

Policy Paper
South Sudan Common Humanitarian Fund (CHF)
2013 Second Round Standard Allocation
12 July 2013

1. This paper outlines the allocation strategy for the second round standard allocation of the. As of early July, projected donor deposits to the CHF amount to approx US\$ 33 million.

2. The projected donor deposits will cover the second round allocation, the CHF reserve and administrative fees (1) in relation to the allocation.

3. This paper includes the parameters on the scope of the allocation. Additional criteria for the definition of clusters' priorities and project prioritisation will be established by clusters and their partners. The paper is supplemented with separate guidance note on priority activities and locations following preliminary consultations with the Inter Sector Working Group (ISWG).

Expected contribution		Status of agreement
Donor	Amount \$	
Australia AID	2,890,173	signed
Denmark	3,400,000	announced
DFID	22,082,019	signed
DFID	2,900,000	announced
Irish AID	1,200,000	announced
CHF Balance	609,359	n/a
Total	33,081,551	

Humanitarian situation and related priorities

4. The CAP 2013 MYR has been revised from \$1.16 billion to \$1.05 billion due to an improved harvest, fewer refugees and returnees than expected. However, while the needs of many vulnerable communities have stabilized as evidenced by the reduction in the number of food insecure from 4.6 to 4.1 million people, needs remain high.

5. There are still 1 million people severely food-insecure across the country. Although the pace of refugee arrivals slowed, some 263,000 refugee are expected to need assistance, particularly with regard to nutrition, health interventions and resilience.

6. The plight of returnees, thousands of whom have been stranded or are living in desperate conditions, continues to be troubling. 70,000 returnees are expected to arrive from Sudan in 2013, lack of transport means to their final destinations and scarcity of integration opportunities and resources are main obstacles to ensure that returnees reach their final destinations, as such returnees continue to require support at transit sites. Needs persist in Abyei where internally displaced people continue to require assistance.

7. Armed hostilities and inter-communal clashes continue to wreck people's lives in parts of Jonglei State where violence and insecurity have displaced tens of thousands of people since the start of the year. Since the start of the current wave of fighting between the South Sudan army and non-state armed actors, most people have left key centres in Pibor County either seeking safety in the bush, moving to other parts of South Sudan, or seeking refuge in neighbouring countries such as Ethiopia and Kenya. Due to access constraints, humanitarian actors have not been able to assess the full scale of needs in the area, but it is estimated that between 100,000 and 120,000 people are either displaced or in inaccessible areas, and are in need of assistance.

8. The revised 2013 CAP maintained the following seven over-arching strategic objectives of the humanitarian response in South Sudan:

- i) Prepare for and respond to emergencies on time by preposition supplies via core pipelines, securing alternative supply chains, upgrading access routes, mapping at-risk communities, building partner capacity, mobilizing logistics, conducting multi-agency assessments and monitoring delivery.

¹ UNDP as Participating Agency for NGOs projects will charge 7% to cover indirect costs in accordance with its financial rules and regulations. The Multi-partner Trust Fund (MPTF) as Managing Agent of the CHF will charge 1% of incoming contributions. The level of CHF reserve to be maintained can be up to a maximum of 20% of fund committed to the CHF as decided by the HC in consultation with CHF AB.

- ii) Maintain frontline services in hotspot areas until other delivery, regulatory, and funding mechanisms are in place, linking short-term action to longer-term goals.
- iii) Assist and protect refugees and host communities.
- iv) Protect people affected by crisis by mitigating the effects of violations related to violence or displacement. Improving child protection and combating gender-based violence will be key priorities.
- v) Support returns in a voluntary, safe and sustainable manner.
- vi) Increase resilience of households suffering from recurrent shocks that make people vulnerable to food insecurity.
- vii) Improve the operating environment by monitoring interference in humanitarian action, advocating with the state and military authorities, and building state capacity.

9. The second standard allocation will support the overarching objectives of the CAP. However food aid assistance will not be eligible for the second round standard allocation.⁽²⁾

The allocation strategy

10. In light of the resources available for the CHF second round standard allocation will target the following thematic areas:

- i) Addressing the needs of only those pipelines that are at risk of rupturing (i.e. experiencing a supplies stock out) before end of the year (Category A);
- ii) Ensuring common logistics services to facilitate access during the rainy season (Category A);
- iii) Supporting frontline services in vulnerable locations focusing on activities as prioritized by clusters (Category B)⁽³⁾;

11. In considering the support to core pipelines and provision of essential common services, clusters should consider:

- a. Critical gaps for the humanitarian operations in light of support given through the CHF 2013 first round standard allocation (see status of pipelines in the Guidance Note);
- b. The ability of the pipeline managing agency to procure, transport and preposition by October/November 2013, considering challenges posed by the rainy season.

