



**Terms of Reference for  
UN Secretary-General's  
Haiti Cholera Response Multi-Partner Trust Fund  
(UN Haiti Cholera Response MPTF)**

**21 July 2017**

## I. UN Secretary-General's Haiti Cholera Response Multi-Partner Trust Fund

### **BACKGROUND**

1. Since the beginning of the Haiti cholera outbreak in 2010, an estimated 780,000 people have been affected and more than 9,000 people have died. This has severely impacted families and communities and highlighted the need for improving water, sanitation and health infrastructure in the country.
2. Concerted national and international efforts since 2010 have resulted in a 90 per cent reduction in the number of suspected cases. This number remains high, however, and recent outbreaks show the continued vulnerability of the population to the disease.
3. Cholera outbreak management is complex, requires extensive preparation and calls for several elements to be in place at the same time: people to be mobilized with information and basic requirements for prevention; surveillance for suspected cases; notification; a rapid coordinated response; and a complementary, preventive vaccination campaign.
4. In 2016, the reduction of rapid response teams during the first quarter of 2016 due to funding shortages, combined with a period of heavy and frequent rainfall in May, political instability, as well as the potential loss of natural immunity four years after the highest peaks, are producing adverse effects which has led to an increase in the number of cases compared to previous years. This has highlighted the critical need for sustained and adequate funding to respond to and ultimately eliminate cholera from Haiti.
5. The impact of cholera must also be tackled by providing support for those most affected by cholera, and helping communities and families get back on their feet, ease their plight and better their lives.

### **PROGRAMMATIC FRAMEWORK**

6. To address this critical situation, the Secretary-General announced a new approach in August 2016, which includes the following strategic objectives:
  - a. **Track 1:**
    - a.Track 1a: intensifying immediate efforts to cut transmission of cholera and improve access to care and treatment; and,
    - b.Track 1b: addressing the longer-term issues of water, sanitation and health systems.
  - b. **Track 2:** development of a package of material assistance and support for those most affected by cholera.
7. While many actors on the ground have been working on Cholera Response, the lack of sustained and adequate funds is an obstacle. To generate and manage resources for the implementation of the new approach to Cholera in Haiti, the UN Secretary-General in collaboration with UN Agencies, Funds and Programmes (UN AFP) has launched the **UN Haiti Cholera Response Multi-Partner Trust Fund** (hereafter referred to as the UN Haiti Cholera Response MPTF). The UN Haiti Cholera Response MPTF will provide the framework to support the UN's new approach to cholera in Haiti; it's most immediate purpose will be to provide support for funds for the immediate response to cholera (Track 1a).

8. The aim of the proposed **UN Haiti Cholera Response MPTF**, an inter-agency pooled funding mechanism, is to rapidly resource UN system, Government and NGO community responses to the Cholera outbreak in Haiti, in accordance with the new strategic approach. Similar to the Ebola Response MPTF, the Cholera Response MPTF will be led by the UN Secretary-General's Special Envoy for Haiti and the Director of the Sustainable Development Unit of the Executive Office of the Secretary-General.
9. The UN Haiti Cholera Response MPTF aims to give the Special Envoy to the UN Secretary-General and the Director of the Sustainable Development Unit (serving as the Co-Chairs of the Advisory Committee), in consultation with the Advisory Committee, the ability to allocate funds to priority needs in line with the new approach, encourage predictable donor contributions for each element of the new approach, and allow rapid response to unforeseen needs. It will ensure a coherent contribution through a common financing mechanism, building on specific UN Agencies, Funds, and Programmes (UN AFP) mandates, existing procedures, partnerships, and comparative advantages, as well as enable the collective support of donors, private sector and individuals in support of the UN's new approach.
10. Operational procedures of the MPTF are streamlined to facilitate rapid, transparent, and effective fund allocation processes.
11. The UN Haiti Cholera Response MPTF will ensure:
  - i. A coherent UN System contribution to the overall response through a common financing mechanism, building on specific UN AFP mandates and procedures;
  - ii. Support to the Government of Haiti's prioritized mid-term cholera elimination plan (2016-2018);
  - iii. Address the impact of cholera through assistance to those most affected;
  - iv. Coordinated, and rapid action;
  - v. Mobilization of funding from Member States, regional bodies, inter-governmental organizations, private sector partners, philanthropic organizations, and individuals, and establishment of an accountable, transparent and cost-effective financial instrument;
  - vi. A results-based management system to enable monitoring of the Fund's contribution to the Cholera response; and
  - vii. Support for the UN's efforts in establishing a platform that facilitates the work of other partners and stakeholders in the fulfillment of the inter-agency actions.
12. The UN Haiti Cholera Response MPTF will build upon the successful experience of the UN Ebola Response MPTF and the UN Central Fund for Influenza Action (CFIA). The Ebola Response MPTF and CFIA have demonstrated that a coordinated funding mechanism can support the response to disease outbreaks and strengthen preparedness efforts.

