

CHF 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-sudan/financing/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 type="checkbox"/>	AA/ UNDP Informed	Date: _____	By: _____
<input type="checkbox"/>	Cluster Coordinator Informed	Date: _____	By: _____
<input type="checkbox"/>	Grantee Informed	Date: _____	By: _____
<input type="checkbox"/>	CHF Database Updated	Date: _____	By: _____

Allocation ID (CHF TS to fill in): 13/SA2/0259

Section 1 – Project Details

Date of Request	24 March 2014, submitted 25 March 2014, resubmitted 11 April 2014	Cluster	Health
Organization Name:	International Medical Corps [IMC]	Contact Name:	Golam Azam
Project Code:	SSD-13/H/55433/13107	Contact Email/Tel No.:	gazam@internationalmedicalcorps.org/+211 954 894 409
Location:	Akobo	Date of Allocation:	16 August 2013
Duration (start and end date as PPA/agreement):	1 December 2013 to 31 March 2014	Amount Allocated:	US\$300,000
Project Title:	Reduce maternal morbidity and mortality and provision of emergency surgery through support of Akobo County Hospital		

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

<p>Type of Revision: Indicate the type (s) of revision being requested.</p> <table border="0"> <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 checked="" type="checkbox"/> Change in project duration/NCE</td> <td>Other Specify: _____</td> </tr> </table> <p>No. of month requested 2 Month New end date: 31 May 2014</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 checked="" type="checkbox"/> Change in project duration/NCE	Other Specify: _____	<p>Reason for NCE: Indicate reason (s) for no-cost extension.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Insecurity</td> <td><input type="checkbox"/> Programmatic delays</td> </tr> <tr> <td><input checked="" 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: _____</p>	<input checked="" type="checkbox"/> Insecurity	<input type="checkbox"/> Programmatic delays	<input checked="" 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 **< 28 Feb 2014 >**
 Amount of Funds Unspent as of **< 28 Feb 2014 >**
 Amount of Funds Committed But Not Spent by **< 31 Mar 2014 >**
 Percentage of Activities Completed as of **< 1 April 2014 >**

\$136,652.00	46%
\$163,348.00	54%
\$22,251.00	7%
80%	

Section 4

This section is for the approving official's review.

OCHA South Sudan:

Endorsed by **Ms. Catherine Howard**, OCHA Deputy 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 _____

Section 5 – Revision Description and Justification

Description and justification of requested change
<p>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.</p> <p>To reallocate funds to a new project, please provide a detailed explanation for why the new project was chosen to receive the reallocation.</p> <p>Please provide revision details in the revision table in section 6 of this document.</p>
<p>With the emergence of the country-wide political crisis in early December 2013, its synergy effect on Akobo was characterized by unique escalation whereby two humanitarian workers and two UNMISS soldiers were killed at the UN- base on 19 December 2013. Re-locatable staffs of all NGOs were as a result compelled to leave and operations of every NGO scaled down significantly.</p> <p>Following that incident, there has been no cargo and personnel movement to Akobo either by UN flight or commercial flight; since Akobo was declared by both government and UN as rebel territory. As a result, drugs, nutrition and WASH supplies including highly skilled health personnel all ran short. Services provided for the past two months are barely marginal and far-less adequate for the old host population.</p> <p>During the joint UN/INGOs mission to Akobo on Wednesday 5 March 2014, it was reported by SSRRC that 18,000 IDPs mainly from Bor and Malakal have influx Akobo which was evident by the unusual over-crowdedness of the town; though UN-OCHA is planning a joint verification exercise of this IDP figures.</p> <p>Since the crisis began, preventable death told within the Akobo community resulting from need for surgery, measles outbreak response, and lack of proper treatment for complicated cases of malaria and diarrhea is 13 [mostly children].</p> <p>Federal Ministry of Health [MOH] of South Sudan has the primary responsibly to supply drugs to the County; whilst IMC supplement to fill in gaps following MOH supplies. It's important to note that MOH drugs for 2013 were not received till date and it's less likely that Akobo will receive MOH drugs for 2014. IMC now carries the total burden of providing drugs, equipments, re-agents and non-medical supplies in wholesome to serve both old, new population and anticipated population that may ensue in the raining season.</p> <p>Hence the need for this re-alignment since IMC is taking the lead amongst other agencies in Akobo to resume full-scale operation this week; though it's the only organization that lost a medical staff in Akobo during the crisis.</p>
<p>Justification for budget line variations</p> <p>Field Supplies- More supplies are needed</p> <p>Hospital Rehabilitation and maintenance- Due to difficulties of getting construction materials on the ground we will not be able to carry out the hospital rehabilitation</p> <p>Drugs, Medical Equipment, Supplies- IMC now carries the total burden of providing the drugs and equipment ,re-agents and non-medical supplies hence the increase in this budget line</p> <p>Transportation of program supplies and equipment- Most plane charters and other transporters are reluctant to fly /travel to Akobo at the moment. IMC is utilizing the WFP flights/UNHAS to transport goods to this project area</p> <p>EPI & Cold Chain Maintenance- This line covers the cost of renting/purchasing and maintaining solar fridges for provision of vaccines and cold chain supplies, however was not utilized in full during the period where activities were reduced</p> <p>Country Director- Due to other funding sources the amount charged to this grant is lower than initially anticipated</p> <p>Finance Manager- There has been need of increased financial oversight of the programme as the finance officer normally based has been reluctant to return to Akobo</p> <p>Logistics Coordinator-There was a temporary vacancy in this position and therefore some savings during the time IMC was looking for a replacement</p> <p>Logistics Manager- There was a temporary vacancy in this position and therefore some savings during the time IMC was looking for a replacement</p> <p>Senior HR Manager- Due to other funding sources the amount charged to this grant has been lower than initially anticipated</p> <p>Security Manager-There was a temporary vacancy in this position and therefore some savings during the time IMC was looking for a replacement</p> <p>National staff- Akobo- Due to the prevailing security situation ,some national staff have been reluctant to return to work in Akobo after the recent crisis</p> <p>National staff – Juba- More staff charges charged than initially anticipated. More support being provided from Juba level</p> <p>Foreign Workers Compensation@ 7.29%- IMC no longer offers this benefit as part of its compensation package to its international employees</p> <p>Food/Living Allowance- Due to reduction in some staff charges to this grant the amount of their allowance also reduces</p> <p>R&R (Rest & Recuperation)-Due to the reduction of staff charges to this grant their amount of their allowance also reduces</p> <p>National staff Medical coverage-There has been delays in instituting medical coverage for staff. we hope to institute this later this year</p> <p>National Staff Travel per diem-More Travel anticipated than initially planned due to relocation of staff for security reasons</p> <p>National & International Staff Travel accommodation-More travel anticipated due to relocation of staff for security reasons</p> <p>In country travel – airfare- More travel anticipated due to relocation of staff for security reasons</p> <p>Vehicle/Motorbikes/boats Registration/Insurance/Maintenance –Akobo- The motor vehicle in Akobo requires major</p>

