For 'new-line' in text fields pres [ALT] and [ENTER] keys on keyboard (do not insert spaces to create line shift)

Please do not change the format of the form (including name of page) as this may prevent proper registration of project data.

For new proposals, please complete the tab for 'Project Document', 'Budget' and 'Locations' Mandatory fields are marked with an asterisk*



Project Document

1. COVER (to be completed by organization submitting the proposal)									
(A) Organization*	Horn of Africa Organization for Protection of Environment and improvement of Livelihoods								
(B) Type of Organization*	UN Ag	gency 🔲 ı	International NO	GO Local N	GO Local NO	30			
(C) Project Title*	Reviving o	of Balanbale M	CH with medi	cines, medical too	s and nutritional sup	plies			
For standard allocations, please use the CAP									
title.		SOM-11/H/40	050	h					
(D) CAP Project Code			030		Emergency Reser		tside of CAP		
(E) CAP Project Ranking (F) CHF Funding Window*	Standar	Medium rd Allocation 2	(Eab 2011)	Required for prop	osals during Standar	u Allocations			
	Stariuai	180050	(Feb 2011)	Must be equal to	total amount request	ed in current CAP			
(G) CAP Budget (H) Amount Request*	-	57737.00			unt in budget, must n				
(I) Project Duration*	 	6 months			months for proposals				
(J) Primary Cluster*		Health		1			,		
(K) Secondary Cluster		Nutrition		Only indicate a	secondary cluster	for multi-cluster	projects		
(L) Beneficiaries									
Direct project beneficiaries. Specify				Men	Women	Total			
target population disaggregated by		Total beneficiaries		3874	7544	11418			
number, and gender. If desired	Total hen	neficiaries inc	lude the follo	owing:					
more detailed information can be	Total bell			T T T T T T T T T T T T T T T T T T T					
entered about types of		Children unde	r 5	3874	4000	7874			
beneficiaries. For information on				0	0	0			
population in HE and AFLC see FSNAU website							1		
(http://www.fsnau.org)				0	0	0	-		
(, , , , , , , , , , , , , , , , , , ,				0	0	0			
(M) Location		Awdal	Banadir	Bay	☐ Gedo ☐ L Jub	oa M Juba	Mudug	Sanaag	Togdheer
Precise locations should be listed	Regions	Bakool	Bari		☐ Hiraan ☐ L Sha		elle Nugaal	Sool	W Galbeed
on separate tab	1	bakbui					Budget:	T\$	
(N) Implementing Partners	2						Budget:	\$	
(List name, acronym and budget)	3						Budget:	\$	-
	4						Budget:	\$	-
	5 6						Budget: Budget:	\$	-
	7						Budget:	\$	-
	8						Budget:	\$	-
	9								-
	10 Budget: \$ -								
	10					Tota			-
	10					Tota Remaining	Budget:	\$ \$ \$	- - 57,737
Focal Point and Details - Provide de		ncy and Cluste	r focal point fo	or the project (name	, email, phone).	Tota Remaininç	Budget:	\$	- - 57,737
Focal Point and Details - Provide de (O) Agency focal point for project:		ncy and Cluste		or the project (name	, email, phone).		Budget:	\$	- - 57,737
	tails on age Name* Email*	Mohamed Jam hopelsom@yah	a Aden noo.com			Remaining Title Phone*	Budget: Budget: Field Coordinate +254720109426	\$ \$ or 6, +252615656561	
	tails on age	Mohamed Jam hopelsom@yah	a Aden noo.com		, email, phone). Central Somalia, Branch	Remaining Title Phone*	Budget: Budget: Field Coordinate +254720109426	\$ \$ or 6, +252615656561	
	tails on age Name* Email*	Mohamed Jam hopelsom@yah	a Aden noo.com			Remaining Title Phone*	Budget: Budget: Field Coordinate +254720109426	\$ \$ or 6, +252615656561	
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4. LOGICAL FRAMEWORK (to	o be completed by organization)	
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(A) Objective*	To increase mother and child accessibility to quality life-saving health care services in Balanbale town MCH, to enhance the capacity						
(B) Outcome 1*	There will be adequate and essential medicines and medical equipment as well as improving the nutrition status among more than 23						
(C) Activity 1.1*	Provide ante-natal (ANC) and post-natal health care services to pregnant and lactating Mothers						
(D) Activity 1.2	Provision of Primary Health	Provision of Primary Health Care Services for Mothers and children (i.e.immunization, treating of diseases and breasfeeding counsel					
(E) Activity 1.3	Provission of medical suppli	Provission of medical supplies as well as medical consultations and treatment services to mothers and children U5.					
(F) Indicator 1.1*	Health Provision of PHC services within 2 km radius of IDP settlements v Target* 3544						
(G) Indicator 1.2	Health	The number of mothers and children received primary Health Carraget					
(H) Indicator 1.3	Health	Number of consultations offered by clinician per day in the MCH					
(I) Outcome 2	Enhanced Capacity building	Enhanced Capacity building and Training for the MCH health staff and improved Quality of Primary healthcare service delivery					
(J) Activity 2.1	16 Balanbale MCH health p	16 Balanbale MCH health personnel (6 males;1 clinician,1 axulliray nurse and 4 CHWs) and 10 females (1 qualified nurse,2 mid wives					
(K) Activity 2.2	Community Trainings on pr	rimary health care awareness (100 male,200 female) for changing socio-cultural taboos that are barriers to					
(L) Activity 2.3							
(M) Indicator 2.1	Health	Number of health workers trained in common illnesses, integrated Target 16					
(N) Indicator 2.2	Health	The number of community stakeholders from Balanbale and imme Target					
(O) Indicator 2.3		Target					
(P) Outcome 3	Enhanced Public Health and Improved Sanitation and Hygiene Practices among the target population						
(Q) Activity 3.1	Hygiene and Sanitation awa	Hygiene and Sanitation awareness and community mobilization campaigns will be carried out by the CHWs staffs for behavioral char					
(R) Activity 3.2							
(S) Activity 3.3							
(T) Indicator 3.1	Health	Target 11418					
(U) Indicator 3.2		Target					
(V) Indicator 3.3		Target					
(W) Implementation Plan*	The past and the present HOPEL health projects in Balanbale district in Galgadud region gave the organization enough lessons and						
Describe how you plan to	experience for the future up-coming interventions.						
implement these activities	HOPEL will create discussions with the indigenous community groups particularly community gatekeepers, women and youth						
(maximum 1500 characters)	groups, ethnic minority groups if any, spiritual groups, and the local authority for effective and sustainable community participation in						
	the entire project implement	the entire project implementation. HOPEL will also embark on sanitation and hygiene promotion as well as mobilization and					
	awareness campaigns on good health practices/behaviours in the community all these activities will be carried out by 10 CHWs and						
	10 Community mobilizers (the	10 Community mobilizers (these hygiene & sanitation promotions, mobilization and awareness campaigns will be done through					