## **Scope and Governance Structure of the UN Haiti Cholera Response MPTF**

13. The scope of the UN Haiti Cholera Response MPTF is to support the new approach, as described in Table 1, which may be amended from time to time.

**Figure 1:**

<b>NEW UN SYSTEM APPROACH ON CHOLERA IN HAITI</b>
<b>TRACK 1a: Intensifying efforts to cut transmission of cholera and improve access to care and treatment</b>
<b>Axis 1: Preventing and Cutting Transmission in Communities</b>
<p><b><i>Objective 1.1: Increase the number of trained rapid response teams</i></b> The number of rapid response teams must be scaled up so that people suspected of having cholera are reached and stabilized (with appropriate community protection) ideally within 24 hours of showing of symptoms and certainly within 48 hours. Teams will need to be properly resourced and trained.</p> <p><b><i>Objective 1.2: Rapid identification and treatment of cases</i></b> Improved and resourced incident management systems will speedily identify and treat cases. This will entail identifying incident managers, effective operational procedures for the deployment and functioning of rapid response teams, appropriate performance management, mapping the capacity of who has capacity to do what in which locations, and robust coordination mechanisms. Support for the incident management function would be an expansion of the existing coordination work undertaken by UNICEF, with technical contribution from PAHO/WHO.</p> <p><b><i>Objective 1.3: Immediate actions to cut transmission</i></b> Distribution of chlorine to households and protection of community water sources. Efforts will be made to ensure local production of chlorine.</p> <p><b><i>Objective 1.4: Revitalize public information campaign to better reach the public and achieve hygiene behaviour changes.</i></b> Reduction in the risk of disease through nationwide public information campaign on water-borne disease, hand-washing and food hygiene, cholera response and procedures for rapid response.</p>
<b>Axis 2 Improve health and reduce mortality</b>
<p><b><i>Objective 2.1: Preventive care: Support for a wider cholera vaccination campaign together with water and sanitation interventions, with an emphasis on household water treatment.</i></b> The large-scale vaccination campaign is planned to start in two departments (Centre and Artibonite). The plan is to first provide to the target population the two doses of vaccine, supported by WASH interventions. Vaccination is an important part of the cholera response and prevention, and needs to be matched with accompanying water and sanitation interventions, such as chlorination of water, to ensure the best efficacy. An evaluation of the results of vaccination and chlorination activities in the Centre department will lay the groundwork for the rollout of a national campaign. At a global level, WHO is leading interventions to ensure an expanded production and supply of cholera vaccines.</p>

***Objective 2.2: Curative care: Strengthen national human resource capacity in acute diarrheal treatment centers, and ensure the integration of cholera treatment (into the health system).***

Implementation of targeted water and sanitation action plans for 8 urban areas considered as persistent cholera hotspots which consistently amplify the disease transmission.

**Axis 3 Coordination and operational support**

The establishment of a national cholera coordination cell has been agreed by the Ministry of Health, PAHO/WHO and UNICEF to clarify procedures for decision making and resource management and to implement them. The High Level Committee for the Elimination of Cholera, co-chaired by the Government of Haiti and the UN, coordinates the overall response, including identification of gaps, ensuring links between community and central levels, and ensures better inter-ministerial coordination on the cholera response. UNICEF and PAHO/WHO are leading on operational support for the cholera response on the ground under the leadership of the Humanitarian Coordinator, and within the context of the incident management system at central and departmental level, and should continue to support coordination of rapid response teams and emergency WASH work.

