

Requesting Organization :	INTERSOS				
Allocation Type :	2023 1st Standard Allocation				
Primary Cluster	Sub Cluster	Percentage			
HEALTH		100.00			
		100			
Project Title :	Scaling up access to essential health services for the vulnerable and underserved populations in Surobi, and Chahar Asyab districts in Kabul province				
Allocation Type Category :					
OPS Details					
Project Code :		Fund Project Code :	CBPF-AFG-23-S-INGO-26427		
Cluster :		Project Budget in US\$:	356,699.43		
Planned project duration :	6 Months	Priority:			
Planned Start Date :	01/10/2023	Planned End Date :	31/03/2024		
Actual Start Date:	01/11/2023	Actual End Date:	30/04/2024		
Project Summary :	<p>The proposed action will address the humanitarian needs of the most vulnerable underserved population in Kabul Province (Surobi, and Chahar Asyab Districts) through a Health intervention designed to enhance the individuals' and communities' capacity to respond to immediate, and foreseeable, winter-specific needs of the targeted population in white areas. Through the proposed action, INTERSOS will aim to tackle the identified needs by focusing on reaching 34,042 direct beneficiaries of which 7,493 women, 8,856 girls, 8,174 men, 9,519 boys of which 3,404 people with disabilities and 58,713 indirect beneficiaries. INTERSOS will focus on 3 health facilities (2 in Surobi, 1 in Chahar Asyab) with the aim to help increase access to comprehensive basic Health care services for women, girls, men, boys and people with disabilities in Kabul in response to the increase of needs during the winter period. This will be pursued through the provision of primary health care in the targeted areas, such as reproductive health, MHPSS and non-communicable disease. To strengthen health care worker capacities will be provided trainings and will be strengthen the infectious disease outbreak preparedness response. In the health facilities all the children under 5 years old will be screened for the identification of SAM/MAM cases with or without complications, that will be referred to the closest facility able to provide assistance. In the meanwhile INTERSOS will raise awareness of the beneficiaries on health and hygiene practices to prevent transmissions of respiratory infections and other communicable diseases.</p>				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	8,174	7,493	9,519	8,856	34,042
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
	246	226	287	267	1,026
	0	0	0	0	0
	410	375	462	444	1,691
	7,518	6,892	8,770	8,145	31,325
	0	0	0	0	0
Indirect Beneficiaries :					
<p>Indirect beneficiaries are members of the communities where the activities proposed through this project will be implemented. These include the members of the families of the beneficiaries and the whole community where the health and protection activities will be implemented. Moreover, all non-targeted communities of the target area will benefit from the interventions in terms of improved community cohesion. Additionally, NGO operating in the area will also benefit from the project through gaining access to a single referral center. NGO partners will also benefit from easier and more effective field coordination through the community centers and community committees.</p>					

Catchment Population:

Link with allocation strategy :

The project contributes to 2023 HRP Health CO2 - "Strengthen health sector capacity to prepare for, prevent, detect and deliver a timely response to disease outbreaks", and specifically SO2 - "The protection risks of the most vulnerable are mitigated and the needs of affected persons of all genders and diversities are monitored and addressed through humanitarian action"; and to the 2023 HRP Health CO1 - "Maintain and increase access to life-saving and life-sustaining coordinated health services and information for those most vulnerable and in need"; and specifically SO1 - "Mortality and morbidity of crisis-affected people of all gender and diversities are reduced through timely, multi-sectoral, lifesaving, equitable and safe assistance". INTERSOS will contribute to pursuing the HRP objectives: Enhancement of Primary Health Services in underserved/hard-to-reach areas, the Provision of medicines and medical supplies, Strengthening of the disease surveillance system, with a focus on diseases that are more likely to spread in winter, Health education and health promotion, Training of health care workers, Protection monitoring. INTERSOS proposed project will contribute to the overall Clusters strategy of reducing exposure of economically drained, low-resilient, underserved communities to morbidity and mortality that have a peak during the winter period. Protection, gender, disability inclusion and Do No Harm will be mainstreamed in the activities.

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

According to the 2023 ICCT Winter Prioritization Report, locations in hard-to-reach areas are considered to have a greater risk of exposure to the harsh winter climate, without the financial capability to purchase winter clothes, fuel, and heating equipment and consumables, to cope with the low temperatures. Moreover, usually during the winter season respiratory infection outbreaks rise, registering a constant increase in hospitalizations, morbidity, and mortality during winter months. As for 2023 ICCT Winter Prioritization Report, Acute respiratory diseases are expected to increase over the winter period. Afghanistan continues to battle outbreaks of measles, dengue fever and COVID-19 amid the pause in international development funding. At the same time, limited existing or accessible health services are a high risk in the affected districts; according to Humanitarian Situation Monitoring (HSM) data, only 55% of key informants reported healthcare services in their settlements in the April HSM assessment, and among those that reported their existence, 47% reported that both medicine and equipment were generally unavailable. INTERSOS is already present in the area and validated the needs through a need assessment in September 2023. The beneficiaries' feedback from the previous action has been taken into consideration during the design phase, in particular, has been integrated the feedback of vulnerable categorizers such as women, the elderly, and people with disabilities.

3. Description Of Beneficiaries

4. Grant Request Justification

The intervention will address the needs of the most vulnerable communities with regard to Health and mainstreaming Protection. The project will tackle the gaps identified in the health system in the white areas of Kabul province, by scaling up the capacity of three identified health facilities, following coordination with the DoPH. INTERSOS is already working in Kabul province, especially in Surobi district, where beneficiaries are familiar with INTERSOS and its activities . This action aims to continue providing services to the communities of this area after the end of the current project, which will stop the activities in the middle of September, and without INTERSOS intervention this area will become a white area again. A health facility at Chahar Asyab was supported by INTERSOS with primary health care services until March 2023 when the funding from WHO ended. This proposal targets both aforementioned districts due to the huge need for essential health services that still persist in the areas that are underserved. To address these increased needs and propose an adequate response to

the emergency of the situation, INTERSOS intends to support the Primary Health System's response, by ensuring the provision of basic health services, including protection mainstreaming, in supported HF's in selected white areas of intervention in Kabul Province. The intervention should be considered as a bridging and temporary action to avoid the collapse of the existing health services.