12. In considering the provision of support to frontline service providers, the Guidance Note on activities prioritized by the clusters in locations specified should be used as reference.

CHF Reserve

13. The CHF Advisory Board will recommend the CHF reserve amount to be maintained to enable the Humanitarian Coordinator to allocate funds in the event of unforeseen needs arising outside the CHF standard allocation. Projects in and outside the CAP will be eligible for allocations from the CHF Reserve if meeting the requirements set out in CHF guidelines and are endorsed by cluster coordinators and co-coordinators. Allocations from the reserve will be approved by the Humanitarian Coordinator in consultation with the CHF Advisory Board. In reviewing applications, the Humanitarian Coordinator and the CHF Advisory Board will consider the appropriateness of proposed activities as well as the suitability of other funding mechanisms such as the CERF, and the IOM "Rapid Response Fund" available in country. This approach will help ensure a high degree of complementarity among pooled funds and support the identification of priorities for all funding streams.

² The WFP nutrition project for treatment of malnutrition in children less than 5 years and pregnant and lactating women is eligible among core pipelines.

³ To include addressing vulnerability of individuals affected by natural disaster and conflict as well as the refugee programme.

Prioritization criteria for selection of projects

14. The following criteria are proposed to support the prioritization of the CHF second round allocation and the work of the Peer Review Teams (PRTs)⁽⁴⁾:
- i) **Implementation of activities** CHF second round should prioritize activities that are in accordance with the cluster priorities defined in the Guidance Note and will not be hampered by the rainy season ⁽⁵⁾.
 - ii) **Timely expenditure and reporting:** The PRT should consider the ability of applying organization to timely disburse and report on previous CHF allocations. The CHF Technical Secretariat (TS) will provide Cluster Coordinators/Co-Coordinator's financial data based on estimated expenditures by UN agencies ⁽⁶⁾ and NGOs quarterly financial reports.
 - iii) **Life-saving ⁽⁷⁾ activities** should be prioritized so as to maximize the impact of the funds. Clusters should apply the CERF life-saving criteria when defining priority activities.
 - iv) **High Priority projects in CAP 2013:** Projects classified as high priority in the CAP 2013 should be weighted higher in the selection process at the Peer Review Team (PRT) meetings.
 - v) **Projects with a significant chance of success** as a result of resource mobilization ability, established capacity on the ground, previous track record of good performance and likely continued access should be prioritized.
 - vi) **Complementarity with CHF 2013 first round:** Organizations that have received funding from CHF R1 and apply for CHF R2 should clearly indicate how the new funding will complement the previous allocation.
 - vii) **Gender mainstreaming:** Projects with gender code of 2 in the CAP 2013 should be weighted favorably in the vetting process at the Peer Review Team (PRT) meetings.
 - viii) **Indirect costs:** Projects that can demonstrate low indirect costs ⁽⁸⁾ as a proportion of direct costs should be weighted favorably.
 - ix) **Value for Money:** Projects that can demonstrate the most 'value for money' (e.g. maximum outcome and beneficiary reach for each dollar invested) relative to the project budget should be prioritized.
 - x) **The needs of Abyei** returnees in relation to life-saving humanitarian activities will be catered for through the core pipelines.

⁴ Numerical score approach is recommended to PRTs for the prioritization exercise.

⁵ Projects selected for funding can run up for 12 months. PRT s may decide to allocate funding to shorter terms programmes if deemed appropriate.

⁶ UN agencies will be requested to provide estimates of CHF 2013 financial expenditure as of 30 June 2013. Expenditures data from CHF 2012 allocations will be provided to clusters by the CHF-TS as reference.

⁷ Use the CERF guidance to define life-saving activities.

⁸ Guidance on how to calculate direct and indirect costs will be provided by the CHF T in the project template. Indirect costs include overheads and other costs not incurred in project location.

Guidance Note

South Sudan Common Humanitarian Fund (CHF)

2013 Second Round Standard Allocation

12 July 2013

1. This Guidance Note outlines priority activities and locations per cluster that can be considered for the CHF 2013 second round standard allocation. It also includes advice to clusters and Peer Review Teams (PRTs) on the allocation process.
2. The Guidance Note is supplementary to the CHF Policy Paper.
3. The priority activities and locations per cluster will be refined and articulated further during the cluster consultations process, as outlined in the CHF allocation timeline.

