

<b>Requesting Organization :</b>	New Ways Organization		
<b>Allocation Type :</b>	Standard Allocation 1 2023		
<b>Primary Cluster</b>	<b>Sub Cluster</b>	<b>Percentage</b>	
Health		100.00	
		<b>100</b>	
<b>Project Title :</b>	Provision of integrated lifesaving health services to the drought-affected population in Berdale district of Bay region		
<b>Allocation Type Category :</b>			
<b>OPS Details</b>			
<b>Project Code :</b>		<b>Fund Project Code :</b>	CBPF-SOM-23-S-NGO-25070
<b>Cluster :</b>		<b>Project Budget in US\$ :</b>	500,000.00
<b>Planned project duration :</b>	12 Months	<b>Priority:</b>	
<b>Planned Start Date :</b>	01/05/2023	<b>Planned End Date :</b>	30/04/2024
<b>Actual Start Date:</b>	01/06/2023	<b>Actual End Date:</b>	31/05/2024
<b>Project Summary :</b>	<p>Decades of conflict, disease outbreaks, widespread poverty, and recurrent climatic shocks, including the ongoing drought emergency, have devastated Somalia. New-Ways is proposing 12-month integrated Health project targeting the most affected vulnerable populations in Berdale district reaching a total of 25,000 persons including 6700 women, 1500 Men, 8400 girls, and 8400 boys).</p> <p>The proposed project will support 2 static and 3 mobile centers in the Berdale district. New-Ways plans to deliver an integrated package of promotive, preventive, and curative maternal, newborn &amp; child health services and scale-up outbreak early warning and response and case management of epidemic-prone diseases through the mobile response team as part of the efforts to support the drought-affected communities in Berdale. The project aims to scale up the static and mobile clinics in Berdale IDP and host community sites and scale up the health care through skilled health professionals. New-Ways through this project will provide regular medical supplies and life-saving drugs to established health facilities, establish referral mechanisms and improve the coverage of measles vaccinations, and support safe motherhood and reproductive health while also ensuring readiness to prevent and respond to outbreaks such as malaria, measles or AWD/Cholera and promote health update through health education and beneficiary sensitization including management of rape and GBV. The project will engages the PLWD, minority groups and women and girls by ensuring representation, allow access, direct engagement, collaborate, train and engage them as staff and beneficiaries</p> <p>The activities to be undertaken will include:</p> <ul style="list-style-type: none"> <li>• Provide Outpatient consultations to drought-affected IDPs in Berdale district</li> <li>• Provide routine and campaign immunization to under 5 children and TT to Women of Child Bearing Age (WBCA)</li> <li>• Ensure the treatment of common diseases such as pneumonia, diarrhea/dehydration, malaria, and skin conditions</li> </ul>		

- Provide antenatal and post-natal care to pregnant and lactating mothers at the 2 static and the 3 Mobile sites.
- Maintain and continue the services being provided at the 2 static and the 3 mobile sites
- Conduct a community mobilization and awareness raising workshop at the start of the project for 100 people
- Construct and furnish 3 outreach shelters with materials for the mobile sites such as forms, tables, chairs.
- Procure Medical supplies and ensure that the 5 facilities have enough supplies throughout the project period.
- Provision of quality multi-sectoral services (clinical case management, PSS, justice, safety)  
  
Conduct quarterly supervision every 3 months for four quarters

**Direct beneficiaries :**

Men	Women	Boys	Girls	Total
1,500	6,700	8,400	8,400	25,000

**Other Beneficiaries :**

Beneficiary name	Men	Women	Boys	Girls	Total
	860	5,200	5,200	5,200	16,460
	0	0	0	0	0
	0	0	0	0	0
	640	1,500	3,200	3,200	8,540
	0	0	0	0	0

**Indirect Beneficiaries :**

A total of 5,000 indirect beneficiaries will benefit from the project through health education through the promotion of good personal and environmental hygiene that would have a direct impact on their behavior and in the process improve people's behavior on the perception of health care services.

