

CHF 2013 Allocation Revision/No-Cost Extension Request Form

The CHF Technical Secretariat will compile all requests for the Humanitarian Coordinator's final review and approval.

Requests sent directly to the HC will be delayed in processing.

For further CHF information please visit: <http://www.unocha.org/south-sudanfinancing/common-humanitarianfund> or contact the CHF Technical Secretariat.

Instructions:

Complete this request form and submit to the CHF Technical Secretariat at CHFsouthsudan@un.org and copy kizitoi@un.org.

Any major changes made to the original allocation as stipulated in the approved project documents must have the endorsement of the cluster coordinator with final approval made by the Humanitarian Coordinator. No-cost extension requests should be well justified and submitted at least two weeks before expiration of approved project duration.

For CHF Technical Secretariat:

<input checked="" type="checkbox"/> AA/ UNDP Informed	Date: 29-3-14	By: Kizitoi
<input checked="" type="checkbox"/> Cluster Coordinator Informed	Date: 29-3-14	By: Kizitoi
<input checked="" type="checkbox"/> Grantee Informed	Date: 29-3-14	By: Kizitoi
<input checked="" type="checkbox"/> CHF Database Updated	Date: 29-3-14	By: Kizitoi

Allocation ID (CHF TS to fill in): 13/SA2/0254

Section 1 – Project Details

Date of Request	5 March 2014, Submitted 6 March 2014, Resubmitted 17 March 2014	Cluster	Health
Organization Name:	CCM	Contact Name:	Elisabetta D'Agostino (CCM)
Project Code:	SSD-13/H/55326/R/6703	Contact Email/Tel No.:	countryrep-ssd@ccm-italia.org 0918570727
Location:	Lakes State/Warrap State	Date of Allocation:	16 August 2013
Duration (start and end date as PPA/agreement):	1 October 2013 – 31 March 2014	Amount Allocated:	US\$200.000
Project Title:	Ensuring health emergencies response and safety nets to local communities, IDPs and returnees in Twic County (Warrap State)		

Section 2 – Revision Type/Reason for No-Cost Extension

Type of Revision: Indicate the type (s) of revision being requested.	Reason for NCE: Indicate reason (s) for no-cost extension.																		
<table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Significant change in activities</td> <td><input type="checkbox"/> Change in location</td> </tr> <tr> <td><input type="checkbox"/> Change in outputs</td> <td><input checked="" type="checkbox"/> Change in budget*</td> </tr> <tr> <td><input type="checkbox"/> Change in target beneficiaries</td> <td><input type="checkbox"/> Change in recipient org</td> </tr> <tr> <td><input type="checkbox"/> Change in project duration/NCE</td> <td>Other Specify: _____</td> </tr> </table> <p>No. of month requested NO CHANGE in DURATION New end date: _____</p> <p>*change in the amount per budget line, total budget remains unchanged</p>	<input type="checkbox"/> Significant change in activities	<input type="checkbox"/> Change in location	<input type="checkbox"/> Change in outputs	<input checked="" type="checkbox"/> Change in budget*	<input type="checkbox"/> Change in target beneficiaries	<input type="checkbox"/> Change in recipient org	<input type="checkbox"/> Change in project duration/NCE	Other Specify: _____	<table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Insecurity</td> <td><input type="checkbox"/> Programmatic delays</td> </tr> <tr> <td><input type="checkbox"/> Inaccessibility</td> <td><input type="checkbox"/> Delays in finalizing PPA</td> </tr> <tr> <td><input type="checkbox"/> Staffing/recruitment delays</td> <td><input type="checkbox"/> Delays in disbursement of funds</td> </tr> <tr> <td><input type="checkbox"/> Internal admn delays</td> <td><input type="checkbox"/> Delays in organization's internal transfer of funds</td> </tr> <tr> <td><input type="checkbox"/> Procurement delays</td> <td><input type="checkbox"/> Delay in securing supplies from pipeline</td> </tr> </table> <p>Other Specify: change of needs on ground due to the emergency situation</p>	<input type="checkbox"/> Insecurity	<input type="checkbox"/> Programmatic delays	<input type="checkbox"/> Inaccessibility	<input type="checkbox"/> Delays in finalizing PPA	<input type="checkbox"/> Staffing/recruitment delays	<input type="checkbox"/> Delays in disbursement of funds	<input type="checkbox"/> Internal admn delays	<input type="checkbox"/> Delays in organization's internal transfer of funds	<input type="checkbox"/> Procurement delays	<input type="checkbox"/> Delay in securing supplies from pipeline
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Section 3 – Level of Completion