5. Complementarity

LOGICAL FRAMEWORK

Overall project objective

To reduce mortality and morbidity by enhancing access to life-saving essential health services in hard-to-reach areas in Kabul during the winter period

HEALTH

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
2023 HRP Health CO2: Strengthen health sector capacity to prepare for, prevent, detect and deliver timely response to disease outbreaks	SO2: The protection risks of the most vulnerable are mitigated and the needs of affected persons of all genders and diversities are monitored and addressed through humanitarian action.	50
2023 HRP Health CO1: Maintain and increase access to life-saving and life-sustaining coordinated health services and information for those most vulnerable and in need	SO1: Mortality and morbidity of crisis-affected people of all gender and diversities are reduced through timely, multi-sectoral, lifesaving, equitable and safe assistance.	50

Contribution to Cluster/Sector Objectives : This project's goals align with the strategic objectives SO1 and SO2 of the 2023 Humanitarian Response Plan for health interventions in Afghanistan. The actions will strengthen the health cluster's aim of protecting individual health by delivering quality health care, preventing the transmission of communicable diseases, and managing outbreaks and other incidents that threaten public health, particularly during the winter period.

Specific actions that would be taken through this intervention are:

- 1) expanding access to high-quality comprehensive primary health care services - outpatient consultation and SRH services in underserved areas in Kabul, through the provision of human resources and medical supplies
- 2) Building the capacity of health workers to provide quality care to the beneficiaries in line with Afghanistan's National treatment guidelines and WHO protocols

Outcome 1

Increasing access to comprehensive basic Health care services for women, girls, men and boys in Kabul in response to the increase of needs during the winter period

Output 1.1

Description

Quality Health Care services extended to hard-to-reach areas in Kabul Province

Assumptions & Risks

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	HEALTH	Output: Number of primary health care consultations	5,529	10,311	6,386	11,816	34,042

Means of Verification :

OPD Attendance Register

Indicator 1.1.2	HEALTH	Output: Number of pregnant women attended first antenatal care visit		579		102	681
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Means of Verification :

Antenatal Care Attendance Register

Indicator 1.1.3	HEALTH	<p>Number of newborns that receive postnatal care within the first 7 days of delivery </p>	0	0	329	303	632
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Means of Verification : <p>Postnatal Care Attendance Register
</p><p class="sceditor-nlf">
</p>

Indicator 1.1.4	HEALTH	Output: Number of health care workers trained	15	15			30
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Means of Verification : <p><b id="docs-internal-guid-431f53bd-7fff-633b-6f39-d8faf26ac0d6">Training report, pre- and post test analysis, attendance sheet
</p>

Indicator 1.1.5	HEALTH	Output: Number of children less than 12 months of age who received measles vaccines			809	747	1,556
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Means of Verification : <p>EPI vaccination register</p>

Indicator 1.1.6	HEALTH						292
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Means of Verification : <p>Maternity/delivery register</p>

Indicator 1.1.7	HEALTH		987	911	0	0	1,898
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Means of Verification : <p>MH screening register, OPD register, MHPSS attendance register </p>

Indicator 1.1.8	HEALTH	<p>Number of people treated for acute respiratory infection (ARI)</p>	1,641	1,525	1,893	1,750	6,809
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Means of Verification : <p>OPD register</p>

Indicator 1.1.9	HEALTH						70
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Means of Verification : <p>Baseline and Endline Survey</p>

Activities

Activity 1.1.1

Standard Activity : Support delivery of primary health care services including reproductive health, MHPSS and non-communicable diseases

INTERSOS has identified with the support and confirmation of DoPH, 3 static health facilities, located in Surobi and Chahar Asyab, and will provide comprehensive primary health care services in line with the BPHS guideline. INTERSOS to expand primary health care service will:

- Provide primary health care services: a comprehensive primary health care package in accordance with BHSP and Ministry of Health /WHO standards and regulations. Services will be provided via static health facilities approach in line with the recent request of the MoPH for humanitarian actors to support more of static health facilities as against the mobile health teams. INTERSOS will engage additional human resources to complement the existing staffing at the supported facilities. As the cases of ARI, pneumonia and other diseases are expected to rise during the winter, INTERSOS will ensure the health staff are sufficiently capacitated with knowledge and supplies to appropriately manage both uncomplicated and complicated diseases.
- Reproductive Health: Pregnant women being one of the most vulnerable groups in the communities will be supported with access to quality ANC, PNC, deliveries and Family Planning services. The FP commodities will continue to be requested from UNFPA, while medical commodities and equipment for the ANC, delivery and PNC will be provided by INTERSOS.
- Treatment of Non-communicable disease: Special attention in terms of training, treatment and provision of appropriate supplies will be made to improve the quality of chronic disease care.
- Mental Health Care: INTERSOS MH experts will also train the health workers doctors and nurses on MH screening and classification, to enhance their capacity in identifying, classifying and appropriately managing/referring beneficiaries with MH disorders.
- EPI - INTERSOS will ensure that all children of vaccinatable age receive vaccines according to Afghanistan EPI schedule by support with a vaccinator in each facility and with basic vaccine storage equipment. The vaccine will be obtained by the team on an agreed routine from the provincial cold store. In Surobi, INTERSOS already supports the EPI services through vaccine service delivery and reinforcing the vaccine storage systems. This will be continued and extended to Chahar Asyab through this project.

INTERSOS will also monitor the percentage of beneficiaries who feel the assistance corresponds to their needs.

Activity 1.1.2

Standard Activity : Strengthen infectious diseases outbreak preparedness and response (e.g. Coordination, surveillance, case management, IPC, RCCE, diagnostic and treatment kits, etc.)

INTERSOS will procure in-country, essential medical commodities including equipment, medicine, consumables and supplies to enhance the governmental supplies which is done quarterly and is insufficient in quantity.

To ensure optimum supplier of essential medication required for managing the increased cases of RTI, INTERSOS will develop and procure specific classes of medications like antibiotics, antipyretic and antihistamine, similar to the constituents of the pneumonia kit developed by WHO in 2020.

INTERSOS will continuously monitor and track drugs consumptions, paying attention to the minimum stock levels to avoid stock depletion especially of tracer commodities like Amoxicilin Tablet 250mg, Paracetamol Tablet 100mg, Miconazole Skin Cream, Folic Acid 5mg and Ferrous Sulphate 200mg.