**Catchment Population:**

**Link with allocation strategy :**

The proposed activities are in line with the 2023 Somalia Humanitarian Plan's health priorities of (1) improved access to essential life-saving health services (Quality health care) for drought-affected populations aimed at reducing avoidable morbidity and mortality; (2) contributing to the reduction of maternal and child morbidity and mortality; (2)

Strengthened and expanded early warning disease detection to mitigate, detect and respond to disease outbreaks in a timely manner. The health situation in the proposed target area of Berdale district which is very critical due to the current drought and overstretched limited health services by People in the IDP camps are the most vulnerable community. Women and children are most vulnerable as they are at risk of acquiring diseases, malnourishment and GBV. The communities of Berdale IDPs and the vulnerable urban poor experience critical challenges to access health services as a result of current situation. This SHF grant will enable New-Ways to provide the services needed to reach Berdale IDPs and Host Communities. The project will engage the PLWD, minority groups and women and girls by ensuring representation, allow access, direct engagement, collaborate, train and engage them as staff and beneficiaries

**Sub-Grants to Implementing Partners :**

Partner Name	Partner Type	Budget in US\$

**Other funding secured for the same project (to date) :**

Other Funding Source	Other Funding Amount

**Organization focal point :**

Name	Title	Email	Phone

**BACKGROUND**

**1. Humanitarian context analysis**

**2. Needs assessment**

Somalia is facing an unprecedented sixth consecutive season of below-average- April to June 2023 rains. The Protracted drought has claimed the lives and livelihoods of many. An estimated 8.25 million people require humanitarian assistance. According to FSNAU's 2022 Post Deyr assessment, the food and nutrition situation remains critical in several districts and is expected to deteriorate further between January to June 2023 due to an anticipated sixth consecutive below-average rainfall season from April to June 2023. The risk of famine (IPC Phase 5) remains credible through at least June in agropastoral areas of Burhakaba district of Bay Region and among the displaced populations in Baidoa and Mogadishu. The health situation in the target areas in Berdale is very critical with drought and a high influx of IDPs. The situation is aggravated by big gaps in health services, People in the IDP camps are the most vulnerable, women and children are most affected as they are at risk of acquiring diseases and GBV. The capacity of affected people to protect themselves has eroded. The large-scale loss of livelihoods and the impact of drought and insecurity in the

outskirts has exposed affected populations to heightened protection risks. The populations of Baidoa and Bardale are facing epidemic risk which is attributed to low vaccination coverage, poor WASH coverage, shortage of health facilities, is under-resourced, low capacity for surveillance, and rapid response to alerts.

### 3. Description Of Beneficiaries

### 4. Grant Request Justification

Decades of conflict, disease outbreaks, widespread poverty, and recurrent climatic shocks, including the ongoing drought emergency, have devastated The health situation in the target areas in Berdale IDPs is very critical with drought and a high influx of IDPs. The situation is worsened by Poor access to clean drinking water and poor humanitarian interventions. the current droughts with poor hygiene and sanitation and AWD/Cholera outbreaks. People in the IDP camps are the most vulnerable community, women and children are most vulnerable as they are at risk of acquiring diseases, malnourishment, and GBV. The populations of Baidoa and Bardale are facing epidemic risk which is attributed to low vaccination coverage, poor WASH coverage, shortage of health facilities, low capacity for surveillance, and rapid response to alerts. According to UNOCHA's humanitarian overview report, the increasing severity of needs are alarming

The h ealth care in Bardale is under-resourced, with limited access to essential medicines, trained medical staff and equipment this has led to high morbidity and mortality rates particularly among women and children This integrated Health services will not only respond to the ongoing drought crisis in Berdale but as well addresses the chronic health gaps that existed there for many years. A total of 25,000 persons including (1500 men, 6700 women, 8400 girls, and 8400 boys) will be reached through integrated health services for the whole project period.

### 5. Complementarity

## LOGICAL FRAMEWORK

### Overall project objective

To improve access to integrated lifesaving emergency response interventions with a focus on maternal and child health services to the drought-affected population through static and mobile health clinics in Berdale district of Bay region of South West State Somalia. New-Ways is proposing a 12-month integrated Health project targeting drought-affected populations in the Berdale district reaching a total of 25,000 persons including 6700 women, 1,500 Men, 8400 girls, and 8400 boys)

## Health

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
To ensure access to safe, effective, equitable and inclusive humanitarian lifesaving and life-sustaining health services to the crisis affected population to 1,737,045 IDPs and 3,664,338 non-displaced population	SO2: Support 2.8 million people to sustain their lives and contribute to building resilience by the end of 2023	40
Reduce of excess morbidity and mortality; prepare, prevent, detect and timely respond to epidemic-prone & endemic diseases, driven by climatic shocks and conflict among million IDPs and non-displaced	SO1: Prevent loss of life of 6.7 million of the most severely vulnerable people, including 1.4 million children under five by the end of 2023	60

### Contribution to Cluster/Sector Objectives :

Improve equitable and safe access to quality emergency and essential lifesaving health services for drought-affected aimed at reducing avoidable morbidity and mortality in the Berdale district of the Bay region.