<p>rehabilitation</p> <p>Vehicle/Motorbikes Registration/Insurance/Maintenance – Juba- There has been an increase in the cost of spares of the Juba vehicle</p> <p>Hospital Generator Fuel- Due to the security situation IMC is solely responsible for the supply of fuel for the running of the hospital. We anticipate purchasing more fuel due to shortages in the hospital</p> <p>Hospital Generator maintenance- There is need for increased maintenance of the generator in Juba</p> <p>Laptops / Desktop Computers / Printers- The prices of the laptop and printer purchased were higher than initially anticipated</p> <p>Communication – Juba- We are not charging communication cost during the cost extension period</p> <p>Office utilities and Supplies – Akobo-More supplies purchased for the field offices than initially anticipated. Less anticipated during the extension period</p> <p>Office utilities and Supplies – Juba-More supplies purchased for the juba offices than initially anticipated. Less anticipated during the extension period</p> <p>Postage/Courier- A slight increase anticipated during the cost extension period.</p> <p>Fuel and Maintenance of Generators – Akobo-Due to the relocation of the staff there has been reduced charging to the period</p> <p>Fuel and Maintenance of Generators – Juba- Major repairs done to the juba generator to ensure smooth running of the office</p> <p>Legal Fees (including NGO forum registration fee) - There has been an increase in the annual subscription fees of NGOs for to the NGO forum. This cost is shared across all grants.</p> <p>Bank Charges and Cash Facilitator Fees- Due to the security situation the cost of cash transfers to Akobo has increased</p> <p>General insurance- There has been a slight increase in the general cost of insurance. We are also not charging this cost in the cost extension period</p> <p>Security company services- The security company has increased it charges</p>		
<p>List activities that were implemented during project period:</p> <ul style="list-style-type: none"> • Hiring of additional staff according to needs • Participation in hospital management committee • Procurement of drugs and essential consumables • Provision/management of essential services • Supervision of essential clinical services, pharmacy and laboratory. • Maintain an infection control/waste management sub-committee at hospital • Monitoring/Supervision of staff to ensure standardized infection control/waste management practices • On the job training and mentoring (clinical, pharmacy/labs/infection control) • Provision of needed job aids 		<p>List outstanding activities:</p> <ul style="list-style-type: none"> • Procurement of drugs and essential consumables [now looked partially done as the situation demands].
<p>Review remarks by cluster coordinator.</p>	<p>Name of reviewer</p>	<p>Dr. Julius Wekesa</p>
<p>Explain the rationale to endorse or reject the request</p>		
<p>The cluster has no objection to this request. The extension of the timeline and budget realignment will enable IMC carry out the remaining highlighted activities and ensure availability of drugs for the response. I am available to respond to any clarifications as required</p>		
<p>Review remarks by CHF Technical Secretariat:</p>	<p>Name of reviewer</p>	<p>Anne-Sophie Lebeux</p>
<p>CHF Technical Secretariat reviewed the request for NCE and allocation revision and asked Health cluster coordinator to include his review remarks.</p> <p>Health cluster coordinator discussed and endorsed the request for NCE and allocation revision based on the above justification.</p> <p>IMC UK 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.</p>		