INTERSOS Pharmacy experts will support through on-job training to ensure rational use of drugs through quality medical prescriptions by enhancing the use of guidelines and on job training for the health staff. Additionally, INTERSOS will procure and distribute clean delivery kits to women at 36 weeks gestation to reduce their out-of-pocket spending on medical consumables when they go to the BEmONC centers for delivery. Baby kits which would include warm clothing for neonates, infants, and toddlers will be distributed to women who delivered in the facility and attend postnatal consultations, especially within the first 7 days of delivery as a means to ensure that under 5 children are provided suitable clothing to protect them from the harsh weather. INTERSOS will distribute also PSS kits to PLW who are enrolled with features of postpartum depression or any MH disorder. Dignity kits will be distributed to adolescent girls treated for genital tract infection and educate menstrual hygiene.

To ensure sustainability of the action, INTERSOS will transfer all the remaining medical stock at the end of the intervention, to the BHC management for use at the supported health facilities.

Disease surveillance: through the surveillance network system, INTERSOS will promptly report any notifiable diseases that is detected during consultations in any of the supported health facilities via the EWARNS platform and to the disease surveillance officer for quick investigation.

Activity 1.1.3

Standard Activity : Provide in-services training to health care workers

INTERSOS will collaborate with the DoPH, WHO and other health actors in Kabul to organize capacity building sessions for the health workers and support staff working in the PHCs. Training sessions will be based on the identified needs and continued on job coaching and mentorship on IMCI, safe motherhood/Reproductive Health, HMIS, IMAM, IYCF, MH (MHGAP, PFA), IMCI, SGBV case management, IPC, surveillance and pharmacy/drug management training. INTERSOS will engage DoPH accredited facilitators and WHO trainers for the formal training, while the INTERSOS technical team (Medco, deputy medco, PMR and MAM) will support the on-job training for the health staff. The training will be programmed in a schedule that will not affect the functionality of the facilities, for example in the periods of low attendance. Being part of the Health and Protection Clusters, INTERSOS will adhere to the guidelines of both clusters and will liaise with the Authorities.

To ensure the quality of care and proper surveillance of the action, INTERSOS will supervise through regular field visits the operation ensuring that INTERSOS, Health Cluster and OCHA standards are respected. The field team will receive the constant support of the Medical Activity Manager and the technical support of the Medical Coordinator and PMR.

Activity 1.1.4

Standard Activity : Not Selected

MoU signature

INTERSOS in the first stage of implementation, immediately after the confirmation of the grant, will proceed to sign the MoU with the relevant Ministries

Output 1.2

Description

Acutely malnourished children are screened and referred to the SC, OTP for appropriate management.

Assumptions & Risks

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	NUTRITION	Number of children screened at health facility level for acute malnourishment	0	0	3,934	3,631	7,565
Means of Verification : <p>Nutrition screening register</p>							
Indicator 1.2.2	NUTRITION	Output: Number of girls and boys aged 6-59 months with SAM who are admitted for treatment in OPD			196	181	377
Means of Verification : <p>OTP admission register</p>							
Indicator 1.2.3	HEALTH						70
Means of Verification : <p>Complaint - Resolution Analysis Matrix</p>							
Indicator 1.2.4	NUTRITION	Output: Number of girls and boys aged 6-59 months with MAM who are admitted for treatment			296	273	569
Means of Verification : <p>MAM admission register</p>							
Indicator 1.2.5	NUTRITION	Output: Number of Pregnant and lactating women with AM who are admitted for treatment		125			125
Means of Verification : <p>PLW AM Admission register</p>							

Activities

Activity 1.2.1

Standard Activity : Not Selected

Screening of children under 5 years for acute malnutrition

INTERSOS will screen all under 5 years old children that present at the health facilities for outpatient consultations. All children identified with acute malnutrition, with or without complications, will be referred to OTPs and SC for appropriate treatment. INTERSOS will work on expanding its existing field-level agreement (FLA) with UNICEF to obtain additional nutritional supplies for the treatment of SAM/MAM cases identified during screening at the newly supported HFs. Previously, the process of FLA amendment with UNICEF took an average of 2 months. While obtaining this agreement, INTERSOS will refer the cases to facilities able to address their needs.

INTERSOS will also ensure that the channels for feedback and complaints are functional monitoring how many complaints and feedback will be processed and solved.

Output 1.3

Description

Awareness of the beneficiaries is increases on health and hygiene practices that could prevent the transmission of respiratory infections and other communicable diseases

Assumptions & Risks

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.3.1	HEALTH	Output: Number of persons reached with RCCE messages for communicable diseases	7,293	6,778	8,412	7,777	30,260

Means of Verification : Awareness tally sheet, HF Attendance Registers

Indicator 1.3.2	HEALTH						70
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Means of Verification : baseline and endline

Activities

Activity 1.3.1

Standard Activity : Support RCCE activities for communicable diseases outbreak

INTERSOS will organize Hygiene and Health promotion sessions that will be conducted by nurses/hygiene promoters in all of the supported facilities before and during consultations.

The health education sessions will focus on:

- Respiratory hygiene, prevention of covid-19 and chronic respiratory diseases like tuberculosis
- Other key hygiene messages
- Communicable diseases
- Nutrition – screening and Infant and Young Children Feeding (IYCF)
- Preventive health cares (vaccination, growth monitoring)
- Management of disability and basic psychosocial support – lists of persons of concern to be drawn up and shared with the PHCC team and program manager for referral and follow up
- Reproductive health, motherhood (pregnancy cares, breastfeeding, family planning...)
- Public health surveillance

The nurses/hygiene promoters will be trained on how to effectively deliver the awareness messages. INTERSOS will select 5 key topics that will be regularly reinforced during each session and upon which the recall rate of the beneficiaries will be tested on a quarterly basis.

To further propagate the key messages to the catchment communities and reach the most people INTERSOS will print IEC materials related to the aforementioned topics and will distribute them as handbills to beneficiaries after the consultation at the health facilities. INTERSOS believes that distributing the IEC materials developed in local languages and with pictures that can be easily understood by non-literate individuals will disseminate key awareness messages on proper health and hygiene practices within the targeted communities. Beneficiaries who would be educated on the information on the IEC materials by the hygiene promoters during their consultation visits will serve as a medium for propagating the same through handbills and educating other community members on the messages. The IEC material will be obtained from the health cluster, WHO, or MoPH.