### Outcome 1

Improved maternal and child health through the provision of quality Antenatal, postnatal, and skilled delivery, immunization, and treatment of common diseases enhanced by a referral system between Primary Health Care and Secondary health care. The project will target 6700 women, 1500 men, 8400 girls, and 8400 boys).

### Output 1.1

#### Description

Improved maternal and child health care services in drought-affected areas in Berdale IDPs through the provision of quality Antenatal, postnatal and skilled delivery, immunization, and treatment of common diseases enhanced by referral system between Primary Health Care and Secondary health care. The project will target 6700 women, 1500 men, 8400 girls, and 8400 boys).

### Assumptions & Risks

### Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	Health	# of outpatient consultations	1,500	6,700	8,400	8,400	25,000
<b>Means of Verification :</b> <p><span style="font-family: Arial, sans-serif; color: black;">HMIS reports, Monthly reports, OPD registers</span></p>							
Indicator 1.1.2	Health	<span style="font-family: Arial, sans-serif; color: black;">Number of children below five years and women of child-bearing age immunized/vaccinated against Vaccine preventable diseases (VPD).</span>	0	4,700	4,200	4,400	13,300
<b>Means of Verification :</b> <span style="font-family: Arial, sans-serif; color: black;">HMIS reports, EPI registers</span>							
Indicator 1.1.3	Health	<p><span style="font-family: Arial, sans-serif; color: black;">The number of pregnant and lactating women provided with Antenatal, skilled birth delivery, and postnatal care services during the project period.</span> </p>	0	4,500	0	0	4,500
<b>Means of Verification :</b>  <span style="font-family: Arial, sans-serif; color: black;">HMIS reports, ANC registers, Maternity registers, PNC registers.</span>							
Indicator 1.1.4	Health	<span style="font-family: Arial, sans-serif; color: black;">Number of people who participated in the Mobilization workshop during the project launch</span>	40	60	0	0	100
<b>Means of Verification :</b> <span style="font-family: Arial, sans-serif; color: black;">Workshop reports and activity pictures, signed workshop attendance list, workshop report, and photos.</span>							
Indicator 1.1.5	Health	<p><span style="font-family: Arial, sans-serif; color: black;">Number of outreach shelters constructed and furnished with materials for the mobile sites such as forms, tables, chairs</span></p>	0	0	0	0	3
<b>Means of Verification :</b> <span style="font-family: Arial, sans-serif; color: black;">Pictures of the shelter, construction and items/equipment in the shelter.</span>							
Indicator 1.1.6	Health	<span style="font-family: Arial, sans-serif; color: black;">Number of facilities that are supported by the Medical supplies bought for the project to ensure that the facilities have enough supplies throughout the project period  </span>	0	0	0	0	5
<b>Means of Verification :</b> <span style="font-family: Arial, sans-serif; color: black;">Agreement with the supplier, activity pictures, waybill, delivery note.</span>							
Indicator 1.1.7	Health	# GBV survivors receiving CMR services	0	0	0	0	120
<b>Means of Verification :</b> <p><span style="font-family: Arial, sans-serif; color: black;" lang="EN-US">Monthly report, Activity report, interim and final report  </span> </p>							
<b>Activities</b>							

**Activity 1.1.1****Standard Activity : # of outpatient consultations**

Provide Outpatient consultations to drought-affected IDPs (women-6700, men-1500, girls-8400, and boys-8400) in Berdale. Each clinician will provide 30 consultations per day for 6 days a week for 12 months. The target sites are 2 Fixed sites and 3 mobile sites are (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries

**Activity 1.1.2****Standard Activity : # children vaccinated**

Provide routine and campaign immunization (BCG, OPV, Pentavalent, and Measles) to 8600 under 5 children and TT to 4700 Women of Child Bearing Age (WBCA) the 3 mobile, and the 2 integrated health static sites. The target sites are and the mobile sites are. (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries

**Activity 1.1.3****Standard Activity : Births assisted by a skilled birth attendant**

Provision of antenatal and post-natal care to pregnant and lactating mothers at the 2 integrated static and the 3 Mobile sites. The project will support 4,500 women of childbearing age. Special attention is to be given to the marginalized and the disabled. The target sites are: (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries

**Activity 1.1.4****Standard Activity : HCW and community training: MHPSS (e.g. PFA, MhGAP-HIG)**

Conduct a community mobilization and awareness raising workshop at the start of the project to maximize inclusion, accountability, and ownership of project by the community. The target is 100 (40 men 60 Women) community members including staff from MoH. The workshop will be for 3 days. 20% of the participants will be from the marginalized and the disabled.