Cluster Priority Activities

4. Priority activities and corresponding locations are summarized for each cluster in the Table 1 below. *The priority activities and locations will be refined further during cluster consultations process.*

Table 1: Summary of priority activities for consideration in CHF 2013 second round standard allocation

Cluster	Priority Geographical areas:	Priority Activities (Thematic issues)	Remarks/Notes
[1]	[2]	[3]	[4]
Education	1. Jonglei (Akobo, Uror, Pibor, Pochalla, Nyirol, Bor) 2. Unity (Pariang, Abienhom, Mayom, Rubkona) 3. Upper Nile (Maban, Renk, Melut, Ulang, Nasir, Baliet, Longuchuk) 4. Warrap (Twic, Tonj South, Tonj East, Tonj North, Gogrial East, Gogrial West) 5. Lakes (Rumbek North, Cueibet, Awerial) 6. NBeG (Aweil North, Aweil East) 7. CES (Juba) 8. EES (Kapoeta North, Kapoeta East)	i) Establish or repair (quick and light) safe and protective learning spaces for affected boys and girls with gender segregated WASH facilities ii) Pre-position and distribute emergency teaching and learning materials to emergency-affected schools and communities to ensure continuity of learning during/after emergencies iii) Conduct rapid training or orientation of education actors and PTAs in emergency-related lifesaving messages and psychosocial support for the benefit of children and youth affected by emergencies	Prioritization of prone counties based on vulnerability mapping conducted by Education Cluster during CP 2013 MYR. This prioritization will be further discussed with Cluster members in coming weeks. Pibor is currently constrained with restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.
Health	1. Jonglei (Pibor, Pochalla, Ayod Akobo, Fangak, canal) 2. Warrap (Twic, Gogrial West, Gogrial East, Tonj North and Tonj East) 3. NBeG (Aweil North, Aweil East and Central) 4. WBeG (Raja) 5. Lakes (Awerial, Rumbek North, Cueibet) 6. Unity (Abienhom, Leer, Rubkona, Mayom, Koch and Pariang) 7. Upper Nile (Renk, Ulang, Nasir, and Maban)	i) Provision of drug kits, medical supplies, reproductive health kits, vaccines and related supplies to facilities in high risk areas ii) Strengthen or reestablish PHCC s and PHCUs in the affected areas including provision of basic equipment and related supplies to ensure essential basic curative services iii) Maintain or strengthen medical referral services for emergency cases iv) Support vaccination campaigns to the vulnerable communities while maintaining the expanded program for immunization v) Strengthen communicable disease control, prevention, and emergency response capacity including provision of outbreak investigation materials and training of key staff vi) Maintain surge capacity for emergencies and surgical interventions vii) Conduct training on emergency preparedness and response at	Emergency preparedness and response to emergencies including Communicable disease outbreaks will be available for any part of the country Complimentarity between CHF and Basic Health Fund will need to be outlined. Pibor is currently constrained with

	8. Eastern Equatoria State (Kapoeta North, and East)	all levels viii) Provide logistical support to prepositioning of core pipeline supplies to high risk states	restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.
FSL	1. Upper Nile, 2. Unity, 3. Warrap (&Abyei Admin area), 4. NBeG, 5. WBeG, 6. Jonglei, 7. Lakes	i) Emergency livestock vaccinations for disease control and deworming interventions ii) Dry season production (vegetable seeds & tools) iii) Replenishing core pipeline (for agricultural, livestock & fisheries inputs) and logistical support iv) Cash transfers for income generation, access to inputs & services v) Community assets (pasture & water management) for resilience building to shocks vi) Post-harvest handling and storage, agro-processing technologies (value addition) & trainings	Core pipeline response to emergencies (esp. livestock diseases) & support to dry season production in food insecure areas in any part of the country & Abyei; support to partner interventions in food insecure/conflict /disaster affected counties in Jonglei, Warrap, Unity, Upper Nile and NBeG
Mine Action	vii) Upper Nile (Baliel, Fashoda, Longechuk, Maban, Malakal, Manyo, Maiwut, Melut, Nasir, Panyikang, Renk, Ulang), viii) Unity (Abiemnhom, Guit, Koch, Leer, Mayendit, Mayom, Ruweng, Panyjar, Rubkona). ix) Warrap (Gogrial East, Gogrial West, Tonj East, Tonj North, Tonj South, Twic). x) NBeG, (Aweil Centre, Aweil East, Aweil North, Aweil South, Aweil West) xi) WBeG (Boro, Deim Zubeir, Ere, Kata, Khor Gana, Naarjur, Sopo, Udici, Wau). xii) Jonglei (Akobo East, Akobo West, Ayod South, Ayod Centre, Ayod Highland, Bor, Twic East, Duk, Fangak, Fanga, Khorfulus Nyirol, Pibor, Pochalla, Uror, Boma).	iii) Emergency mine/ERW clearance and iv) Mine Risk Education	xv) Prioritization of emergency mine/ERW clearance and mine risk education, targeting civilian populations at great risk of getting injured/killed by Explosive Remnants of War (ERW). Clearance operations will also concentrate on areas where contamination hampers safe deployment of humanitarian aid delivery.
NFI & ES	1. Jonglei – (Pibor, Uror, Akobo); 2. Upper Nile (Renk, Maban, Melut, Ulang, Nasir); 3. Unity (Pariang, Abienhom, Mayom, Mayendit, Panyajar); 4. Abyei Administrative Area; Warrap (Twic, Tonj South, Tonj East); 5. NBeG (Aweil North, Aweil East); 6. Lakes (Rumbek North).	i) Adequate procurement, storage and transportation for the pipeline to ensure no pipeline breakage in 2013. ii) Frontline field-based and mobile response capacity, including field coordination; frontline transportation; assessment; appropriate shelter/NFI provision and PDM.	Pibor is currently constrained with restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.
Nutrition	1. Jonglei-Pibor, Akobo, Nyirol, Ayod, Fangak, Pochalla, Urol, Duk 2. Upper Nile -Maban, Nasir and Ulang 3. Unity-Panyjar, Koch, Mayom,	i) Management of acute malnutrition: Treatment for SAM and MAM in children U5 years, P&LW and other vulnerable groups ii) Prevention of acute malnutrition in the vulnerable population targeted (optimal IYCF-E, nutrition education, supplementation, BSFP)	High priority is placed on highly food insecure and border states of Jonglei, Upper Nile, Unity, Warrap, NBeG and WBeG. Specific counties in each

