

Project Proposal

Organization	UNICEF (United Nations Children's Fund)					
Project Title	Support to emergency and routine immunization interventions through vaccine provision, strengthening of cold chain systems, capacity building and implementation of immunization services to prevent outbreaks of Vaccine Preventable Diseases in South Sudan					
Fund Code	SSD-15/SA1/H/UN/195					
Cluster	Primary cluster			Sub cluster		
	HEALTH			None		
Project Allocation	1st Round Standard Allocation		Allocation Category Type	Core pipeline		
Project budget in US\$	1,480,039.99		Planned project duration	6 months		
Planned Start Date	01/01/2015		Planned End Date	30/06/2015		
OPS Details	OPS Code	SSD-15/H/72955		OPS Budget	0.00	
	OPS Project Ranking			OPS Gender Marker		
Project Summary	To ensure that boys, girls and women among vulnerable populations (IDPs, refugees, returnees and the host population) have access to quality immunization services to prevent outbreaks of vaccine preventable diseases.					
Direct beneficiaries		Men	Women	Boys	Girls	Total
	Beneficiary Summary	0	59639	549402	571826	1,180,867
	Total beneficiaries include the following:					
	Internally Displaced People	0	28204	259819	270424	558447
People in Host Communities	0	31435	289583	301402	622420	
Indirect Beneficiaries			Catchment Population			
Link with the Allocation Strategy	<p>The project will contribute to health cluster objective number 1 decreasing excess mortality and morbidity by strengthening the quality of emergency health care through the prevention of communicable diseases, since vaccine preventable diseases account for a substantial percentage of the burden of morbidity and mortality in children under five. The project will contribute to raising awareness at the community level on the importance of vaccination for children and pregnant women. The project will contribute to objective 2 enhancing health systems capacity to adequately respond to outbreaks due to vaccine preventable diseases, with a particular focus on measles. At the same time, communities in high risk areas will be targeted with awareness and communication campaigns on the importance of measles and polio immunization, as well as early identification at the community level of suspected measles cases.</p> <p>The CHF source of funding is essential to ensure the procurement of core immunization supplies for the first quarter of 2015. Current stocks will only last for a period of 3 months, in the event that no new epidemics are reported. Cases of measles have been reported during the last quarter of 2014 in several counties of the three conflict-affected states and response to those outbreaks is ongoing, compromising the country stocks of measles vaccine. Transportations costs to those hard to reach locations, as well as cold chain items are on the high side, due to scarcity of air strips, partners on the ground and fixed cold chain structures. It is impossible to preposition vaccines for two reasons: 1) lack of cold chain facilities, 2) epidemics arise in different locations. UNICEF will preposition vaccines in its hubs of Bentiu, Bor and Malakal, as well as with partners prior to each campaigns. Vaccines are sent to implementing partners just prior to campaigns, due to the lack of cold chain facilities in the three conflict-affected states; vaccines are usually chartered to partners on the ground, through close coordination with the health cluster and the Expanded Program of Immunization technical working group, as soon as the outbreak is confirmed.</p>					
Sub-Grants to Implementing Partners			Other funding Secured For the Same Project (to date)			
Organization focal point contact details	Name	Title		Phone	Email	
	Gloria Puertas	Primary Health Care Specialist		0955260267	gpuertas@unicef.org	
BACKGROUND INFORMATION						
1. Humanitarian context analysis.. Humanitarian context: Describe the current humanitarian situation in the specific locations where this project will be implemented	<p>Overview:</p> <ul style="list-style-type: none"> South Sudan as a new nation has been facing serious structural, human, technical, and logistical challenges to ensure that children and women receive quality immunization services to protect from vaccine preventable diseases. The on-going armed conflicts since mid-December 2013 further aggravated the situation making it highly difficult to reach children and women with life-saving immunization services. Existing capacity and infrastructure for immunization services is very weak countrywide, but particularly in the three conflict affected states. <p>Key indicators:</p> <ul style="list-style-type: none"> The health status of the women and children of South Sudan was extremely poor even prior to the crisis. The maternal and under-five child deaths were high at 2.054/100,000 live births and 108/1,000 live births respectively. According to the 2012 EPI coverage survey, 34% infants below one year were fully immunized, 46% children had received measles vaccine before one year of age, and 45% had received DPT3. As a result, most children have been at risk of morbidity and mortality resulting from vaccine preventable diseases. <p>Constraints and challenges:</p> <ul style="list-style-type: none"> This current crisis has resulted in destruction of health facilities, cold chain systems, and immunization supply chain. This is set against the background of an already fragile health system, compromising the access of quality health services for the affected populations. The risk of outbreaks of vaccine preventable disease has been heightened among affected populations with the already poor routine immunization coverage in the country and compounded by increasing risk factors such as high population displacement and overcrowding in IDP camps. Measles outbreaks have occurred in some of the IDP camps with a total of 798 suspected cases of measles and 82 deaths (CFR 10 - 27%) reported. Delivery of immunization services to conflict affected populations living outside IDP camps have been hampered following destruction of health facilities and looting of cold chain equipment, relocation of health workers and limited access to the affected communities due to insecurity. 					
	<p>2. Needs assessment. Explain the specific needs of the target group(s), explaining existing capacity and gaps. State how the needs assessment was conducted, list any baseline data and explain how the number of beneficiaries has been developed. Indicates references to assessments such as Multi-cluster/sector Initial Rapid Assessments (MIRA)</p> <p>Several cold chain assessments were conducted during 2011 and 2014, but there is not reliable information on health and cold chain facilities in many counties in the three conflict affected states. Most government and NGO supported health facilities do not have health staff allocated to immunization activities.</p>					
3. Description Of Beneficiaries	<p>This project for this CHF standard allocation round follows the same geographic priorities as identified by the health cluster. These are as follows:</p> <ol style="list-style-type: none"> Jonglei – all counties Upper Nile – all counties Unity – all counties Lakes – Aweril, Yirol West, Yirol East and Rumbek North Central Equatoria – Juba (IDP camps) Warrap - Twic, Agok, Gogrial East, Tonj North, Tonj South and Tonj East 					
4. Grant Request Justification.	Rationale:					

