							roject Proposa
Organization	SWISSO - Kalmo (SWISS	SO - Kalmo)					
Project Title	Provision of basic nutritio Kunturwarey district of Lo		CF, as well as treatmer	nt of Acu	te Malnutrition for child	dren (Boys and	d girls) under 5 years and PLW
CHF Code	CHF-DDA-3485-723						
Primary Cluster	Nutrition		Secondary Cluster				
CHF Allocation	Standard Allocation 1 (Fe	eb 2015)	Project Duration			1	12 months
Project Budget	299,999.54						
HRP Details	HRP Code	SOM-15/H/71661	HRP Budget	339,4	20.00		
	HRP Project Ranking	A - HIGH	HRP Gender Marker				
Project Beneficiaries			Men		Women	Total	
	Beneficiary Summary			20	2,512	2,53	32
			Boys		Girls	Total	
			1	,100	1,100	2,20	00
				Total		4,73	32
	Total beneficiaries inc	lude the following:					
	Children under 5		1	1,100	1,100	2,2	200
	Pregnant and Lactating		0	2,470	2,4	170	
	Staff (own or partner sta	ff, authorities)		20	42		62
mplementing Partners	Partner	Partner Budget					
	SWISSO-KALMO				0.0	00	
					0.0	00	
Organization focal point contact	Name: Dr. Abdi Hersi Ti	tle: Regional Director					
details	Telephone: +254722777	455 <b>E-mail:</b> abdi.her	si@swisso-kalmo.org				
BACKGROUND INFORMATION							
<ol> <li>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)</li> </ol>	humanitarian assistance is at risk of sliding back in and IDP populations. 6 % malnutrition. More than 7 disposal. Somalia's popul	and access, increasing to crisis if urgent action increases in GAM cas 1% of the people do no lation, remain on the m	malnutrition, and incre n is not taken to addres seload in last 6 months. of have access to safe of argin of food insecurity	eased act ss deterion Today, 2 drinking vand mag	ute food insecurity. So pration in the humanita 21,800 children under water; while 77% do n y struggle to meet the	malia's extrem arian situation a five in Somalia ot have access ir minimal food	s to safe means of waste I requirement through end-201
(managed)	Somalia are at increased	risk of acute malnutrition a SAM of 5.5 (critical)	. Most vulnerable are c	AM casel hildren ir	oad in last 6 months. In IDPs(FSNAU Post G		a GAM rate of 17.2 which is
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	Somalia are at increased considered as critical and among Shabele agropast Swisso Kalmo has been of UNFPA, W.H.O. Commur government and Al-Shab: Marka, kunturwarey and for the urban poor and ID Nutrition survey in post G years) suffering from acut in most livelihoods is eith practice of exclusive brea	risk of acute malnutritical a SAM of 5.5 (critical) rolist at 0.7 and under operating in Somalia sinities in Marka, Qoryoleab and renewed inter-copy towns are drapes. Therefore, they are usual 2014 indicate that hie te malnutrition. Median er sustained or deterious tfeeding and IYCF is shows similar trends w	on 6 % increases in G/o. Most vulnerable are c 5 mortality rate among nce 1992,SK is involve by and Kunturwarey disclan conflict, restricting warn down. There has be consuming less than igh levels of acute maln GAM rate of 17.2 percrated since the Gu 201: not yet harbitualized in there the number of chil	AM casel hildren ir Shabele d in the i tricts and tricts and trade molecular and utrition pent in the 3 seasor this com Idren wh	oad in last 6 months. In IDPs(FSNAU Post Griverine.  mplementation of proj dis surrounding are forwerent - leading to in pader collapse of ecord resulting in sharp incersists across the coule as Gu 2014 seasonal and, in which Median GAmunity. Data from Sw	ects awarded to creased staple nomic activities crease in food intry with one cossessment sug M of 14.4 percisos-kalmo nut	a GAM rate of 17.2 which is crude Death Rate in L/Shabele by OCHA,FAO, WFP, UNICEF use to conflict between the food prices as supplies in a causing less purchasing pow insecurity. Results of FSNAU out of every seven children (sgests that the nutrition situation and the same confliction is considered to the confliction of the confliction is conflicted to the confliction of the confliction is conflicted to the confliction of the confliction is conflicted to the confliction of the confl
