

## South Sudan 2012 CHF Standard Allocation Project Proposal

*Proposal for CHF funding against Consolidated Appeal*

For further CHF information please visit <http://unocha.org/south-sudan/financing/common-humanitarian-fund>  
or contact the CHF Technical Secretariat [chfsouthsudan@un.org](mailto:chfsouthsudan@un.org)

**SECTION I:**

<b>CAP Cluster</b>	<b>HEALTH</b>								
<b>CHF Cluster Priorities for 2012 First Round Standard Allocation</b>									
<b>Cluster Priority Activities</b> <ol style="list-style-type: none"> <li>1. To maintain the existing safety net by providing basic health packages and emergency referral services.</li> <li>2. To strengthen emergency preparedness including surgical interventions.</li> <li>3. To respond to health related emergencies including controlling the spread of communicable diseases.</li> </ol>	<b>Cluster Geographic Activities</b> Unity, Warrap, Upper Nile, Jonglei, Northern Bahr el Ghazal and Lakes States.								
<b>Project details</b>									
<b>Requesting Organization</b> UNICEF	<b>Project Location(s)</b> Upper Nile, Unity, Northern Bahr El Ghazal, Jonglei, and Warrap States <i>(these focus states have high numbers of refugees, returnees and internally displaced persons)</i> UNICEF is the only organization providing EPI vaccines and associated supplies in South Sudan which are made available to the Ministry of Health and all NGOs implementing EPI activities, thereby covering all the ten states in the country.								
<b>Project CAP Code</b> SSD-12/H/46251									
<b>CAP Project Title</b> Vaccine Preventable Disease Control through Routine and Supplementary Immunization Interventions									
<b>Total Project Budget in South Sudan CAP</b> US\$ 7,845,000	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Amount Requested from CHF</b></td> <td style="width: 50%;"><b>Other Resources Secured</b></td> </tr> <tr> <td>US\$ 600,000</td> <td>US\$ 1,850,000 (other resources) US\$ 1,000,030 (CERF)</td> </tr> </table>	<b>Amount Requested from CHF</b>	<b>Other Resources Secured</b>	US\$ 600,000	US\$ 1,850,000 (other resources) US\$ 1,000,030 (CERF)				
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US\$ 600,000	US\$ 1,850,000 (other resources) US\$ 1,000,030 (CERF)								
<b>Direct Beneficiaries</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Women:</td> <td></td> </tr> <tr> <td>Men:</td> <td></td> </tr> <tr> <td>Girls:</td> <td>96,456 (6 to 59months)</td> </tr> <tr> <td>Boys:</td> <td>100,393 (6 to 59months)</td> </tr> </table>	Women:		Men:		Girls:	96,456 (6 to 59months)	Boys:	100,393 (6 to 59months)	<b>Total Indirect Beneficiary</b> 150 health workers (80 men and 70 women)
Women:									
Men:									
Girls:	96,456 (6 to 59months)								
Boys:	100,393 (6 to 59months)								
<b>Implementing Partners</b> <ul style="list-style-type: none"> <li>• Ministry of Health – Republic of South Sudan: Supplies worth of US\$ 80,000</li> <li>• State Ministries of Health (in the focus states): Supplies worth of US\$ 80,000</li> <li>• Various NGOs implementing EPI activities (they will mainly receive EPI supplies – vaccines, injection materials and cold chain equipment procured through UNICEF)</li> </ul>	<b>Catchment Population (if applicable)</b>								
<b>Address of Country Office</b> <b>Project Focal Person:</b> Dr. Daniel Ngemera <b>Email &amp; Tel:</b> <a href="mailto:dngemera@unicef.org">dngemera@unicef.org</a> ; +211955355890 <b>e-mail country Representative:</b> <a href="mailto:yhaque@unicef.org">yhaque@unicef.org</a> <b>e-mail finance officer:</b> <a href="mailto:mngandu@unicef.org">mngandu@unicef.org</a> <b>Address:</b> UNICEF South Sudan Country Office Totto Chan Compound P.O. Box 45, Juba, South Sudan	<b>Project Duration</b> (max. of 12 months, starting from allocation date)  <b>Start Date:</b> 15 <sup>th</sup> March, 2012  <b>End Date:</b> 15 <sup>th</sup> March, 2013								
	<b>Address of HQ</b> <b>e-mail desk officer</b>  <b>e-mail finance officer:</b>  <b>Address:</b>								

