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

<u>Please do not change the format of the form</u> (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 b	v organ	ization su		he proposal)					
(A) Organization*		nal Rescue		ile proposar					
(B) Type of Organization*	UN Ag	ency 🔲	International NG	O Local NO	GO Internationa	I NGO			
(C) Project Title*				d Conflict Displace			ost Communit	ies in Mudug, H	liran and Galgaduud
For standard allocations, please use the CAP title.	Regions, (Central Soma	alia						
(D) CAP Project Code	S	OM-12/WS/4	48212	Not required fo	r Emergency Rese	rve proposals ou	tside of CAP		
(E) CAP Project Ranking		High			oosals during Standa				
(F) CHF Funding Window*	Standar	rd Allocation 1	1 (Mar 2012)	Morat has a social to	total and a cost same	tad in assessed CAD			
(G) CAP Budget (H) Amount Request*	s		250,244.24		total amount reques unt in budget, must r		ıdaet		
(I) Project Duration*		8 months			months for proposa				
(J) Primary Cluster*	Water,	Sanitation ar	nd Hygiene						
(K) Secondary Cluster (L) Beneficiaries				Only indicate a	secondary cluster	for multi-cluster	orojects		
Direct project beneficiaries.				Men	Women	Total			
Specify target population	Total beneficiaries			13200	19800	33000			
disaggregated by number, and gender. If desired more detailed	Total beneficiaries include the follo			owing:					
information can be entered about	Internally Displaced People			0	0	6600			
types of beneficiaries. For	People in Host Communities			0	0	26400			
information on population in HE and AFLC see FSNAU website									l
(http://www.fsnau.org)				0	0	0			l
(M) I costion		I	_	0	0	0			
(M) Location Precise locations should be listed	Regions	Awdal	Banadir		☐Gedo ☐L Jub	_	Mudug	Sanaag	Togdheer
on separate tab		Bakool	■Bari	Galgaduud	Hiraan L Sha	ueiieM Shabell	e Nugaal	Sool	☐W Galbeed
(N) Implementing Partners	1 2	1.BaniAdam					Budget: Budget:	\$	72,825
(List name, acronym and budget)	3						Budget:	\$	-
	<u>4</u> 5						Budget: Budget:	\$	
	6						Budget:	\$	
	7 8						Budget: Budget:	\$	-
	9						Budget:	\$	-
	10					Total	Budget: Budget:	\$	72.825
						Remaining		\$	177,419
Focal Point and Details - Provide		gency and Clu	uster focal poir	nt for the project (na	ame, email, phone).		Country Directo	,	
(O) Agency focal point for project:		Prafulla Mishra	uster focal poir a a@rescue.org	nt for the project (na	ame, email, phone).	Title Phone*	Country Directo +254 735 756 2		
	Name*	Prafulla Mishra prafulla.mishra	a@rescue.org		ame, email, phone). enana Road, Nairobi, Ke	Title Phone*			
(O) Agency focal point for project:	Name* Email* Address	Prafulla Mishra prafulla.mishra International R	ra a@rescue.org Rescue Committe	ee, Laiboni Center, Le	enana Road, Nairobi, Ke	Title Phone*			
(0) Agency focal point for project: 3. BACKGROUND AND NEED	Name* Email* Address	Prafulla Mishra prafulla.mishra International R	ra a@rescue.org Rescue Committe ease adjus	ee, Laiboni Center, Li	enana Road, Nairobi, Ke	Title Phone* enya	+254 735 756 2	13	the near returned
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(0) Agency focal point for project: 3. BACKGROUND AND NEED (A) Describe the project rationale based on identified issues, describe the humanitarian situation in the area, and list	Name* Email* Address S ANAL The sustate populatio (AWD) / WHO received.	Prafulla Mishra prafulla.mishra International R .YSIS (ple ained influx on ons displaced cholera outboorded more	a@rescue.org Rescue Committe ease adjust of IDPs into ti d by the fami oreaks. UNH e than 380 ca	t row size as the central region ne of 2011 have CR estimated in ses of acute wal	needed) due to ongoing crisignificantly increa January 2012 thereory diarrhea (AWE	Phone* onflict in the south used the vulnerab e are 284,000 ID between Febru	+254 735 756 2 mern regions of illity of common Ps in Hiran, of ary 6 and 12	coupled with t unities to acul Galgaduud ar , 2012 from a	te watery diarrhoea nd Mudug regions. pproximately 70
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(A) Objective*	To enhance prevention, preparedness and response to AWD/cholera outbreaks in high risk areas in Mudug, Hiran and Galgaduud						
(B) Outcome 1*	Increase the capacity of one local agency, community hygiene promoters and community health workers for response to AWD/ch						
(C) Activity 1.1*	Training and engagement of community hygiene promoters and community health workers on AWD/cholera response						
(D) Activity 1.2	Conduct joint emergency simulations and workshops with one local organization, BaniAdam, and community hygiene promoters,						
(E) Activity 1.3							
(F) Indicator 1.1*	Water, Sanitation and Hygiene Number of people who have participated in interactive hygiene prarget* 320						
(G) Indicator 1.2	Water, Sanitation and Hygiene Number of beneficiaries participating in emergency response and Target						
(H) Indicator 1.3	Water, Sanitation and Hygiene Target						
(I) Outcome 2	Improved access to AWD/cholera emergency response supplies in Mudug, Hiran and Galgaguud regions.						
