CHF 2013 Allocation Revision/No-Cost Extension Request Form						
The CHF Technical Secretariatwill compile <u>all</u> 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.						
<u>Instructions</u> :	For CHF Technical Secretariat:					
Complete this request form and submitto the CHF Technical Secretariat	AA/ UNDP Informed Date: By:					
at <u>CHFsouthsudan@un.org</u> and copy <u>kizitoi@un.org</u> . Any major changes made to the original allocation as stipulated in the approved project	Cluster Coordinator Informed Date: By:					
documents must have the endorsement of the cluster coordinator with final approvalmade by the	Grantee Informed Date: By:					
Humanitarian Coordinator.No-cost extension requests should be well justified and submitted at least two weeks before expiration of approved project duration.	CHF Database Updated Date: By:					
	Allocation ID (CHF TS to fill in):13/SA2/0329					

Section 1 - Project Details

Geodoli 1 Troject Details						
Date of Request	5 March 2014, submitted 6 March 2014, resubmitted 21 March 2014, resubmitted 23 April 2014	Cluster	Nutrition			
			T			
Organization Name:	ССМ	Contact Name:	Elisabetta D'Agostino (CCM)			
Project Code:	: SSD-13/H/55145/R/6703		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 13 - 31 March 2014	Amount Allocated:	US\$225,000			
Project Title: Enhancing EP&R to nutrition needs of Host, IDPs and Returnees' communities in Greater Yirol (Lakes State) and Greater Tonj (Warrap State)						

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

Type of Revision:		Reas	Reason for NCE:				
Indicate the type (s) of revision being requested.		Indic	Indicate reason (s) for no-cost extension.				
	Significant change in activities Change in outputs Change in target beneficiaries	X	Change in location Change in budget* Change in recipient org	X	Insecurity Inaccessibility Staffing/recruitment	X	Programmatic delays Delays in finalizing PPA Delays in disbursement of funds
X	Change in project duration/NCE Oth	ler S	Decify:		delays Internal admndelays Procurement delays		Delays in organization's internal transfer of funds Delay in securing supplies from pipeline
No. of month requested 1 Month New end date: 30 April 2014			Other Specify:				

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 December 2013**

\$71,313	32%				
\$153,688	68%				
\$50,000 22%					
80%					

Section 4

This section is for the approving official's review.		
OCHA South Sudan:		
Endorsed by Mr. VincentLelei, OCHA Head of Office, South Sudan	Review Date	_
Humanitarian Coordinator, South Sudan		
Approved by Mr, Toby Lanzer, DSRSG/RC/HC/UNDP RR, South Sudan	Review Date	_
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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 budget across the existing 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 a part of the modification in the duration of the project due to some delay in the activities implementation. The delay is due to the difficult created by the emergency situation in MIngkaman and by the handover of the nutrition activities in the Warrap state. CCM and CUAMM are doing their best to make up for the delay and reach the expected results.

Catchment area of intervention is Warrrap State (Tonj East and Tonj South) and Lakes State (Greater Yirol) served by 1 Hospital and several PHCC/PHCC.

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:

- to increase of 5% the number of SAM cases treated at SC/OTP level in the project catchment area in 6 months;
- to increase at least 5% the number of SAM patients with medical complications referred to higher level facility in 6 months.
- to increase of at least 5% the number of U5/P&LW screened through MUAC measurement (static and outreach),
- to increase of at least 5% the number of women and care-takers (including men and community leaders) sensitized about Nutrition in 6 months.

Expected results of the project still remain:

ER1 Integrated nutrition services for U5 and P&LW in Greater Yirol and in Greater Tonj are consistently provided in1hospital, 6 PHCC and 6 PHCUs

ER2. Acute malnutrition is prevented for both U5 and P&LW in host and IDP/Returnee communities in the catchment area

ER3: Nutrition EP&R capacities at Greater Yirol, Tonj East and Tonj South county level are enhanced

The expenditure data provided above is related to the target of activity achieved in quarter, which we believe is not necessarily related to the level of expenditure achieved on 31 December 2013. 67% of the project beneficiaries where reached at the end of December (see quarterly reporting summary below). Moreover, other preparatory activities where completed (i.e. procurements for medical supplies and maintenance). The unspent amount encountered at the end on December was partly already engaged (procurement and maintenance), and partly unused due to delay of the handover with WVI in Warrap State. Moreover you have also to take in consideration a slight stop of the activities from mid-December to January, due to security reasons that affected the capacity of CCM-CUAMM to finalize certain activities or purchases in line with the work-plan.

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	29,663	19,737	67%
	Women	11,254	5,529	49%
	Girls	8,747	4,711	54%
	Men	764	1,452	190%
	Boys	8,898	8,045	90%

See the quarterly project reporting for further details.

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

Supplies, commodities, equipment, transport: the increment in the budget of \$17.097 is to face the increment of need as consequences of the conflicts raised up at the middle of December. The IDPs, most of them women and children are settled in an open camp with low access to basic needs services. Since the beginning of January CCM is coordinating the H&N cluster with the support of the UN agencies in the field (Unicef, WHO...) with the aim to avoid any overlapping in the health and nutrition services and respond to the IDPs and Host community needs. The budget increment will be used to purchase some equipment (building materials, solar system, etc..) and supplies, Pharmaceutical&Non-Pharmaceutical for SC desk) and transportation cost in order to face the increment in needs.