Provide information what amount of grant and activities have been implemented. Exact amounts and percentages are not necessary approximate numbers are sufficient.

Amount of Funds Spent as of **31 December 2013**

Amount of Funds Unspent as of **31 December 2013**

Amount of Funds Committed But Not Spent by **31 January 2014**

Percentage of Activities Completed as of **31 January 2014**

\$66,789	33%
\$133,211	67%
\$62,883	31%
75%	

Section 4

This section is for the approval of the		
CHF Technical secretariat		
Endorsed by Mr. _____	Sudan	26/3/14 Review Date
OCHA, South Sudan		
Approved by Mr. _____	South Sudan	26/03/14. Review Date

Section 5 – Revision Description and Justification

Description and justification of requested change

Please describe the requested changes to the original allocation and provide detailed background and justification for the proposed revision. CHF revision requests have to be submitted to the Humanitarian Coordinator for any significant changes in the following allocation parameters: major activities, implementation targets, location, allocation amount, recipient organization and/or recipient project, and project duration. To reallocate funds to a new project, please provide a detailed explanation for why the new project was chosen to receive the reallocation. Please provide revision details in the revision table in section 6 of this document.

The present request for project revision is specifically meant at relocating the project budget lines and components to better serve the project scope and to address the additional needs incurred in the area as consequence of the crisis especially during the period January 2014-March 2014.

No modification is envisaged to any among the followings: project locations, project targets, project expected results and/or project activities.

Target population is composed of communities living scattered, in remote/ underserved areas and cattle camps, IDP/returnees' camps, with very poor or discontinuous access to basic services (63% reached by CCM, 37% by CUAMM). U5 (41% of the beneficiaries) and women in reproductive age (approximately 37% of the beneficiaries, out of which at least 6% pregnant) are the most exposed to epidemic outbreaks and health complications due to low quality health care, poor health/nutrition education and hygienic conditions, men-driven RH decisions and delayed emergency response. Other MARPs categories include HIV+/TB patients and victims of inter-clan clashes. Health prevention/raising awareness target mostly caretakers (including men) and opinion leaders (community/religious leaders, local institutions) to promote safe health, hygiene and sanitation behaviors (at least 15% of the beneficiaries). Indirect beneficiaries count around 441,000 people (70% of the population in the catchment area).

Since February 2014, CCM/CUAMM have been implementing the project according to the approved work-plan and logical framework, in order to achieve the following objectives:

- The increase of 15% in the utilization rate of PHC at facility level in 6 months, including at least 15% increment in women's access (monthly baseline: 1,200 boys, 1,300 girls, 1,450 men, 1,900 women);
- the increase of 15% in the access to emergency health service in 6 months (monthly baselines: 10 emergency surgical operations);
- the increase of 20% in the number of referred patients in 6 months (monthly baseline: 34 referred patients).

Expected results of the project still remain:

ER1: Frontline health service provision to underserved host, IDPs and returnees' communities in Greater Yirol and Greater Toni counties supporting up to 28 facilities (1 hospital, 7 PHCCs and 20 PHCUs).