	<p>Abiemnhom, and Mayendit</p> <p>4. NBeG- Aweil East and North</p> <p>5. Warrap- Twic and Abyei area</p> <p>6. WBeG-Raga</p>	<p>iii) Provision of emergency preparedness and response services (rapids assessments and response, trainings on Nutrition in Emergencies)</p> <p>iv) Pipeline: Procurement and management of pipeline(s) from central to end user location</p> <p>v) Provision and strengthening of state-level coordination aimed at improving intervention outcomes</p>	<p>state are stated in the second column of this table.</p> <p>Pibor is currently constrained with restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.</p>
Protection	<p>1. Jonglei (all counties)</p> <p>2. Warrap (all counties)</p> <p>3. NBeG-(all counties)</p> <p>4. Central Equatoria State (Juba)</p> <p>5. Abyei</p> <p>6. Unity</p> <p>7. Upper Nile</p>	<p>Emergency response (general):</p> <p>i) Rapid protection assessments to identify vulnerable persons and risks/gaps for response.</p> <p>ii) Enhance capacity and training of frontline responders (police, health workers, community networks etc.), relevant for both GBV and child protection</p> <p>iii) Coordination with UNMISS and UNISFA on Protection of Civilians initiatives</p> <p>GBV</p> <p>iv) Direct support and response services to GBV survivors, including immediate medical and psychosocial care (incl. PEP kits)</p> <p>v) GBV emergency response teams (establish, train)</p> <p>vi) Special Protection Units</p> <p>Child Protection</p> <p>vii) Prevention and response to unaccompanied and separated children</p> <p>Family Tracing and Reunification (FTR); Provision of temporary care arrangement for boys and girls.</p> <p>viii) Protection assistance to Children Associated with Armed Group and Armed Forces</p> <p>ix) Recreational and psycho-social support for children and community affected by emergency</p> <p>Cross Cutting</p> <p>x) Mainstreaming HIV in intervention planning/implementation</p> <p>xi) Targeted support for civil status documentation focused on persons with specific needs from conflict impacted populations and emergency returns</p> <p>xii) Continued support for populations in displacement</p>	<p>Particular focus is to be given to emergency response, extending current programming (both agencies own or complimentary programming)</p> <p>Pibor is currently constrained with restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.</p>
WASH	<p>1. Jonglei—Pibor, Ayod, Akobo, Pigi, Fangak</p> <p>2. Upper Nile—Renk, Makal (aka Malakal); host community in Maban; Longochuk, Maiwut, Baliet, Ulang</p> <p>3. Unity—Mayom, Abiemnom, Counties in Tri-State area</p> <p>4. Lakes—Counties in Tri-State area</p> <p>5. Warrap—Twic, Tonj Counties</p> <p>6. NBeG—Aweil East, Aweil North</p> <p>7. CES—Juba County</p>	<p>i) Emergency water treatment units</p> <p>ii) Rehabilitation of existing water points, where appropriate</p> <p>iii) Drilling/construction of new water points, if appropriate</p> <p>iv) Convert hand pumps to motorized boreholes w/ tap stands</p> <p>v) Emergency communal latrines</p> <p>vi) Distribution of hygiene kits</p> <p>vii) Emergency hygiene promotion training</p> <p>viii) Pre-positioning of core pipeline</p> <p>ix) Pre-positioning of refugee pipeline supplies in Maban and Yida</p> <p>x) Distribution of WASH NFIs</p>	<p>Pibor is currently constrained with restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.</p> <p>Specific areas remain flexible within the states, dependent upon the emergencies that may arise.</p>
Muli-Sector	<p>1. Upper Nile, the Bahr el Ghazal and Unity for the OTA,</p> <p>2. Country wide for the tracking and monitoring.</p> <p>3. Upper Nile (Maban county) and Unity (Pariang)– refugee</p>	<p>i) Logistic assistance to stranded returnees- Transit and onward transport assistance (OTA); and</p> <p>ii) Tracking and monitoring of population movement (Returnees and/or IDPs) with specific emphasis in Jonglei, Warrap, Unity, NBeG for the IDPs and adding Upper Nile for the returnees.</p> <p>iii) Health, Nutrition, WASH in refugee camps of Upper Nile and</p>	<p>Refugees:, fragile nutrition and epidemiological situation particularly in the context of Hepatitis E response; Access to the camps/spot</p>