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  3. Activities. List and describe the activities that your organization is currently implementing to address	Somalia are at increased considered as critical and among Shabele agropast Swisso Kalmo has been of UNFPA, W.H.O. Commur government and Al-Shab. Marka, kunturwarey and of the urban poor and ID Nutrition survey in post of years) suffering from acut in most livelihoods is eith practice of exclusive brea regions in the last 1 year 3374 had SAM, 13,093 P Swisso-kalmo Supports 3 malnutrition through province supervision of CHWs and Micronutrient supplement and nutrition care through on promotion of locally avand equip them to deliver	risk of acute malnutritic la SAM of 5.5 (critical) rolist at 0.7 and under opperating in Somalia sinities in Marka, Qoryole ab and renewed inter-Qoryoley towns are dra Ps. Therefore, they are used to the control of t	on 6 % increases in GA . Most vulnerable are c 5 mortality rate among mce 1992,SK is involve ey and Kunturwarey dis alan conflict, restricting awn down. There has b e consuming less than i gh levels of acute maln GAM rate of 17.2 perc rated since the Gu 201: not yet harbitualized in there the number of chi d 3124 of them had MA TP mobile sites to U5 o supplementation (Vit A h, training and monitorir es involved in screening LW, according to micro us medical and nutritior us medical and nutritior is; Train community men unseling; Encourage tar lal nutrition and care m	AM casel hildren ir Shabele d in the i tricts and tricts and trade more and a trict and tricts and tricts and tricts and trict and tricts and t	oad in last 6 months. In IDPs(FSNAU Post Criverine.  In IDPs(F	eu,2014). the C ects awarded bood insecure di creased staple nomic activities crease in food i ntry with one c ssessment sug M of 14.4 perc isso-kalmo nut e 57,815 out of managing child utrition facilities munization;Pra a;Promotion an C materials;Cor premetion are sugentials.	a GAM rate of 17.2 which is rude Death Rate in L/Shabele by OCHA,FAO, WFP, UNICEF, live to conflict between the food prices as supplies in a causing less purchasing pow but of every seven children (< : downward of the conflict of the conf
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  3. Activities. List and describe the activities that your organization is currently implementing to address these needs	Somalia are at increased considered as critical and among Shabele agropand Swisso Kalmo has been of UNFPA, W.H.O. Commungovernment and Al-Shabi Marka, kunturwarey and for the urban poor and ID Nutrition survey in post Gyears) suffering from aculin most livelihoods is eith practice of exclusive brearegions in the last 1 year 3374 had SAM, 13,093 P Swisso-kalmo Supports 3 malnutrition through proving measles and Pentavalen supervision of CHWs and Micronutrient supplement and nutrition care through on promotion of locally avand equip them to deliver community members with first 40 days.In this project	risk of acute malnutritic la SAM of 5.5 (critical) rolist at 0.7 and under opperating in Somalia sinities in Marka, Qoryole ab and renewed inter-Qoryoley towns are dra Ps. Therefore, they are used to the control of t	on 6 % increases in GA . Most vulnerable are c 5 mortality rate among mce 1992,SK is involve ey and Kunturwarey dis alan conflict, restricting awn down. There has b e consuming less than i gh levels of acute maln GAM rate of 17.2 perc rated since the Gu 201: not yet harbitualized in there the number of chi d 3124 of them had MA TP mobile sites to U5 o supplementation (Vit A h, training and monitorir es involved in screening LW, according to micro us medical and nutritior us medical and nutritior is; Train community men unseling; Encourage tar lal nutrition and care m	AM casel hildren ir Shabele d in the i tricts and tricts and trade more and a trict and tricts and tricts and tricts and trict and tricts and t	oad in last 6 months. In IDPs(FSNAU Post Criverine.  