



EBOLA RESPONSE MULTI-PARTNER TRUST FUND PROPOSAL

Proposal Title: Ebola Response and Recovery Capacity Support for the Resident Coordinator – UN Sierra Leone	Recipient UN Organization(s): United Nations Development Programme (UNDP)
Proposal Contact: The Resident Coordinator Address: C/O UNDP, Wilkinson Road, Freetown Telephone: +232 789000059 E-mail: Gabriel.Rugalema@fao.org (RC a.i.)	Implementing Partner(s) – name & type (Government, CSO, etc): N/A
Proposal Location (country): Please select one from the following <input type="checkbox"/> Guinea <input type="checkbox"/> Liberia <input checked="" type="checkbox"/> Sierra Leone <input type="checkbox"/> Common Services	Proposal Location (provinces): Freetown, Sierra Leone
Project Description: <i>One sentence describing the project's scope and focus.</i> The Inter-agency Collaboration for Ebola (ICE) recently concluded that for the post-Ebola epidemic chapter the role of mitigating against future threats and meeting newly emerging challenges, including catering for survivors, within the UN's architecture would systematically sit with the Resident Coordinator. This project aims to provide the Resident Coordinator the additional capacity to meet the aforementioned new tasks.	Requested amount: USD 695,527 Other sources of funding of this proposal: nil Government Input: nil Start Date: 01 January 2016 End Date: 31 December 2016 Total duration (in months): 12 months
MISSION CRITICAL ACTIONS to which the proposal is contributing. For reporting purposes, each project should contribute to one SO. For proposals responding to multiple MCAs within 1 SO, please select the primary MCA to which the proposal is contributing to. <input checked="" type="checkbox"/> Strategic Objective 3 MCA8: Recovery and economy	

Recipient UN Organization(s) UNDP	Management Committee Chair:
<i>Name of Representative: Mr. Sudipto Mukerjee</i> <i>Signature</i> <i>Name of Agency: UNDP</i> <i>Date & Seal</i>	<i>Dr. David Nabarro</i> <i>Signature</i> <i>Date: 18 December 2015</i>
<i>Co- sign:</i> <i>Name of Resident Coordinator a.i.: Mr. Gabriel Rugalema</i> <i>Signature</i>	

NARRATIVE

- a) **Rationale for this Project:** With the declaration of the end of the Ebola outbreak, there is a need to maintain capacity to respond to the high probability of another outbreak, to manage residual risk, and support the Ebola recovery activities. Phase III of the response is planned to conclude at the end of March, 2016. Many assets and surge capacity staff members connected to the response are leaving Sierra Leone in a coordinated manner. There is a residual threat of a re-emergence, i.e. the end of the outbreak does not infer that the virus is eliminated, and new challenges related to Ebola survivors must be addressed in a sensitive manner, alongside ongoing medical research and development. The Inter-agency Collaboration on Ebola (ICE) recently concluded that for the post-Ebola outbreak chapter, the role of mitigating against future threats and meeting newly emerging challenges within the UN's architecture would systematically sit with the Resident Coordinator. This role will emerge alongside the Government's internal reshaping of its Disaster Management Platform, including the re-tasking of its National Ebola Response Centre. All this is happening in parallel to global changes in the way the international community respond to zoonotic threats.

This one-year project aims to provide additional capacity to the Resident Coordinator during 2016 in order to support national authorities to respond and recover from Ebola issues in Sierra Leone. A dedicated Ebola Focal Point for the Resident Coordinator will therefore be located inside the Office of the Resident coordinator, supported by an Administrative / Finance Officer and a Driver, to provide the aforementioned extra capacity.