- The risk of outbreaks of vaccine preventable diseases remains high in these populations. This project aims to improve access to quality immunization services for children less than fifteen years of age both boys and girls; and by pregnant women, to prevent outbreaks of vaccine preventable diseases.
- This will be achieved through:
 - provision of safe and potent vaccines and related injection materials,
 - improving social mobilization and advocacy to increase uptake of immunization services especially during emergency immunization activities,
 - improving coordination and response to outbreaks and strengthening the cold chain system through repair and maintenance of cold chain equipment in accessible priority areas.
- UNICEF continues to play a pivotal role in South Sudan immunization program to ensure that children and women, among the affected communities are protected from vaccines preventable diseases.
- UNICEF is entirely responsible for the procurement, storage, and distribution of all vaccines and injection materials for routine, supplementary, and emergency immunization activities, and establishment and maintenance of the cold chain system across the country through procurement of cold chain equipment and their installation, repair, renovation, rehabilitation and maintenance.

5. Complementarity. Explain how the project will complement previous or ongoing projects/activities implemented by your organization.

LOGICAL FRAMEWORK

Overall project objective To ensure that boys, girls and women among vulnerable populations (IDPs, refugees, returnees and the host population) have access to quality immunization services through training of health workers on immunization, provision of cold chain equipment and operational funding of routine and emergency immunization activities, to prevent outbreaks of vaccine preventable diseases.