In IDPs(F	eu,2014). the C ects awarded bood insecure di creased staple nomic activities crease in food i ntry with one c ssessment sug M of 14.4 perc isso-kalmo nut e 57,815 out of managing child utrition facilities munization;Pra a;Promotion an C materials;Cor premetion are sugentials.	a GAM rate of 17.2 which is rude Death Rate in L/Shabele by OCHA,FAO, WFP, UNICEF the to conflict between the food prices as supplies in a causing less purchasing pow insecutive. Results of FSNAU put of every seven children ( <a href="equation-regions">equation-regions regions r</a>
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  3. Activities. List and describe the activities that your organization is currently implementing to address these needs  LOGICAL FRAMEWORK  Objective 1	Somalia are at increased considered as critical and among Shabele agropast Swisso Kalmo has been of UNFPA, W.H.O. Commungovernment and Al-Shab. Marka, kunturwarey and of for the urban poor and ID Nutrition survey in post Gyears) suffering from acut in most livelihoods is eith practice of exclusive brearegions in the last 1 year regions in the last 1 year and 14 year says and the says of	risk of acute malnutritic la SAM of 5.5 (critical) rolist at 0.7 and under poperating in Somalia sinities in Marka, Qoryole ab and renewed inter-Qoryoley towns are dra Ps. Therefore, they are used to the malnutrition. Median er sustained or deterion is steeding and IYCF is shows similar trends w LW were screened and SC, 5 OTP static, 4 O ission of micro nutrient stylly poperation to children and Provision of community volunteers ation to children and Provision of continuous allable nutrition or continuous and screen stylly stylly continuous and screen stylly continuous and screen stylly screen sty	on 6 % increases in GA. Most vulnerable are c 5 mortality rate among nce 1992,SK is involve ey and Kunturwarey dis islan conflict, restricting awn down. There has b e consuming less than ig hevels of acute maln GAM rate of 17.2 perc rated since the Gu 201: not yet harbitualized in there the number of chi d 3124 of them had MA TP mobile sites to U5 o supplementation (Vit A h, training and monitorir s involved in screening LW, according to micro us medical and nutritior us medical and nutritior us medical and nutritior us medical and nutritior is Train community men unseling: Encourage tar inal nutrition and care m tities by supporting 4 m  etes including IYCF, as v	AM casel hildren ir Shabele d in the i tricts and trade mo een a brusual and utrition pent in the 3 seasor this comildren who was a seasor this comildren who can differ in the case of SAM of nutrient in education bers and get wom essages ore OTP.	oad in last 6 months. In IDPs(FSNAU Post 6 riverine.  IDPs(FSNAU Post 6 riverin	ects awarded bood insecure discreased staple momic activities crease in food intry with one of sessessment sug M of 14.4 percisor-kalmo nut in 57,815 out of managing child utrition facilities inder five and promotion and comaterials; Corror IYCF promotion are controlled in the sesses mobile OTP a mobile OTP a	a GAM rate of 17.2 which is trude Death Rate in L/Shabel by OCHA,FAO, WFP, UNICE true to conflict between the food prices as supplies in a causing less purchasing por insecurity. Results of FSNAU but of every seven children (capests that the nutrition situal tent was recorded. The use trition facilities in lower Shabe which 22,068 had MAM and dren U5 and PLW with moder s;Provide immunization service pregnant women; Training and rod support for optimal matern nducting sensitization session or counseling;Train CHW roup for IVFC; Provide special care for mothers in the