#### Activity 1.1.5

##### Standard Activity : Primary care - outpatient services

Construct and furnish outreach shelters with materials for the mobile sites such as forms, tables, chairs. The mobile sites are Ahmed Gurey, Waberi and Horseed)

#### Activity 1.1.6

##### Standard Activity : # of people served by medical supplies and medications

Medical supplies are bought for the project to ensure that the facilities have enough supplies throughout the project period. The target sites are (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed)

#### Activity 1.1.7

##### Standard Activity : Clinical management of rape (CMR), PSS for survivors

Provision of quality multi-sectoral services (clinical case management, PSS, justice, safety) for GBV survivors and make sure they are served with dignity and confidentiality. The facilities to be targeted (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries

#### Output 1.2

##### Description

Improved communicable Disease response and control through health and hygiene promotion and case management with improved referral and coordination.

##### Assumptions & Risks

##### Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	Health	<p><span style="font-family: Arial, sans-serif; color: black;">The number of people (men-1500, women-6700, boys-8400, and girls-8400) reached by health promotion message.</span></p>	1,500	6,700	8,400	8,400	25,000

##### Means of Verification :

<span style="font-family: Arial, sans-serif; color: black;">HMIS reports, activity reports, Monthly reports</span>

Indicator 1.2.2	Health	# Health care staff trained	22	23	0	0	45
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**Means of Verification :**

Training reports, pictures, signed the attendance sheet.

Indicator 1.2.3	Health	<p>Number of monitoring and supervisions exercises undertaken</p>	0	4	0	0	4
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**Means of Verification :** <p>Supervision report, pictures and attendance sheet for the visiting team</p>

**Activities****Activity 1.2.1**

**Standard Activity : HCW and community training: MHPSS (e.g. PFA, MhGAP-HIG)**

Conduct awareness and social mobilization campaigns on health, hygiene, AWD, and Immunizable diseases, targeting women, men, girls, and boys in drought-affected populations in Berdale IDPs. The target is IDPs and vulnerable host communities during the whole of the project period. 15% of the attendees will be from marginalized communities, IDPs, and the disabled while the remaining 85% will be from the host community. The awareness campaign will be done once every month for 12 months period

**Activity 1.2.2**

**Standard Activity : # Health care staff trained**

Provide capacity-building training for 24 health workers and 21 CHWs (22 men and 23 women) i.e 1 health field officer, 2 Medical Doctors, 7 Qualified Nurses, 7 Auxiliary nurses, 7 midwives and 21 CHWs are trained on integrated management of childhood illnesses (IMCI); Basic Emergency Obstetric Care (BEmOC); Mental health and psycho-social support [MHPSS) and training of staff and CHWs on Clinical Management of Rape  
The training will be for 4 days and will use different methodologies such as: Class discussion; Lectures and presentations; Role play; Group work; Oral drill and Video presentation.

**Activity 1.2.3**

**Standard Activity : # monitoring conducted**

Provision of timely Quarterly supervision to make sure that project is implemented in line with the workplan

**Additional Targets :****M & R****Monitoring & Reporting plan**

This project will have a clear monitoring and reporting system, which will align with the country and state level reporting system. The monitoring and supportive supervision will happen monthly and quarterly by the project senior members. Monitoring will be done on daily basis and reporting of the activities, including recording of tasks and achievements, will be carried out continuous basis by NWO. Data will be collected through field visit, submission and review of the monthly report, the findings will be used to make informed decisions and timely adjustments done. Interim and final reports will be compiled and shared with UNOCHA. The Programme Coordinator will be based in Baidoa to oversee the project activities. Reports will be generated from the facilities and shared with the stakeholders and discuss at during the cluster meetings in order to identify the gaps within the report and help NWO and the MoH authorities in prioritizing the need of the district in future programming