- b) **Coherence with Existing Projects:** The Global Ebola MPTF is current funding five related projects, these are as follows:
- UNDP: Livelihoods project for EVD survivors: USD 2,108,011 (this figure includes USD 52,540 for Pink Cross).
 - WHO/UNICEF: Ebola Survivors – Database Creation, Needs Assessment and Screening, Psychosocial Support and Reintegration into Society – USD 1,047,396.25
 - WHO – Integrated Disease Surveillance and Reporting (IDSR) project – USD 2,073,205

➤ UNICEF: To strengthen WASH - USD 856,000

➤ UNDP: Reintegration of the IFRC burial team members - USD \$1,975,639.87

c) **Capacity of RUNO(s) and Implementing Partners:** The RUNO will be the United Nations Development Programme (UNDP), which is the administrative backbone of the Resident Coordinator Office (RCO), and provides a long history of project management. UNDP has long-term presence in the country and expertise in capacity building to national institutions in the field, as well as providing services to the UN system in general. The RCO is led by the Resident Coordinator (RC), who also carries the responsibility of the Resident Representative (RR) of UNDP and the Designated Official (DO) of the Department of Safety and Security (DSS). The RC is the most senior UN official in a country who oversees and coordinates the United Nations Country Team. At its core, RCO staff is financed by the Development Operations Coordination Office (DOCO) that primarily works on system-wide coherence and global UN reforms. In West Africa the Ebola epidemic has required innovative solutions to unprecedented problems for which the RCO has been constantly adapting, responding, supporting and facilitating, as and when necessary, within the wider global response to the epidemic. New expertise and flexible approaches have been developed throughout this difficult period, which will continue through the recovery phase.

d) **Proposal Management:** The RC's Ebola Focal Point will be supervised directly by the RC / RR / DO. Being located in the RCO the RC's Ebola Focal Point would report directly to the RC / RR / DO. The RC's Ebola focal point will be assisted by a Finance and Administrative Officer and a driver. The key outputs being as follows:

- Create, maintain and lead platforms for Ebola management coordination (monthly coordination meetings with key stakeholders, both UNCT and national partners), in particular cater for issues related to Ebola survivors;
- Capacity assessment of national institutions in the field of Ebola management;
- Capacity building of UNCT and national institutions for better Ebola response / recovery
- Knowledge management on the existing solutions, and dissemination of best practices; advocacy for key reforms (improvements) in the area of Ebola management, including high quality reports
- Building strategic partnerships among all stakeholders in substantive Ebola management policies

RC's Ebola Focal Point - P5: The RC's Ebola Focal Point will work directly with the RC / UNCT, and where necessary the Office of National Security, Ministry of Health and Ministry of Gender, Children and Social Welfare, to ensure the UN is a central element in all national preparedness and response plans that relate to Ebola. In particular the Focal Point will work with multiple agencies on issues that emanate from the evolving situation concerning Ebola survivors.

Finance and Administration Officer – P2: The RC's Ebola Focal Point must be able to navigate and administrate multiple layers within the UNDP system and stay on top of finances and correspondence created many Ebola-related issues. A Finance and Administrative Officer will help with all aspects of project management and reporting. The Finance and Administrative Officer will also back-stop for the Ebola Focal Point during those occasions when the Ebola Focal Point is absent from the country.

Driver – G2: The RC's Ebola Focal point must be able to independently move around Freetown and the provinces of Sierra Leone in order to connect with all the stake holders involved in the aforementioned Ebola related tasks.

e) Risk Management:

Table 5 – Risk management matrix

Risks to the achievement of SO in targeted area	Likelihood of occurrence (high, medium, low)	Severity of risk impact (high, medium, low)	Mitigating Strategy (and Person/Unit responsible)
Breakdown in the flow of information at the epicentre of the ebola issue	Medium	High	Interagency Rapid Response Team quickly deployed and on-site real time information retrieved.
Scale of ebola issue overwhelms the in-country capacity	Medium	High	International community standing by to send additional capacities. New WHO guidelines on global response.

- f) Monitoring & Evaluation:** As with all projects that aim to mitigate against unforeseen events by reducing risks and providing capacity in prior to the event occurring, the monitoring arrangements are difficult to spell out in advance, however, the following would be monitoring indicators of system-wide readiness:

Monitoring:

- “Actions-On” charts are clear and frequently drilled so each element of the Ebola response are aware of their roles and the information and triggers required above and below them within the chain of command. Vehicles and materials and financial arrangements are ready to be implemented at a moment's notice.
- Known risks, such as Ebola survivors, as catered for in an appropriate manner, i.e. within a human-rights based approach.

