OCHA					Droice	ot Droposs									
Coordination Saves Lives					Projec	ct Proposa									
Organization	IMC (International Medical Co	xpanded Delivery of Inpatient Healthcare Services at Beletweyne Hospital													
Project Title	Expanded Delivery of Inpatie	xpanded Delivery of Inpatient Healthcare Services at Beletweyne Hospital HF-DMA-0489-515													
CHF Code	CHF-DMA-0489-515														
Primary Cluster	Health	hdard Allocation 1 (May 2013) Project Duration 8 months													
CHF Allocation	Standard Allocation 1 (May 2														
Project Budget	103,716.01	Code SOM-13/H/56521 CAP Budget 611,1													
CAP Details	CAP Code	SOM-13/H/56521		CAP Budget		611,170.00									
	CAP Project Ranking	A - HIGH		CAP Gender Mark	ker										
Project Beneficiaries			Men	Women	Total										
	Beneficiary Summary														
			Boys	Girls	Total										
			20,0	55	. 3.0.										
			Tota	al											
	Total beneficiaries include	e the following:													
	Children under 5		1,000	1,500	2,500										
	Urban Poor		4,500	5,800	10,300										
	Pregnant and Lactating Wor	men	0	1,800	1,800										
	Staff (own or partner staff, a	authorities)	57	36	93										
Implementing Partners															
Organization focal point	Name: Christine Forster T	itle: Program Coordinato	r, Somalia & Somaliland	 !											
contact details	Telephone: +25472456231	8 E-mail: cforster@Inte	ernationalMedicalCorps.	org											
BACKGROUND INFORMAT	ION														
Project rationale. Humanitarian context: Give a specific description of the humanitarian situation in the target region based on newest data available (indicate source) (Maximum of 1500 characters)	Despite ongoing insecurity in opportunity to access the are functional referral hospital in regions, as well as southern from 2008. On December 31 need (based on average con CESVI, with support from the months of consultations and parties agreed that CESVI w services. IMC is requesting \$ ensure coverage of planned.	a & avail resident and IDF Hiraan Region (population Ethiopia. MSF began provion , 2012, MSF ended its fina sumption rates) through the Health Cluster and fundin negotiations with the Direct ould assume responsibility 105K in additional funding	P populations with urgen of approximately 300,0 iding health services in Euroial support to the hose end of March 2013. In ag from CHF, initiated optorate of Health (DoH), of for all outpatient care,	atly required healthcare (00) and its catchment per letweyne Hospital in spital, leaving behind a strenational Medical Coperations in Beletweyne local government authowhile IMC would suppo	& other services. Belet population extends into 2007 and started manastock of medical consumps (IMC) and CESVI(0) and CESVI(0) and CESVI(0) and CESVI(0) and CESVI(0) are the pediatric, maternity, and community of pediatric, maternity, and community of pediatric, maternity, and community of the pediatric and c	weyne Hospital is the or Bakool and Galgaduud aging operations remotel mables sufficient to cove Cooperazione E Sviluppo 3, after more than three members. The involved and emergency surgical									
2. Needs assessment. Describe the capacities in place, then identify the gaps (previous and new). Explain the specific needs of your target group(s) in detail. State how the needs assessment was conducted (who consulted whom, how and when?). List any baseline data	The volume of consultations on data communicated by Miprogram implementation, IMC beneficiaries, nearly 60% of services, for which IMC did ndiscussed & agreed to with the local government has made the importance of mobilizing identified an urgent need for entire inpatient department & grant for Beletweyne).	SF, IMC anticipated an avec crecorded a monthly aver- whom were female. IMC hot receive CHF funding to the DoH. However, since II clear that security, not hea community/Diaspora supp additional funding to address	erage per month of 80 s age of 139 surgeries and as identified the urgent of provide under the original MC has initiated operational lithcare, is the top priority ort to promote the sustal ess unanticipated gaps,	surgical cases and 60 d d 141 deliveries. In Ap- need for support to fem- nal grant, as these costs ons, Diaspora support t y for its limited budget. sinability of hospital ser- particularly for medical	eliveries. Yet during the ril & May, IMC provided hale & male inpatient ms were to be covered by the hospital has all but IMC will continue to envices. In the meantime, I commodities and food	e first two months of d inpatient services to 1' dedical (non-surgical) y other parties, as initiall ut ceased, and the new gage local authorities of however, IMC has rations, to operate the									
Activities. List and describe the activities that your organization is currently implementing to address these needs	Since initiating operations in the pediatric, maternity, & em maternity unit, to ensure suffi IMC assumed responsibility f which, under the original CHI had done since 2008; howev ground to ensure program questionate and control to the result of the program of	nergency surgery units of to icient female staffing cover- or service provision in the Figrant, IMC did not receiver, IMC quickly recognized reality. In addition to provide referral system has been of	the hospital. IMC carefull rage. In the absence of a entire inpatient department of that the complex content ing clinical services, IMC fficially rolled out, IMC e er than anticipated. The	ly considered gender disupport from other part nent, including the adult IC had initially planned ext demanded the regulaction is also working to devexpects admissions, par \$105K in funding requi	uring staff recruitment, ies, including the local at male & female medicat to manage hospital act ar presence of IMC mare relieved a functioning reference of the tricularly of women to the ested through this propersion.	particularly for the authorities and Diaspora al (nonsurgical) wards, for ivities remotely, as MSF nagement staff on the real system in the ne maternity unit, to osal to supplement the									