5. MONITORING AND EVALUATION (to be completed by organization) HOPEL has a sub-office in Balanbale district and staff based in the Project area will play a significant role in project monitoring. (A) Describe how you will monitor, evaluate and report on your project HOPEL will make monitoring an integral part of all the project activities right from the beginning. The monitoring will be done in activities and achievements, partnership with local authorities and the community health committees. Periodic progress reports (weekly and monthly, as shall be including the frequency of agreed upon) shall be submitted to UN-OCHA in the course of the implementation period. The project staff in conjunction with local monitoring, methodology (site visits, authorities will undertake daily and weekly monitoring of the project activities. They will meet regularly to discuss the progress and observations, remote monitoring, achievements of the project plans against the set targets, noting accomplishments and gaps, and proposing follow-up activities where necessary. Internal reports will be prepared and submitted by HOPEL project manager to the HOPEL Deputy Director, the external evaluation, etc.), and Deputy Director will report to the Executive Director, where the Executive Director will report to both OCHA/CHF secretariat and monitoring tools (reports, statistics, photographs, etc.). Also describe HOPEL board of Directors. This will provide updates on achievements, challenges and plans for the upcoming month. A final how findings will be used to adapt Program and Financial report will be submitted at the end of the project period. HOPEL will be committed to share its activities with the health Cluster and the OCHA feild staff as well as prepare health quarterly the project implementation strategy. (maximum 1500 characters) * reporting and share necessary information and inputs with the Health cluster 3W matrix. Balanbale local administration and local elders will also be given an opportunity of a free hand to carry out visits and follow ups on the project activities in the district. (B) Work Plan Timeframe Must be in line with the log frame. Please select 'weeks' for projects up to 6 months, and 'months' for projects up to 12 months ek 1-4 Week 5-8 Week 9-12 Week 13-16 Week 17-20 Week 20-24 Mark "X" to indicate the period Activity activity will be carried out 1.1* Provide ante-natal (ANC Х Х 1.2 Provision of Primary Hea 1.3 Provission of medical sup 2.1 16 Balanbale MCH healt 2.2 Community Trainings on 2.3 Hygiene and Sanitation aX 3.1 Hygiene and Sanitation awareness and community mobilization campaigns will be carried out by the CHWs staffs for behavioral change **3.2** 0 **3.3** 0 6. OTHER INFORMATION (to be completed by organization) Activity (A) Coordination with other Organization 1 UNICEF UNICEF will provide Emergency medical supplies to the MCH.UNICEF has been activites in project area List any other activities by your or 3 any other organizations, in particular those in the same cluster. and describe how you will

coordinate your proposed activities with them	6 7 8 9 10				
(B) Cross-Cutting Themes Please indicate if the project supports a Cross-Cutting theme(s) and briefly describe how. Refer to Cross-Cutting respective guidance note		Cross-Cutting Themes	(Yes/No)	Outline how the project supports the selected Cross-Cutting Themes.	Write activity number(s) from section 4 that supports Cross- Cutting theme.
		Gender	Yes	The project will be targeting to a total population of 11418 of mothers and	
		Capacity Building			