	response	Unity State, camp/site specific interventions iv) Physical access to and inside camps (basic infrastructure, flood mitigation measures)	maintenance of internal roads required during the rainy season.
Logistics	<ol style="list-style-type: none"> 1. Jonglei—Bor, Pibor, Pochalla, Gumuruk, Manyabol, Raat, Ferteit, Labrab, Omillia, Kengen, Lotilla, Kelo, Nyalangoro, Likongole, Akobo, and Boma (all accessible areas in Jonglei as determined by ISWG) 2. Upper Nile—Renk, Malakal, Maban, and Melut 3. Unity—Bentiu, Yida, Adjuong Thok, and other refugee response locations. 4. Warrap—Alek and Wunrok 5. Northern Bahr el Ghazal and Western Bahr el Ghazal—Raja, Aweil, and Wau 6. ALL STATES - emergency road/bridge/airstrip repair 	<ol style="list-style-type: none"> i) Air operations for Jonglei due to ongoing active hostilities and the physical access constraints across the state; ii) Emergency road/airstrip repair as identified by Logistics Cluster User Group, in consultation with focal points in key "hotspot" areas; iii) Provision of common transport services (via truck, boat/barge, and air - when needed and based on funding available); iv) Supporting humanitarian partner's logistical capacity on difficult to access routes or where commercial options are unavailable/cost prohibitive (deep field routes); v) Provision of common storage facilities for prepositioning of humanitarian inter-agency cargo in key coordination hubs (five additional storage units budgeted for 2013) and; vi) Coordination of armed escort convoys, as needed, with OCHA and UNMISS. <p>Notes</p> <ul style="list-style-type: none"> • Upper Nile—Common inter-agency storage provision in four locations (Renk, Malakal, Maban, and Melut) - ability to scale up if needed; pre-positioning of nine trucks for movement of humanitarian cargo • Jonglei—Common inter-agency storage provision in two current locations (Bor and Akobo) - ability to scale up if needed (based on accessibility and security); transportation of humanitarian goods via truck, armed escort convoy coordination with OCHA and UNMISS; provision of airlift capacity, if needed and funds available; • Unity—Common inter-agency storage in two locations (Bentiu and Yida) - ability to scale up if needed; pre-positioning of one truck for movement of humanitarian cargo; • Warrap—Common inter-agency storage in two locations (Alek and Wunrok) - ability to scale up if needed; • Northern Bahr el Ghazal – ability to scale up with common storage, and trucking to meet the needs of the IDP response, if required. • Greater Bahr el Ghazal—Common inter-agency storage in one location (Wau) - ability to scale up if needed; pre-positioning of one truck for movement of humanitarian cargo; • ALL STATES - emergency road/bridge/airstrip repair available as identified by User Group and members; river transport available for movement of humanitarian good to Upper Nile or Jonglei if needed. <p>The Logistics Cluster will continue to monitor requests and the security/humanitarian situation. A roving logistics officer has been deployed to provide additional coordination and support wherever necessary</p>	Pibor is currently constrained with restricted access. Proposals for Pibor County must take this into account, and explain mitigating measures to be taken.
CCS	1. Ten states of SS	i) Security support to humanitarian organizations operating in South Sudan	
ETC	<ol style="list-style-type: none"> 2. Jonglei 3. Unity 4. Upper Nile 5. Northern Bahr el Ghazal 6. Western Bahr el Ghazal 7. All counties where humanitarian organizations are providing response and emergency telecommunications 	<ol style="list-style-type: none"> ii) Preposition three data connectivity kits to be able to respond to at least three ongoing emergencies. iii) Implement reliable voice and data services and power supply for aid agencies to be connected to the Humanitarian Internet Support Project (HISP). iv) Provide coverage for ten common operational areas with basic security telecommunications. v) Provide coordination services and information products— staff resources also available in Juba. <p>Notes</p>	<p>ETC will continue to provide emergency telecommunications services to humanitarian partners as needed.</p> <p>Pibor is currently constrained with restricted access. Proposals for Pibor County must take this</p>

	intervention is required.	In Jonglei, ETC will preposition a data connectivity kit in Bor which will be ready to be moved to Pibor or any other identified operational hub once humanitarian access is granted.	into account, and explain mitigating measures to be taken.
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Status of core pipelines