ER2: Effective response to emergencies, including health referral and surgical treatment, is ensured

ER3: Health, Hygiene and Sanitation practices of host, IDPs and returnees' communities are enhanced and preventive health approach is promoted

ER4: Enhancing IDSR, EP&R capacities and PHC system management in Greater Yirol and Greater Toni is improved

No changes are envisaged in the project target, which details below show the progress rate at date (31.12.2013):

	(C) Project target (as per CHF project proposal)	(D) Achievement at Project Mid-Term	(E) Remarks at Project Mid-Term
1 Total direct beneficiaries	60.679	18535	30.55%
Women	22.343	6939	31.06%
Girls	13.363	3662	27.40%
Men	13.298	4517	33.97%
Boys	11.675	3417	29.26%

See the quarterly project reporting for further details.

As earlier mentioned, the requested budget relocations is functional to an effective allocation of the still available resources, according to the recently assessed requirements. Please find below a justification for the request for budget revision:

- Supplies, commodities, equipment, transport: According to the actual level of expenditure we propose a decrement of 2,736 USD. This is a balance between the reduction of essential equipments, and the increment in surgical ward maintenance which is necessary in order to face the high number of patient as consequence of the actual crisis.

In details:

- Reduction of 93% on the budget line for drugs for YW PHCUs and OUTREACHES: the start of HPF program, focused on Yirol West PHCUs, has ensured additional funds for buying drugs for these health facilities. Further, in January, we received a drugs order for PHCUs processed many months ago but never delivered because of the crisis; with this provision we can support YW PHCUs without particular problems
- Reduction of 24% on cleaning materials for PHCUs: buying in Uganda some cleaning materials in the previous quarter we have managed to get good and sufficient quantity of products saving a certain amount of money that can be reallocated.
- Increase of 133% of surgical ward renovation: the infrastructure of the surgical ward has been damaged by some water infiltrations, therefore the intervention to be carried on has been more consistent than what was planned (mainly to reinforce the walls and the foundation and to repair the scratches)

- Personnel: as the most of the human resources could be covered by other funds, CUAMM ask a decrement of 10,992

USD from this chapter. In details:

- Increment of 24% of Pharmacist Assistant salary: she has been appointed to support also the County Health Department in the management of drugs for PHCUs, therefore her compensation has been increased
- Increment of 45% of Driver Salary: especially during the first phase of the crisis and as consequence of the high IDPs concentration in Awerial (having as referral facility Yirol County Hospital), the ambulance driver workload has significantly increased and therefore more funds are needed to cover his extra time.
- Reduction of 100% of the budget line dedicated to Yirol County Hospital Staff. HPF ensured longer and more consistent support to Yirol Hospital, covering the main running costs, including the staff ones
- Staff flights: no changes
- Trainings, workshops, seminars, campaigns: Cuamm is asking for an increment of 14.500 \$ to face the urgency of the measles vaccination campaign conducted in the IDPs catchment area. In details:
 - Increment of 161% of Vaccination Campaign budget: CUAMM has been asked to the SMOH and UNICEF to conduct a vaccination campaign in the IDPs settlements in Awerial. The fund allocated to this budget line are meant to recruit, train and pay incentives to 64 people, to cover transport costs from the County to the 3 main payams, to cover the logistic costs of 2 weeks of campaign which will cover more than 30.000 children.
- Vehicle operating and maintenance costs . In details:
 - Decrement of 32% of ambulance costs: HPF ensured longer and more consistent support to Yirol Hospital, covering the main running costs, including the ambulance ones.
 - Increment of 20% of hiring car costs: because of the high number of ambulance calls due the crises in Awerial (whose facilities are referring to Yirol Hospital), we need to hire a second car to support the referral system.
- Office equipment and communications: no changes.
- Other costs. Decrement of 25% of bank charges costs is based on the actual level of expenditures. Savings in this budget lines have been relocated to cover the needs incurred in the area as consequence of the crisis.
- Programme Support Costs: no modification in the budget line, which still corresponds to 7% of the project direct costs.
- Audit costs: no changes in the budget line.