**Workplan**

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
<p>Activity 1.1.1:</p> <p>Provide Outpatient consultations to drought-affected IDPs (women-6700, men-1500, girls-8400, and boys-8400) in Berdale. Each clinician will provide 30 consultations per day for 6 days a week for 12 months. The target sites are 2 Fixed sites and 3 mobile sites are (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries</p>	1												
<p>Activity 1.1.2:</p> <p>Provide routine and campaign immunization (BCG, OPV, Pentavalent, and Measles) to 8600 under 5 children and TT to 4700 Women of Child Bearing Age (WBCA) the 3 mobile, and the 2 integrated health static sites. The target sites are and the mobile sites are. (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries</p>	1												
<p>Activity 1.1.3:</p> <p>Provision of antenatal and post-natal care to pregnant and lactating mothers at the 2 integrated static and the 3 Mobile sites. The project will support 4,500 women of childbearing age. Special attention is to be given to the marginalized and the disabled. The target sites are: (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries</p>	1												

<p>Activity 1.1.4:</p> <p>Conduct a community mobilization and awareness raising workshop at the start of the project to maximize inclusion, accountability, and ownership of project by the community. The target is 100 (40 men 60 Women) community members including staff from MoH. The workshop will be for 3 days. 20% of the participants will be from the marginalized and the disabled.</p>	1												
<p>Activity 1.1.5:</p> <p>Construct and furnish outreach shelters with materials for the mobile sites such as forms, tables, chairs. The mobile sites are Ahmed Gurey, Waberi and Horseed)</p>	1												
<p>Activity 1.1.6:</p> <p>Medical supplies are bought for the project to ensure that the facilities have enough supplies throughout the project period. The target sites are (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed)</p>	1												
<p>Activity 1.1.7:</p> <p>Provision of quality multi-sectoral services (clinical case management, PSS, justice, safety) for GBV survivors and make sure they are served with dignity and confidentiality. The facilities to be targeted (Static sites: October and Berdale and the mobile sites include: Ahmed Gurey, Waberi and Horseed). The activity engages the PLWD, minority groups and women and girls by ensuring representation, access, direct engagement, collaboration and beneficiaries</p>	1												
<p>Activity 1.2.1:</p> <p>Conduct awareness and social mobilization campaigns on health, hygiene, AWD, and Immunizable diseases, targeting women, men, girls, and boys in drought-affected populations in Berdale IDPs. The target is IDPs and vulnerable host communities during the whole of the project period. 15% of the attendees will be from marginalized communities, IDPs, and the disabled while the remaining 85% will be from the host community. The awareness campaign will be done once every month for 12 months period</p>	1												
<p>Activity 1.2.2:</p> <p>Provide capacity-building training for 24 health workers and 21 CHWs (22 men and 23 women) i.e 1 health field officer, 2 Medical Doctors, 7 Qualified Nurses, 7 Auxiliary nurses, 7 midwives and 21 CHWs are trained on integrated management of childhood illnesses (IMCI); Basic Emergency Obstetric Care (BEmOC); Mental health and psycho-social support [MHPSS) and training of staff and CHWs on Clinical Management of Rape The training will be for 4 days and will use different methodologies such as: Class discussion; Lectures and presentations; Role play; Group work; Oral drill and Video presentation.</p>	1												



**Access**

New-Ways has its main office in Mogadishu and is currently running 10 health and Nutrition static Centres and 9 mobile sites in South West State. New-Ways has also a sub office in Baidoa that is currently coordinating all New-Ways's projects in Baidoa and Berdale. The situation in Berdale is so far stable which is a facilitating factor in the implementation of this project. New-Ways will regularly monitor the access issues and also participate in all coordination meetings discussing access issues in the area. Should access become an issue, New-Ways will share this with the donor and ask for their guidance in addition to temporarily modifying the mobile team movement accordingly depending on the situation.