## SECTION II

### A. Humanitarian Context Analysis

Briefly describe (in no more than 500 words) the current humanitarian situation in the specific locations where CHF supported activities will be implemented. Provide evidence of needs by referencing assessments and key data, including the number and type of the affected population<sup>1</sup>

Child mortality is particularly high in South Sudan with the Infant and Under-Five Mortality Rates estimated at 75 and 105 per 1,000 live births respectively (Sudan Household Health Survey 2010). The survey also revealed that less than 6% of children were fully immunized by twelve months of age; one in five had received the measles vaccine, and 15% had received the necessary polio or DPT doses to be protected against childhood preventable diseases. Furthermore, there is a high DPT1 – DPT 3 drop-out rate reaching as high as 50% in some of the states. With such very low immunization coverage, it is likely that the states and counties with low coverage will be prone to outbreaks of vaccine preventable diseases unless special efforts are made to increase the coverage.

Because of the low immunization coverage in South Sudan and building up of susceptible children over the last 6 years after the 2005-2006 measles catch-up campaign in addition to the high influx of returnees since the referendum period, sporadic measles outbreaks were reported in 4 states (Unity, NBEG, Upper Nile and Warrap) with 1,243 cases reported (559 males 684 females) and 39 deaths in 2011. Fourteen mop-up campaigns implemented as outbreak response in 14 counties from December 2010 to August 2011 with a total number of 180,515 children vaccinated. Measles follow-up campaigns have been carried out in 8 states with 1,326,550 children 6 to 59 months of age vaccinated. There is a need to complete the follow-up campaign in the remaining 2 states namely Western Equatorial and Eastern Equatorial. This will reduce the likelihood of further outbreaks of measles.

It is nearly 32 months since the last case of wild polio virus was reported in South Sudan, this has been made possible due to intensive implementation of 19 polio immunization days campaigns in all 10 states. The decreased number of Supplementary Immunization Activities (SIAs) (NIDs and sub-NIDs) since 2010 combined with the current low routine immunization coverage might lead to a cumulative increase of susceptible children under five years of age to wild polio virus through importation. The decreased number of SIAs was due to decreasing risk in South Sudan whereby the last case of polio was reported end of June 2009 and also the decrease in the funding from the global polio eradication partners as South Sudan was categorized as no longer high risk country.

Neonatal tetanus is still a threat in South Sudan, due to the fact that many women (nearly 80% as per MOH data) do not have access to safe and clean deliveries. In addition, the TT immunization coverage has been reported to be very low in South Sudan. It is estimated that only 38% of the newborn are protected from neonatal tetanus at birth (SHHS- 2010).

The cold chain system which is core to provision of immunization services also needs substantial support. Reports received from the field indicates that there has been breakdown of the cold chain equipment particularly in hotspot areas with high number of returnees and IDPs which include Unity, Warrap, Jonglei, Upper Nile and Northern Bahr El Ghazal states. Without a well-functioning cold chain systems at central, state, county and health facility levels, it will be very difficult for health workers at all levels within the ministry of health and NGOs to have access to sufficient quantities of potent and viable vaccines to enable them to respond immediately in case of any outbreaks of any vaccine preventable diseases. Therefore, new cold chain hubs will be established and new cold chain equipment installed as well as repair and maintenance of the existing equipment. The special attention will be in areas with high number of returnees, refugees and internally displaced persons (IDPs); this will ensure that women, boys and girls less than five years of age among these groups have access to quality immunization services.