**TRACK 1b: Addressing the medium/longer term issues of water, sanitation and health systems**

The long-term solution for preventing cholera and other water-borne diseases is investing now in stable, long-term access to clean water and decent sanitation.

Haiti has the lowest rate of access to water and sanitation in the Western Hemisphere. Only a quarter of the Haitian population has access to decent toilets, only half the population has access to safe water. The outbreak of cholera in 2010 and subsequent impact on the population has shown the vulnerability of Haiti's existing water, sanitation and health infrastructure. The Government National Plan for Cholera Elimination (2012-2022) addresses the longer term issue of ensuring access to clean water and proper sanitation. Track 1B activities are aimed at tackling, in a sustainable and long-term manner, the issue of water, sanitation and health which represents not only the long term solution to the elimination of cholera, but is also in full aligned with the Sustainable Development Goals. The United Nations is working with key partners such as the World Bank, the IDB and others to ensure that Haiti meets the Sustainable Development Goals.

***Objective 2.3: Implement national sanitation campaign***

The national sanitation campaign was launched in 2014 and aims to reduce open defecation as well as increase access to clean water. The campaign supports local communities in addressing access to water, rehabilitating water systems and ensuring chlorination to combat contamination. Communities are supported to build toilets and eliminate open defecation.

**TRACK 2: providing material support for those most affected by cholera**

The support to those most affected must go beyond addressing the cholera outbreak, but also needs to include a proposal for a package of material assistance and support to those most affected by the disease. The details of the package of assistance will be included after a period of local consultation.

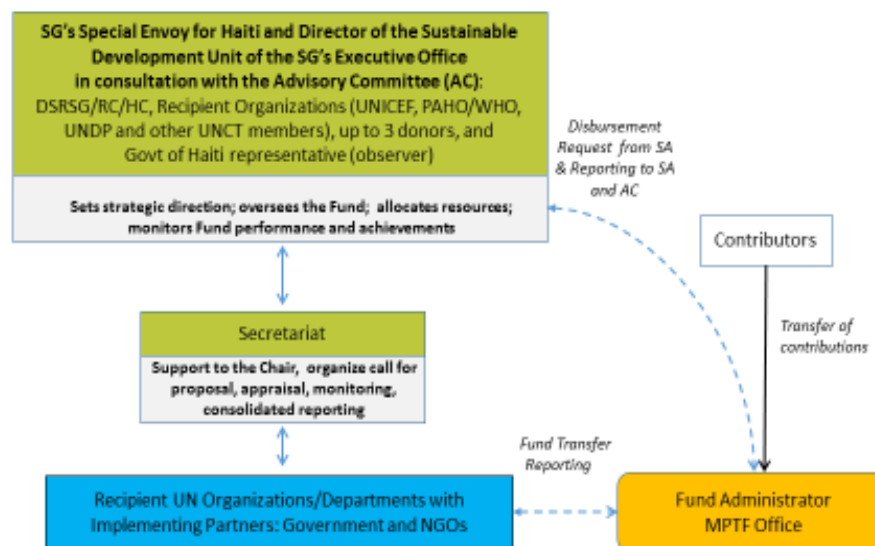
14. In addition, the Fund will be able to support other interventions, including those addressing the risk and treatment of cholera caused by the consequences of Hurricane Matthew, which hit Haiti at the beginning of October.
15. The Fund could also receive earmarked contributions for the global strategic engagement in support of the new approach to cholera in Haiti and organizational learning. Such contributions will be made to a dedicated global window for this purpose