**BUDGET**

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
<b>1. Staff and Other Personnel Costs</b>							
1.1	Health field coordinator	D	1	1,600.00	12	50.00	9,600.00
	<i>The health field coordinator will be based in Berdale to supervise daily health and nutrition activities. He/she will work closely with Health Manager to ensure daily supervision at field level is conducted and the records are correct. The Field officer will conduct mentoring, coaching and on job training at field level in collaboration with Medical Activity Manager. He/she will also coordinate the work of CHWS at the field level.</i>						
1.2	HMIS reporting officer	D	1	1,050.00	12	30.00	3,780.00
	<i>He/She will charge on data, reporting on DHIS2, Report Hub. active case finding and follow-up. Will also participate in selection of relevant training materials and schedule of training. Also assess the capacity of the selected Workers. This employee will specifically work on this project. He will be paid 1050 per months and SHF will pay 30%</i>						
1.3	Project Manager	D	1	2,500.00	12	30.00	9,000.00
	<i>He/She will facilitate the conceptualization development and actualization of integrated multi-cluster delivery of the response package ensuring that cross-cutting themes such as do-no harm, gender etc. are fully integrated into the project. S/he will be the principal contact person of the project. Will work closely with the head of mobile teams and facility in charges in order to ensure project activities are implemented seamlessly and are coherent. The proposed remuneration is as a result of the complexity of an integrated program that will require hiring someone</i>						
1.4	Medical doctor for the main facility in Berdale town	D	2	1,000.00	12	100.00	24,000.00
	<i>Medical Doctor will be in charge of main static facilities at Berdale to ensure care and treatment of children with complications. He/she will also diagnose, assess and treat the patients. He/She will be in a position to provide and perform the duty of physician in cases management and counselling. Review the Mobile Team activities and priorities on a regular basis updating the Project manager on gaps and/or provide recommendations on how to improve quality of services. He will be paid \$1000 per month and SHF will support 100%</i>						
1.5	Qualified nurses (1 per every static sites and 1 for every mobile team)	D	7	400.00	12	100.00	33,600.00
	<i>Help to organize and carry out patient care and treatment, according to laid down's prescriptions and WHO guidelines and Participate in surveillance of the patient regarding alimentation, hydration, elimination and general health status. Be proactive in identification of emergency situations. Communicate regularly with other Mobile Team staff. This employees will specifically work on this project</i>						
1.6	Auxiliary nurses( 1 per every static sites and 1 for every mobile team)	D	7	200.00	12	100.00	16,800.00
	<i>Assist the nurses during consultations and carry out vaccination for children under five, conduct duties like dressing of wounds and helping the midwives during delivery. Implement and evaluate individual treatment plans for patients with a known long-term condition. Identify and manage as appropriate treatment plans for patients at risk of developing a long-term condition. Prioritize health problems and intervene appropriately to assist the patient in complex, urgent or emergency situations, including initiation of effective emergency care. Support patients to adopt health promotion laid down strategies that encourage patients to live healthily and apply principles of self-care</i>						
1.7	Qualified midwives (1 per every static sites and 1 for every mobile team)	D	7	400.00	12	100.00	33,600.00
	<i>Ensure admission of patient and follow up of labor. Direct normal delivery, -Carry out prolonged deliveries in collaboration with the Doctor. Ensure the follow up of the new-borns and the mothers and Prepare the discharge of mothers and their babies- Counselling mother's pre and post-delivery</i>						
1.8	Executive Director	D	1	4,000.00	12	25.00	12,000.00
	<i>Responsible to the overall management of the projects. His role includes: Coordinate project activities to ensure that the activities in each results area are implemented in accordance with the project agreement, monitor the procurement of goods and services for the project. The ED will give 25% of his time for this project.</i>						
1.9	Human resource officer	D	1	1,200.00	12	30.00	4,320.00
	<i>The HR Officer oversees all the issues related to staffing from recruitment to disciplinary to staff affairs and preparation of contracts. The staff will dedicate 30% off their time to this project</i>						