Logical Framework details for HEALTH

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
2015 SSO 1: Improve access to, and responsiveness of, essential including emergency health care, and emergency obstetric care services	SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need	75
2015 SSO 2: Enhance existing systems to prevent, detect and respond to disease outbreaks	SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need	25

Outcome 1	Vulnerable children (IDPs, refugees, returnees and the host population) up to 15 years of age are vaccinated through integrated emergency vaccination campaigns.			
Code	Description	Assumptions & Risks		
Output 1.1	Measles vaccinations given to 6m - 15 years in emergency or returnee situation	<p>Assumptions: Security allows conducting vaccination campaigns. Campaigns are accepted by the beneficiaries.</p> <p>Risk: lack of partners on the ground in hard to reach counties, where there is no MoH presence, but where measles cases are reported.</p> <p>Means of verification: UNICEF Vision reports of supplies sent to partners registered in the system. Partners vaccination campaigns reports. EPI technical working group meetings minutes.</p>		

Indicators

Code	Cluster	Indicator	End Cycle Beneficiaries				End-Cycle Target
			Men	Women	Boys	Girls	
Indicator 1.1.1	HEALTH	[Frontline services] # of children > 5 to 15 years who have received measles vaccinations in emergency or returnee situation			549402	571826	1121228
Means of Verification:							

Activities

Activity 1.1.1	Procurement of vaccines and related injection materials for the PoCs in conflict affected States.
Activity 1.1.2	Respond to vaccine preventable disease outbreaks through appropriate mechanisms such as integrated campaigns and RRM in accessible areas of the priority locations
Activity 1.1.3	Social mobilization activities implemented to support vaccination activities
Activity 1.1.4	Monitoring the implementation of immunization campaigns.
Activity 1.1.5	Procurement of vaccines and related injection materials to respond to epidemics in hard to reach locations.
Activity 1.1.6	Reception of vaccines for PoCs at Juba level.
Activity 1.1.7	Booking charter flights to dispatch vaccines to hard to reach locations.
Activity 1.1.8	Storage of vaccines upon reception in the national cold chain store.
Activity 1.1.9	Dispatch vaccines from national cold chain to partners responding to epidemics upon confirmation of the epidemic.

Outcome 2	Cold chain systems are functional in accessible areas of priority locations			
Code	Description	Assumptions & Risks		
Output 2.1	Cold chain systems in health facilities, counties and states are maintained	<p>Assumption: the security situation will allow the deployment of staff to maintain cold chain systems. The PoCs of Bentiu, Bor and Malakal will continue to exist during the first 6 months of 2015.</p> <p>Risks: Deterioration of security entailing evacuation of UNICEF staff in charge of cold chain in the PoCs. Charter flights not allowed to fly to specific locations of the three conflict affected States.</p> <p>Means of verification: UNICEF Funds utilization for procurement of cold chain items, chartering flights and release orders to the field.</p>		

Indicators

Code	Cluster	Indicator	End Cycle Beneficiaries				End-Cycle Target
			Men	Women	Boys	Girls	
Indicator 2.1.1	HEALTH	[Core pipeline] # of implementing partners receiving supplies from the pipeline					20
Means of Verification:							

Indicator 2.1.2	HEALTH	Number of cold chain facilities functional in priority locations.																0
Means of Verification:		Ministry of Health list of cold chain facilities. UNICEF registry of functional cold chain facilities																

Activities

Activity 2.1.1	Installation of cold chain equipment in priority locations.
Activity 2.1.2	Pre-positioning of essential vaccines in re-established cold chain facilities
Activity 2.1.3	Monitoring the arrival and effective installation of cold chain equipment.
Activity 2.1.4	Repair and maintenance of established cold chain facilities.
Activity 2.1.5	Prepositioning of cool boxes and ice packs to conduct immunization campaigns in hard to reach locations.
Activity 2.1.6	Provide partners implementing immunization campaigns in hard to reach locations with cold chain items for the duration of the campaign.
Activity 2.1.7	Maintain a registry of all the partners receiving cold chain items.
Activity 2.1.8	Maintain a registry of cold chain facilities assessed, rehabilitated and fully operational.