## Governance Structure

### *Advisory Committee*

16. The objective of the UN Haiti Cholera Response Fund is to support the timely allocation and disbursement of donor resources to the most critical needs under the direction of the Co-Chairs of the Advisory Committee, in consultation with the Advisory Committee.
17. The Advisory Committee will provide guidance to the Co-Chairs in the management of the UN Haiti Cholera Response Fund. The Advisory Committee will also serve as a forum for discussing strategic issues and sharing information on funding coverage. The responsibilities of the Trust Fund Advisory Committee include:
  - a. Guidance to the Co-Chairs on the oversight and strategic direction of the Fund and mobilization of its resources in accordance with the TOR;
  - b. Advising the Co-Chairs on project proposals, after technical review undertaken by the Trust Fund Secretariat and making recommendations on funding decisions.
  - c. Receipt and review of the periodic and annual progress narrative and financial reports prepared by the Trust Fund Secretariat and the Administrative Agent.
18. The Advisory Committee will consist of the following members: the UN Secretary-General's Special Envoy for Haiti and the Director of the Sustainable Development Unit of the Executive Office of the Secretary-General (as Co-Chairs), the Deputy Special Representative of the Secretary-General/UN Humanitarian Coordinator/UN Resident Coordinator (DSRSG/HC/RC) for Haiti, UNICEF, PAHO/WHO, UNDP and other UNCT members as appropriate, and up to three donors. The Government of Haiti, represented at the level of the Permanent Representative to the UN in NY, will have observer status. The MPTF Office will serve as ex-officio member of the Advisory Committee.
19. The governance structure of the Fund is presented in Figure 2.

**Figure 2: Governance Structure of the UN Haiti Cholera Response MPTF**



20. The Co-Chairs in consultation with the Advisory Committee will articulate the funding priorities, and with reviewing and approving proposal submissions by Recipient UN Organizations. The Advisory Committee will ensure that the nature of the requests meets the established funding priorities and that their scope conforms to the needs.
21. The Advisory Committee will meet anytime it should be required to do so, upon invitation from the Co-Chairs. The Advisory Committee will meet physically, via video or teleconference.
22. In circumstances where an immediate emergency funding is required in order to respond to an urgent requirement that is in line with the overview of needs and requirements and/or funding priorities of the Fund, the Co-Chairs, in consultation with the Advisory Committee, may approve proposals electronically on a “no-objection” basis within 24 hours.
23. The Co-Chairs, in consultation with the Advisory Committee, supported by the Fund Secretariat and Administrative Agent, will develop and adopt Rules of Procedure, which will include all relevant templates.

#### ***Fund Secretariat***

24. The Co-Chairs of the Advisory Committee will be supported by a small Fund secretariat hosted in the MPTF Office. Fund Secretariat will provide the administrative support to the Co-Chairs of the Advisory Committee; support the fund mobilization efforts led by the Co-Chairs; organize calls for and appraisal of proposals; and monitor and report on Fund’s programmatic and operational performance to the Advisory Committee. The costs of the Fund Secretariat will be kept to a minimum and will be covered by the UN Haiti Cholera Response MPTF as direct costs, with budget submitted to the Co-Chairs, in consultation with the Advisory Committee, for approval.

#### ***Recipient UN Organizations***

25. The UN Haiti Cholera Response MPTF is designed to support and allocate resources to Recipient UN Organizations in undertaking specific activities and functions, aligned with the actions of the Strategic Response, as may be amended from time to time, and approved by the Co-Chairs, in consultation with the Advisory Committee. **Recipient UN Organizations** of the Fund will include **UN Funds and Programmes, and UN Specialized Agencies**.
26. The Recipient UN Organizations sign a Memorandum of Understanding with Multi-Partner Trust Fund Office (MPTF Office) of the UNDP, serving as Administrative Agent.
27. Each Recipient UN Organization shall assume full programmatic and financial accountability for the funds disbursed to it by the Administrative Agent. Such funds will be administered by each UN Agency, Fund, and Programme in accordance with its own regulations, rules, directives and procedures. Each Recipient UN Organization shall establish a separate ledger account for the receipt and administration of the funds disbursed to it by the Administrative Agent.
28. Indirect costs of the Recipient UN Organizations recovered through programme support costs will be 7%. All other costs incurred by each Recipient UN Organization in carrying out the activities for which it is responsible under the UN Haiti Cholera Response MPTF will be recovered as direct costs.

## **Fund's Implementing Partners**

29. **Implementing Partners**, consisting of **Government institutions and NGOs** (“the Implementing Partners”) can receive funding from the Fund through Recipient UN Organizations.
30. One of the Recipient UN Organizations would serve as Managing Agent for Government and NGO implemented projects. The Implementing Partners will receive funds for approved projects from this Recipient UN Organization.
31. The Government institutions and NGOs will need to sign an agreement with the Recipient UN Organization.