The project proposed for funding from CHF will enable UNICEF to fill in the highlighted gaps by ensuring that the vaccines and assorted supplies for supporting emergency immunization services in the high risk states of South Sudan in 2012 are made available to all implementing partners. This will enable UNICEF to fulfil her core commitments to cater for the increased needs of women of child bearing age and boys and girls less than 5 years of age following the continuous influx of returnees from the North, refugees from South Kordofan and Blue Nile States, as well as internally displaced persons in the priority states. The current numbers of returnees and IDPs in the five focus states of Warrap, Jonglei, Unity, Upper Nile and Northern Bahr El Ghazal as at the end of January 2012 are: 264,428 returnees and 426,162 IDPs with a majority of the displaced persons being in Jonglei state following the Pibor clashes between December 2011 and January 2012. UNICEF was substantially involved in providing vaccines, injection materials and cold chain equipment to the Ministry of Health and NGOs coordination immunization activities among the displaced person groups, resulting in about 26,940 children less than five years of age benefiting from measles and polio vaccinations.

Measles cases continue to be reported among returnee groups and IDPs indicating that these groups of children are at higher risk of contracting measles, polio and other vaccine preventable diseases and at the same time spreading the disease to the host communities and hence this calls for urgent attention to ensure that all boys and girls less than 5 years of age are vaccinated and to sustain high immunization coverage therefore increasing herd immunity and hence preventing outbreaks. With the funding from CHF UNICEF will continue to provide the essential vaccines and EPI supplies required to carry out immunization activities during emergencies.

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

## B. Grant Request Justification

To prevent outbreak of vaccine preventable diseases particularly measles, neonatal tetanus and polio requires continued and sustained life-saving and urgent vaccination interventions to protect children (boys and girls), pregnant women and women of child bearing age against the major vaccine preventable diseases. The proposed interventions under this proposal are in line with the agreed sector priorities for 2012 as immunization services through provision of vaccines and cold chain equipment for storage of vaccines is one of the core functions of the sector in an emergency context. In addition, this project is directly contributing to the following health cluster overarching objectives:

Objective 1: Maintaining the existing safety net by providing basic health packages and emergency referrals

Objective 2: Control the spread of communicable diseases

It is also important to note that nearly all vaccines, injection materials and cold chain equipment to support implementation of routine immunization and emergency immunization campaigns are procured by UNICEF and one of the major challenges has been on securing long term and predictable funding to ensure consistent supply of vaccines, injection materials and cold chain equipment. These funds are mobilised from various donors such as Bill and Melinda Gates Foundation, USAID/OFDA, Rotary International and Government of Japan. However, these funds are limited only to support few activities such as social mobilisation for polio eradication initiatives and procurement of vaccines mainly for routine immunization services leaving a major funding gap for procurement of vaccines for emergency interventions and strengthening of the cold chain systems at various levels to support the delivery immunization services in high risk states.

Taking into consideration that South Sudan has received a high influx of returnees and internally displaced person over the past twelve months (totalling to 264,428 returnees and 426,162 IDPs in the five priority states of Warrap, Unity, Upper Nile, Jonglei and Northern Bahr El Ghazal), the number of children (girls and boys) and women in need of immunization services has therefore increased and hence depleting the already available resources.

The central cold chain in Juba and in the high risk states does not have adequate storage capacity of vaccines and hence insufficient to meet the current increased storage needs of vaccines for emergency response. With the increasing demand, large quantities of vaccines are required to be stored at Juba level for easy dispatch in high risk areas and at the same time the focus states of Warrap, NBEG, Jonglei, Upper Nile and Unity do not have sufficient capacity to store large quantities of vaccines and it may be difficult to respond urgently in case of outbreaks. In most of the areas where the returnees will be residing there is limited network of cold chain equipment and hence the available resources will not be enough to support the establishment of cold chain systems in the returnees' and internally displaced persons areas and host communities; this therefore calls for the additional support from the CHF to increase the capacity of the cold chain systems to store vaccines and freeze enough ice-packs for immunization campaigns.