WORK PLAN

Project workplan for activities defined in the Logical framework	Activity Description (Month)	Year	Month															
			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec				
	Activity 1.1.1 Procurement of vaccines and related injection materials for the PoCs in conflict affected States.	2015	X	X	X	X	X	X										
	Activity 1.1.2 Respond to vaccine preventable disease outbreaks through appropriate mechanisms such as integrated campaigns and RRM in accessible areas of the priority locations	2015	X	X	X	X	X	X										
	Activity 2.1.1 Installation of cold chain equipment in priority locations.	2015	X	X	X	X	X	X										
	Activity 2.1.2 Pre-positioning of essential vaccines in re-established cold chain facilities	2015		X	X	X	X	X										
	Activity 1.1.3 Social mobilization activities implemented to support vaccination activities	2015	X	X	X	X	X	X										
	Activity 2.1.3 Monitoring the arrival and effective installation of cold chain equipment.	2015		X		X		X										
	Activity 1.1.4 Monitoring the implementation of immunization campaigns.	2015		X		X		X										
	Activity 1.1.5 Procurement of vaccines and related injection materials to respond to epidemics in hard to reach locations.	2015	X	X	X	X												
	Activity 1.1.6 Reception of vaccines for PoCs at Juba level.	2015	X	X	X	X	X											
	Activity 1.1.7 Booking charter flights to dispatch vaccines to hard to reach locations.	2015	X	X	X	X	X	X										
	Activity 1.1.8 Storage of vaccines upon reception in the national cold chain store.	2015	X	X	X	X	X	X										
	Activity 1.1.9 Dispatch vaccines from national cold chain to partners responding to epidemics upon confirmation of the epidemic.	2015	X	X	X	X	X	X										
	Activity 2.1.4 Repair and maintenance of established cold chain facilities.	2015	X	X	X	X	X	X										
	Activity 2.1.5 Prepositioning of cool boxes and ice packs to conduct immunization campaigns in hard to reach locations.	2015	X	X	X	X	X	X										
	Activity 2.1.6 Provide partners implementing immunization campaigns in hard to reach locations with cold chain items for the duration of the campaign.	2015	X	X	X	X	X	X										
	Activity 2.1.7 Maintain a registry of all the partners receiving cold chain items.	2015	X	X	X	X	X	X										
	Activity 2.1.8 Maintain a registry of cold chain facilities assessed, rehabilitated and fully operational.	2015	X	X	X	X	X	X										

M & R DETAILS

<p>Monitoring & Reporting Plan: Describe how you will monitor the implementation of each activity. Describe the tools you plan to use (checklist, photo, questionnaires, interviews, suggestion box etc.) in order to collect data and how you will store data. Explain the frequency type and protocol of reporting (how often do you report about what to whom?). State if, when and how you plan to evaluate your project .</p>	<p>UNICEF will keep a centralized database recording ins and outs of the central stockpile, with quantities dispatched, times and partners. UNICEF cold chain officer will be accountable for this information. Partners will report to UNICEF on a weekly basis on the number of vaccines utilized during the reporting week, with a detailed breakdown (age and sex) of the beneficiaries. UNICEF will keep databases on the number of beneficiaries reached by location. Reports will be shared with the health cluster on a monthly basis, with the exception of reactive campaigns, where the reporting will be done on a weekly basis. Partners implementing vaccination campaigns will send the weekly data to WHO and UNICEF immunization specialists who will further analyze and share with the health cluster; those reports include the number of children reached by the campaign, with a breakdown by sex and age, plus the number of vials utilized. Challenges in the implementation of the campaign are reported in the narrative.</p> <p>UNICEF will provide the Humanitarian Coordinator through the technical secretariat, with the following reports: 1) Funds utilization 2) List of supplies (vaccines and cold chain items) procured 3) List of supplies distributed to partners 4) Number of beneficiaries reached by the pipeline disaggregated by location, sex and age. Since the project has been reduced to 6 months, UNICEF will provide only a final report. Ad hoc reports might be provided to the Humanitarian Coordinator upon request.</p>
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OTHER INFORMATION