Activity 1.1	Provision of the Mobile.	herapeutic	feeding for malnourished <5 children and PLW i.e 1100 boys a	nd 1100 gi	rls and 250	00 PLW in	2 OTP sta	tic and 1 C	TP				
Activity 1.2			nunization and vit A in all nutrition sites having 1100 girls and 1 and in better integration with the health sector.	1100 boys.	In order to	reduce ra	ate of dete	rioration ar	mong				
Activity 1.3	Rehabilitation facilities)	of therape	utic centres Kurtunwarey and Bullo marer (Rehabilitation of the	e building,	provision o	of water sy	stem and	hand wash	ning				
Indicators for outcome 1		Cluster	Indicator description						Targe				
	Indicator 1.1	Nutrition	Number of children (6-59months) and pregnant and lactating	g women	admitted ir	n treatmen	t programr	mes	4700				
	Indicator 1.2	Nutrition	Number of <5 children who were immunized of Measles an	d provided	with vit A				2820				
	Indicator 1.3	Nutrition	Number of facilities rehabilitated with water system and har	nd washing	facilities				2				
Outcome 2	Capacity of 2	1 nutrition s	staff (10 male and 11 female) and 21 CNWs (11 female and 10	male) imp	roved for t	he manag	ement of a	cute malnı	utrition				
Activity 2.1	21 nutrition st conducted on		Ws (11 Female and 10 male) will be trained including nutrition riod of 6 days.	screeners	and nurse	s on IMAN	/I. The train	ning will on	ly be				
Activity 2.2			mmunity Nutrition Workers (10 male and 11 female) will be trai ucted once for a period of 6 days.	ned includ	ing nutritio	n screene	rs and nurs	ses on IYC	F. The				
Activity 2.3			(10 female and 10 male) will be trained on NHHP and malnutr d once for a period of 4 days.	ition aware	eness both	in the U5	boys,U5 g	irls and PL	.W. The				
Indicators for outcome 2		Cluster	Indicator description						Targe				
	Indicator 2.1	Nutrition	Number of male and female Staff/Community Health Workers acute malnutrition	outreach	workers tra	ained on t	he manage	ement of	21				
	Indicator 2.2	Nutrition	Number of nutrition staff and CNWs who were trained on IYC	F					21				
	Indicator 2.3	Nutrition	Number of community mobilizers trained on NHHP and malnu	utrition awa	areness bo	oth in the <	5 and PLV	V	20				
Outcome 3	Improved acc	ess of boys	s, girls, women and men to nutrition related resilience activities	through B	NSP activi	ties							
Activity 3.1		•	thers with counseling on breastfeeding and IYCF activities, thr unity level (12 events)	ough cond	ucting of r	nother to r	mother and	I mother to	mother				
Activity 3.2	Provide multi 2500 pregnar		trient supplementation,Deworming tablets,treatment of commoting women	n illnesses	and provi	ision of Vit	A to 1100	boys, 110	0 girls ar				
Activity 3.3	Conduct a SC	QUEC surve	ey .										
Indicators for outcome 3	Cluster Indicator description Targ												
	Indicator 3.1	Nutrition	Number of IYCF promotion sessions held						12				
	Indicator 3.2	Nutrition	Number of children under five and PLW received MMN supple common illnesses and provision of Vit A	ementation	, dewormir	ng tablets,	treatment	of	4700				
	Indicator 3.3	Nutrition	Number of SQUEC Surveys done						1				
WORK PLAN													
Implementation: Describe for each activity how you plan to implement it and who is carrying out what	operation. All documenting monthly OTP, project report staffs and cor	OTP sites daily admis /TSFP reports and a final munity he	ition specialist) will implement the project and he/she will be re admit and treat cases on daily bases while TSFP sites admit a sisions and discharges are entered in Swisso-kalmo data base. rts and sent to UNICEF/W.F.P. In addition to the regular week! Il project report will be provided to UNOCHA. Facilities will be in alth worker will be trained using the standard guidelines such a ; There will be regular field visits by the project coordinator for	nd treat ca Weekly re y and mon ehabilitate as IMAM; F	ses once in ports are of the thing reports of the contract of	n a week, combined s, overall i e standard trainings,	Weekly O to complete nterim fina d organizat	TP/TSFP rethe the requing the requiest the requiest the recorder of the record	eports, red narrative elines;				
Project workplan for activities defined in the	Activity Des	scription		Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Mont 11-1				
Logical framework			therapeutic feeding for malnourished <5 children and PLW i.e and 2500 PLW in 2 OTP static and 1 OTP Mobile.	х	Х	Х	Х	Х					
	girls and 1100	boys. In or	measles immunization and vit A in all nutrition sites having 1100 der to reduce rate of deterioration among children with malnutrition in the health sector.	х	х	Х	х	х					
			on of therapeutic centres Kurtunwarey and Bullo marer ding, provision of water system and hand washing facilities)	x	x								
		eners and n	staff and CNWs (11 Female and 10 male) will be trained including urses on IMAM. The training will only be conducted once for a	X									
	Activity 2.2 21 Nutrition staff and Community Nutrition Workers (10 male and 11 female)  Will be trained including nutrition screeners and nurses on IYCF. The training will only be conducted once for a period of 6 days.												
	A adiaday 2 2	20 commun	ity mobilizers(10 female and 10 male) will be trained on NHHP and		Х								