INTERSOS will also develop material to facilitate beneficiaries' awareness of the complaints and feedback mechanism with the same methodology as described above. All the surveys will be carried out by the HMIS officers in each location.

Additional Targets :

M & R

Monitoring & Reporting plan

The INTERSOS MEAL team will carry out post-distribution monitoring (PDM) exercises covering the provision of kits to beneficiaries, planned from December to February 2024, after the distributions. The Technical team and the MEAL unit will develop tools to monitor each indicator and report it to the health cluster through the reporthub and to the nutrition cluster through the NND and MoPH through HMIS/DHIS 2 on monthly/quarterly basis. Bimonthly visits will be performed to each facility by the Medical Manager with the technical support of the

medical coordinator.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
<p>Activity 1.1.1:</p> <p>INTERSOS has identified with the support and confirmation of DoPH, 3 static health facilities, located in Surobi and Chahar Asyab, and will provide comprehensive primary health care services in line with the BPHS guideline. INTERSOS to expand primary health care service will:</p> <ul style="list-style-type: none"> • Provide primary health care services: a comprehensive primary health care package in accordance with BHSP and Ministry of Health /WHO standards and regulations. Services will be provided via static health facilities approach in line with the recent request of the MoPH for humanitarian actors to support more of static health facilities as against the mobile health teams. INTERSOS will engage additional human resources to complement the existing staffing at the supported facilities. As the cases of ARI, pneumonia and other diseases are expected to rise during the winter, INTERSOS will ensure the health staff are sufficiently capacitated with knowledge and supplies to appropriately manage both uncomplicated and complicated diseases. • Reproductive Health: Pregnant women being one of the most vulnerable groups in the communities will be supported with access to quality ANC, PNC, deliveries and Family Planning services. The FP commodities will continue to be requested from UNFPA, while medical commodities and equipment for the ANC, delivery and PNC will be provided by INTERSOS. • Treatment of Non-communicable disease: Special attention in terms of training, treatment and provision of appropriate supplies will be made to improve the quality of chronic disease care. • Mental Health Care: INTERSOS MH experts will also train the health workers doctors and nurses on MH screening and classification, to enhance their capacity in identifying, classifying and appropriately managing/referring beneficiaries with MH disorders. • EPI - INTERSOS will ensure that all children of vaccinatable age receive vaccines according to Afghanistan EPI schedule by support with a vaccinator in each facility and with basic vaccine storage equipment. The vaccine will be obtained by the team on an agreed routine from the provincial cold store. In Surobi, INTERSOS already supports the EPI services through vaccine service delivery and reinforcing the vaccine storage systems. This will be continued and extended to Chahar Asyab through this project. <p><u>INTERSOS will also monitor the percentage of beneficiaries who feel the assistance corresponds to their needs.</u></p>	1												

Activity 1.1.2:

1

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To ensure sustainability of the action, INTERSOS will transfer all the remaining medical stock at the end of the intervention, to the BHC management for use at the supported health facilities.

Disease surveillance: through the surveillance network system, INTERSOS will promptly report any notifiable diseases that is detected during consultations in any of the supported health facilities via the EWARNS platform and to the disease surveillance officer for quick investigation.

<p>Activity 1.1.3:</p> <p>INTERSOS will collaborate with the DoPH, WHO and other health actors in Kabul to organize capacity building sessions for the health workers and support staff working in the PHCs. Training sessions will be based on the identified needs and continued on job coaching and mentorship on IMCI, safe motherhood/Reproductive Health, HMIS, IMAM, IYCF, MH (MHGAP, PFA), IMCI, SGBV case management, IPC, surveillance and pharmacy/drug management training. INTERSOS will engage DoPH accredited facilitators and WHO trainers for the formal training, while the INTERSOS technical team (Medco, deputy medco, PMR and MAM) will support the on-job training for the health staff. The training will be programmed in a schedule that will not affect the functionality of the facilities, for example in the periods of low attendance. Being part of the Health and Protection Clusters, INTERSOS will adhere to the guidelines of both clusters and will liaise with the Authorities.</p> <p>To ensure the quality of care and proper surveillance of the action, INTERSOS will supervise through regular field visits the operation ensuring that INTERSOS, Health Cluster and OCHA standards are respected. The field team will receive the constant support of the Medical Activity Manager and the technical support of the Medical Coordinator and PMR.</p>	1												
<p>Activity 1.1.4:</p> <p>MoU signature</p> <p>INTERSOS in the first stage of implementation, immediately after the confirmation of the grant, will proceed to sign the MoU with the relevant Ministries</p>	1												
<p>Activity 1.2.1:</p> <p>Screening of children under 5 years for acute malnutrition</p> <p>INTERSOS will screen all under 5 years old children that present at the health facilities for outpatient consultations. All children identified with acute malnutrition, with or without complications, will be referred to OTPs and SC for appropriate treatment. INTERSOS will work on expanding its existing field-level agreement (FLA) with UNICEF to obtain additional nutritional supplies for the treatment of SAM/MAM cases identified during screening at the newly supported HFs. Previously, the process of FLA amendment with UNICEF took an average of 2 months. While obtaining this agreement, INTERSOS will refer the cases to facilities able to address their needs.</p> <p>INTERSOS will also ensure that the channels for feedback and complaints are functional monitoring how many complaints and feedback will be processed and solved.</p>	1												