The evaluation of the project will be based upon monitoring of the following indicators:

- Speed of response once an Ebola issue trigger has been verified and activated.
- Efficiency of coordination between the response elements, as per planning documents, once ebola event occurs
- Effectiveness of wider international response being activated.

The RC's Ebola Focal Point will be the Project Manager. This project proposal incorporates the results framework, which will serve as a basis to prepare the project's M&E plan, to ensure the effective use of resources and targets achievement. The project team (with ultimate responsibility of the Project Manager) will collect all project documentation to provide reliable proof of performed activities and achieved goals, including the list of trainings' participants, list of people received counselling services, list of people screened etc. including photo and video materials. Expenditures will be strictly controlled and monitored through procedures established in UNDP and implemented through the Project Manager.

PROPOSAL RESULT MATRIX

Proposal Title:					
Strategic Objective to which the Proposal is contributing¹	<i>Strategic Objective 5 MCA13: Multi-faceted preparedness</i>				
Effect Indicators	Geographical Area (where proposal will directly operate)	Baseline² In the exact area of operation	Target	Means of verification	Responsible Org.
% of Resident Representatives of the UN Agencies in Sierra Leone are satisfied with the existing Ebola response and recovery capacities of UN in Sierra Leone	National	Not applicable	No less than 80%	Minutes of the UN Country Team meeting, which reviewed the results of work of the Ebola Focal point	
MCA <input type="checkbox"/> ³					
Output Indicators	Geographical Area	Target⁴	Budget	Means of verification	Responsible Org.
# of Ebola Focal point and support team in place at an appropriate moment in the transition process	National	3	USD 650,025	Human resources records and fact of deployment. Office operational and team independently mobile	UNDP, Project Manager & RC
# of Ebola management coordination meetings held	National	12		Minutes of meetings	UNDP, Project Manager & RC
# of knowledge products (3W/4W mapping, reports, publications, analytical materials) produced to feed the discussion on disaster	National	3		Soft copies of knowledge products	UNDP, Project Manager & RC
# of programme and policy consultations provided to UN and national institutions, including Office of National Security of Sierra Leone	National	5		Minutes of meetings with national partners, UNCT; written recommendations	UNDP, Project Manager & RC
# of capacity assessment and capacity building events organized for national institutions and UN agencies		2			
Coordination Fees⁵					
Staffing			USD 515,025		
Data collection					

¹ Proposal can only contribute to one Strategic Objective

² If data are not available please explain how they will be collected.

³ Project can choose to contribute to all MCA or only the one relevant to its purpose.

⁴ Assuming a ZERO Baseline

⁵ Should not exceed 20% including the indirect cost

<i>Equipment & Supply</i>			USD 135,000
<i>Indirect Cost max 7 %</i>			USD 45,501
Total Project Cost in USD			USD 695,527

Project budget by UN categories

PBF PROJECT BUDGET			
CATEGORIES	Amount Recipient Agency	Amount Recipient Agency (if more than 1)	TOTAL
1. Staff and other personnel (include details) (P5+P2+G2)	515,025		515,025
2. Supplies, Commodities, Materials (include details) (fuel, vehicle maintenance, toner, paper)	15,000		15,000
3. Equipment, Vehicles, and Furniture, incl. Depreciation (include details) (Vehicle, laptops, printers)	50,000		50,000
4. Contractual services (include details)	0		0
5. Travel (include details) (international conferences, in-country DSA)	30,000		30,000
6. Transfers and Grants to Counterparts (include details)	0		0
7. General Operating and other Direct Costs (include details) (Rent of office Space)	40,000		40,000
Sub-Total Project Costs	650,025		650,025
8. Indirect Support Costs*	45,501		45,501
TOTAL	695,527		695,527

** The rate shall not exceed 7% of the total of categories 1-7, as specified in the Ebola Response MOU and should follow the rules and guidelines of each recipient organization. Note that Agency-incurred direct project implementation costs should be charged to the relevant budget line, according to the Agency's regulations, rules and procedures.*