LOGICAL FRAMEWORK														
Objective 1	Improve access and availability to quality health care for women, children, and men in the Beletweyne area, with women and children comprising between 70% and 80% of beneficiaries. Inpatient department of Beletweyne Hospital has medical commodities sufficient for the provision of high-quality, life-saving, healthcare services to													
Outcome 1	Inpatient department of Beletweyne Hospital has medical commodities sufficient for the provision of high-quality, life-saving, healthcare services to women (3,000), men (2,000), girls (2,800) and boys (2,500).													
Activity 1.1	Procure and deliver high-quality medical commodities, including supplies and pharmaceuticals, to Beletweyne Hospital to address the healthca of women (3,000), men (2,000), girls (2,800), and boys (2,500) in the inpatient department (maternity, pediatric, surgical, and adult medical nonwards). Locally procure and supply food commodities (sorghum, rice, beans, sugar, oil, and iodized salt) and cooking fuel sufficient to prepare and proventies.													
Activity 1.2					e, beans, sugar, oil, and iodized s									
Activity 1.3														
Indicators for outcome 1		CI	luster	Indicator descript	ion					Tar	get			
	Indicator 1.1	l He	ealth	Number of consultation	ns per clinician per day by admir	nistrative u	ınit		30					
	Indicator 1.2	2 He	ealth	Number of hot meals p	provided to each inpatient per da	ay				2				
	Indicator 1.3	В Не	ealth							0				
Outcome 2	_	functioning health referral system is established for the Beletweyne Area and Beletweyne hospital has increased capacity to respond to surgical eds of catchment population.												
Activity 2.1	male) on spe	cific surgica	al procedu		e-job training to the hospital surg the hospital's capacity to provid									
Activity 2.2	Healthcare w Beletweyne H	•	male and 2	25 female) from surroundi	ng health and nutrition facilities t	rained on	a standard	d policy ar	d protoco	l for referi	ral to			
Activity 2.3														
Indicators for outcome 2		Cluster Indicator description									Targe			
	Indicator 2.1	Health	Number of health facilities supported						1					
	Indicator 2.2	Health	Number of healthcare/nutrition staff from surrounding health and nutrition facilities trained on referral policy protocol						and	50				
	Indicator 2.3													
Outcome 3														
Activity 3.1														
Activity 3.2														
Activity 3.3														
Indicators for outcome 3				Cluster	Indicator description				Tar	get				
	Indicator 3.1	I		Health	0									
	Indicator 3.2	2		Health 0										
	Indicator 3.3	3		Health 0										
WORK PLAN														
Project workplan for activities defined in the	Activity D	escriptio	n			Month 1-2	Month 3-4	Month 5-6	Month 7-8		Mont 11-1			
Logical framework	Activity 1.1 Procure and deliver high-quality medical commodities, including supplies and X pharmaceuticals, to Beletweyne Hospital to address the healthcare needs of women (3,000), men (2,000), girls (2,800), and boys (2,500) in the inpatient department (maternity, pediatric, surgical, and adult medical non-surgical wards).													
	Activity 1.2 Locally procure and supply food commodities (sorghum, rice, beans, sugar, oil, and iodized salt) and cooking fuel sufficient to prepare and provide hot mealsthat meet daily caloric requirementsto each inpatient (3000 women, 2000 men, 2800 girls, 2500 boys) during the length of his/her stay.													
	Activity 1.	Activity 1.3												
	hospital surge	eon (male) a echniques to	and supportion improve the	ng clinical staff (6 female ar	rovide on-the-job training to the nd 6 male) on specific surgical vide quality surgical interventions 100 girls, 2500 boys.)		Х	Х						
		Activity 2.2 Healthcare workers (25 male and 25 female) from surrounding health and nutrition facilities trained on a standard policy and protocol for referral to Beletweyne Hospital.												

