness and preventive measure including exclusive breastfeeding.	2017								X	X	X	X	X	
	2018	X												
Activity 4.2.3: To provide nutritional supplements to HIV positive patients.	2017								X	X	X	X	X	
	2018	X												
Activity 4.2.4: To conduct basic training on HIV/AIDS for the nutrition staffs	2017								X	X				
	2018													
Activity 4.3.1: Establish complaint and feedback mechanisms in all nutrition sites	2017								X	X	X	X	X	
	2018	X												
Activity 4.3.2: Raise awareness and provide information for the beneficiaries on their rights and entitlement in the nutrition sites and in the community	2017								X	X	X	X	X	
	2018	X												
Activity 4.3.3: Involve communities in design, implementation, monitoring and evaluation on the nutrition project	2017								X	X	X	X	X	
	2018	X												

OTHER INFO

Accountability to Affected Populations

RMF's approach of operation normally focused on a person as a whole by providing medical/physical, emotional, economic and social support. There is normally accountability and feedback mechanism in place to ensure that complains from the affected populations are registered and addressed promptly and appropriately so as to improve quality of service delivery.

RMF always encourages the participation of the affected populations in management and implementation of the project, all our team on the ground are South Sudanese nationals and some are recruited from the affected population, under this project RMF will recruit more nationals both from Juba levels and from the affected populations. RMF team in all the sites of operation will continue to meet and discuss with the Payam administration, local areal leaders/chiefs regularly about the progress, challenges, lessons learnt and the way forward.

RMF works closely with Jonglei State Ministry of Health and Ayod County Health Department (CHD). RMF will continue to build the capacity of its nutrition staffs through supportive supervisions, mentorship and refresher trainings. We also encourage and invite participants from the CHD where applicable for training so as to build their capacity in nutrition programming and also encouraging integration of nutrition activities into the existing government health facilities. RMF conducts quarterly participatory learning meetings involving community leaders/members, CHD and political wing to discuss progress and challenges and jointly decide on the way forward. We will continue doing this until the CHD is probably in a position to run nutrition services with capacitated local staff.

RMF approach ensures transparency in our work, and is shared with the affected populations as per the organizational procedures and policies so that they can make informed decisions.

Implementation Plan

RMF has a strong presence in Ayod and currently active in three sites- Jiech, Pagil and Gorwai and has an active MOU with the County Health Department hence scaling up response in the area will be easy. Our local staffs who were supporting Mogok site are still leaving in the area hence will easily recall them and re-establishment of Mogok will be swiftly done and for Wai will integrate some of the local staffs of CHD and those working with World Vision before pulling out from the area.

RMF is also in process of recruiting an additional nutrition program manager to support the scale up plan and together with the exiting nutrition program manager and M&E coordinator will implement the program basing of designed work plan under this project. During the implementation, RMF will ensure robust monitoring of the processes to ensure excellent program performance and outcome.

RMF will comply and work closely with nutrition cluster and share the progress (achievements and challenges) regularly. The work plan will guide our implementation of the project under this grant and RMF will inform the nutrition cluster in case there will change of plan due to unforeseen circumstances.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
CMD	CMD is a partner in Ayod implementing WASH and education programs and currently responding to outbreak of Acute Watery Diarrhoea in the area. RMF will work closely with them to in the following areas. Addressing WASH related illnesses like diarrhoeal diseases. Provision of clean safe drinking water at the facility especially for appetite test and hand washing. Provision of materials for sinking pit latrines at the nutrition treatment centres and discouraging open defecations. Involving the school teaching staffs in disseminating messages on nutrition, health and WASH Both partners will conduct Integrated WASH, Health and Nutrition education at the facility and the community. Establish a robust referral mechanism linking the nutrition to primary health care system RMF will participate in the testing and treatment of uncomplicated malaria at the nutrition centres. RMF and CMD will strengthen provision of WASH services in the communities surrounding the nutrition sites including nutrition, health and hygiene promotion.
ADA	ADA is a partner on the ground doing child protection and RMF will collaborate with them in the following areas. Strengthening referral system to ensure emergency feeding for children at the nutrition centres. Training nutrition staffs to identification and referral of GBV cases to nearby centres. Incorporating child protection messages including prevention and response and services into nutrition, health and WASH outreach and awareness activities.

