2012 Common Humanitarian Fund for South Sudan

CHF Reserve Application Template

For further CHF information please visit <u>http://unocha.org/south-sudan/financing/common-humanitarian-fund</u> or contact the CHF Technical Secretariat <u>CHFsouthsudan@un.org</u>

Note:

This application shall be submitted to the sector lead for the relevant sector with copy to the CHF Technical Unit.

If the request is approved a CHF allocation matrix shall be submitted to register the allocation in the CHF Database. If the project is not already in the Work Plan a project sheet must also be prepared and submitted, after which the project will be included.

CHF ER No.			
Date Received:			
CAP Project	🛛 Yes	🗌 No	
Focal point:			

To be filled in by the CHF Technical Secretariat

CHF Reserve Grant Request Summary						
Requesting Organisation:	Upper Nile Initiative and Development Organization (UNIDO)					
Project Title:	Emergency Primary health care in Mayendit, Koch, and Mayom Counties in Unity State					
CAP Project Code (if CAP project):	SSD-12/H/46388					
CAP Sector/Cluster:	Health					
Geographic areas of implementation (list states):	Unity State Mayendit County Payams 1. Bhor Mayendit PHCC 2. Pabuong Pabuong PHCU 3. Thaker Thaker PHCU 4. Luom Luom PHCU					
Total project budget:	US\$ 310,000					
Amount requested from CHF Reserve:	US\$ 190,280					
Total number of beneficiaries targeted by the Emergency Reserve grant request (disaggregated by sex/age):	Total:42, 387 direct beneficiaries20,000 Indirect beneficiariesMen:10,071boys10,174Women:11,020girls11,022					
Implementing partners (include those that will benefit from CHF funding):	Upper Nile Initiative & Development Orgarnization					
Project Contact Details (Provide names, phone numbers, and emails of head of your organization, and the project focal person)	Executive Director: James Keah Ninrew Physical Address: Hai Tongpiny, Kololo Road, Juba, South Sudan Telephone: +211 955 008160 or/ +211 917 088006 Email: ed@unidosouthsudan.org Project Focal Person: Peter Puoch Chuol Physical Address: Leer - Unity State, South Sudan Telephone: +211 955 522756 or +211 912 028891 Email: peterpouch@rocketmail.com Medical coordinator					

A. Humanitarian Context (Context Analysis)

- In approximately 1,000 words briefly describe the humanitarian situation in the specific region/area where CHF Reserve activities
- are planned for with reference to assessments and key data, including the number and type of the affected population¹
- Describe the humanitarian response plans/priorities and any gaps in the response and the reasons for the gaps (e.g. access, security, funding). Also explain relation to the work of other partners in the area.

Mayendit county which is in Unity state has continued to bear the brunt of the Sudan - South Sudan border tensions with recent excursions by the Sudan's army in counties in the south. This has led to increased IDPs some of whom have settled in Mayendit County. In total Mayendit county has so far accommodated 15,201as per the figures by UNOCHA between the period 30th Oct 2010 and Jan 2012. The latest figures from the SSRC office in Mayendit indicate there are currently 19,943 IDPs from 1st February 2012 in the County. The county of Mayendit also continues to suffer regular intertribal conflicts with communities fighting mainly over cattle rustling activities that initiate revenge attacks. In the most recent occurrence on the 1st of February 2012 there was a vicious attack in a meeting held by the County Commissioners' of Mayendit and his counterparts from Rumbek North and Tonj East and Tonj North which left 41 people dead in the neighboring counties and 18 people from Mayendit county which included one boy child and one girl child and caused displacements in the Payams of Bhor, Malkuer, Madol 1, Madol 2, Pulual. In this event Pabuong PHCU was burnt down and therefore requires a new construction which will house the consultation room, pharmacy and registry. The county also hosts a total 14,226 returnees coming from the northern part of Unity State many of these returnees are in Bhor and Thaker Payams so are served by the PHCC in Mayendit and the PHCU in Thaker. Koch county which was at the epicenter of armed rebellions led by Gatluak Gai and General Athor remains from calm despite mediation efforts. This security challenges mean continuous displacement of the population and poor health infrastructure. World Relief South Sudan has in the past years been implementing health strengthening in emergencies situation in Koch county in Partnership with UNIDO. These efforts have borne fruit in reducing mortality rates and providing Basic Health services to the community since the State ministry of Health is still unable to fully take over provision of health services.