<p>Activity 1.3.1:</p> <p>INTERSOS will organize Hygiene and Health promotion sessions that will be conducted by nurses/hygiene promoters in all of the supported facilities before and during consultations.</p> <p>The health education sessions will focus on:</p> <ul style="list-style-type: none"> • Respiratory hygiene, prevention of covid-19 and chronic respiratory diseases like tuberculosis • Other key hygiene messages • Communicable diseases • Nutrition – screening and Infant and Young Children Feeding (IYCF) • Preventive health cares (vaccination, growth monitoring) • Management of disability and basic psychosocial support – lists of persons of concern to be drawn up and shared with the PHCC team and program manager for referral and follow up • Reproductive health, motherhood (pregnancy cares, breastfeeding, family planning...) • Public health surveillance <p>The nurses/hygiene promoters will be trained on how to effectively deliver the awareness messages. INTERSOS will select 5 key topics that will be regularly reinforced during each session and upon which the recall rate of the beneficiaries will be tested on a quarterly basis.</p> <p>To further propagate the key messages to the catchment communities and reach the most people INTERSOS will print IEC materials related to the aforementioned topics and will distribute them as handbills to beneficiaries after the consultation at the health facilities. INTERSOS believes that distributing the IEC materials developed in local languages and with pictures that can be easily understood by non-literate individuals will disseminate key awareness messages on proper health and hygiene practices within the targeted communities. Beneficiaries practices who would be educated on the information on the IEC materials by the hygiene promoters during their consultation visits will serve as a medium for propagating the same through handbills and educating other community members on the messages. The IEC material will be obtained from the health cluster, WHO, or MoPH.</p> <p>INTERSOS will also develop material to facilitate beneficiaries' awareness of the complaints and feedback mechanism with the same methodology as described above. All the surveys will be carried out by the HMIS officers in each location.</p>	1											
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<p>OTHER INFO</p>
<p><u>Accountability to Affected Populations</u></p>
<p>Community-based approach and active involvement of men, women, boys, and girls have been placed at the basis of the project design phase, through a dedicated needs assessment and the regular community consultations conducted by INTERSOS as part of its ongoing projects in Kabul. Following the principles and mechanisms currently in place, community committee meetings will be among the main means of receiving feedback from the beneficiaries during the project implementation. Additionally, surveys, FGDs, and KIIs will continue to be carried out along the proposed intervention, as part of M&E activities as well as protection monitoring. INTERSOS will join and support Afghanistan Community Voices and Accountability on a regular basis.</p>
<p><u>Implementation Plan</u></p>
<p>The Program Manager (PM), INTERSOS contribution, will supervise the overall achievement of objectives and realization of outcomes and</p>

outputs foreseen by the action; regarding the technical components, a dedicated Medical Activity Manager, with the support of the Medical Coordinator, will ensure the quality of the implementation of the health component, while the Protection Activity Manager will ensure the quality of the protection component, with support of the Protection Coordinator. The PM and Technical Coordinators will ensure that activities will respect global humanitarian standards as well as AHF's guidelines and any SOPs/tools shared by the respective clusters. Data will be captured into internal databases enabling INTERSOS to collect and analyze information on sectors with protection cross-cuts. As per protection data, INTERSOS will roll out in Afghanistan its IMP Case Management Platform, successfully employed in several other scenarios. INTERSOS is also supported by the HQ.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
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Environment Marker Of The Project

Gender Marker Of The Project

4- Likely to contribute to gender equality, including across age groups

Justify Chosen Gender Marker Code

Protection Mainstreaming

INTEROS developed a standard Protection and Protection Mainstreaming Training Package, Training sessions will be conducted in each targeted HF, in Pashto, Dari, and English by qualified trainers, thanks to the support granted by BHA. The training length is of 1 day and around 15 participants will participate in each batch. Training is delivered at field and Base levels. The staff will receive a first training and a refresher training after three months. To evaluate their knowledge, challenges faced in the field will be conducted with protection mainstreaming checklists that will ensure the capacity building of field teams and a follow-up to the knowledge and effectiveness of the first training phase. Additional Protection training may be conducted by INTERSOS as per staff capacity/needs identified during the implementation of the project (PSEA training). During all trainings, particular attention will be given to safe identification and referral of vulnerable cases, including GBV and CP, to enable trainees to identify such cases safely and effectively (respectively: during outpatient visits and consultations, for medical staff; and during outreach activities, for community workers) and MHPSS Officers and Counselors will provide PFA and information about the available services, respect and follow the safe referral guidelines and promptly refer them to protection actors for their assessment and support.

Country Specific Information

Safety and Security

Access

INTEROS is currently implementing a similar program in Kabul. The strategy to gain humanitarian access to the target areas of the present project will follow a similar methodology INTERSOS has used for other programs in the same area. INTERSOS will work with the local authorities, community elders, and members of the local shura of the targeted communities, including religious leaders, in order to increase the knowledge in regards to the activities implemented and utilization of existing power structures that could facilitate the implementation in the area of intervention. Community relations will be strengthened through regular exchanges that will also be utilized to receive information, including updates on security issues, and encourage community participation in program implementation to help strengthen the responsiveness of service delivery.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1. Staff and Other Personnel Costs							
1.1	Medical Activity Manager	D	1	1,315.00	6	100.00	7,890.00
	<i>1 Medical Activity Manager, originally grade C.11, based at the HF, national staff, ensures the constant medical support to the Health facilities team providing advice and guidance in operations, and ensuring the compliance with professional, internal and National standards, during the frequent visits to the HFs. additionally, s/he monitors and ensures the collection of data from the medical teams. The position is supported for supported for 6 months, for 100% of its monthly cost, for a monthly salary of USD 1315</i>						
1.2	Medical Doctor	D	6	914.00	6	100.00	32,904.00
	<i>6 Medical Doctors (3 males, 3 females), Grade D.7, based at the HF, 2 for each Health facility to ensure equitable gender access to services, all national staff. The MDs are providing OPD consultations at the health facilities, and leadership within the same. the position is supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 914</i>						
1.3	Midwife	D	3	683.00	6	100.00	12,294.00