Activity 3.2 Provide multiple micronutrient supplementation, Deworming tablets, treatment of common illnesses and provision of Vit A to 1100 boys, 1100 girls and 2500 pregnant and lactating women	Х	х	х	х	Х	×
Activity 3.3 Conduct a SQUEC survey						×

# M & E DETAILS

			M	ont	h (s	) wh	en	olan	nea	M &	ĿΕ	will Ł	e de	one
Activity Description	M & E Tools to use	Means of verification	1	2	3	4	5	6	7	8	9	10	11	1
Activity 1.1 Provision of therapeutic feeding for malnourished <5 children and PLW in 2 OTP static and 1 OTP Mobile.	- Data collection - Field visits	Provide monthly, interim and final reports. Provide supervision report on quarterly basis, documentation of success stories	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	
Activity 1.2 Provision of measles immunization and vit A in all nutrition sites having 1100 girls and 1100 boys. In order to reduce rate of deterioration among children with malnutrition and in better integration with the health sector.	- Data collection - Field visits	Provide monthly, interim and final reports. Provide supervision report on quarterly basis.documentation of success stories	Х	Х	Х	Х	Х	X	X	Х	Х	X	Х	
Activity 1.3 Rehabilitation of therapeutic centres Kurtunwarey and Bullo marer Rehabilitation of the building, provision of water system and hand washing facilities)	- Field visits - Photo with or without GPS data	Quotation Supervision report Facility photos before and after rehabilitation	Х	Х	Х	Х								
Activity 2.1 21 nutrition staff and CNWs (11 Female and 10 male) will be trained noluding nutrition screeners and nurses on IMAM. The training will only be conducted once for a period of 6 days.	Contact details     Field visits     Photo with or without GPS data	List of 40 trained staff, Training report, Attendance sheet records, Training photos, Sample of Pre and post tests	X	Х										
Activity 2.2 21 Nutrition staff and Community Nutrition Workers (10 male and 11 emale) will be trained including nutrition screeners and nurses on IYCF. The training will only be conducted once for a period of 6 days.	- Contact details - Field visits - Photo with or without GPS data	List of 40 trained staff, Training report, Attendance sheet records, Training photos, Sample of Pre and post tests			Х	Х								
Activity 2.3 20 community mobilizers(10 female and 10 male) will be trained on NHHP and malnutrition awareness both in the U5 boys,U5 girls and PLW. The raining will be conducted once for a period of 4 days.	- Contact details - Field visits - Photo with or without GPS data	List of 20 trained community mobilizers, Training report, Attendance sheet records, Training photos, Sample of Pre and post tests		Х										
Activity 3.1 Promote and provide Mothers with counseling on breastfeeding and YCF activities, through conducting of mother to mother and mother to mother support groups at community level (12 events)	- Data collection - Field visits	Provide monthly, interim and final reports.Photos of mothers receiving promotion services.documentation of success stories	Х	Х	Х	Х	Х	Х	Х	Х	Х	X	Х	
Activity 3.2 Provide multiple micronutrient supplementation, Deworming tablets, treatment of common illnesses and provision of Vit A to 1100 boys, 1100 girls and 2500 pregnant and lactating women	- Data collection - Field visits	Provide monthly, interim and final reports.Photos of mothers receiving promotion services.documentation of success stories	Х	Х	Х	Х	X	Х	X	Х	Х	Х	Х	
Activity 3.3 Conduct a SQUEC survey	- Field visits - Other - Photo with or without GPS data	The SQUEC report, photos, sample of questionnaire used.											х	