The state health infrastructure is still in poor shape with many health facilities lacking permanent structures this has left meant the health facilities such Mayendit PHCC does not provide laboratory tests to ailments and act as a referral facility in performing surgeries' for patients suffering from bullet wounds etc. There is therefore need to equip Mayendit PHCC with a laboratory building and adequate equipment to enable provision of key basic services to the community. The state ministry of health is currently unable to pay health workers their emoluments leaving NGOs to fill in the gap by paying incentives to staff and hiring technical personnel where their services are required. Of key importance here is the need to continue to provide key technical staff to the PHCC in Mayendit whom the SMOH does not provide, that is the Clinical Officer, the Midwife and the Laboratory technician as well as continue supporting the other SMOH staff with incentive pay in the backdrop of reduced budgets from the national government due to the Sudan and South Sudan oil saga that has led to closure of oil exports. This occurs in a backdrop of state that has seen displacements during the year of 74,180 people in Unity State with Mayendit county being among the areas affected.

The road network is still poor and worsens in the rainy seasons with some areas being in accessible this hampers greatly provision of health services since the county health department's do lack motor vehicles that would assist in emergency situations. Humanitarian vehicles' thus do provide key support in case of emergency referrals of patients.

It is still vital to maintain emergency preparedness and a stronger epidemiological surveillance and rapid response system to curb and confine outbreaks in this Mayendit county

B. Grant Request Justification

- In approximately 1,000 words describe why CHF Reserve funding is sought for this project, and why this particular activity is important. Explain why the activity is time critical and need rapid funding through the CHF Reserve.
- Please include information about the relationship to Work Plan indicators/priorities, as well as regional agreed priorities where possible.
- Confirm that agency internal reserves or other donor funds are not immediately available and/or appropriate to fund the proposed activities. Please provide information on which donors or what other funding sources have been approached.

The county of Mayendit in Unity State falls within the targeted Health Cluster high priority intervention areas in the year 2012 based on the ongoing humanitarian situation in South Sudan. Given the proximity of these area to the Sudan -South Sudan border there shall in the coming months continue upsurge of IDPs and returnee populations who require emergency health response and hence it is vital to ensure provision of basic health services continue uninterrupted. In event of increased security threats that rise to level 3 or 4 most international humanitarian organizations are forced evacuate their staff. UNIDO being a local organization has continued to have a presence on ground and would enable the health cluster achieve the priorities through;

- Facilitate continued provision of services and response to emergency situations. 1.
- 2. Ensure continued surveillance of epidemiological diseases
- 3. Strengthen the capacity of the health workers vide facilitating health workers acquire on job training from experts drawn from the region.
- Increase the capacity of the health system in the county to reduce infant mortality rates through expanded 4. immunization programs and safe deliveries
- Increase access to basic health services via increasing mobile health centres 5.
- Strengthen the County Health Department in undertaking its supervision role as a measure of building an exit 6.

¹ 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. Version 1.0 (20120224) Page 2 of 8 CHF 2012.Form-10

strategy.

UNIDO is the only national NGO health provider in Mayendit County and strongly supports the SMOH in delivering health care especially during emergencies as well as collaborating with other international humanitarian agencies working in the county. The border issue has led to increase in the cost of living since most goods are now derived from the East African region and have to reach Unity state via river transport. This situation leads to a need to continue supporting the health workers with incentive payments in order to avoid them migrating to other regions and hence leave an expertise gap for the local community. UNIDO has identified the need to recruit staff that the SMOH has been unable to that need be present in these health centres. It also evident that with the rising costs of living majority of people in the communities are not still able to pay for health services due to poverty and therefore continued humanitarian intervention is still required.

i) Justification For Accessing the CHF Reserve

Describe why this activity was not funded through the CHF standard allocation process, and what has changed since that process was completed to make this project emerge as a priority.

UNIDO has sought funding from different sources since November 2011 but none has been availed as the main donors within South Sudan are unwilling to take on new partners. OFDA RRF has been approached but their funding is only for emergencies and UNIDOs request has been unsuccessful hence UNIDO strongly requires assistance for the entire year. The Health Cluster has stated that CHF reserve funding was being offered to the 3 national NGOs who have been having difficulties and thus did not apply the normal CHF process.

C. Project Summary (Description of <u>CHF Reserve Component</u> of the Project)

In approximately 1,000 words briefly describe how CHF Emergency Reserve funding will be used to support core humanitarian activities.