Accountability to Affected Populations	Awareness and information campaigns will be conducted prior to every immunization campaign, targeting IDPs, host and returnee communities. Health educators will be present at health facilities explaining the importance of vaccines to prevent infectious diseases. UNICEF will procure vaccines of adequate quality and following international standards. Communities will be involved in the design and implementation of campaigns.
Implementation Plan: Describe for each activity how you plan to implement it and who is carrying out what.	The proposal will be implemented only during the first six months of 2015, based on access to priority locations and potential epidemics of vaccine preventable diseases, by UNICEF, health cluster partners and the MOH. UNICEF is the sole provider of vaccines in South Sudan and coordinates immunization activities with the MOH and WHO through the EPI technical working group. Partners are able to access vaccines by submitting requests to the MOH. Supervision of the immunization activities will be conducted jointly by MOH, UNICEF and WHO. UNICEF will preposition supplies only in Bentiu, Bor and Malakal PoCs with funding from this project. Partners responding to epidemics (measles and polio) will receive the supplies as per the government policy: 1/ Outbreak is confirmed 2/ Micro-planning finalized 3/ Training of vaccinators 4/ Vaccines dispatched to partner on the ground as per the micro-planning. Vaccines will be only sent prior to the campaigns, therefore, no prepositioning required, based on 2014 experience and due to the lack of cold chain facilities.
Coordination with other Organizations	

in project area	
Environmental Marker Code	
Gender Marker Code	1-The project is designed to contribute in some limited way to gender equality
Justify Chosen Gender Marker Code	Activities undertaken by the project ensure the participation of women during the design, implementation and monitoring through a range of interventions. At the community level, women are engaged in consultations, participatory appraisals and communication campaigns on the importance of vaccination. Traditional birth attendants (majority are women) are supported to promote immunization activities. Boys and girls are targeted through tailored education sessions on vaccine preventable diseases, where their views are taken into consideration and utilized to develop new messages. Women and men are targeted at community level to understand the advantages and risks of immunization, the impact on community's health, the locations in their communities where vaccines are available, as well as the campaigns that might take place during the coming months. Community resilience is promoted across all the interventions.
Protection Mainstreaming	
Safety and Security	
Access	

BUDGET

1 Staff and Other Personnel Costs (please itemize costs of staff, consultants and other personnel to be recruited directly by the implementing partner for project implementation)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
1.1	Immunization specialist (P3)	S	2	18529	6	25.00%	55,587.00	55,587.00	55,587.00	111,174.00
1.2	Cold chain officer (P2)	D	3	14850	6	50.00%	133,650.00	66,825.00	66,825.00	133,650.00
1.3	Immunization officer (NOB)	S	1	3077	6	25.00%	4,615.50	4,616.00	4,615.00	9,231.00
1.4	Cold chain officer (NOA)	D	4	3000	6	50.00%	36,000.00	14,094.00	14,094.00	28,188.00
Section Total							229,852.50	141,122.00	141,121.00	282,243.00

2 Supplies, Commodities, Materials (please itemize direct and indirect costs of consumables to be purchased under the project, including associated transportation, freight, storage and distribution costs)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
2.1	Measles vaccine, 10 dose vial	D	131940	2.52	1	60.00%	199,493.28	0.00	0.00	
2.2	Oral polio vaccine, 20 dose vial	D	67320	2.85	1	60.00%	115,117.20	0.00	0.00	
2.3	TT vaccine, vials	D	7160	0.97	1	60.00%	4,167.12	0.00	0.00	
2.4	Syringe, 0.05 ml box of 100	D	1451	3.43	1	60.00%	2,986.16	0.00	0.00	
2.5	Syringe, 0.5 ml box of 100	D	12094	3.95	1	60.00%	28,662.78	0.00	0.00	
2.6	Safety boxes, box of 25	D	596	16	1	60.00%	5,721.60	0.00	0.00	
2.7	Cotton wool rolls 500g	D	7000	2.23	1	75.00%	11,707.50	0.00	0.00	
2.8	Transportation	D	1	216546	1	80.00%	173,236.80	0.00	0.00	
Based on the average cost of 15,000 USD to charter flights to hard reach locations during 2014.										
Section Total							541,092.44	0.00	0.00	0.00