- Personnel: the most relevant changes in this component refer to the request to decrease the amount allocated for human resources either regional or local (-31.497 USD.). The decrement for CCM is mainly related to the delay in the handover of the nutrition activities in Tonj East and South from WVI (end of January 2014) which has led the delay in the recruitment of the second nutrition specialist as well as the switch of local staff into CCM payroll. With regard CUAMM. the decrement is mainly related to the availability of some other resources. Thedecrement do not affect the ratio between direct and indirect costs, since according to the amendment proposed direct cost represent the 82% of the whole budget.
- Staff flights: no changes.
- Trainings, workshops, seminars, campaigns:no changes
- Vehicle operating and maintenance costs: We ask an increment in the budget of 7.800 USD which is mainly related to the need of ensuring the referral of the beneficiaries in the area affected by the emergency through the rental of an additional vehicle for 1 months as well as the cost of fuel for this new vehicle.
- Office equipment and communications: no changes.
- Other costs:the increment in this budget line of 6.600 USD is mainly related to increment of project staff in Awerial counties to face the emergency situations as well as some resources which are necessary to ensure the purchase of some items in order to ensure the security of the field staff.
- 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:

- Consolidation of Yirol Hospital SC and support of AdiorPHCC SC, based on assessed needs (Lakes State).
- Maintain OTPs in PHCC/Us in Greater Yirol;
- Procurement and prepositioning and distribution of essential/emergency drugs and nutrition supplies for SAM/MAM treatment and management of the related complications at facility level.
- Maintaining coordination (through coordination meetings and MoUs with other IPs: namely Plan/KHI and concerned SMoH) between OTP and STFP services in Greater Yirol counties, when SAM and MAM cases are treated by different partners.
- Maintaining of integrated ANC/PNC and nutrition services for P&LW, including ordinary screening and micronutrient supplementation, in Yirol County Hospital MCH and gradually introducing it in all the PHCC/Us in the whole project catchment area:
- Maintaining integrated U5 growth monitoring within EPI/OPD ordinary service provision, including micronutrient/Vitamin A supplementation and deworming, in Yirol County Hospital MCH and gradually introducing it in all the PHCC/Us in the whole project catchment area:
- Training and education activities

List outstanding activities:

- Start OTP in up to 2 facilities in Tonj East, 2 facilities in TS; 1 facility in Yirol East, 1 facility in Awerial.
- Enhancing the emergency referral system through improved coordination among partners/stakeholders, IDP's especially among population in Awerialcounty.

Review remarks by cluster coordinator.

Name of reviewer

NyaumaNysasani

Explain the rational to endorse or reject the request

The described revision of the budget and reasons given are valid as long as they cover nutrition activities. Please grant this project an extension of 1 month as requested to enable the partner complete planned activities.

Review remarks by CHF Technical Secretariat:

Name of reviewer

Anne - Sophie Lebeux

Nutrition Cluster coordinator discussed and endorsed the request for a one month NCE and allocation revision.

CHF Technical Secretariat reviewed and asked CCM to strengthen justification for NCE and allocation revision. The requested information was provided.

CCM is required to submit a progress narrative report for activities implemented upto 31 March 2014. A final narrative report will be required one month at the end of the NCE period.

6 - Revision I	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	Specific objective of the project is to expand access. Nutrition preventive and curative services for MARP and boys/girls U1/U5 living under the poverty li underserved areas, including IDPs and returnees (Awerial, Yirol East and Yirol West counties), Lakes St Tonj East.	s (P&LWs, wome ne, in remote o in Greater Yiro	n er el	No changes			
Key Activities	 To integrate nutrition services for U5 and P&LW in Greater Yirol and in Greater Tonj are consistently provided in 1 hospital, 6 PHCC and 6 PHCUs To prevent Acute malnutrition for both U5 and P&LW in host and IDP/Returnee communities in the catchment area To enhance Nutrition EP&R capacities at Greater Yirol, Tonj East and Tonj South county level 			No changes			
Locations (specify county):	Warrap - Tonj East, Tonj South (40%) Lakes - Awerial, Yirol East, Yirol west (60%)			No changes			
Beneficiaries:	29,663			No changes			
Duration:	6 months (1 October 13 - 31 March 2014)		Duration	7 months (1 October 13 – 30 April 2014)			
Indicative CHF	Relief Items and Transportation	60,841	Indicative CHF		Relief Items and Transportation	77,939	
Budget:	Personnel	92,079	Budget:		Personnel	60,582	
	Staff Travel	6,176			Staff Travel	6,176	
	Training/Workshop/Seminar/Campaign	7,770			Training/Workshop/Seminar/Campaign	7,770	
	Contracts/ Sub grant	0			Contracts/ Sub grant	0	
	Vehicle Operating and Maintenance Costs	13,302			Vehicle Operating and Maintenance Costs	21,102	
	Office Equipment and Communication	4,560			Office Equipment and Communication	4,560	
	Other Costs	23,475			Other Costs	30,075	
	Programme Support Costs (PSC)	14,569			Programme Support Costs (PSC)	14,569	
	Audit cost (NGOs only)	2,228			Audit cost (NGOs only)	2,228	
	Total:	225,000			Total:	225,000	