The funds derived shall be used on;

- Payment of Health workers salaries recruited by UNIDO to fill the gap of technical expertise left out by the SMOH, these are the clinical officers, Laboratory technicians, Midwifes and Nurses.
- Payment of incentives for SMOH staff , in these cadre are the CHWs, TBAs and EPI vaccinators
- Logistical support in the provision of Drugs from the SMOH Stores in Bentiu to the Health Facilities.
- Rehabilitation and Construction of Health facility Buildings
- Procuring Motor Cycles for Mobile Health Teams

Provide continuous training for the SMOH staff

i) Objective

The objective should be specific, measurable, achievable, relevant and time-bound.

The project will increase provision of basic health services to vulnerable communities in Mayendit county by 50% It seeks to obtain this by;

- Increasing the capacity of Mayendit PHCC to provide quality healthcare and emergency referral services
- Increase the Health system coverage in the provision BPHS to the community by 50% and participation at community level via strengthening community based health providers and mobile health services.

ii) Cross Cutting Issues

Briefly describe how cross-cutting issues are taken into consideration (i.e. gender, environment, HIV/AIDS)

Gender issues have been taken care of in the program by having the mobile team to provide basic and essential health services for women, including antenatal care (ANC), postnatal care (PNC), delivery, gynaecologic exams, and general health services. Mobile teams will also provide examinations, first aid, and simple lab tests, such as Hemoglobin %, ABO-RH (blood group antigens), urine tests for sugar and proteins, and pregnancy tests. It also targeted to increase the capacity of clinical skills of the TBAs by having the Midwifes undertake a TOT training with a view of enabling them in future be able to be work as midwifes after attaining the necessary on job training. This will enable them be integrated into the government payroll for their sustainability.

On environment UNIDO will ensure incinerators are in place to safely discard Hospital waste and that all staff ensures the correct procedures are followed

iii) Proposed Activities

List the main activities to be implemented with CHF Reserve funding. Exact location of the operation (provide map if relevant). Total number of direct beneficiaries as per the planned activities.

- Hire clinical cadre staff in Mayendit PHCC to serve an estimated 10,000 beneficiaries located in Bhor and Pabuong Payams
- Hire a laboratory technician in Mayendit PHCC to serve an estimated 10,000 beneficiaries located in Bhor and Pabuong Payams
- Establish a mobile response team based in Mayendit that will respond to emergencies that shall be led by a clinical officer cadre staff and two midwifes covering Madol 1 and Madol 2 Payams that have suffered displacements and lack a PHCU facility. These two Payams have an estimated beneficiary community of 11,000 people.
- Procure motor cycles for the mobile response team and supervision based at Mayendit PHCC.
- Construct new facilities for the pharmacy, consultation in Pabuong that was razed down in the recent clashes and renovate other semi permanent buildings to be used as housing for health providers in Mayendit PHCC.
- The project shall also put up Latrine facilities in two PHCUs which are Pabuong and Thaker.
- Continuous refresher training of Health workers (all cadres) with training materials ranging from clinical
 management guidelines to training-of-trainer (TOT) courses derived from Juba University. The project shall
 specifically target CHWs, TBAs drawn from the network supervised by the CHD and EPI volunteers.

- Payment of incentives to the SMOH seconded staff
- Recruitment of a skilled Midwife for Mayendit PHCC
- Implementing preventive health measures that combine primary, secondary and tertiary prevention as an effective way for reducing excess mortality in all the Health centres' under the project.
- Targeting vulnerable groups for preventive health services such as children under five, pregnant women, the elderly and unaccompanied minors from mainly the returnee populations and IDPs
- Monitoring population and health services data to detect emerging health problems

iv) Expected Outcomes

Explain the results you expect to have at the end of the CHF grant period, and provide no more than three indicators you will use to measure the extent to which those results will have been achieved

The project envisages the following results;

- 1. Increased number of consultations per clinician, per day.
- 2. Laboratory that has capability to perform microscopy and other diagnostics for patients from the county.
- Renovation of dilapidated health care facilities including establishment of housing for healthcare providers
 Establishment of a mobile unit based in Mayendit PHCC that will respond promptly to reach out to emergency
- 4. Establishment of a mobile unit based in Mayendit PHCC that will respond promptly to reach out to emergence situations
- 5. Increased knowledge by health workers through capacity building
- 6. Increased access by the population living within 5 km of a health facility that meets minimum standards
- 7. Increased number of births assisted by a skilled attendant