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.																													
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Key Activities	<ol style="list-style-type: none"> Ensure urgently needed drugs, medical, laboratory consumables and surgical supplies, and establish use of MoH drug supply management tools/system. <ul style="list-style-type: none"> Ensure availability of essential drugs, medical, laboratory and essential sanitation supplies (through MoH and direct procurement and transport) Secure the MoH Pharmaceutical supply chain management tools for Akobo Hospital Train and supervise relevant staff in the use of MOH SCM tools Provide quality in-patient and out-patient routine and emergency services <ul style="list-style-type: none"> Staff key positions in the hospital, while encouraging the CHD to hire staff if the budget becomes available Assure staff have the needed registers, protocols, supplies and equipment to provide care to MoH standards Supportive supervision of clinical services, pharmacy and laboratory On-the-job and short trainings to improve knowledge and skills of attending staff. Strengthen universal precaution, infection control and health care waste management behaviors among hospital staff <ul style="list-style-type: none"> Routinely monitor universal precaution, infection control and health care waste management during supervision visits Offer refresher training to staff not complying with standards Mentor universal precaution and infection control sub-committee to the hospital management committee 	Key Activities	<ol style="list-style-type: none"> Ensure urgently needed drugs, medical, laboratory consumables and surgical supplies, and establish use of MoH drug supply management tools/system. <ul style="list-style-type: none"> Ensure availability of essential drugs, medical, laboratory and essential sanitation supplies (through MoH and direct procurement and transport) Secure the MoH Pharmaceutical supply chain management tools for Akobo Hospital Train and supervise relevant staff in the use of MOH SCM tools Provide quality in-patient and out-patient routine and emergency services <ul style="list-style-type: none"> Staff key positions in the hospital, while encouraging the CHD to hire staff if the budget becomes available Assure staff have the needed registers, protocols, supplies and equipment to provide care to MoH standards Supportive supervision of clinical services, pharmacy and laboratory On-the-job and short trainings to improve knowledge and skills of attending staff. Strengthen universal precaution, infection control and health care waste management behaviors among hospital staff <ul style="list-style-type: none"> Routinely monitor universal precaution, infection control and health care waste management during supervision visits Offer refresher training to staff not complying with standards Mentor universal precaution and infection control sub-committee to the hospital management committee Maintain disease surveillance and emergency response capacity <ul style="list-style-type: none"> Ensure weekly ISDR reports compiled and sent to CHD/SMOH and national level, and alert relevant as per protocols Revise emergency preparedness and response plans and hold one 																												

	<p>4. Maintain disease surveillance and emergency response capacity</p> <ul style="list-style-type: none"> • Ensure weekly ISDR reports compiled and sent to CHD/SMOH and national level, and alert relevant as per protocols • Revise emergency preparedness and response plans and hold one simulation with hospital staff, and one with each Boma health committee who has completed a response plan before March 2013. • Provide on-the-job and refresher training to operating theatre staff on surgical interventions and related procedures. <p>In addition IMC will coordinate with the CHD and Nile Hope Development Forum to assure continued smooth referral of clients from PHCC/PHCU level to hospital level.</p>		<p>simulation with hospital staff, and one with each Boma health committee who has completed a response plan before March 2013.</p> <ul style="list-style-type: none"> • Provide on-the-job and refresher training to operating theatre staff on surgical interventions and related procedures. <p>In addition IMC will coordinate with the CHD and Nile Hope Development Forum to assure continued smooth referral of clients from PHCC/PHCU level to hospital level.</p>		
Locations (specify county):	Akobo	Locations (specify county):	Akobo		
Beneficiaries:	20,351	Beneficiaries:	20,351		
Duration:	4 Months (1 December 2013 to 31 March 2014)	Duration:	6 Months (1 December 2013 to 31 May 2014)		
Indicative CHF Budget:	Relief Items and Transportation	32,726	Indicative CHF Budget:	Relief Items and Transportation	40,394
	Personnel	188,519		Personnel	153,238
	Staff Travel	5,534		Staff Travel	8,820
	Training/Workshop/Seminar/Campaign	1,000		Training/Workshop/Seminar/Campaign	1,000
	Contracts/ Sub grant	0		Contracts/ Sub grant	0
	Vehicle Operating and Maintenance Costs	14,427		Vehicle Operating and Maintenance Costs	25,923
	Office Equipment and Communication	4,500		Office Equipment and Communication	5,057
	Other Costs	30,892		Other Costs	43,166
	Programme Support Costs (PSC)	19,432		Programme Support Costs (PSC)	19,432
	Audit cost (NGOs only)	2,970		Audit cost (NGOs only)	2,970
	Total: 300,000		Total: 300,000		