1.10	Admin and Finance Manager	D	1	1,200.00	12	30.00	4,320.00
	<i>The admin and finance officer will be responsible the daily running of the office activities and ensure proper accountability of donor funds. He/She is in charge of all bases and ensure that the field finance officers provide timely reports, proper documentation are obtained that is in line with procurement procedure. They will dedicate 30% off their time to this project</i>						
1.11	Logistic officer	D	1	1,200.00	12	30.00	4,320.00
	<i>Logistics, procurement and admin officer-project supply procurement and management. SHF contributes 30% of the salary</i>						
1.12	Community Health Workers	D	32	100.00	12	100.00	38,400.00
	<i>These team will be involved in linking the project staff with the community, they will prepare the community and help in referral</i>						
1.13	Cleaners	D	4	150.00	12	100.00	7,200.00
	<i>The cleaners will be responsible for keeping the two static facilities clean and in good sanitation</i>						
1.14	Security guard	D	4	150.00	12	100.00	7,200.00
	<i>The security guards will be manning the static facilities day and night</i>						
1.15	Program Manager	D	1	3,000.00	12	30.00	10,800.00
	<i>He/She will facilitate the conceptualization development and actualization of integrated multi-cluster delivery of the response package ensuring that cross-cutting themes such as do-no harm, gender etc. are fully integrated into the project. S/he will be the principal contact person of the project. Will work closely with the head of mobile teams and facility in charges in order to ensure project activities are implemented seamlessly and are coherent. The proposed remuneration is as a result of the complexity of an integrated program that will require hiring someone</i>						
1.16	Drug dispenser/Pharmacist	D	5	350.00	12	100.00	21,000.00
	<i>He or she will be involved in the management of the drugs and control the movement of the drugs. 1 per static site and 1 for every outreach/mobile site</i>						
1.17	EPI Nurse	D	5	400.00	12	100.00	24,000.00
	<i>Help to organize and carry out immunization services, according to laid down's WHO guidelines. 1 per static site and 1 for every outreach/mobile site</i>						
	<b>Section Total</b>						<b>263,940.00</b>
<b>2. Supplies, Commodities, Materials</b>							
2.1	Procurement of emergency medical supplies	D	1	47,970.00	1	100.00	47,970.00
	<i>(Activity 1.1.8) Essential drugs and related medical supplies will be purchased from Nairobi and transported to Berdale. The total cost will be USD 47,970 as per the attached BOQ.</i>						
2.2	Training of staff on MHPSS	D	1	5,505.00	1	100.00	5,505.00
	<i>(Activity 1.2.4)This will cover the cost of conducting the training for (24 staff and 21 CHWs) participants for four days, covering staff per diem allowance, refreshments, venue rent and training materials</i>						
2.3	Purchase cleaning materials for infection prevention such as Hand rubs, disinfectants for the Static Centers	D	1	7,611.00	1	100.00	7,611.00
	<i>The supplies is to be used for disinfection of the Static Centres. See the BOQ</i>						
2.4	Cost on water provision for the outreach services	D	5000	0.19	12	100.00	11,400.00
	<i>Each outreach facility will be provided with water i.e paying for the water during the facility operations costing 0.19/litre for 5000 beneficiaries during the project period. This water will be used for drinking, delivery and hygiene purposes since there is no tap water available in the project sites. This amount will be used in 3 mobile sites for the project period. Water trucking will be used. See the BOQ. Due to the drought and working in the IDPs for the mobile sites need water on a daily basis hence the cost</i>						
2.5	Training of staff on for Integrated management of childhood illness (IMCI)	D	1	5,505.00	1	100.00	5,505.00
	<i>(Activity 1.2.2)This will cover the cost of conducting Integrated Management of Childhood Illness (IMCI) (24 staff and 21 CHWs) participants for four days, covering staff per diem allowance, refreshment, venue rent and training materials</i>						
2.6	Training of staff on BemONC (Basic Maternal Obstetric and Neonatal Care)	D	1	5,505.00	1	100.00	5,505.00
	<i>(Activity 1.2.3)This will cover the cost of conducting Basic Obstetric, Neonatal and Newborn Care (BeMONC) (24 staff and 21 CHWs) participants for four days, covering staff per diem allowance, refreshment, venue rent and training materials</i>						
2.7	Community mobilization/inception meeting	D	1	2,020.00	1	100.00	2,020.00
	<i>(Activity 1.1.6)The mobilization will be done at the beginning of the project for 100 people</i>						