Environment Marker Of The Project

A+: Neutral Impact on environment with mitigation or enhancement

Gender Marker Of The Project

2a-The project is designed to contribute significantly to gender equality

Justify Chosen Gender Marker Code

RMF nutrition approach is designed in a way that all children under 5 boys or girls, PLW/caretakers benefit from the services without discrimination. The community approach involves participation of community leaders, members of all sexes and age group. Ensures that the needs of each category of people are provided. RMF offers equally opportunity for males and females; in our nutrition sites the proportion of female staff recruited is 45.7% and this percentage will continue to increase as we scale up the response in Ayod.

Protection Mainstreaming

RMF nutrition approach is designed in such a way that all children under 5 years of age, boys and girls, benefit from the integrated nutrition services equitably without discrimination. Pregnant and Lactating Women (PLW) and caretakers (females and males) also benefit from the services without any discrimination. The community approach involves participation of community leaders, community members of both genders (Men and Women). This ensures that needs of each category of people are taken care for.

RMF offers equal opportunity for males and females; in our existing OTPs and SCs the proportion of female staff is 42.7%, this will continue to increase as we open more sites. RMF considers female empowerment as a priority and will continue to encourage and support females at all levels.

All existing 20 IYCF mother to mother support groups are female and more 10 groups will be formed under this project. This will empower the women in the community.

The direct beneficiaries under this project are segregated by age and sex (boys, girls, women and men) to ensure that each group is cared for since each group response differently to external shocks and the vulnerability also various. Normally women especially PLW and girls are prompt to vulnerability in any external shocks. The project is designed to respond to identified needs of children (boys and girls), women and men. Also precaution taken to cover GBVs and ensuring no constraint to accessibility to the services.

Country Specific Information

Safety and Security

Generally the security in the country is still fluid following the resumption of armed confrontation in Juba in July 8, 2016. The fighting now spread to most parts of the countries and Ayod County is not an exception. Population displacement continuous and security situation is unpredictable.

Juba is relatively calm and RMF staffs operating in the main coordination office will continue to monitor the situation and regularly participate in security briefing provided by NGO forum and UNDSS.

In Ayod, all our areas of operations are under the SPLA-IO and will continue to work closely with SSRA (South Sudan Rehabilitation Authority) in the SPLA IO area and get daily security update. Measures are in placed to evacuate/relocate staffs in case of life threatening security situation.

Access

Generally access to Ayod is so challenging and pose very huge logistical challenges and is so expensive. Roads are not passable and complicated by deteriorating security situation in the country.

All the areas in Ayod will be accessed through UNHAS operated helicopter which is so expensive, to charter UNHAS helicopter cost about \$(16,000- 20,000) per a trip. Occasionally places like Jiech, Pagil and Gorwai can be accessed through fixed wing aircraft only during dry season.

RMF will hire the UNHAS helicopter to drop the re-establishment materials to Mogok and Wai and for replenishment of nutrition supplies will coordinate with logistic cluster.

RMF will access most of the sites through the weekly UNHAS flight which in most cases not reliable and the chances of cancellation is high especially when the number of passengers travelling is low.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1. Staff and Other Personnel Costs							
1.1	Remuneration for 2 nutrition officers	D	2	1,400.00	6	100.00	16,800.00
	<i>2 nutrition officers, 1 each in the site to be re-established (Mogok and Wai) to oversee the actual implementation of the integrated nutrition program in each site, 1pax budgeted at \$1400/month for entire project circle (6 months), 100% charge to SSHF</i>						
1.2	Remuneration for 5 nutrition nurses	D	5	920.00	6	100.00	27,600.00
	<i>5 nutrition nurses (3 to support the SC/OTP/TSFP to be re-established in Mogok, 1 for Wai and 1 to support the existing site in Gorwai which has OTP/TSFP/SC) the nurses will manage the SC and also support the work at OTP/TSFP, 1pax budgeted at \$920/month for entire project circle (6 months), 100% charge to SSHF</i>						
1.3	Remuneration for 1 Clinical officer	D	1	1,300.00	6	100.00	7,800.00
	<i>1 Clinical Officer to consult/review and manage the SAM children in SC to be re-established in Mogok and train other staffs in inpatient care, 1pax budgeted at \$1300/month and charge 100% to SSHF</i>						
1.4	Remuneration for 5 nutrition assistants	D	5	450.00	6	100.00	13,500.00
	<i>5 nutrition assistants (3 to support the SC/OTP/TSFP to be re-established in Mogok, 1 for Wai and 1 to support the existing site in Gorwai which has OTP/TSFP/SC) the nutrition assistants will conduct health/nutrition/hygiene education, screening, enrolling SAM/MAM children and PLW on treatment and assist in outreach activities, 1pax budgeted at \$450/month for entire project circle (6 months), 100% charge to SSHF</i>						
1.5	Remuneration for 5 IYCF counsellors	D	5	450.00	6	100.00	13,500.00
	<i>5 IYCF counsellors (3 to support the SC/OTP/TSFP to be re-established in Mogok, 1 for Wai and 1 to support the existing site in Gorwai which has OTP/TSFP/SC) the IYCF counselor will promotes IYCF activities, also support the running of OTP/TSFP and the SC; budgeted at \$450/pax/month for entire project circle (6 months), 100% charge to SSHF</i>						
1.6	Remuneration for 1 nutrition program manager	D	1	2,500.00	6	50.00	7,500.00
	<i>The nutrition manager will support the existing manager in overseeing the scale up response and will assist in re-establishing Mogok and Wai and support the team in the field through training and mentorship. Also participating in the coordinating RMF nutrition activities with nutrition cluster, UNICEF, WFP and other Donors/Partners; budgeted @2500; 50% charge to SSHF</i>						
1.7	Incentives for 27 Community Nutrition Volunteers (CNVs)	D	27	15.00	6	100.00	2,430.00
	<i>The CNVs conduct community mobilization/outreach activities, defaulter tracing and refer the cases to the treatment centre, 10 for Mogok, 8 for Wai and 3 each to strengthen the existing sites (Gorwai, Pagil and Jiech); 1pax budgeted at \$15/month, 100% charge to SSHF</i>						
1.8	Remuneration for 5 Security Guards	D	5	200.00	6	100.00	6,000.00
	<i>The security guards to provide security for the warehouse/storage facility at the site to ensure safety of the nutrition supplies and compound items, 2 for Wai and 3 for Mogok, 1 pax budgeted @ \$200/month and 100% charged to SSHF.</i>						
1.9	Remuneration for 5 cleaners	D	5	200.00	6	100.00	6,000.00