	Activity 2.3															
	Activity 3.1															
	Activity 3.2															
	Activity 3.3															
M & E DETAILS	'															
						Mon	th (s	s) w	hen	plai	nned	d M	& E	will b	e doi	ne
Activity Description			M & E Tools to use	Means of verification	1	2	3	4	5	6					11	
supplies and pharmaceuticals, to needs of women (3,000), men (2,	ver high-quality medical commoditi Beletweyne Hospital to address th ,000), girls (2,800), and boys (2,50 surgical, and adult medical non-su	- Data collection - Field visits - Verification	Procurement records; consumption records	х	Х	х	Х	Х	х	х	Х					
sugar, oil, and iodized salt) and o	ically procure and supply food commodities (sorghum, rice, beans, ized salt) and cooking fuel sufficient to prepare and provide hot daily caloric requirementsto each inpatient (3000 women, 2000 -). Data collection - Field visits - Verification - Consumption records						Х	Х	Х	Х	Х	Х				
Activity 1.3																
training to the hospital surgeon (r male) on specific surgical proced	geon recruited to support and provi male) and supporting clinical staff (ures/techniques to improve the ho- ons to the target beneficiary popula 500 boys.)	- Field visits - Individual interview - Other	- Individual interview assessment; site						X	X	х					
_	ers (25 male and 25 female) from s a standard policy and protocol for I	- Data collection - Field visits - Other	Program staff visit health and nutrition facilities to monitor/assess referral system uptake; record keeping of referral forms collected from patients referred to hospital			X	X	X	X	X	X					
Activity 2.3																
Activity 3.1																
Activity 3.2																
Activity 3.3																
OTHER INFORMATION																
Coordination with other	Organization	Activity														
Organizations in project area	1. CESVI	-	are jointly operating Beletweyne	Hospital; IMC is delive	ring	inpat	ient	servi	ices	while	e CE	SVI	is de	liverir	g	
		outpatient service Coordination	es													
	2. Save the Children		-4- 5					-1. IN	10 :-							
	 WARDI WARDI has relocated its stabilization center from western Beletweyne town into Beletweyne Hospital; IMC is working closely with WARDI to ensure SAM cases receive appropriate medical care 											with				
Gender theme support	Yes															
Outline how the project supports the gender theme	Funding requested through th inpatient services for women recruitment, particularly for the ensure sufficient 24/7 female Development of the referral syunderstanding healthcare acc facilities on standard policy ar completion.	(3,000), men (2,00) e maternity unit. The staffing coverage system involves makes by gender an	00), girls (2800), and boys (2. This current proposal requests in the maternity unit, where the apping of health and nutrition d age. Training of male (25) a	.500) through March funding for recruitme ne number of monthly services in Beletwey and female (25) healt	15, 2 ent o deli ne to hcar	014. of two verie own a	. IM(o ad es to and orke	dition date surre	reful nal r e ha ound om s	lly co midv is fa ding surro	onsid vives r exi area ound	derections derections described desc	d ge oth f led i th an nealt	nder emale nitial n emp h and	during e—to projec ohasis	staf ctions on
Select (tick) activities that supports the gender theme	-		ality medical commodities, includ 000), girls (2,800), and boys (2,5													lical
	provide hot mealsthat me		ood commodities (sorghum, rice quirementsto each inpatient (30							_						
	Activity 1.3:															
	female and 6 male) on spe	ecific surgical proce	ed to support and provide on-the edures/techniques to improve the en, 2800 girls, 2500 boys.)									_				
	Activity 2.2: Healthcar referral to Beletweyne Hos		and 25 female) from surrounding	ng health and nutrition	facilit	ies t	raine	ed on	a s	tand	ard p	olicy	and	proto	col fo	r