	3 Midwives, Grade E.5, national staff, based at the HF, supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 683						
1.4	Nurse	D	6	683.00	6	100.00	24,588.00
	6 Nurses, all national staff, Grade E.5, based at the HF, granting nursing services at the health facilities, in their respective roles (nutrition, triage, OPD). The positions are supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 683						
1.5	Vaccinator	D	3	591.00	6	100.00	10,638.00
	3 Vaccinators, Grade E.4, national staff, based at the HF, providing EPI services to beneficiaries accessing the HF's services, according to the patients' immunization calendar and needs. The positions are supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 591						
1.6	MHPSS officer/counselor	D	3	683.00	6	100.00	12,294.00
	3 MHPSS officers/counselors, Grade E.5, based at the HF, national staff, embedded in the HF, providing Mental health support to beneficiaries who directly seek MH support of referred by the health facility MD. The positions are supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 683						
1.7	Hygiene & Health Education Promoter	D	3	591.00	6	100.00	10,638.00
	3 Hygiene & Health Education Promoters, Grade E.4, based at the HF, national staff, tasked, within the Health facility, to provide hygiene and health education to the people accessing the health facilities services, while waiting for these services, or in ad-hoc educational sessions. The positions are supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 591						
1.8	Guard for Health centers	D	6	489.00	6	100.00	17,604.00
	6 Guards for Health centers, Grade F.2, based at the HF, national staff, guarding the Health Facilities and managing beneficiaries' crowds, when needed. The positions are supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 489						
1.9	Cleaner for Health Centers	D	3	401.00	6	100.00	7,218.00
	3 Cleaners for Health centers, Grade F.1, based at the HF, national staff, ensuring the cleaning services at the HF's. The positions are supported for 6 months, for 100% of their monthly cost, for a monthly salary of USD 401						
1.10	MEAL Officer	D	1	914.00	6	50.00	2,742.00
	1 MEAL Officer, Grade D.7, based in Kabul at the INTERSOS country office, national staff, executing, under the supervision of the MEAL Manager, the MEAL unit monitoring tasks at projects' level (supporting the elaboration, follow up, and monitoring of projects indicators, monitoring activities, elaborating reports, and supporting the maintenance of AAP systems). The position is supported for 6 months, for 50% of its monthly cost, against a full monthly salary of USD 914						
1.11	Country Director	D	1	6,621.00	6	10.00	3,972.60
	1 Country Director, Grade A.16, based in Kabul at the INTERSOS country office, international staff. The CD is INTERSOS overall leading position in the country, responsible for all operations, and ensuring the implementation of the strategy in the country. The CD engages and network with high end counterparts (INGOs, UN, Donors, HQ, Authorities) in the country and outside it. The position is supported for 6 months, for 10% of its monthly cost, against a full monthly salary of USD 6621						
1.12	Head of Programme	D	1	5,375.00	6	10.00	3,225.00
	1 Head of Programme, Grade A.15 (acting as CD in the absence of the country director), based in Kabul at the INTERSOS country office, international staff. The HoP grants internal overall leadership and coordination among the different units present in the organization, and engages, externally, within the Humanitarian forums and clusters, and with Authorities, mainly at Central level. The position is supported for 6 months, for 10% of its monthly cost, against a full monthly salary of USD 5375						
1.13	Grant & Reporting Manager	D	1	4,833.00	6	10.00	2,899.80
	1 Grant & Reporting Manager, Grade A.14, based in Kabul at the INTERSOS country office, international staff. The GRM ensures compliance with donors' requirements, supporting other units to align their operations within Donors' standards, and supervising the elaboration of reports. The position is supported for 6 months, for 10% of its monthly cost, against a full monthly salary of USD 4833						
1.14	Finance Officer	D	1	1,039.00	6	20.00	1,246.80
	1 Finance Officer, Grade D.9, based in Kabul at the INTERSOS country office, national staff, supporting and monitoring the process of expenditures, and contributing to the elaboration of internal financial reports and reports to donors and authorities, following final confirmation from the Country Finance Coordinator. The position is supported for 6 months, for 20% of its monthly cost, against a full monthly salary of USD 1039						
1.15	Finance Assistant	D	1	683.00	6	20.00	819.60
	1 Finance Assistant, Grade E.5, based in Kabul at the INTERSOS country office, national staff, executing clerk tasks within the finance department (accounting book-keeping, verification and filing of supporting documents). The position is supported for 6 months, for 20% of its monthly cost, against a full monthly salary of USD 683						
1.16	HR Officer	D	1	977.00	6	20.00	1,172.40

	<i>1 HR Officer, Grade D.8, based in Kabul at the INTERSOS country office, national staff, responsible for managing every aspect of the employment process, including coordinating the orientation and training of new staff members and assisting with payroll management. The position is supported for 6 months, for 20% of its monthly cost, against a full monthly salary of USD 977</i>						
1.17	HR Assistant	D	1	683.00	6	20.00	819.60
	<i>1 HR Assistant, Grade E.5, based in Kabul at the INTERSOS country office, national staff, executing clerk tasks within the HR department (collection, verification and filing of time sheets and applications for vacancies, letters drafting and leaves calculations). The position is supported for 6 months, for 20% of its monthly cost, against a full monthly salary of USD 683</i>						
1.18	Office Guards	D	4	489.00	6	25.00	2,934.00
	<i>4 Office Guards, Grade F.2, based in Kabul at the INTERSOS country office, national staff, ensuring 24/7 coverage of guards' services, supported for 6 months, for 25% of their monthly cost, against a full monthly salary of USD 489</i>						
1.19	Office Cleaners	D	2	401.00	6	25.00	1,203.00
	<i>2 INTERSOS Office Cleaners, Grade F.1, based in Kabul at the INTERSOS country office, national staff, providing cleaning services within the office and the guest house. These two positions are supported for 6 months, for 25% of their monthly cost, against a full monthly salary of USD 401</i>						
1.20	Logistic Officer	D	1	977.00	6	25.00	1,465.50
	<i>1 Logistic Officer, Grade D.8, based in Kabul at the INTERSOS country office, national staff, tasked with provision of logistic support to all the health facilities, contributing to the in-country procurement processes and logistics management, including fleet management. The position is supported for 6 months, for 25% of its monthly cost, against a full monthly salary of USD 977</i>						
1.21	Logistic Assistant	D	1	683.00	6	20.00	819.60
	<i>1 Logistic Assistant, Grade E.5, based in Kabul at the INTERSOS country office, national staff, assisting the Log officers in all clerical tasks and errands. The position is supported for 6 months, for 20% of its monthly cost, against a full monthly salary of USD 683</i>						
1.22	Access & Security Officer	D	1	1,039.00	6	20.00	1,246.80
	<i>1 Access & Security Officer, based in Kabul at the INTERSOS country office, Grade D.9, national staff, networking with authorities and other national and international actors to ensure the safe & continued access for the medical teams, to the working locations. the position is supported for 6 months, for 20% of its monthly cost, against a full monthly salary of USD 1039</i>						
	Section Total						160,634.70
2. Supplies, Commodities, Materials							
2.1	Medical Drugs & consumables	D	3	2,000.00	6	100.00	36,000.00
	<i>Medical Drugs & consumables purchases for 3 health facilities based on the average consumption recorded within INTERSOS interventions in the last 18 months, related to targeted population's data. The purchase is calculated and supported for 6 months, for 100% of its cost, for a total purchase per clinic of USD 36,000. Please refer to BoQ B.1 for details.</i>						
2.2	PPE (Personal protection Equipment)	D	3	350.00	6	100.00	6,300.00
	<i>PPE (Personal protection Equipment) purchase for 3 health facilities, based on historical use data, and based on the number of medical staff involved in activities within the health facilities. The purchase is supported for 6 months, for 100% of its cost, for a total purchase per clinic of USD 2,100. Please refer to BoQ B.2 for details.</i>						
2.3	Baby Kits	D	613	23.00	1	100.00	14,099.00
	<i>purchase of 613 Baby Kits, based on selected targets (according to internal criterias) set for this intervention, supported for 100% of their cost, for a unit cost of USD 23. Please refer to BoQ B.3 for details.</i>						
2.4	Delivery Kits	D	800	3.00	1	100.00	2,400.00
	<i>purchase of 800 Delivery Kits, based on selected targets (according to internal criterias) set for this intervention, supported for 100% of their cost, for a unit cost of USD 3. Please refer to BoQ B.4 for details.</i>						
2.5	Soap for Hygiene and Health Education promotion	D	8000	1.00	1	100.00	8,000.00
	<i>purchase of 8000 pieces of Soap for Hygiene and Health Education promotion, for distribution to beneficiaries, supported for 100% of their cost, for a unit cost of USD 1. Please refer to BoQ B.5 for details.</i>						
2.6	IEC materials promoting Health, hygiene and winterization behaviors	D	3	3,000.00	1	100.00	9,000.00
	<i>IEC materials promoting Health, hygiene and winterization behaviors for 3 health facilities. The ICE material will be based on national standards, and confirmed with authorities, before new material is printed. The cost, based on historical population-based averages for ICE materials printing and distribution, is supported for the whole period of intervention, for 100% of its cost, for a total cost per health facility of USD 3000. Please refer to BoQ B.6 for details.</i>						
2.7	PSS (psycho-social support) Kits	D	90	18.00	1	100.00	1,620.00
	<i>purchase of 90 PSS Kits, to be distributed to selected beneficiaries, according to the Protection team's criteria, supported for 100% of their cost, for a unit cost of USD 18. Please refer to BoQ B.7 for details. we insist on keeping this budget line in the budget as we consider PSS kits as part of the whole and comprehensive treatment that should be offered to beneficiaries.</i>						
2.8	Dignity kits	D	100	36.00	1	100.00	3,600.00