	<i>The cleaners clean the treatment facility (OTP/TSFP and SC), the compound and supply water at the facility for appetite taste and hand washing, 2 for Wai and 3 for Mogok, 1 pax budgeted @ \$200/month and 100% charged to SSHF.</i>						
	Section Total						101,130.00
2. Supplies, Commodities, Materials							
2.1	Essentials medicines/consumables for the 2 SCs	D	2	900.00	2	50.00	1,800.00
	<i>Procurement of essential medicines like Antibiotics, Antimalaria, Antipyretic and consumables to supplement the SC kits from WHO, since there is no functional healthcare services in Mogok and Gorwai; this will support the SCs to manage other medical conditions among SAM children admitted in the SC, budgeted 900/site/quarter; 50% charge to SSHF</i>						
2.2	Training materials (stationary_ note books, pens, flip charts & maker pens) for CMAN/IYCT training and Mother to Mother support training	D	1	585.00	1	100.00	585.00
	<i>(10pkts of note book A4 each @ 19 hence 19*10=190, 5pkts of pens each @9.5 hence 5*9.5=47.5, 15 flip charts each @ 14.3 hence 15*14.3=214.5, 10pkts of maker pens each @6.2 hence 10*6.2=62 & 10PCS of masking tapes @7.1 hence 10*7.1=71); total=585; 100% charge to SSHF</i>						
2.3	Stationary for the field sites	D	12	276.10	1	50.00	1,656.60
	<i>Procure and provide stationary to all the OTP/TSFP/SC sites in Ayod (5 OTPs, 5 TSFPs and 2 SCs); Each site to receive 5 Pkts of pen each @9.5 hence 5*9.5=47.5; 2 electronic calculator @23.8 hence 2*23.8=47.6, 2 pkts of counter book Q4 each @47.6 hence 2*47.6=95.2; 2 pkts of box files each @42.9 hence 2*42.9=85.8; total 47.5+47.6+95.2+85.8=276.1; 50% charge to SSHF</i>						
2.4	Rain coats and gumboots for the field based staff	D	98	53.00	1	51.00	2,648.94
	<i>The rain coats and the gumboots will ensure continuity in community mobilization and outreach activities during rainy season, each of the CNVs and nutrition staff will receive one gumboots/rain coat; Gumboots @25 and rain coat @ 28 hence total per person=53; 51% charge to SSHF</i>						
2.5	Procure accommodation tents for the team in Mogok & Wai	D	4	3,300.00	1	76.00	10,032.00
	<i>There are no infrastructures in Ayod as the existent infrastructure were destroyed during the fighting, the relocatable staffs needed to be accommodated; each 4.5m * 3.6m * 1.6m size tent, budgeted @3300; 2 per sites; 76% charge to SSHF</i>						
2.6	Provide mattresses/beddings for the SC in Mogok	D	10	95.00	1	100.00	950.00
	<i>These are essential for the inpatient management of SAM children, what RMF had in Mogok were all vandalized during the insurgency; each budgeted @ 95, 100% charge to SSHF</i>						
2.7	Procure assorted items for re-establishing OTP/TSFP sites in Mogok & Wai	D	2	2,250.00	1	100.00	4,500.00
	<i>These includes items like furniture for the facility/compound, megaphones/accessories, handwashing buckets, kitchen equipment and items for maintaining the compounds, 100% charge to SSHF</i>						
2.8	Essential food items for the relocatable staff in 5 sites in Ayod	S	5	450.00	6	20.00	2,700.00
	<i>There are no essential foodstuffs available in the market in Ayod, our team in the 5 locations depend on foodstuffs taken from Juba, budgeted for rice, maize floor, beans, lentils, cooking oil, onions, tomatoes, species, sugar and beverages to support relocatable staffs; 20% charge to SSHF</i>						
2.9	Training of 44 nutrition staff on CMAM/IYCF guideline	D	44	10.00	5	100.00	2,200.00
	<i>34 RMF staffs and 10 from CHD to receive 5 days refresher training on CMAM/IYCF guidelines; (refreshment \$10/pax/day). 100% to SSHF. This is to capacitate them and implement the program according to South Sudan MOH guideline and achieve better outcome</i>						
2.10	CNVs training on basic aspect of CMAM/IYCF	D	52	10.00	3	100.00	1,560.00
	<i>27 new and 22 existing CNVs to be trained on basic aspect of CMAM/IYCF with more focus on Identification of Malnourished children/PLW, Conducting outreach activity, correct referrals to the nutrition facility, defaulter tracing, IYCF messages; (refreshment \$10/pax/day). 100% to SSHF. This is to capacitate them and implement the program according to South Sudan MOH guideline and achieve better outcome</i>						
2.11	Training of 120 members of mother to mother support groups on IYCF activities	D	120	10.00	2	100.00	2,400.00
	<i>10 mother to mother support groups each comprising of 12 (refreshment budget a@10 /pax/day); 100% charge to SSHF. The mother to mother support groups play center role in disseminating IYCF messages and referring malnourished children and PLW to the facility.</i>						
2.12	F75 Therapeutic diet, sachet 448g /KG		0	0.00	0	0.00	0.00
2.13	F100 Therapeutic diet, sachet 456g /KG		0	0.00	0	0.00	0.00
2.14	Therapeutic spread, sachet 92g /CAR-150		0	0.00	0	0.00	0.00