It's worth noticing that, following the planned budget relocation, the ratio between direct and indirect costs is not affected

List activities that were implemented during project period:

- drug supplies,
- maternal health care,
- EPI both static and Outreach,
- curative services,
- health education carried out in the facility and at the community at large.
- 2 mass campaigns were also done to commemorate the Hand washing day and Global World HIV Day.
- supporting the CHD in the provision of continuous OPD services in 6 PHCU and IPD services in 3 PHCC,
- Yirol County Hospital MCH is providing on permanent base all the main RH services foreseen in the BPHS.
- Yirol County Hospital has organized and regularly run an outreach plan covering 4/ 7 Payams for a totale of 26 villages
- Yirol County Hospital staff is benefiting of the daily TA provided by highly qualified international medical and nursing staff.
- A PH expert has been appointed as technical advisor to the CHD and he is spending consistent time at the MCH, monitoring especially the EPI service and the surveillance, focusing on data collection and analysis.

List outstanding activities:

- Strengthen the referral system and the emergency response.
- Provide the Mingkamann HF with the PHCC health services.

Review remarks by cluster coordinator.

Name of reviewer

Dr. Julius Wekesa

Explain the rationale to endorse or reject the request

The health cluster is satisfied with the justification provided by the partner hence no objection to the request.

Review remarks by CHF Technical Secretariat:

Name of reviewer

Thomas Nyambane

Health cluster endorsed the request for allocation revision on bases of the justifications provided by CCM. CHF TS reviewed the request and asked CCM to strengthen their justifications. The requested information was provided.

CCM is required to provide a progress narrative report by 15 April 2014 covering activities implementation upto 31 March 2014. A final narrative report will be required one month at the end of the NCE period.

6 - Revision Details

Original CHF Allocation(s) Details of the original CHF allocations (please insert information from allocation tables):		Proposed Revised Allocation(s) Details on proposed revised allocations:	
Output	<p>Specific objective of the project is to ensure continuity of essential health service delivery (safety nets) and adequate emergency preparedness and response capacities - including surgical intervention and EmONC - in all Greater Yiröl and Greater Tonj through:</p> <ul style="list-style-type: none">- The increase of 15% in the utilization rate of PHC at facility level in 6 months, including at least 15% increment in women's access (monthly baseline: 1,200 boys, 1,300 girls, 1,450 men, 1,900 women);- the increase of 15% in the access to emergency health service in 6 months (monthly baselines: 10 emergency surgical operations);- the increase of 20% in the number of referred patients in 6 months (monthly baseline: 34 referred patients).	Output	No changes
Key Activities	<ul style="list-style-type: none">- To provide frontline health service to underserved host, IDPs and returnees' communities in Greater Yiröl and Greater Tonj counties supporting up to 28 facilities (1 hospital, 7 PHCCs and 20 PHCUs).- To ensure effective response to emergencies, including health referral and surgical treatment, is ensured- To promote health, Hygiene and Sanitation practices of host, IDPs and returnees' communities are enhanced and preventive health approach- To improve DSR, EP&R capacities and PHC system management in Greater Yiröl and Greater Tonj	Key Activities	No changes
Locations (specify county):	Warrap - Tonj East, Tonj South (20%) Lakes - Awerial, Yiröl East, Yiröl west (80%)	Locations (specify county):	No changes
Beneficiaries:	60,679	Beneficiaries:	No changes
Duration:	6 months (1 October 2013 – 31 March 2014)	Duration	6 months (1 October 2013 – 31 March 2014)
Indicative CHF Budget:	Relief Items and Transportation	Indicative CHF Budget:	Relief Items and Transportation
	Personnel	58,548	Personnel
	Staff Travel	92,448	Staff Travel
	Training/Workshop/Seminar/Campaign	1,890	Training/Workshop/Seminar/Campaign
	Contracts/ Sub grant	11,255	Contracts/ Sub grant
	Vehicle Operating and Maintenance Costs	0	Vehicle Operating and Maintenance Costs
	Office Equipment and Communication	10,530	Office Equipment and Communication
			0