	<i>purchase of 100 Dignity kits, to be distributed to selected beneficiaries according the medical unit selection's criteria, supported for 100% of their cost, for a unit cost of USD 36. Please refer to BoQ B.8 for details.we insist on keeping this budget line in the budget as we consider Dignity kits as part of the whole and comprehensive treatment that should be offered to beneficiaries.</i>							
2.9	Updating Training for medical professionals on Winter related conditions	D	7	1,056.95	1	100.00	7,398.65	
	<i>7 sessions, in line with comment PB2 on: Integrated Management of Acute Malnutrition; Integrated Management of Neonatal and Childhood Illness; Sexual and Reproductive Health; Infant and Young Child Feeding; Infection prevention control; Mental Health and Psycho-social support/Services; Health Management Information System. they are Updating Trainings for medical professionals on Winter related conditions, supported for 100% of their cost, for an average unit cost of USD 1,056.95. The updating sessions topics will be prioritised according to the capacity needs assessed by the medical team during interactions with the new medical colleagues at the health facilities. The cost is expected to contribute toward transport, refreshments and training materials costs. Please refer to BoQ B.9 for details.</i>							
2.10	BHC (Basic Health Centre) utilities & Maintenance	D	3	200.00	6	100.00	3,600.00	
	<i>3 BHCs' utilities & Maintenance, supported for 6 months, for 100% of its monthly cost, for a monthly cost of USD 200. As for hystorical expenditure data this budget line will mainly support the cost for granting water and power at the health facilities, and enabling the logostic team to provide the necessary maintenance and repairs for equipment and infrastructures, to facilitate the provision of services at the health facilities.</i>							
2.11	Health center rent	D	1	250.00	6	100.00	1,500.00	
	<i>1 Health center rent , supported for 6 months, for 100% of its monthly cost, for a monthly rent of USD 250 (the assessment of the other 2 BHC reported that no rent has to be paid in one of the other 2 locations meanwhile ongoing negotiations with local authorities will determine the need for the second rent to be paid)</i>							
2.12	BHC winterization (Gas, firewood, blankets)	D	3	350.00	5	100.00	5,250.00	
	<i>3 BHCs' winterization (purchase of Gas, firewood, and blankets to ensure comfort of patients and staff during the daily services), supported for 5 months, for 100% of its monthly cost, for a monthly cost of USD 350. this budget line expenditure may vary according to harshness of weather condition. Please refer to BoQ B.12 for details.</i>							
2.13	BHC sterilization and OPD diagnostic equipment	D	3	3,978.60	1	100.00	11,935.80	
	<i>3 BHCs' sterilization and OPD diagnostic equipment, based on BoQs, supported for 1 consolidated purchasing event months, for 100% of their cost, for an average cost per facility of USD 3978.60. Please refer to BoQ B.13 for details. The amounts are based on hystorical needs faced while running other BHCs.</i>							
	Section Total						110,703.45	
3. Equipment								
3.1	BHC furniture replacement	D	3	1,500.00	1	100.00	4,500.00	
	<i>3 BHCs' furniture replacement (as for initial assessment there is need to provide, or replace some basic furniture like desks, shelves/cabinets,and chairs, inside the health facilities. this expenditure is supported for 100% of its cost, for a total average cost per facility of USD 1500. the cost is a lumpsum meant to ensure that the furniture assessed as missing or in need to be replaced during the project lifetime will have adequate resources allocated.</i>							
3.2	Laptops for project staff	D	1	980.00	1	100.00	980.00	
	<i>1 Laptop, purchased locally in Kabul, through our FWA supplier, for Project staff (for a new Medical Activity Manager), as s/he will need adequate ICT tools to enable him/her in data collection and reports elaboration, supported for 100% of its cost (laptop + accessories like headphones, phone, mouse, external screen, if needed), for an average cost of USD 980. the cost is based on framework agreements signed with suppliers. the laptop targeted by this purchase is Lenovo Thinkpads, with intel core 5 or 7.</i>							
	Section Total						5,480.00	
4. Contractual Services								
4.1	Project Vehicle rental & fuel, with Driver	D	7	1,000.00	6	100.00	42,000.00	
	<i>in line we our FWA with the supplier the monthly cost for 4WD vehicles is set at USD 1,000, including rent, fuel, maintenance, risk, driver. the cost ensures an acceptable quality of services, whereby other previous and cheaper suppliers did not manage to deliver and to ensure reliability of services. the vehicles needed are 7 Project Vehicles, 1 for project monitoring and support purposes and 6 (2 vehicles for each of the 3 HF) for staff transport, with Driver, supported for 6 months, for 100% of its monthly cost, for a monthly cost of USD 1000. 2 vehicles are needed for staff's transport to comply with the segregation of spaces between female and male staff, and to comply with the mahram's requirement: to ensure and monitor staff presence in the clinics, we organise for their commuting transport rather than leaving it to their own, at times unworkable, arrangements.</i>							
4.2	Translation services for projects documents	D	1	300.00	1	100.00	300.00	
	<i>Translation services for projects documents (for translation of communications to authorities, MoU process, ICE materials, and procurement documents), supported for 100% of its estimated cost, for a total of USD 300. the translation services are ruled by a signed contract</i>							
	Section Total						42,300.00	