## ***Administrative Agent***

32. The UN Haiti Cholera Response MPTF will be administered by the MPTF Office, acting as the Administrative Agent. The MPTF Office is a UN Facility which administers over 100 UN common funding instruments (<http://mptf.undp.org>).
33. UNDP MPTF Office is responsible for Fund design and set-up, the maintenance of the Fund account, the receipt of donor contributions and the disbursement of funds upon instructions from the Co-Chairs in consultation with the Advisory Committee and provision of periodic consolidated reports. The MPTF Office charges a standard one-time fee of 1% for pass-through services of the UN pooled funds, which will be deducted from the contributions to the UN Haiti Cholera Response MPTF at the time they are deposited.

## **III. Proposal development and approval**

34. The UN Haiti Cholera Response MPTF will allocate funds to Recipient UN Organizations based on Organizations' proposals. The Recipient UN Organizations, Government institutions and NGO Implementing Partners will be invited to submit proposals to the Secretariat upon issuance of a Call for Proposals. Recipient UN Organizations should submit to the Secretariat proposals after due consultation with the DSRSG/HC/RC for Haiti and appropriate members of the UN Country Team with relevant expertise.
35. The Fund Secretariat will review the proposals submitted by Recipient UN Organizations to ensure that all the required information is included in the standard proposal before submission to the Co-Chairs, as further described in the Rules of Procedure. The Co-Chairs, in consultation with the Advisory Committee will then review the vetted proposals and either approve it, request further review or reject it. Upon approval of a proposal the Advisory Committee Co-Chairs will advise the UN Haiti Cholera Response MPTF Administrative Agent to disburse the authorized amount to the Recipient UN Organization. The request to transfer funds will be signed by the Co-Chairs of the Advisory Committee and include all relevant documentation to enable a disbursement. The Administrative Agent will disburse the authorized amounts to a Recipient UN Organization within 48 hours (two business days) of receiving all the required documentation and instructions from the Co-Chairs of the Advisory Committee.
36. The proposal approval process and the timelines of the allocation cycle will be described in the Rules of Procedure.
37. The Co-Chairs, in consultation with the Advisory Committee, with the support of the Fund Secretariat and Administrative Agent, will prepare a standard proposal form to be used



by all Recipient UN Organizations when submitting proposals to the UN Haiti Cholera Response MPTF.

38. In order to ensure that the operations of the UN Haiti Cholera Response MPTF allow for an adequate and timely response to any emergency need (particularly in the case of Track 1a support), and in particular to minimize the time needed for reviewing requests, the Co-Chairs, in consultation with the Advisory Committee, with the support of the Fund Secretariat and the Administrative Agent, will review its procedures and decide on any amendment deemed necessary to further fast track procedures.

#### **IV. Contributions to the UN Haiti Cholera Response MPTF**

39. Contributions to the UN Haiti Cholera Response MPTF may be accepted from Member States, regional bodies, inter-governmental organizations, businesses, foundations and individuals. Contributors are encouraged to provide un-earmarked contributions into the UN Haiti Cholera Response MPTF, which will be programmed by the Co-Chairs in consultation with the Advisory Committee. If due to specific donor preferences the un-earmarked contributions are not feasible, donors may earmark their contributions to a specific Track of the New UN Approach.
40. To contribute to the UN Haiti Cholera Response MPTF, a contributor needs to sign a Standard Administrative Arrangement (SAA). Contributions to the UN Haiti Cholera Response MPTF may be accepted in fully convertible currency of unrestricted use. Such contributions will be deposited into the bank account designated by the MPTF Office, as stated in the SAA.
41. The value of a contribution payment, if made in other than US dollars, will be determined by applying the United Nations operational rate of exchange in effect on the date of payment. Gains or losses on currency exchanges will be recorded in the UN Haiti Cholera Response MPTF account established by the Administrative Agent.