3 Equipment (please itemize costs of non-consumables to be purchased under the project)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
Section Total							0.00	0	0	0.00

4 Contractual Services (please list works and services to be contracted under the project)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
4.1	Support to implementation of emergency immunization activities through direct implementation and through partners	D	1	300000	1	45.00%	135,000.00	0.00	0.00	
Response to epidemics of vaccine preventable diseases plus Rapid Response Missions to hard to reach locations.										
4.2	Support to cold chain installation, repair and maintenance	D	1	25000	6	100.00%	150,000.00	0.00	0.00	
Contracts for installation, repair and maintenance of cold chain equipment at average of \$25,000 per month										
4.3	Support to implementation of communication and social mobilization activities	D	1	100000	1	100.00%	100,000.00	0.00	0.00	
Awareness and information prior and during campaigns (recruitment of social mobilizers, training, provision of t-shirts, caps, pens, incentives and megaphones). This lump sum will cover for social mobilization for three campaigns.										
4.4	Warehousing and Logistics Costs	D	1	98000	1	80.00%	78,400.00	0.00	0.00	
21% of the value of supplies stored										
Section Total							463,400.00	0.00	0.00	0.00

5 Travel (please itemize travel costs of staff, consultants and other personnel for project implementation)

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Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
5.1	Staff travel for monitoring and implementation support	D	20	1240	6	50.00%	74,400.00	37,200.00	37,200.00	74,400.00
	Return ticket and 10 days DSA in a month-\$400 for return flight and \$84 DSA per day, for each person. Most missions are conducted jointly with partners.									
	Section Total						74,400.00	37,200.00	37,200.00	74,400.00

6 Transfers and Grants to Counterparts (please list transfers and sub-grants to project implementing partners)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
	Section Total						0.00	0	0	0.00

7 General Operating and Other Direct Costs (please include general operating expenses and other direct costs for project implementation)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
7.1	Security and MoSS Compliance of Office Premise	S	1	333950	1	5.00%	16,697.50	0.00	0.00	
7.2	Fuel for vehicles and generators	S	1	653850	1	5.00%	32,692.50	0.00	0.00	
7.3	ICT Costs	S	1	250800	1	10.00%	25,080.00	0.00	0.00	
	Based on 6 months ICT costs in Malakal, Bentiu, Bor and RRM missions during 2014.									
	Section Total						74,470.00	0.00	0.00	0.00

Sub Total Direct Cost	1,383,214.94
Indirect Programme Support Cost PSC rate (insert percentage, not to exceed 7 per cent)	7%
Audit Cost (For NGO, in percent)	
PSC Amount	96,825.05

Quarterly Budget Details for PSC Amount	2015		Total
	Q1	Q2	
	0.00	0.00	0.00

Total Fund Project Cost	1,480,039.99
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Project Locations

Location	Estimated percentage of budget for each location	Beneficiary Men	Women	Boy	Girl	Total	Activity
Jonglei	25					0	
Lakes	12					0	
Unity	25					0	
Upper Nile	25					0	
Warrap	5					0	
Central Equatoria	8					0	

Project Locations (first admin location where activities will be implemented. If the project is covering more than one State please indicate percentage per State)

Admin Location1	Percentage
Jonglei	25
Lakes	12
Unity	25
Upper Nile	25
Warrap	5
Central Equatoria	8

DOCUMENTS