	Indicator	Target
		· ··· 901
1	Increase in number of people with access to a basic package of health services (direct beneficiaries)	42,387
2	Number of facilities that meet basic standards for staffing, equipment, amenities, drugs and supplies providing Basic Package Health Services (BPHS)	Five facilities
3	Number of health workers recruited to primary health Care center compared to MOH requirements	10 health workers
4	Number of antenatal clients receiving IPT2 second dose	4,408 expected pregnant target 60% to receive second dose of IPT2
5	Number of health workers trained in MISP / communicable diseases / outbreaks / IMCI / CMR	30 Health workers

v) Implementation Plan

Explain planned mechanisms for implementation. Specifically, report planned grants to implementing partners, including NGOs, government actors, etc., monitoring and evaluation plan/system, etc. Please indicate implementation timeline below.

UNIDO shall implement the project in conjunction with the County Health department and where there are activities for construction and renovation these shall be given to outside contractors.

In training UNIDO targets to work closely with Juba University in the provision of training materials and instructors where possible to ensure that the MOH guidelines are met.

The County Health Department shall be involved at every implementation stage as a means of building their capacity and ensuring success and sustainability of the programs

Implementation Timeline	Start Date	End Date			
Overall Project	1 st January 2012	31 December 2012			
CHF Reserve supported activities	2 April 2012	April 2013			

D. Secured funding				
Please add details of secured funds for the project from other sources				
Source/donor	Amount (USD)			
Healthnet TPO	86,887-			

SECTION III:

LOGFRAME							
CHF ref. Code: <u>SSD-12/</u> H/46388/14826	Project title: Emergency Mayom Counties in Unity	r Primary health care in Mayendit, Koch, and State	Organisation: UNIDO				
Overall Objective: What is the overall broader objective, to which the pr Describe the expected long-term change. Increase by 50% in the Provision of basic health serv communities in Mayendit county		 Indicators of progress: What are the key indicators related to the overall objective? Increase in number of people with access to a basic package of health services Percentage of facilities that meet basic standards for staffing, equipment, amenities, drugs and supplies 	 How indicators will be measured: What are the sources of information on these indicators? Monthly reports to the county health department – (Epidemiological, EPI, Reproductive health etc) Facility assessment reports 				
Specific Project Objective/s: 1. Increase the capacity of Mayendit PHCC in the provision of quality healthcare and emergency referral services 2. Increase the Health system coverage in the provision BPHS to the community by 50% and participation at community level.		 Indicators of progress: Number of health workers recruited to primary health Care centres compared to MOH requirements Number of health workers trained under project activities Number of under 5 year-old children immunized against measles % of people with access to a basic package of health services 	 How indicators will be measured: Signup sheets Staff contracts EPI reports Assessment reports on facilities per population Monthly reports to the county health department – (Epidemiological, EPI, Reproductive health etc) Facility assessment reports 	 Assumptions & risks: Staff shall be willing to work in insecurity prone areas There shall be adequate funds to pay the technical staff since the SMOH cannot currently recruit. It is assumed that communities shall be able to resolve conflicts without destruction of the health infrastructure in place. Risk of not attaining this objective is the insecurity experienced in the area that leads to health staff relocating to safer places and communities being displaced 			
 Results - Outputs (tangible) and Outcomes (intangible): 1.1. Increased number of consultations per clinician, per day. 1.2. Laboratory that has capability to perform microscopy and other diagnostics for patients from the county. L.3. Renovation of dilapidated health care facilities including establishment of housing for healthcare providers L.4. Establishment of a mobile unit based in Mayendit PHCC that will respond promptly to reach out to emergency situations 1.5. Increased knowledge by health workers through capacity building 2.1. Increased access by the population living within 5 km of a health facility that meets minimum standards 2.2. Increased number of births assisted by a skilled attendant 		 Indicators of progress: 1. % of communicable diseases detected and responded to within 72 hrs 2. Number survivors of SGBV receive clinical management of rape treatment 3. Number of health workers trained in MISP / communicable diseases / outbreaks / IMCI / CMR 4. Percentage of population living within 5 km of a health facility that meets minimum standards 5. % reduction in case fatality rate for specific diseases (e.g. Measles, diarrhea), and for 	 How indicators will be measured: Early warning reports Laboratory test reports Training reports 	 communities being displaced Assumptions & risks: The project shall be able to hire an remunerate a Laboratory technician and clinical officers that are not currently hired by the SMOH. The county health department and local administration need to mobilize the communities to understand the need for women attending full antenatal visits. 			