# OTHER INFORMATION

Coordination with other Organizations in project area	Organization	Activity							
Organizations in project area	1. W.H.O	Provides guidelines							
	2. Nutrition Cluster	Provides guidance on management of children with malnutrition and coordinate the cluster							
	3. UNICEF	provide both financial and supplies support and sharing of reports							
	4. M.O.H	Involvement of the ministry in all our activities and share reports with them							
	5. W.F.P	We have a Field Level Agreement (FLA). We receive financial assistance							
	6. UNOCHA	Share interim and final report							
	7. Health	The project will be integrated with health							
	8. WASH and Livelihood	WASH and Livelihood and thus improving patient status and help in quick recovery of the patients will malnutrition.							
Gender theme support	Yes								
Outline how the project supports the gender theme	disaggregated data of the dir equity in the various planned projects. A gender dimension	activities are specifically targeting women and children(Boys and Girls) less than 5 years of age. Gender and number ect project beneficiaries are malnourished women and children (Boys and Girls). Swisso-kalmo will integrate gender interventions and disaggregated by sex from the planning to implementation, through Monitoring and Evaluation of its based on understanding of women, girls, boys and men's different needs, roles, responsibilities, capacities and risks consultation, decision making and capacity development. the intervention will ensure equity in the selection of numbers							

# Select (tick) activities that supports the gender theme | Activity 1.1: Provision of therapeutic feeding for malnourished <5 children and PLW i.e 1100 boys and 1100 girls and 2500 PLW in 2 OTP static and 1 OTP Mobile. | Activity 1.2: Provision of measles immunization and vit A in all nutrition sites having 1100 girls and 1100 boys. In order to reduce rate of deterioration among children with malnutrition and in better integration with the health sector. | Activity 1.3: Rehabilitation of therapeutic centres Kurtunwarey and Bullo marer (Rehabilitation of the building, provision of water system and hand washing facilities) | Activity 2.1: 21 nutrition staff and CNWs (11 Female and 10 male) will be trained including nutrition screeners and nurses on IMAM. The training will only be conducted once for a period of 6 days. | Activity 2.2: 21 Nutrition staff and Community Nutrition Workers (10 male and 11 female) will be trained including nutrition screeners and nurses on IYCF. The training will only be conducted once for a period of 4 days. | Activity 2.3: 20 community mobilizers(10 female and 10 male) will be trained on NHHP and malnutrition awareness both in the U5 boys,U5 girls and PLW. The training will be conducted once for a period of 4 days. | Activity 3.1: Promote and provide Mothers with counseling on breastfeeding and IYCF activities, through conducting of mother to mother and mother to mother support groups at community level (12 events) | Activity 3.2: Provide multiple micronutrient supplementation,Deworming tablets,treatment of common illnesses and provision of Vit A to 1100 boys, 1100 girls and 2500 pregnant and lactating women

### BUDGET

### A:1 Staff and Personnel Costs

1.1 Interi	national Staff								
Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
1.1.1	Nutrition coordinator (nutrition expert)	1	3000	12	Months	36,000.00	19,800.00	16,200.00	45.00
1.1.2	Logistic officer	1	800	12	Months	9,600.00	1,920.00	7,680.00	80.00
1.1.3	Store keeper	1	400	12	months	4,800.00	0.00	4,800.00	100.00
1.1.4									
1.1.5									
1.1.6									
1.1.7									
1.1.8									
1.1.9									
1.1.10									
	Subtotal					50,400.00	21,720.00	28,680.00	