Access and utilization of immunization services in South Sudan is still a major challenge and therefore continued risk for the outbreak of diseases particularly measles and polio. While efforts are being made through routine EPI, immunization campaigns against vaccine preventable diseases should continue to sustain the high immunity profile among the vulnerable children. The threat for an outbreak still exists since most of the success observed is attributed to the vaccination campaigns. Neonatal tetanus is also still a threat in South Sudan, due to the fact that many women (nearly 80% as per MOH data) do not have access to safe and clean deliveries. With the continued high influx of returnees it is important to ensure that all children and women in South Sudan including returnees, refugees and internally displaced persons have access to quality immunization services to prevent outbreak of diseases.

## C. Project Description (For CHF Component only)

### i) Purpose of the grant

In view of the above background and needs, the CHF funding will be used to address the most vulnerable children both boys and girls below 5 years of age, particularly within populations of returnees, refugee and internally displaced persons, who are exposed to the risk of vaccine preventable diseases mainly measles and polio. This project will contribute in reducing the morbidity and mortality resulting from VPDs in the 5 high risk states.

In addition, 150 health workers (80 male and 70 female) who are involved in the delivery of immunization services will be trained to support in raising awareness among community members, leaders, caregivers and service providers as well as ensuring proper management of vaccines and cold chain systems to ensure prompt delivery of sufficient quantities of potent vaccines particularly in response to emergencies. The project will also mobilize and advocate for increased male involvement in demanding for immunization services to ensure that all eligible children both boys and girls are protected against vaccine preventable diseases particularly measles and polio. It is estimated that through CHF support a total 196,849 children 6-59 months from the five states will be vaccinated against measles and polio. The same children will receive one dose of measles during the project period while it is estimated that they would also receive an average of 3-4 doses of polio vaccine to assure maximum protection.

Furthermore, UNICEF aims at committing CHF support in the installation of cold rooms and solar fridges in the focus states as well

as repair and maintenance of the existing cold chain equipment in these states to ensure adequately functioning cold chain with sufficient capacity to for effective response during emergencies. Technicians to carry out the installation and repairs will be identified and contracted once the funds are approved. To ensure that vaccines are kept within the recommended temperatures there is a need for the constant supply of generators which requires fuel (diesel). The support from CHF will also be used to cover operational costs for running the generators which provides power to the central vaccine store stores in Juba and respective state capitals.

UNICEF is therefore seeking the support from CHF to fill up the existing funding gaps to help in reaching the un-reached boys and girls under the age of five years in the five priority states with high numbers of returnees, refugees and internally displaced persons. The CHF support will support the procurement of additional vaccines and solar fridges which are not covered with the available funding including the anticipated CERF funding. CHF support will also be used for technical support through deployment of staff with technical skills in immunization service delivery. The cold chain systems will be strengthened through rehabilitation of the existing vaccine store and also the installation, repair and maintenance of the cold chain equipment.

**ii) Objective**

- To ensure that 196,849 children (96,456 girls and 100,393 boys) less than 5 years of age are protected against vaccine preventable diseases (mainly measles, polio and neonatal tetanus) in areas with high influx of returnees, refugees and internally displaced persons in Upper Nile, Unity, Northern Bahr El Ghazal, Jonglei, and Warrap States.