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	deliveries 6. Number and % of Women attended at least one and four times for antenatal care during pregnancy receiving IPT2 second dose						
 Activities: Hire of A clinical cadre staff Hire of A laboratory technician Establish a mobile response team based in Mayendit that will respond to emergencies Procure motor cycles for the mobile response team Construct new facilities for the pharmacy, consultation and renovate other a semi permanent buildings to be used as housing for health providers Continuous refresher training of Health workers in the community Payment of incentives to SMOH seconded staff Recruitment of A skilled Midwife Implementing preventive health measures that combine primary, secondary and tertiary prevention as an effective way for reducing excess mortality. Targeting vulnerable groups for preventive health services such as children under five, pregnant women, the elderly and unaccompanied minors Monitoring population and health services data to detect emerging health problems 	 Inputs: Cash to pay 2 clinical officers and a laboratory technician Motorbikes procured. Materials for rehabilitation and construction of new buildings. Training Manuals Provide logistical support to the acquisition of TBA delivery kits from the MOH Funds for incentive payments 	 Assumptions, risks and pre-conditions: Receive funding on time to enable undertake renovations and construction before the onset of rains that will make it impossible to undertake such activities. It is assumed that the staff at Juba university shall be willing to provide the course guidelines for training as this refresher courses shall count on the career development of the health workers 					

PROJECT WORK PLAN This section must include a workplan with clear indication of the specific timeline for each main activity and s	ub-ac	tivitv	(if ap	olicat	ole).										
The workplan must be outlined with reference to the quarters of the calendar year.										-					
Activity	Q1 / 2012				2/ 20			3 / 20			4 / 20		Q1. / 2013		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Result (1.1): Increased number of consultations per clinician, per day															<u> </u>
Activity (1.1.1)							-			-					┝──
Hire of A clinical cadre staff				Χ										-	<u> </u>
Result (1.2): Laboratory that has capability to perform microscopy and other diagnostics for patients from the county															
Activity (1.1.2.)															
Hire of A laboratory technician				Χ											
Result (1.3): Renovation of dilapidated health care facilities including establishment of housing for healthcare providers															
Activity (1.1.3)															
Construct new facilities for the pharmacy, consultation and renovate other a semi permanent															<u> </u>
buildings to be used as housing for health providers					Х	Χ									
Result (1.4): Establishment of a mobile unit based in Mayendit PHCC that will respond															
promptly to reach out to emergency situations Activity (1.1.4.)															<u> </u>
Targeting vulnerable groups for preventive health services such as children under five,															
pregnant women, the elderly and unaccompanied minors					X	X	X	X	X	X	X	X	X	X	X
Sub- Activity (1.1.4.1)															
Purchase of two motorcycles for the mobile unit					Χ										
Result (1.5): Increased knowledge by health workers through capacity building															
Activity (1.1.5)															
Continuous refresher training of Health workers in the community						Χ					Χ				
Result (2.1): Increased access by the population living within 5 km of a health facility that															
meets minimum standards															<u> </u>
Activity (1.2.1.)															
Implementing preventive health measures that combine primary, secondary and tertiary prevention as an effective way for reducing excess mortality				X	X	X	X	X	X	X	X	X	X	X	X
Result (2.2): Increased number of births assisted by a skilled attendant		1							1	1	1				[
Activity (1.2.2)									1		l				
Payment of incentives to the SMOH seconded staff				X	X	X	X	X	X	X	X	X	X	X	X
Sub- Activity (1.2.2.1)															
Recruitment of a skilled Midwife		-		X						+					<u> </u>
		L	<u> </u>		I		<u> </u>	I	<u> </u>		L	I	1		L

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

CHF Reserve Grant Request Review Section – Internal

Reviewer			Justification/clarification/recommendations
Function/Title:	Central Sector Lead		
Name:			
Organisation:			
Date:			
Recommendation:	Grant recommended : Yes] No	
Function/Title:	Regional Sector Lead		
Name:			
Organisation:			
Date:			
Recommendation:	Grant recommended : Yes] No	
Function/Title:			
Name:			
Organisation:			
Date:			
Recommendation:	Grant recommended : Yes] No	
Function/Title:			
Name:			
Organisation:			
Date:			
Recommendation:	Grant recommended : Yes] No	
Function/Title:			
Name:			
Organisation:			
Date:			
Recommendation:	Grant recommended : Yes] No	