2.15	Amoxici.pdr/oral sus 125mg/5ml/BOT-100ml			0	0.00	0	0.00	0.00
2.16	Height boards			0	0.00	0	0.00	0.00
2.17	Scale, infant, spring type, 25kgx100g			0	0.00	0	0.00	0.00
2.18	Mother and Child Electronic Scale			0	0.00	0	0.00	0.00
2.19	MUAC measuring tapes (Child)			0	0.00	0	0.00	0.00
2.20	MUAC measuring tapes (Adult)			0	0.00	0	0.00	0.00
2.21	SC inpatient Kits			0	0.00	0	0.00	0.00
2.22	CSB++			0	0.00	0	0.00	0.00
2.23	RUST			0	0.00	0	0.00	0.00
2.24	Vegetable Oil			0	0.00	0	0.00	0.00
2.25	Cereals/grains and pulses			0	0.00	0	0.00	0.00
Section Total								31,032.54
3. Equipment								
3.1	Procure 2 new Laptop for field sites	D		2	1,300.00	1	100.00	2,600.00
<i>Procure 2 laptops for field sites to enable computerized data collection and reporting system, 1 for Mogok and 1 for the existing site in Jiech, each budgeted at \$1,300, 100% charge to SSHF</i>								
3.2	Procure & install solar system in Mogok SCs to ensure 24 hours' services	D		1	4,790.00	1	100.00	4,790.00
<i>4 solar panel of 200W budgeted at 410 each; 2 solar battery of 200Amp budgeted at 520 each; an inverter of 3000W budgeted @1560; accessories like solar bulbs, 2 rolls of 1.5mm electric cables, 4 packets of clips, charger controller, switches budgeted @550 and installation cost @1450; all charge 100% to SSHF</i>								
3.3	Procure 2 new satellite phones (thuraya)	D		2	1,350.00	1	100.00	2,700.00
<i>1 each for Mogok and Wai to enable coordination and reporting, each budgeted @1350 and 100% charge to SSHF</i>								
3.4	Office photocopier	S		1	2,798.00	1	51.00	1,426.98
<i>Procure medium size multipurpose CANON Photocopier to facilitate copying of reports and other nutrition documents; 51% charged to SSHF</i>								
Section Total								11,516.98
4. Contractual Services								
4.1	Local construction of OTP Shades, fencing the facility and sinking toilets in Mogok and Wai	D		2	3,200.00	1	100.00	6,400.00