### **Budget Narrative:**

# 1.2 Local Staff

	• • • • • • • • • • • • • • • • • • • •								
Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
1.2.1	Nutrition Supervisors	1	500	12	Months	6,000.00	0.00	6,000.00	100.00
1.2.2	Clinical officer	1	1000	12	Months	12,000.00	0.00	12,000.00	100.00
1.2.3	Data Manager	1	400	12	Months	4,800.00	0.00	4,800.00	100.00
1.2.4	Nutrition Nurse	8	400	12	Months	38,400.00	0.00	38,400.00	100.00
1.2.5	Nutrition Screeners/auxilliary nurses	12	200	12	Months	28,800.00	0.00	28,800.00	100.00
1.2.6	Community Health Workers	12	120	12	Months	17,280.00	0.00	17,280.00	100.00
1.2.7	Health and hygiene promoters	4	400	12	Months	19,200.00	0.00	19,200.00	100.00
1.2.8	Nutrition Registrars	4	200	12	Months	9,600.00	0.00	9,600.00	100.00
1.2.9	Cleaners for the nutrition site	4	150	12	Months	7,200.00	0.00	7,200.00	100.00
1.2.10	Security guards for the nutrition site	8	150	12	Months	14,400.00	7,200.00	7,200.00	50.00
	Sub Total					157,680.00	7,200.00	150,480.00	

### **Budget Narrative:**

### B:2 Supplies, Commodities, Materials

s, s,	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	2.1.1	Rehabilitation of the therapeutic centres in Kunturwarey (Kunturwarey and Buulo Mareer)	1	12827.4	1	lumpsum	12,827.40	0.00	12,827.40	100.00
	2.1.2	Water for site operations( \$5 per litrex25 litres)	2	125	12	months	3,000.00	0.00	3,000.00	100.00
	2.1.3	Training of 21 staff and CNWs on IMAM	1	7940	1	lumpsum	7,940.00	0.00	7,940.00	100.00

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	2.1.4	Training of 20 Community mobilizers on NHHP	1	3775.5	1	lumpsum	3,775.50	0.00	3,775.50	100.0
	2.1.5	Tables and chairs for the staff and patient usage in the facility in Kunturwarey	10	10	1	lumpsum	100.00	0.00	100.00	100.0
	2.1.6	Training of 21 staff and CNWs on IYCF	1	7940	1	lumpsum	7,940.00	0.00	7,940.00	100.0
	2.1.7	Car hire/rental for the 2 mobiles sites	2	1600	12	month	38,400.00	0.00	38,400.00	100.0
	2.1.8									
	2.1.9									
	2.1.10									
		Sub Total					73,982.90	0.00	73,982.90	
	Budget N	Narrative:								
C:3 Equipment	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	3.1.1									
	3.1.2									
	3.1.3									
	3.1.4									
	3.1.5									
	3.1.6									
	3.1.7									
	3.1.8									
	3.1.9									
	3.1.10									
		Sub Total					0.00	0.00	0.00	
	Budget N	Narrative:								
D:4	Code	Budget Line Description	Units	Unit	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to
										CHF
Contractual Services				Cost						
	4.1.1			Cost						
	4.1.1			Cost						
				Cost						
	4.1.2			Cost						
	4.1.2			Cost						
	4.1.2			Cost						
	4.1.2 4.1.3 4.1.4 4.1.5			Cost						
	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6			Cost						
	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7			Cost						
	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8			Cost						
	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8 4.1.9	Sub Total		Cost			0.00	0.00	0.00	
	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8 4.1.9 4.1.10	Sub Total Narrative:		Cost			0.00	0.00	0.00	
	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8 4.1.9 4.1.10		Units	Unit	Duration	TimeUnit	0.00 Amount(USD)	0.00 Organization		%charged to
Services	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8 4.1.9 4.1.10	Narrative:	Units		Duration	TimeUnit				
Services	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8 4.1.9 4.1.10	Narrative:	Units	Unit	Duration 4					%charged to CHF
Services	4.1.2 4.1.3 4.1.4 4.1.5 4.1.6 4.1.7 4.1.8 4.1.9 4.1.10  Budget N  Code  -5.1.1	Budget Line Description  Movement of staff (Air ticket_ for project staff) two trips for the nutrition coordinator, the data manager		Unit			Amount(USD)	Organization	CHF	%charged to