**iii) Proposed Activities**

1. Strengthening the cold chain system by availing and installing additional 20 solar fridges in the hot spot areas with high numbers of returnees and refugees to ensure continued provision of immunization services.
  - Location: returnees, refugees and IDPs in NBEG, Upper Nile, Unity Jonglei and Warrap states
  - Direct Beneficiaries: Children < 5 years of age: 96,456 girls and 100,393 boys
2. Improve the capacity of cold storage sufficient enough to meet the current demand particularly during emergencies through rehabilitation of vaccine stores in Warrap (2 county stores), Unity (2 county stores) and Northern Bahr El Ghazal (state vaccine store).
  - Location: Warrap, Unity and Northern Bahr El Ghazal cold chain stores
  - Direct Beneficiaries: Children < 5 years of age: 96,456 girls and 100,393 boys
3. Training of 150 health workers (80 men and 70 women) on best practices in vaccination particularly during emergencies, vaccine and cold chain management and social mobilization. This will ensure that health workers have adequate capacity in preventing and responding to outbreaks of vaccine preventable diseases.
  - Location: Warrap, Upper Nile, Jonglei, Unity and Northern Bahr El Ghazal states
  - Direct Beneficiaries: 80 male health workers and 70 female health workers
4. Provide technical support through recruitment of Cold Chain Experts and Health Specialist to coordinate the planning and implementation of the emergency immunization interventions and strengthening the capacity of health workers and sMOH staff.
  - Location: Technical support to Warrap, Upper Nile, Jonglei, Unity and Northern Bahr El Ghazal states
  - Direct Beneficiaries: 80 male health workers and 70 female health workers; 96,456 girls and 100,393 boys < 5 years of age

**iv). Cross Cutting Issues**

This proposal is addressing the most vulnerable children both boys and girls below 5 years of age exposed to the risk of vaccine preventable diseases. This proposal will contribute in raising awareness among caregivers and services to ensure that rights of boys and girls to health care specifically to immunization services are realized. During implementation of the project, more female health workers will be enrolled, trained and encouraged to participate in immunization service provision. The project will also mobilize and advocate for increased male involvement in immunization service provision. In addressing the environmental issues, the project will ensure that injection safety and immunization waste disposal are given first priority and will be in accordance with the MOH and international agreed standards. The EPI injection safety will also address the issue of HIV/AIDS prevention among health workers.

**v) Expected Result/s**

**Expected Outcomes/Results**

- a. 196,849 children (96,456 girls and 100,393 boys) below 5 years of age particularly among returnee, refugee and IDP populations are immunized against vaccine preventable diseases (mainly measles and polio).
- b. 150 health workers (80 male and 70 female) – cold chain technicians, social mobilizers and other cadres of health workers have improved skills on vaccine and cold chain management, social mobilization of caregivers and appropriate immunization practices.
- c. 3 vaccine stores in Warrap, Unity and Northern Bahr El Ghazal rehabilitated and have increased vaccine storage capacity and fully functional.
- d. Cold chain equipment installed, maintained and repaired in Warrap, Upper Nile, Jonglei, Unity and Northern Bahr El Ghazal states.

	<i>Indicator</i>	<i>Target (indicate numbers or percentages)</i>
1	Number of measles vaccinations given to under 5 in emergency or returnee situation	Attain over 90% coverage among the returnees, refugees and IDP children
2	Polio coverage at each SIA	95% of children reached at each SIA (by administrative

		coverage) and over 90% through finger marking
3	Number of health workers trained in vaccine/cold chain management, social mobilization and appropriate immunization practices	150 health workers (80 male and 70 female) trained in vaccine/cold chain management, social mobilization and appropriate immunization practices
4	Total direct beneficiaries	196,849 children less than five years of age: 96,456 girls and 100,393 boys

#### vi) Implementation Mechanism

The implementation of planned activities will be based on the agreed work plan between UNICEF and the government at central and state level and is accordance with the UNICEF and Republic of South Sudan joint programme of cooperation 2012 -2013. Therefore the implementation will be carried out by the Ministry of Health at ROSS and state level with the support of various NGOs implementing immunization activities.

All vaccines, injection materials and cold chain equipment procured through UNICEF will be distributed through Government at central and state MOH. NGOs will access most of these supplies through the state cold chain stores. NGOs operating in hard to reach areas with limited access to state headquarters will sign a project cooperation agreement with UNICEF and they will be provided with supplies directly from UNICEF warehouse and the central vaccine stores in Juba. Rehabilitation of the cold chain stores will be done through fund disbursements to the respective state ministries of health and installation, maintenance and repair of cold chain equipment through internal and externally contracted technicians.