(J) Activity 2.1							
(K) Activity 2.2	Preposition stocks for emergency response to AWD and cholera in Mudug, Hiran and Galgaduud regions; hygiene kits, chlorine ar						
(L) Activity 2.3							
(M) Indicator 2.1	Water, Sanitation and Hygiene Target						
(N) Indicator 2.2	Water, Sanitation and Hygiene Number of beneficiaries with access to AWD/cholera response s Target						
(O) Indicator 2.3	Water, Sanitation and Hygiene Target						
(P) Outcome 3	Provide sanitation and water supply support to the 6 cholera treatment centres (CTCs).						
(Q) Activity 3.1	Construction of latrines to ensure appropriate sanitation facilities to 6 CTCs.						
(R) Activity 3.2	Ensure safe water supply to 6 CTCs.						
(S) Activity 3.3							
(T) Indicator 3.1	Water, Sanitation and Hygiene Number of people with increased access to appropriate sanitatio Target 30000						
(U) Indicator 3.2	Water, Sanitation and Hygiene Number of people with sustained access to safe water. Target						
(V) Indicator 3.3	Target						
(W) Implementation Plan*	The IRC will directly implement all the activities proposed in Hobyo, Gaalkayco, Jariban, Galdogob, and Cabudwaaq in Mudug and						
Describe how you plan to	Galgaduud regions. The IRC will work with BaniAdam, a national NGO, to implement the activities proposed in Xarardheere and						
implement these activities	Belet Weyne, in Mudug and Hiran regions. The IRC will support BaniAdam with technical guidance for WASH programming						
(maximum 1500 characters)	ensuring gender and conflict sensitivity is mainstreamed. The IRC and BaniAdam will collaborate closely with UNICEF and the						
	Health and Nutrition Clusters to ensure a well coordinated inter-cluster approach to AWD/cholera preparedness and response in						
	the three regions. The IRC will train hygiene promoters and conduct workshops and emergency response simulations ensuring						
	community preparedness. In collaboration with the Health cluster the IRC will train community health workers in AWD/cholera						
	response. The IRC will coordinate closely with UNICEF and the Health cluster to support the proposed CTCs with appropriate						
	sanitation facilities and access to safe water. The Water quality at CTCs will be monitored regularly and maintenance support						
	mechanisms for water points and latrines will be designed and implemented in collaboration with the Health cluster. Emergency						
	stocks will be carefully prepositioned ahead of the long rains for response to potential outbreaks of AWD and cholera in high risk						
	areas. Such response will be conducted jointly by the IRC and BaniAdam. Activities will be jointly monitored and feedback						
	integrated in programming.						

MONITORING AND EVALUATION (to be completed by organization) The IRC and Bani'Adam will develop a robust joint monitoring matrix as part of the IRC's M&E manual for high-quality monitoring (A) Describe how you will monitor, evaluate and report on plans, thus building the capacity of the implementing partner. Joint field staff visits will be utilized, security permitting, to regularly monitor activities against objectives and verify key outputs. Using GPS, coordinates of locations are recorded for mapping and reporting. Images will be taken before, during and after construction of latrine and water points. Nairobi-based staff and technical your project activities and achievements, including the advisers provide technical support both in person and remotely. Field staff, in conjunction with the local community, will be responsible for the overall management and monitoring of implementation of project activities. Monthly progress reports and 4W Matrix will be shared with the cluster. Interventions will be coordinated through an inter-cluster approach and information shared with the Health and Nutrition Clusters as relevant. Community participation is encouraged through established feedback frequency of monitoring, methodology (site visits, observations, remote monitoring external evaluation, etc.), and monitoring tools (reports, statistics, photographs, etc.). Also describe how findings will be mechanisms and third party monitoring through community members or local authority will be employed. Staff will maintain phone contact with the community hygiene promoters, health workers and the local administration in target areas. All staff will be trained on conflict sensitivity and confinuously evaluate the project's impact according to the cluster Do No Harm checklist. All beneficiary used to adapt the project figures will be disaggregated by gender. implementation strategy. (maximum 1500 characters) (B) Work Plan Timeframe Must be in line with the log frame Mark "X" to indicate the period activity will be carried out Please select 'weeks' for projects up to 6 months, and 'months' for projects up to 12 months Month 1-2 Month 3-4 Month 5-6 Month 7-8 Month 9-10 Month 11-12 Activity 1.1* Training and engageme 1.2 Conduct joint emergence 1.3 Preposition stocks for e 2.1 Construction of latrines 2.2 Ensure safe water supp 3.1 Construction of latrines to ensure appropriate sanitation facilities to 6 CTC 3.2 Ensure safe water supply to 6 CTCs. 6. OTHER INFORMATION (to be completed by organization) (A) Coordination with other Organization 1 The IRC Water sources rehabilitation and construction, latrines construction and hygiene activites in project area List any other activities by your or any other organizations, in The locations of planned CTCs and the joint programs in AWD/cholera responsion sharing on AWD/cholera cases from hospital data. 2 Health Cluster MSF Belgium Bani"Adam Currently implementing hygiene promotion and environmental santation activiti particular those in the same cluster, and describe how you will coordinate your proposed activities with them (B) Cross-Cutting Themes Write activity number(s) from Please indicate if the project supports a Cross-Cutting Outline how the project supports the selected Cross-Cutting Cross-Cutting Themes (Yes/No) section 4 that theme(s) and briefly describe supports Cross how. Refer to Cross-Cutting Cutting theme. respective guidance note Sender sensitivity is mainstreamed through IRC programming. The need for Gender Yes Capacity Building