	Other Costs	10,394		Other Costs	10,094
	Programme Support Costs (PSC)	12,955		Programme Support Costs (PSC)	12,955
	Audit cost (NGOs only)	1,980		Audit cost (NGOs only)	1,980
	Total:	200,000		Total:	200,000

Total Estimated Budget USD 200,000

*Other secured funding: please indicate if there is any other funding or resources (cash or in-kind) received toward activities of this project
 -- Pls indicate D or I against each budget line to indicate whether cost is direct (D) or indirect (I)

PART I												
(a) Items Description (insert more budget line rows as needed)	(b) Location	(c) Cost Type D or I	(d) Unit of measurement	(e) Percentage/ FTE	(f) Quantity	(g) Unit Cost	(h) ORIGINAL CHF Cost	Revised amount	Variance	Variance in %	(i) Other funding to this project including in-kind	
1 RELIEF ITEMS AND TRANSPORTATION (please separate relief items and transportation budget lines)												
1.01 CCM												
1.1.1 Essential Drugs ACT's and Disposable items	Yirol Town	D	see details	35%	1.0	44,313	15,510	15,510	0	0%	10,000	
1.1.2 Lab supplies	Yirol Town	D	see details	35%	1.0	14,651	5,128	5,128	0	0%	2,000	
1.1.3 HF equipment / supplies	Yirol Town	D	see details	35%	1.0	16,422	5,748	5,748	0	0%		
1.1.4 HF maintenance and running costs	Yirol Town	D	see details	40%	1.0	22,908	9,163	9,163	0	0%		
1.1.5 Transport of drugs/materials/supplies	Yirol Town	D	trip/county	60%	3.0	5,000	9,000	9,000	0	0%		
1.02 CUAMM												
1.2.1 Essential emergency drugs to respond to infectious disease outbreaks	Yirol Town	D	lump sum	25%	1.0	20,000	5,000	4,600	-400	-8%	7,000	
1.2.2 Drugs kit to support mobile clinic and YW PHCUs	Yirol Town	D	lump sum	50%	1.0	10,000	5,000	330	-4,670	-93%		
1.2.3 Cleaning materials for Yirol County Hospital and PHCUs (4)	Yirol Town	D	lump sum	50%	1.0	2,000	1,000	762	-238	-24%		
1.2.4 In kind incentives for blood donors	Yirol Town	D	monthly lump sum	0%	6.0	230	0			#DIV/0!		
1.2.5 Surgical Ward rehabilitation	Yirol Town	D	lump sum	20%	1.0	10,000	2,000	4,665	2,665	133%		
1.2.6 Emergency Room maintenance	Yirol Town	D	lump sum	20%	1.0	5,000	1,000	907	-93	-9%		
1.2.7 Equipment for Surgical Ward	Yirol Town	D	lump sum	0%	1.0	4,000	0	0	0	0%		
1.2.8 Equipment for Emergency Room	Yirol Town	D	lump sum	0%	1.0	2,000	0	0	0	0%		
1.2.9 Equipment for Yirol West PHCUs (4)	Yirol Town	D	lump sum	30%	0.0	9,600	0	0	0	0%		
Sub-total SUPPLIES, COMMODITIES...							58,548	55,812	-2,736	-5%		
2 PERSONNEL (provide detailed information on responsibility/title, post location and the percentage dedicated to the CHF project)												
2.01 CCM												
2.1.1 Area Coordinator (2 expat)	Yirol Town	D	month/person	0%	12.0	4,000	0	-	0	0%	4,000	
2.1.2 PHC supervisors (6 expat)	Yirol Town	D	month/person	0%	36.0	1,400	0	-	0	0%	1,400	
2.1.3 Expatriate Lab technician (3 expat)	Yirol Town	D	month/person	0%	18.0	1,200	0	-	0	0%	1,200	