#### **V. Fund Management and Operational Principles**

42. Resources from the UN Haiti Cholera Response MPTF will be utilized for the purpose of meeting the direct and indirect costs of proposals managed by Recipient UN Organizations. Details of such proposals, including respective budgets and implementation partners, will be as set out in the relevant proposal documents.
43. Whenever possible and to the extent that it does not jeopardize the privileges and immunities accorded to them and the safety and security of their staff, the Recipient UN Organizations will promote donor visibility on information, funded activity materials and at funded activity sites.
44. The UN Haiti Cholera Response MPTF will be operationally closed upon completion of all proposals funded through the MPTF and after satisfaction of all commitments and liabilities.
45. Any balance remaining in the Fund Account or in the individual Recipient UN Organizations' separate ledger accounts upon completion of the UN Haiti Cholera Response MPTF will be used for a purpose mutually agreed upon by the donors and the Co-Chairs, in consultation with the Advisory Committee or returned to the donor(s) in

proportion to their contribution to the Fund as agreed upon by the donors and the Co-Chairs, in consultation with the Advisory Committee.

## **VI. Monitoring and Reporting**

46. To facilitate the monitoring and evaluation reporting of resources allocated by the Fund, Recipient UN Organizations applying for the UN Haiti Cholera Response MPTF will be required to disclose complementary funding received from other sources for the activities supported by the Fund.
47. For each proposal approved for funding from the UN Haiti Cholera Response MPTF, each Recipient UN Organization shall provide the Administrative Agent and the Fund secretariat with the following statements and reports prepared in accordance with the accounting and reporting procedures applicable to the Recipient UN Organization concerned.
  - (a) Narrative progress reports for each twelve-month period, to be provided no later than three months after the end of the applicable reporting period;
  - (b) Annual financial reports as of 31 December each year with respect to the funds disbursed to it from the UN Haiti Cholera Response MPTF Account, to be provided no later than four months after the end of the applicable reporting period;
  - (c) A final consolidated narrative report and financial report, after the completion of the activities financed by the UN Haiti Cholera Response MPTF and including the final year of the activities, to be provided no later than 30 April of the year following the operational closing of the project activities;
  - (d) A final certified financial statement, to be provided no later than 31 May of the year following the financial closing of the project.
48. Implementing Partners shall provide the Recipient UN Organization, acting as the Managing Agent, with the reports agreed in the agreement referred in Paragraph 30, which will include quarterly, annual and final narrative and financial reports within the timelines specified in the above-mentioned agreement.
49. The Co-Chairs, in consultation with the Advisory Committee may agree upon the provision of additional reporting, such as quarterly or six monthly reports, including informal disbursement and commitment figures, if deemed necessary for effective resource mobilization and transparency of the UN Haiti Cholera Response MPTF.
50. The reports will be consolidated by the Fund's secretariat and provided to each donor that has contributed to the UN Haiti Cholera Response MPTF Account, to the Co-Chairs and the Advisory Committee as per the schedule established in the Standard Administrative Agreement.
51. The MPTF Office maintains, within the MPTF Office Gateway, the UN Haiti Cholera Response MPTF web-site (<http://mptf.undp.org/cholera>), and provides up-to-date programmatic and real-time financial information on contributions received and funds transferred and quarterly updates. The MPTF Office Gateway (<http://mptf.undp.org>) is a web-based service portal, which provides real-time financial data generated directly from UNDP's accounting system. In order to effectively provide fund administration

services and facilitate monitoring and reporting to the UN system and its partners, the Gateway provides financial information including: contributor commitments and deposits, approved programme budgets, transfers to and expenditures reported by Participating Organizations, interest income and other expenses.

52. The UN Haiti Cholera Response MPTF will also carry out a “lessons-learned exercise” of the UN Haiti Cholera Response MPTF, as decided by the Co-Chairs in consultation with the Advisory Committee. The Co-Chairs in consultation with the Advisory Committee will determine the exact scope and objectives of the lessons learned and review exercise(s).

### **VII. Other Operational Aspects**

53. The UN Haiti Cholera Response MPTF is established for an initial period of 3 years to finance and implement actions described in Paragraph 13 of this TOR. If the Co-Chairs, in consultation with the Advisory Committee, deems necessary to extend the Fund beyond the initial period it can extend the fund through a decision of the Co-Chairs in consultation with the Advisory Committee and the Administrative Agent.