5. Table 2 below summarizes the stock and prepositioning status of the pipelines as of 30 May. All pipelines showed improvement or remained stable since April, with average achievement at the end of May about 80% of supplies in Juba and main state capitals –from about 65% at the end of April; this is mainly due in significant improvements in the supply of certain items for Reproductive Health, WASH, Vaccines and Nutrition pipelines.

- i). 6 pipelines –Nutrition, WASH, Education, food, NFI/Shelter and Reproductive health achieved their targets in May (above 75%).
- ii). Food has delivered over 90% of prepositioning requirements and over 80% of the resourced commodities are already in country. However, funding is required for nutrition supplies; there is also an expected short fall of about 20,000mt in the next 3 months (June-Aug) that could affect non prepositioning locations
- iii). NFI/ES has pre-positioned over 70% of target in deep field locations
- iv). 3 pipelines- Health trauma kits, agricultural support supplies and Vaccines remain on track (above 50% of their target). Status will continue to improve with arrival of supplies in July.
- v). Vaccines showed marked improved from April due arrival of additional supplies and others that were not previously recorded in the report
- vi). If access to Jonglei opens in the coming months it could change these levels as stocks are depleted to meet new needs

Table 2: Summary of stock and prepositioning status of the pipelines

Pipeline	Project Code	Org.	CAP Revised Req.	Funding Secured (as of 1 July)	Funding (%)	CHF R1 Funding	Pooled funding (%)	Bilateral Funding (%)	Unmet Req.	Pipeline status (as of 30 May)
Education Supplies	SSD-13/E/55519/124	UNICEF	5,788,385	2,067,089	36%	1,375,089	67%	33%	3,721,296	Stable
Seeds, Tools and animal vaccines	SSD-13/A/56113/123	FAO	13,000,000	7,655,000	59%	3,000,000	39%	61%	5,345,000	Stable – improved in supplies of one commodity
Food Assistance	SSD-13/F/55863/561	WFP	306,519,310	226,188,578	74%	0	0%	100%	80,330,732	Stable
Health – vaccines	SSD-13/H/55197/124	UNICEF	11,891,351	4,415,568	37%	1,600,009	36%	64%	7,475,783	Improved with arrival of new supplies and also some items now included that were not recorded in April
Health – Reproductive Kits	SSD-13/H/55251/117 1	UNFPA	2,912,616	865,000	30%	865,000	100%	0%	2,047,616	Stable; improved in supply of all commodities
Health – Emergency/Trauma kits	SSD-13/H/55471/122	WHO	10,604,040	6,329,232	60%	1,477,024	23%	77%	4,274,808	Stable and on track to achieving the annual target
NFIs and Emergency Shelter	SSD-13/S-NF/55455/298	IOM	8,794,800	3,710,386	42%	1,940,006	52%	48%	5,084,414	Stable
Nutrition supplies (SAM)	SSD-13/H/55044/124	UNICEF	18,765,021	5,141,556	27%	1,500,012	29%	71%	13,623,465	Improved from 65%-83%- bp-5 supplies from red to green

Nutrition supplies (MAM)	SSD-13/F/55056/561	WFP	32,337,861	22,289,626	69%	1,500,000	7%	93%	10,048,235	Stable
WASH supplies	SSD-13/WS/56024/1 24	UNICEF	14,034,553	4,398,262	31%	2,898,262	66%	34%	9,636,291	Improved from 73%-93%-as a result of improvement in supply of buckets, jerry cans and hygiene kits
Total			424,647,937	283,060,297	67%	16,155,402			141,587,640	

Cluster Project Selection and Review Process

6. In accordance with the South Sudan CHF allocation guidelines, cluster portfolios will be prepared through internal cluster reviews. This process will involve:
 - i). Cluster Coordinators/Co-Coordinators who will convene cluster consultations meetings to refine and adopt cluster specific priorities which should be promptly communicated to partners to allow enough time for the drafting of proposals,
 - ii). CAP partners will be asked to submit proposals based on priorities endorsed within their clusters,
 - iii). Cluster Coordinators/Co-Coordinators will engage with their respective cluster PRTs to select the proposals submitted against their respective cluster specific criteria in line with priorities and guidance stipulated in this guidance note,
 - iv). The composition of the PRTs should be Cluster Coordinator, Co-Coordinator, UN agency representative, INGO and NNGO representative and OCHA representative. It is recommended that the Clusters discuss with the NGO Forum (coordinator@southsudanngoforum.org) to advise on the representation of one International and one National NGO representative to each PRT.
 - v). In order to facilitate efficient and timely finalization of cluster portfolios, projects recommended for allocation after presentations at the Advisory Board will undergo technical review that will be conducted jointly by the Cluster Coordinators/Co-Coordinators, PRTs, M&R Specialists and CHF TS.