2.1.4 Field staff local medical team (CHV, CHP, CHP vaccinators, CHPs, etc) v	Yirol Town	D	see details	29%	1.0	105,900	30,182	30,182	0	0%	15,091	
2.1.5 Local medical team (CHV, CHP, CHP vaccinators, CHPs, etc) v supporting	Aweraid	D	see details	29%	1.0	68,987	19,661	19,661	0	0%	9,831	
2.1.6 Country Representative	JUBA	I	month/person	10%	4.5	4,500	2,025	2,025	0	0%		
2.1.7 Administrator	JUBA	I	month/person	10%	4.5	2,800	1,260	1,260	0	0%		
2.1.8 M&E Officer /Health Advisor	JUBA	I	month/person	10%	4.5	2,500	1,125	1,125	0	0%		
2.1.9 Logistician	JUBA	I	month/person	10%	4.5	1,500	675	675	0	0%		
2.02 CUAMM												
2.2.1 Medical Doctor in charge of Yirol County Hospital OT (including on job training)	Yirol Town	D	monthly salary	15%	6.0	5,270	4,743	4,694	-49	-1%	4,743	
2.2.2 Medical Doctor in charge of Yirol County Hospital emergency room and	Yirol Town	D	monthly salary	30%	6.0	4,270	7,686	7,686	0	0%		
2.2.3 Nurse in charge of Yirol County Hospital and support for outreach activities	Yirol Town	D	monthly salary	30%	6.0	3,333	5,999	5,999	0	0%		
2.2.4 PH expert in charge of CHD TA on emergency preparedness	Yirol Town	D	monthly salary	0%	6.0	4,270	0	-	0	0%		
2.2.5 Assistant Anesthetist (1) for Yirol County Hospital OT	Yirol Town	D	monthly salary	0%	6.0	1,025	0	-	0	0%	6,150	
2.2.6 Assistant Pharmacist for Yirol County Hospital and Yirol County drugs	Yirol Town	D	monthly salary	100%	6.0	300	1,800	2,225	425	24%	-	
2.2.7 Clinical Officer-Emergency Room	Yirol Town	D	monthly incentives	50%	6.0	800	1,800	-	-1,800	-100%		
2.2.8 Nurses (4) for Yirol County Hospital Emergency Room	Yirol Town	D	monthly incentives	50%	24.0	400	4,800	-	-4,800	-100%		
2.2.9 Nurses (5) for Yirol County Hospital Surgical Ward	Yirol Town	D	monthly incentives	50%	30.0	400	6,000	-	-6,000	-100%		
2.2.10 Driver for Yirol County Hospital Ambulance	Yirol Town	D	monthly salary	100%	6.0	553	3,319	4,819	1,500	45%		
2.2.11 Yirol West Mobile Team per diem	Yirol Town	D	mp sum (per outreach)	0%	48.0	80	0	-	0	0%	3,840	
2.2.12 CM as in charge of project general monitoring and support	Yirol Town	D	monthly salary	0%	6.0	3,250	0	-	0	0%		
2.2.13 Logistician for Yirol County Hospital maintenance	Yirol Town	D	monthly salary	100%	6.0	229	1,373	1,105	-268	-20%		
Sub-total PERSONNEL COSTS							92,448	81,456	-10,992	-12%		
3 STAFF TRAVEL (Flights, DSA, Perdiem, Terminals - Describe the nature of the travel and staff members responsibility/title)												
3.01 CCM												
3.1.1 Road transport Direct staff (tax, per diem, accomodation etc)	Yirol Town	D	county	70%	4.0	500	1,400	1,400	0	0%		
3.1.2 International flight for indirect staff (Juba/Nairobi)	Yirol Town	I	flight	70%	2.0	350	490	490	0	0%		
3.01 CUAMM												
Sub-total STAFF TRAVEL							1,890	1,890	0	0%		
4 TRAININGS, WORKSHOPS, SEMINARS, CAMPAIGNS - (Describe type of training, number of participants, duration)												
4.01 CCM												
4.1.1 Workshops/Training of opinion leaders (VHCs, HHPs, etc)	Yirol Town	D	event	0%	6.0	300	0	-	0	0%		