Training of health workers will be done in line with MOH and international guidelines and will be done jointly by UNICEF and the MOH at central and state levels.

#### vii) Monitoring Plan

To ensure monitoring of the progress towards attainment of the result set towards strengthening of immunization services, various monitoring and evaluation mechanisms will be instituted. The following will be carried out as part of the monitoring of progress:

- a) Continuous documentation of the best practices will take place to facilitate the scaling up of the initiative and a set of indicators as stipulated in the Government strategies and UN work plan will be used to ensure that there is synergy between the proposed activities and the government plans for sustainability purpose.
- b) All state and counties will be supported to improve on data quality starting from collection and reporting. This will include training, provision of various data collection and reporting tools. Also quality control will be enhanced through periodic data auditing at health facility, Payam, County and State level.
- c) Joint monitoring of project activities between UNICEF, NGOs and Government at central and state level will be carried regularly and quarterly review meetings will be conducted and necessary adjustments will be made to deliver the results.
- d) Reports on the progress and results will be prepared quarterly and biannually to ensure that there is continuous feedback and ensures project accountability.

**Reporting plan:** the reporting will be based on the regular weekly, monthly and quarterly monitoring reports from the 5 states and the technical guidance and support from UNICEF zonal offices in Malakal and Wau as well as UNICEF staff stationed in the five states.

#### E. Committed funding

Please add details of committed funds for the project from other sources including in-kind supports in monetary terms (USD)

Source/donor and date (month, year)	Amount (USD)
CERF (anticipated funding)	\$ 1,000,030
Other sources (Donor funds from: OFDA, Rotary International, BMGF)	\$ 1,850,000
<b>Total secured funding</b>	<b>\$ 2,850,030</b>

### SECTION III:

LOGFRAME				
CHF ref. Code: <u>SSD-12/H/46251</u>		Project title: <u>Vaccine Preventable Disease Control through Routine and Supplementary Immunization Interventions</u>		Organisation: <u>UNICEF</u>
<b>Overall Objective:</b> <ul style="list-style-type: none"> <li>To interrupt the outbreak of vaccine preventable diseases such as measles, and polio.</li> </ul>		<b>Indicators of progress:</b> <ul style="list-style-type: none"> <li>Number of confirmed wild polio case</li> <li>Number of confirmed measles cases</li> </ul>		<b>How Indicators will be measured:</b> <ul style="list-style-type: none"> <li>Vaccine Preventable Diseases (VPD) Weekly reports</li> </ul>
<b>Specific Project Objective/s:</b> <ul style="list-style-type: none"> <li>To protect all children below five years of age against vaccine preventable diseases with special focus on measles and wild polio.</li> </ul>		<b>Indicators of progress:</b> <ul style="list-style-type: none"> <li>Number of children vaccinated against wild polio and measles.</li> </ul>		<b>How indicators will be measured:</b> <ul style="list-style-type: none"> <li>Tally sheets by immunization teams</li> <li>Payam, County and State administrative coverage reports.</li> <li>Post campaign monitoring of finger markings of children immunized.</li> </ul>
<b>Results - Outputs (tangible) and Outcomes (intangible):</b>		<b>Indicators of progress:</b>		<b>Assumptions &amp; risks:</b>
1	Measles vaccination coverage in high risk areas	Number and % of children 6-59 months who received measles vaccination among the returnees' children and in host communities.		Immunization teams are recording their activities correctly and accurately.
2	Polio coverage at each NIDs	Number and % of children reached at each NID (by administrative coverage) and over 90% through finger marking.		Immunization teams are recording their activities correctly and accurately.
<b>Activities:</b>		<b>Inputs:</b>		<b>Assumptions, risks and pre-conditions:</b>
1	<b>Procurement of solar fridges</b>			
1.1	Procurement of 20 solar fridges for the hot spot areas with high numbers of returnees and refugees to ensure continued provision of immunization services.	Number of solar fridges procured for hotspot areas		UNICEF supply & logistic reports
2	<b>Rehabilitation of vaccine cold stores and installation, repair and maintenance of cold chain equipment</b>			
2.1	Rehabilitation of vaccine stores in Warrap, Unity and Northern Bahr El Ghazal states.	The volume of space available at Warrap, Unity and NBEG state vaccine stores for storage of additional vaccines for rapid response.		Monthly stock reports, UNICEF supply and logistics reports
				The contractor to carry out the rehabilitation will start and complete the work within agreed timelines.