Advice to Clusters and PRT:

7. Role of Cluster Coordinators/Co-Coordinators and PRTs
 - i). Cluster Coordinators/Co-Coordinators and PRTs will rate projects (numerical score approach is recommended) for technical merit and relevance in addressing the most urgent humanitarian needs in accordance with policy paper, cluster priorities and previous performance of the implementing organization.
 - ii). Cluster Coordinators/Co-Coordinators will prepare a presentation to defend the cluster's strategy and projects portfolio in front of the CHF Advisory Board.
 - iii). During the defence, Cluster Coordinators/Co-Coordinators will ensure that the portfolio is "blind," hiding the identity of the requesting organization. Cluster Coordinators/Co-Coordinators are required to demonstrate that their programmatic strategy is evidence-based. They are also required to support their allocation proposals with clear and concise documentation on the ranking and decision making process to demonstrate that a transparent, inclusive and objective process was followed. If dissatisfied with a particular presentation, the HC or CHF Advisory Board may request the concerned Cluster Coordinator/ Co-Coordinator to make a second presentation.
 - iv). Based on the presentations and in line with the policy paper, the HC, in consultation with the CHF Advisory Board, will make recommendations for funding to each cluster.
 - v). The HC will then debrief each Cluster Coordinator/Co-Coordinator on the outcome of the defences informing how much is allocated to the cluster, and issues to address before project allocations are approved.
8. Clusters members should agree on cluster specific timelines, prioritization criteria, and the criteria which will be used after the cluster envelope has been decided by the Advisory Board to either reduce or increase the portfolio of projects accordingly (e.g drop the lowest priority projects; reduce all project budgets by a pro-rata amount). The Cluster will be asked to explain these criteria in their defence to the Advisory Board.
9. The PRT should consider the ability of the applicant to timely expend and report against previous CHF allocations. To this end, the quarterly disbursement matrix maintained by UNDP for CHF allocation and estimated expenditure by UN agencies will be provided to clusters by the CHF Technical Secretariat.

10. The PRT should also consider projects that have limited potential of receiving funds through other channels if all other criteria are met, including the ability to implement the project.
11. Clusters should ensure that projects recommended for CHF support include an analysis of the specific needs and priorities of women, girls, boys and men and that all activities are informed by this analysis. This requirement does not apply to 'gender-neutral' projects such as logistics and emergency telecommunications projects. The GenCap Adviser, Ms Valerie Mills Laforce (laforce@un.org), at OCHA is available to support Clusters in this regard.
12. Clusters will consider the 'value for money' of a project and the indirect costs as a proportion of direct costs. Updated guidelines on the calculation of Direct and Indirect costs are contained in the CHF proposal template. It is important that:
 - i). The budget includes a detailed budget breakdown including the total cost of the project and other contributions (including in kind contributions);
 - ii). Personnel costs indicate responsibility/title, duty station in South Sudan, unit cost, quantity, duration, and percentage dedicated to the specific project;
 - iii). Transportation and operational costs directly charged to project area and to head office are clear;
 - iv). (Potential) higher operational costs due to inaccessibility and insecurity among others are taken into account.
13. Clusters should avoid allocating small amounts to many projects. The minimum allocation to a single project is recommended at US\$200,000 for UN agencies and INGOs, and at US\$50,000 for NNGOs. Under special circumstances smaller project allocations will be considered for critical activities if:
 - i). The entire project budget is below US\$200,000;
 - ii). The amount will fully cover a funding gap for the total project budget; or
 - iii). The amount will fund vital life-saving activities that will cease in less than 30 days or is a gap-filler for three months of activities until another donor is identified.
14. Pass-through arrangements, where organizations sub-grant funding to their implementing partner organization without providing any meaningful guidance, coordination, technical advice, monitoring and evaluation capacities or any other function of additional value will not be accepted.
15. Submitted proposals should articulate in a clear manner how the proposed intervention in the proposal will contribute to achieve the cluster specific priorities identified for this allocation. Proposals will include at least three indicators from the Cluster Standard Output Indicators List¹ to monitor the progress and the results achieved by the CHF funded project. Each indicator should provide a target scaled to the CHF contribution to the CAP project and broken down by age and gender as much as possible. The CHF Monitoring and Reporting Officer at OCHA and cluster Monitoring Specialists are available to support Clusters in this regard.
16. Implementation of a CHF recipient project shall not exceed twelve (12) months² from the actual project start date or from the CHF allocation in the case of pre-financed projects, and Project Partnership Agreements (PPAs) will therefore be drafted with twelve months duration unless otherwise specified in the project document. Project pre-financing will be limited to only the costs incurred in the interim period between the CHF allocation date (i.e. date when CHF Advisory Board recommends allocations to cluster portfolios) and the date of actual cash disbursement to the recipient project.
17. NGO partners who have not been allocated funds from the previous South Sudan CHF will need to be assessed by UNDP for their capacity before the contract is prepared. Capacity assessment requirements will be shared with concerned partners.
18. NNGOs applying for funding through the second standard allocation will present their budgets in US Dollars and will receive the allocation in hard currency. This is an exceptional measure taken due to the current economic situation for direct CHF disbursements through UNDP.³