4.1.2 Training for health staff	Yirol Town	D	see details	5%	1.0	27,100	1,355	1,355	0	0%		
4.1.3 Community outreaches	Yirol Town	D	see details	5%	1.0	18,000	900	900	0	0%		
4.02 CUAMM												
4.2.1 Yirol West County PHCUs staff (12) training on communicable disease	Yirol Town	D	lump sum	0%	1.0	3,661	0	-	0	0%	3,661	
4.2.2 Yirol West County PHCUs staff (12) training on antibiotic resistances	Yirol Town	D	lump sum	0%	1.0	3,661	0	-	0	0%	3,661	
4.2.3 Vaccination campaign (vaccinator per diem, supplies, vehicles renting)	Yirol Town	D	lump sum	100%	1.0	9,000	9,000	23,500	14,500	161%		
Sub-total TRAINING, WORKSHOPS...							11,255	25,755	14,500	129%		
5 CONTRACTS/SUB GRANTS (Specialized services for the project provided by outside contractors or partners/NGOs)												
5.1							0	0	0	0%		
5.2							0	0	0	0%		
5.3							0	0	0	0%		
Sub-total CONTRACTS							0	0	0	0%		
6 VEHICLE OPERATING & MAINTENANCE COSTS (provide detailed information on item/activity)												
6.01 CCM												
6.1.1 maintenance, fuel and spare parts for vehicles and Ambulance	Yirol Town	D	county	60%	3.0	2,000	3,600	3,600			1,782	
6.01 CUAMM												
6.2.1 Fuel and maintenance for Yirol County Hospital Ambulance (average of 200 L)	Yirol Town	D	monthly lump sum	80%	6.0	750	3,600	2,459	-1,142	-32%		
6.2.2 Hiring of cars for extra support to Yirol County Hospital Referral System	Yirol Town	D	monthly lump sum	50%	6.0	1,110	3,330	4,000	670	20%		
Sub-total VEHICLE OPERATING & MAINTENANCE COSTS							10,530	10,059	-472	-4%		
7 OFFICE EQUIPMENT & COMMUNICATIONS (provide detailed information on item/activity)												
7.01 CCM												
7.1.1 IT materials and office supplies (toners, USD drives,stationery) for field offices	Yirol Town	D	county	80%	0.0	250	0	-	0	0%		
7.1.2 IT materials and office supplies (toners, USD drives,stationery) for Juba office	JUBA	I	lumpsum	40%	0.0	1,500	0	-	0	0%		
7.01 CUAMM												
Sub-total OFFICE EQUIP. & COMMUNICATIONS							0	0	0	0%		
8 OTHER COSTS (e.g. bank charges) - provide itemized description of costs.												
8.01 CCM												
8.1.1 Field offices running costs and maintenance	Yirol Town	D	month/county	12%	12.0	2,600	3,744	3,744	0	0%		
8.1.2 Juba office running costs	JUBA	I	month	10%	4.0	12,500	5,000	5,000	0	0%		
8.1.3 visitity/bank charges	JUBA	I	month	30%	6.0	250	450	450	0	0%		
8.02 CUAMM												
8.2.1 Bank charges	Juba	I	monthly lump sum	100%	6.0	200	1,200	900	-300	-25%		
Sub-total OTHER COSTS							10,394	10,094	-300	-3%		
(i) SUBTOTAL Project Costs							185,066	185,066	0	1	0	
(ii) Programme Support costs												
Not to exceed 7% of Project requirements(A)								12,955	12,955	0	0%	
(iii) AUDIT COSTS for NGO implemented projects								1,980	1,980	0	0%	
NOT LESS THAN 1% of the Project Costs(A) and PSC(B)												
GRAND TOTAL ((i)+(ii)+(iii))							200,000	200,000	0	0%		