2.2	Installation, repair and maintenance of cold chain equipment in Warrap, Unity, Upper Nile, Jonglei and Northern Bahr El Ghazal states.	The volume of space available at Warrap, Unity and NBEG vaccine stores for storage of additional vaccines for rapid response.	Monthly stock reports, UNICEF supply and logistics reports	The contractor to carry out the installation, repair and maintenance will start and complete the work within agreed timelines.
<b>3</b>	<b>Technical support provided for implementation of accelerated immunization activities</b>	<b>Number of staff recruited to provide technical support to key partners in implementing emergency immunization responses.</b>	<b>UNICEF HR Records</b>	<b>Timely recruitment of technical staff with adequate skills and knowledge to facilitate processes.</b>
3.1	Technical support provided at central level to effectively respond to vaccine preventable disease outbreaks and emergency response through immunization.	Availability of clear micro-plans, guidelines and strategies for responding to vaccine preventable disease out-breaks.	MOH/GOSS Records and guidelines, protocols and tools disseminated to state and county level	Timely recruitment of technical staff with adequate skills and knowledge to facilitate processes
3.2	Technical support provided in 5 high risk states to effectively respond to vaccine preventable disease outbreaks and emergency response through immunization among returnees, IDPs and host communities	Number of state supported to increase their capacity in planning	State EPI reports, micro-plans for responding to outbreaks.	Timely recruitment of technical staff with adequate skills and knowledge to facilitate processes

## PROJECT WORK PLAN

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

Activity	Q1 / 2012			Q2 / 2012			Q3 / 2012			Q4 / 2012			Q1. / 2013		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
<b>Result 1 – Distribution of Vaccines and Injection Materials</b>															
• Activity 1.1: Procurement of 20 solar fridges				X	X										
<b>Result 2 – Rehabilitation of vaccine cold stores and installation, repair and maintenance of cold chain equipment</b>															
• Activity 2.1: Rehabilitation of vaccine stores in Warrap, Unity and Northern Bahr El Ghazal states				X	X	X	X	X	X						
• Activity 2.2: Installation, repair and maintenance of cold chain equipment in Warrap, Unity, Upper Nile, Jonglei and Northern Bahr El Ghazal states				X	X	X	X	X	X	X	X				
<b>Result 3 – Training of cold chain assistants, social mobilizers and health workers</b>															
• Activity 3.1: Training of cold chain assistants, social mobilizers and health workers on cold chain and vaccine management, social mobilization and outbreak response				X	X	X				X	X	X			
<b>Result 4 – Technical support provided for implementation of accelerated immunization activities</b>															
• Activity 3.1: Technical support provided at central level to effectively respond to vaccine preventable disease outbreaks and emergency response through immunization.			X	X	X	X	X	X	X	X	X	X	X	X	X
• Activity 3.2: Technical support provided in 5 high risk states to effectively respond to vaccine preventable disease outbreaks and emergency response through immunization among returnees, refugees, IDP populations as well as host communities.			X	X	X	X	X	X	X	X	X	X	X	X	X

\*: TIMELINE FOR EACH SPECIFIC ACTIVITY MUST BE MARKED WITH AN X AND SHADED GREY 15%