	CHF		299,999.54	91.21								
	Commu			0.00								
	Organiza		28,920.00									
	Descript	ion	Amount	%								
Other sources	of funds											
· <del>-</del>			GRAND TOTAL						309,293.40	28,920.00	299,999.54	
Programme Support Costs	8.1.1	Indirect Programm	e Support Costs						0.00	0.00	19,626.14	CHF 7.0
H.8 Indirect	Code	Budget Line Descrip	ption	·					Amount(USD)	Organization	CHF	%charged to
		-	TOTAL						309,293.40	28,920.00	280,373.40	
	Budget N	arrative:							·			
		Sul	b Total						20,030.50	0.00	20,030.50	
	7.1.10											
	7.1.9											
	7.1.8											
	7.1.7											
	7.1.6											
	7.1.5	Bank charges (2%	of the total budget)		1	5630.5	1	Lumpsum	5,630.50	0.00	5,630.50	100.
	7.1.4	Utilities (Kunturwa			1	200	12		2,400.00	0.00	2,400.00	-
	7.1.3	Communication			1	400	12		4,800.00		4,800.00	
	7.1.2	Stationaries			1	200	12		2,400.00	0.00	2,400.00	
Direct Costs	7.1.1	Office rent			1	400	12	months	4,800.00	0.00	4,800.00	
G:7 General Operating and Other	Code	Budget Line Descrip	ption		Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged t
	Budget N	arrative:										
		Su	ıb Total						0.0	0.00	0.00	
	6.6.10											
	6.1.9											
	6.1.8											
	6.1.7											
	6.1.6											
	6.1.5											
	6.1.4											
	6.1.3											
	6.1.2											
Counterparts	6.1.1											
F:6 Transfers and Grants to	Code	Budget Line Descrip	ption		Units	Unit Cost		TimeUni	t Amount(USD	Organization	CHF	%charged to
	Budget N	arrative:			·					· · · · · · · · · · · · · · · · · · ·		
		Su	b Total						7,200.00	0.00	7,200.00	
	5.1.10											
	5.1.9											
	5.1.8											
	5.1.7											
	5.1.6											

Other Donors	a)	0.00	
	b)	0.00	
TOTAL		328,919.54	

# LOCATIONS

Region	District	Location	Standard Cluster Activities	Activity	Beneficiary Description	Number	Latitude	Longitude	P.Code
Lower Shabelle	Kurtunwaarey	Kurtunwaarey	Capacity building, Community screening for malnutrition and referral, Infant and young child feeding promotion, Multiple micronutrients supplementation for pregnant and lactating women, Treatment of severe acute malnutrition in children 0-59months, Vaccination at nutrition centres	The capacity of the staff will be developed, counselling on IYCF will be done, PLW willbe provided with MMN, children with SAM will be treated, vaccination will be provided at the facilities and nutritin health and hygiene promotion will be done	Children under five years and pregnant and lactating women	2500	1.61101	44.330299	NA-3810- K19-002
Lower Shabelle	Kurtunwaarey	Bulo Messer	Capacity building, Community screening for malnutrition and referral, Infant and young child feeding promotion, Multiple micronutrients supplementation for pregnant and lactating women, Treatment of severe acute malnutrition in children 0-59months, Vaccination at nutrition centres	The capacity of the staff will be developed, counselling on IYCF will be done, PLW willbe provided with MMN, children with SAM will be treated, vaccination will be provided at the facilities and nutritin health and hygiene promotion will be done	Children under five years and pregnant and lactating women	2220	1.5985	44.219398	NA-3810- K16-002
TOTAL						4,720			

# DOCUMENTS

Document Description	
1. BUDGET BREAKDOWN IN EXCEL	
2. BOQ FOR REHABILITATION	
3. BUDGETARY guidelines and template	
4. BOQ for Communication	
5. BOQ for Office stationary	
6. BOQ for Trainings	
7. revised 2.1.1 boq	
8. revised 2.1.3,2.1.4 and 2.1.6 BOQ	
9. 7.1.2 STATIONERY BOQ	
10. 7.1.3 COMMUNICATION BOQ	
11. 5.1.2 tRAVEL BOQ	