	<i>Infrastructures in Mogok and Wai destroyed during the fighting, local materials are normally use for constructing temporal shades for the OTP/TSFP and usually done by the local people hired from the community (each site will need -2 toilets @1300, OTP/TSFP shades @850 and compound cleaning and fencing @1,050); 100% charge to SSHF</i>						
	Section Total						6,400.00
5. Travel							
5.1	Local travels for Nutrition Officers/CO/Nutrition Nurses	D	8	550.00	2	90.00	7,920.00
	<i>8 Nutrition staffs (2 nutrition officers, 1 clinical officer and 5 nurses) to travel from Juba to the field sites and back to Juba for their break every quarter with UNHAS flight which is \$550 for two ways; 90% charge to SSHF</i>						
5.2	M&E visit	S	5	1,040.00	2	60.00	6,240.00
	<i>Quarterly visit by Juba based nutrition program manager/M&E coordinator to support and mentor the field based staffs and monitor/evaluate the program performance of the project in Mogok, Wai, Pagil, Jiech and Gorwai budgeted for flights and per diems (5 sites, UNHAS flights (\$275*2 ways) and per diem (1 trip=7days*\$70 per diem rate= 490); Cost for visiting 1 site (550+490=10400)</i>						
5.3	Charter UNHAS helicopter to drop supplies to Mogok and Wai	D	2	16,000.00	1	90.00	28,800.00
	<i>Mogok and Wai not accessible by fixed wing plane during rainy season only by helicopter solely operated by UNHAS; the helicopter will airlift materails for establishing the facility and compounds since no infrastructure exist on the ground; each trip is budgeted @16,000 and 90% charge to SSHF</i>						
5.4	Movement of essential items from Juba to Ayod	S	500	3.00	6	20.00	1,800.00
	<i>Movement of essential items like stationary, essential foodstuffs for the relocatable team through weekly UNHAS flights (cargo @ \$3/kg), on average move 500kg/month; 20% charge to SSHF</i>						
	Section Total						44,760.00
6. Transfers and Grants to Counterparts							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
7. General Operating and Other Direct Costs							
7.1	Internet Subscription fees for Juba office	S	1	920.00	6	40.00	2,208.00
	<i>Internet services to facilitate coordination/communication, monthly fee is \$920 and 40% charge to SSHF</i>						
7.2	Thuraya Subscription	D	5	400.00	6	30.00	3,600.00
	<i>There is no regular telephone network service in whole of Ayod County, we depend on satellite phone for coordination/communication including sending weekly report, each field site has 1 satellite phone and payment of subscription fee is done monthly; budgeted @ \$400/phone/month, 30% charged to SSHF</i>						
7.3	Hire of car for Juba office to enable coordination,	S	1	2,500.00	6	40.00	6,000.00
	<i>This facilitates the movement of the main Juba team for coordination/meetings and logistic activities which support the nutrition program in the field sites; average monthly cost is \$2500; 40% charge to SSHF</i>						
7.4	Juba main office space	S	1	4,000.00	6	25.00	6,000.00
	<i>The office space in Juba is the main country coordination office for coordinating all the RMF program and significantly contribute to the nutrition program in Ayod; office is @4000 and 25% charge to SSHF</i>						
7.5	Juba office Stationary	S	1	1,500.00	6	30.00	2,700.00
	<i>Office consumables such as printing papers, toner/cartridge for the photocopier/printer, pens, box files, envelopes, budgeted as @1500/month; 30% charge to SSHF</i>						
7.6	Fuel for Juba office generator	S	120	1.50	6	50.00	540.00

	<i>Fuel for running Juba office generator to ensure smooth running of the office equipment; 120L/month @ 1.5/L, 50% charge to SSHF</i>						
	Section Total						21,048.00
SubTotal			1,058.00				215,887.52
Direct							186,272.54
Support							29,614.98
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							15,112.13
Total Cost							230,999.65
Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Jonglei -> Ayod	100		4,203	2,374	2,571	9,148	
Documents							
Category Name				Document Description			