		A	ctivit	y 2.3:											
		A	ctivit	y 3.1:											
		A	ctivit	y 3.2:											
		A	ctivit	y 3.3:											
BUDGET															
BODGLI	4440		_ 4 1	-11	-1->										
1.1 Supplies, commodities,	1.1.1 Supplies (materials and goods)														
equipment and transport	Code	Budget Lin	ne Desc	cription			Unit Cost Units		Timeframe	Amount(USE) Organiza	tion	CHF	% of CHF Total	
and transport		Drugs and	d Medica	al Supplies			19473.61	1	3.5	68,157.6	4 C	.00	68,157.64		
		Hospital M	Mattress	protection plast	tic sheets		15	50	1	750.0	0 0	.00	750.00		
		Food Ratio	on (Inp	atient)			1562.59	1	6.5	10,156.8	4 0	.00	10,156.84		
	Subtotal Supplies									79,064.4	7 C	.00	79,064.47	81.6	
	1.1.2 Transport and Storage														
	Code Budget Line Description				Unit Co:	st U	Inits	s Timeframe		unt(USD)	Organization	CHF	% of CHI	Total	
	Sub	total Trans	port ar	nd Storage						0.00	0.00	0.00		0.0	
1.2	1.2.1 International Staff														
Personnel (staff,	Code B	udget Line D	escripti	on	Unit Cost	Unit	ts T	imeframe	Amour	nt(USD)	Organization	CHF	% of CHF	Total	
consultants, travel and	Sul	btotal Inter	nation	al Staff						0.00	0.00	0.00		0.0	
training)	1.2.2 Lc	cal Staff													
	Code B	udget Line D	escripti	on	Unit Cost	Unit	ts T	imeframe	Amour	nt(USD) Organizat		CHF % of CH		HF Total	
	Subtotal Local Staff									0.00	0.00	0.00		0.0	
1.3 Training of	Code	Code Budget Line Description					Unit Cos	t Units	Timeframe	Amount(USE	Organiza	tion	CHF	% of CHF Total	
Counterparts		Training o	n the r	eferral system fo	or Health worker	rs	3966.38	1	1	3,966.3	8 (0.00	3,966.38		
		Subtot	al Trai	ning of Counte	erparts					3,966.3	3,966.38 0.0		3,966.38	4.1	
I.4 Contracts with mplementing	Code	Budget Lin	ne Desc	cription			Unit Cost	Units	Timeframe	Amount(USE	O) Organiza	zation CHF		% of CHF Total	
partners)		Consultan	Consultant Trainer (Surgeon)				2500	1	3	7,500.0	0 0	0.00	7,500.00		
			Subto	otal Contracts						7,500.0	0 (0.00	7,500.00	7.7	
1.5 Other Direct Costs	Code	Budget Lin	ne Desc	cription			Unit Cost	Units	Timeframe	Amount(USE	Organiza	tion	CHF	F Total O.0 F Total O.0 F Total O.0 W of CHF Total 7. W of CHF Total 6.0 W of CHF Total 7.0000	
		Hospital U					800	1	8	6,400.0		0.00	6,400.00		
		Suk	ototal (Other Direct C	osts					6,400.0	0 (0.00	6,400.00	6.6	
			Т	OTAL						96,930.8	0.00	9	6,930.85		
2.0 Indirect Costs										Amount(USD)	Organization	on	CHF		
		Indirect C	osts							6,785.16	0.0	00	6,785.16	7.0000	
			GF	RAND TOTAL						103,716.01	0.0	00 1	03,716.01	100.0	
Other sources	of funds														
	Descrip	ption		Amour	nt %										
	Organization 0.00				00.00										
	Community 0.0				00 0.00										
	CHF			103,716.0	01 100.00										
	Other [Donors	a)	0.0	00										
			b)	0.0	00										

LOCATIO	SNC											
Region	District	Location	Activity	ivity Beneficiary Description Number								
Hiraan	Belet Weyne	Belet Weyne	Expanded support for inpatient service delivery at Beletweyne Hospital	Women, men, girls, boys, urban poor, IDPs, pregnant and lactating women, IMC-recruited hospital staff, healthcare staff from referral facilities	10393	4.735984	45.204268	NB- 3815- G05- 001				
TOTAL					10,393							

DOCUMENTS

Document Description

- 1. Letter Proof of action on audit recommendation
- 2. IMC Somalia 2nd CHF Budget Beledweyne WIth BOQs and Breakdowns Revised 5