2.8	Outreach shelter construction and supplies	D	1	7,920.00	1	100.00	7,920.00
	<i>(Activity 1.1.7)New Ways will construct 3 outreach shelters and equip them with the necessary materials for work</i>						
2.9	Transportation/Freight cost for the supplies from Nairobi to Baidoa to Berdale	D	1	6,180.00	1	100.00	6,180.00
	<i>The supplies will be procured from Nairobi as recommended by the Cluster and transported via air to Berdale and this cost will cover the purchase amount, freight, storage and terminal costs</i>						
2.10	Training of staff on Clinical Management of Rape	D	1	5,505.00	1	100.00	5,505.00
	<i>(Activity 1.2.5)This will cover the cost of conducting Clinical Management of Rape (CMR) (24 staff and 21 CHWs) participants for four days, covering staff per diem allowance, refreshment, venue rent and training materials</i>						
2.11	Warehouse rent for the medical and nutrition supplies	D	1	500.00	12	100.00	6,000.00
	<i>The money will be used to pay for the rent of the warehouse in a safe location that will cost 500 per month for the project period</i>						
	<b>Section Total</b>						<b>111,121.00</b>
<b>3. Equipment</b>							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	<b>Section Total</b>						<b>0.00</b>
<b>4. Contractual Services</b>							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	<b>Section Total</b>						<b>0.00</b>
<b>5. Travel</b>							
5.1	Car hire for outreach support and supervision	D	3	1,800.00	12	100.00	64,800.00
	<i>Three cars will be used. Each mobile will use 1 car for the mobile teams and the same cars will be used for supervision, referrals and project management and administration to support in staff movement</i>						
5.2	Joint Supportive supervision monitoring by MoH and New Ways team	D	1	1,730.00	4	100.00	6,920.00
	<i>These are field monitoring visit of senior staff DSA to check program implementation and quality of services for a period of 5 days the cost of 1 car hire-Once per quarter i.e 3 times during the project. The staffs will be travelling from Mogadishu to Baidoa by air and they include: (The team will comprise of the Admin, The Monitoring Officer and the project Manager. See the attached BOQ</i>						
	<b>Section Total</b>						<b>71,720.00</b>
<b>6. Transfers and Grants to Counterparts</b>							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	<b>Section Total</b>						<b>0.00</b>
<b>7. General Operating and Other Direct Costs</b>							
7.1	Communication cost for Berdale office	D	1	800.00	12	30.00	2,880.00
	<i>Communication cost Sub office for staff in the field and also for the office for easy communication and monitoring of project</i>						
7.2	Office stationaries	D	1	1,600.00	12	30.00	5,760.00
	<i>This fund will be used for buying stationary for the office</i>						
7.3	Office utilities	D	1	800.00	12	30.00	2,880.00
	<i>These are the cost of electricity and water for the office</i>						
7.4	Office rent	D	1	2,400.00	12	30.00	8,640.00
	<i>Rent for office New-Ways office</i>						

7.5	Bank/Hawala charges	D	1	348.72	1	100.00	348.72
<i>This will ensure the transection transfers charges cost and will be charge at 0.5 % of program direct cost amounting</i>							
<b>Section Total</b>							<b>20,508.72</b>
<b>SubTotal</b>			5,100.00				<b>467,289.72</b>
Direct							467,289.72
Support							
<b>PSC Cost</b>							
PSC Cost Percent							7.00
PSC Amount							32,710.28
<b>Total Cost</b>							<b>500,000.00</b>

Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Somalia > Bay > Baidoa > Berdale	30.00000	0	0	0	0		H: Activity 1.1.1:  H: Activity 1.1.2:  H: Activity 1.1.5:  H: Activity 1.1.7:  H: Activity 1.2.2:  Provide capacity-building training for 2...
Somalia > Bay > Baidoa > Berdale/Axmed Gurey	15.00000	0	0	0	0		H: Activity 1.1.1:  H: Activity 1.1.2:  H: Activity 1.1.5:  H: Activity 1.1.7:  H: Activity 1.2.2:  Provide capacity-building training for 2...

Somalia > Bay > Baidoa > Berdale/Horseed	15.00000	0	0	0	0	H: Activity 1.1.1:  H: Activity 1.1.2:  H: Activity 1.1.5:  H: Activity 1.1.7:  H: Activity 1.2.2: Provide capacity-building training for 2...
Somalia > Bay > Baidoa > Berdale/October	20.00000	0	0	0	0	H: Activity 1.1.1:  H: Activity 1.1.2:  H: Activity 1.1.5:  H: Activity 1.1.7:  H: Activity 1.2.2: Provide capacity-building training for 2...
Somalia > Bay > Baidoa > Berdale/Waberi	20.00000	0	0	0	0	H: Activity 1.1.1:  H: Activity 1.1.2:  H: Activity 1.1.5:  H: Activity 1.1.7:  H: Activity 1.2.2: Provide capacity-building training for 2...

#### Documents

Category Name	Document Description
Budget Documents	New Ways Health project BoQ-Berdale.xls
Budget Documents	Revised New Ways Health project BoQ_08-05-2023.xls
Budget Documents	Revised New Ways Health project BoQ_17-05-2023.xls
Budget Documents	Revised New Ways Health project BoQ_23-05-2023.xls
Grant Agreement	GA NWO 25070 HC signed.pdf
Grant Agreement	GA NWO HEALTH Berdale 25070 signed.pdf