5. Travel							
5.1	MEAL Monitoring & PDMs	D	1	450.00	2	100.00	900.00
	<i>MEAL Monitoring Activities & PDMs, supported for 2 events, for 100% of its cost, for a total of USD 900. These costs are mainly related to transport and refreshment costs to enable participation (when required) of beneficiaries to surveys and focus group discussions, and to print forms for the monitoring activities. please refer to BoQ E</i>						
	Section Total						900.00
6. Transfers and Grants to Counterparts							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
7. General Operating and Other Direct Costs							
7.1	Contribution to communication costs - Kabul	D	1	2,700.00	6	10.00	1,620.00
	<i>Contribution to communication costs for the office in Kabul (office's internet costs, and support staff telephone costs), and for selected supported for 6 months, for 10% of its monthly cost, for a monthly cost of USD 270. the communication costs are regulated by contract(s), for the different internet services providers, and by an internal allocation of airtime for each different HR position. please refer to BoQ G.1</i>						
7.2	Contribution to office running costs & utilities - Kabul	D	1	4,500.00	6	10.00	2,700.00
	<i>Contribution to office supplies running costs & utilities in the Kabul office, supported for 6 months, for 25% of its monthly cost, for a monthly cost of USD 1125. the lumpsum is based on the average cost for utilities contracts, and on the average costs for generator's fuel consumption. please refer to BoQ G.2</i>						
7.3	Contribution to office and shared Guest House Rental - Kabul	D	2	3,529.00	6	10.00	4,234.80
	<i>Contribution to 1 office and 1 Guest House Rental in Kabul, supported for 6 months, for 10% of their monthly cost, for a monthly cost of USD 352.90 per unit. cost based on current contract rent for the office, and on the new contract for the Guest House. please see in uploaded document the current contract. The new location for the Guest House is under negotiations with the landlord. please refer to BoQ G.3</i>						
7.4	Bank and Transfer fees	D	1	7,985.00	6	10.00	4,791.00
	<i>Bank and Transfers fees, supported for 6 months, for 10% of their costs, for a total cost of 4,971. this cost is based on the minimum 2.38% calculated on recent transfers. the cost allocated to the project refers to the cost related to project only amounts. we are planning to gradually shift, between January and March 2024 from the Awalas' providers to the National banking systems' transfers, therefore we can allocate only this small part of the total real cost of the transfers.</i>						
	Section Total						13,345.80
SubTotal				9,698.00			333,363.95
Direct							333,363.95
Support							
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							23,335.48
Total Cost							356,699.43

Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Afghanistan > Kabul > Chaharasyab	33.00000	0	0	0	0		<p>H: Activity 1.1.1:</p> <p>INTERSOS has identified with the support... H: Activity 1.1.2:</p> <p>INTERSOS will procure in-country, essent... H: Activity 1.1.3:</p> <p>INTERSOS will coll... H: Activity 1.2.1:</p> <p>Screening of children under 5 y... H: Activity 1.3.1:</p>
Afghanistan > Kabul > Surobi	67.00000	0	0	0	0		<p>H: Activity 1.1.1:</p> <p>INTERSOS has identified with the support... H: Activity 1.1.2:</p> <p>INTERSOS will procure in-country, essent... H: Activity 1.1.3:</p> <p>INTERSOS will coll... H: Activity 1.2.1:</p> <p>Screening of children under 5 y... H: Activity 1.3.1:</p>

Documents	
Category Name	Document Description
Project Supporting Documents	DoPH Kabul Introduction Letter of BHCs to INTERSOS Scan copy .pdf
Project Supporting Documents	AHF health intervention_MAPS.pdf
Budget Documents	28 - Salary Scale 2022 VERSION 3.xlsx
Budget Documents	20230924 Medical supplies for common diseases and Bemonc Services.xlsx
Budget Documents	BoQ Delivery Kit1 .xlsx
Budget Documents	BoQ NFI kits..xlsx
Project Supporting Documents	AHF Target Calculation.xlsx
Project Supporting Documents	AAP endorsment.pdf
Project Supporting Documents	Endorsement mail Disability group.pdf
Project Supporting Documents	DoPH letter with translation.pdf
Project Supporting Documents	No duplication PUI.pdf
Project Supporting Documents	PSEA and GIHA pending endorsment.pdf
Budget Documents	BoQs_ Training.xlsx
Project Supporting Documents	GiHA endorsement (9).pdf

Budget Documents	CBPF-AFG-23-S-INGO-26427 NEW BoQ Category - B.xlsx
Budget Documents	CBPF-AFG-23-S-INGO-26427 NEW BoQ Category - G.xlsx
Budget Documents	Endorsed Salary Scale 2022.pdf
Budget Documents	CONT-KBL-006 House lease agreement.pdf
Budget Documents	20231011 INTERSOS_Cost recovery _GAP analysis - draft report.xlsx
Budget Documents	AHF - BoQ Category - E _ M&E.xlsx
Budget Documents	AHF - BoQ Category - G1_G2_G3.xlsx
Budget Documents	G.2 costs framework agreement_INT-AFG-2023-KBL-10-FWA.PDF
Budget Documents	detailed AHF - BoQ Category - G1_2_3.xlsx
Grant Agreement	GrantAgreement_CBPF-AFG-23-S-INGO-26427_Health_INTERSOS_Signed.pdf