¹ The list of Standard Outputs Indicators is included in the CHF documentation for this allocation.

² Although 2013 CAP projects are up to December 2013, duration of projects allocated CHF can run up to twelve months from allocation date.

³ UNDP statement of intent and communication to OCHA (15/8/2012).

19. The process will be supported by the joint OCHA and UNDP Technical Secretariat based in OCHA South Sudan. Technical Secretariat focal points are: Federica D'Andreagiovanni, dandreagiovannif@un.org, +211 922406061; Thomas Nyambane, nyambanet@un.org, +211 922406071; Meron Berhane, berhanem@un.org, +211 922406080; Anne-Sophie Le Beux, lebeux@un.org, +211928062367; and Ashutosh Jha (for PPAs), ashutosh.jha@undp.org, +2110959000939.

Important deadlines

20. On confirmation of allocation, UNDP will prepare PPA (Project Partnership Agreement) based on the project proposal, project budget and logical framework submitted by the partner. If any additional information or clarification is required, CHF Technical Secretariat (TS) will contact the partner to provide the missing information/clarification. Partners will be required to provide the information/clarification within one week of first contact by the TS. PPA will be first signed by UNDP and shared with partners for counter signature, which should be done within one week of receiving the signed contract. Fund disbursement process will start only after UNDP receives the signed original PPA from the partners along with other relevant information (signed payment request, banking details, etc).
21. UN agencies awarded an allocation will have to counter sign a CHF allocation letter within two weeks from the date of the HC's signature.

Complaints Mechanism

22. Participants with insufficiently addressed concerns or complaints regarding CHF processes or decisions can at any point in time approach the head of CHF Technical Secretariat (chfsouthsudan@un.org) with these concerns. The CHF TS will compile, review and present raised issues to the Humanitarian Coordinator, who will then take a decision on necessary action(s). The Humanitarian Coordinator will share with the Advisory Board any such concerns or complaints and actions taken thereof.

South Sudan CHF 2013 Second Round Allocation Timeline (Revised as of 17 July 2013)

Date/ Deadline	Responsible	Action
25- 26 Jun	Advisory Board (AB); ISWG; CHF TS	Begin consultations on drafting of CHF allocation policy paper <ul style="list-style-type: none"> • Consultations with AB – 25 June • Consultations at the ISWG – 26 June
3 Jul	Coordinators; Co-Coordination; Cluster partners	Based on the Advisory Board's strategic focus, clusters provide a list of priority activities by geographic location to CHF Technical Secretariat (chfsouthsudan@un.org). CHF TS begin preparation of draft zero of the allocation policy paper
5 -11 Jul	AB; CHF TS; HCT, ISWG	Consultation with CHF Advisory Board and HCT on zero draft CHF allocation policy paper. Policy paper is distributed electronically to AB, ISWG and HCT with deadline for comments 11 July.
12 Jul	HC; CHF TS	Release of the CHF allocation policy paper HC/OCHA briefs stakeholders (potential CHF applicants) and Cluster Coordinators/Co-Coordination to explain the CHF allocation process CHF TS circulates to Cluster Coordinators/Co-Coordination the CHF allocation policy paper, timeline and the following templates/forms: Proposal, Budget, Allocation Report (i.e. minutes form), Projects Ranking form (Annex 1), CHF defense presentation.
15 – 18 Jul	Coordinators; Co-Coordination; Cluster partners	Establish cluster priorities <ul style="list-style-type: none"> • Cluster initiate consultations with partners on CHF allocation priorities and refine activities within prioritized locations • Update list of standard output indicators and send feedback to CHF TS • Constitute Peer Review Teams (PRTs) • Partners agree on cluster specific timelines, and projects prioritization criteria • <i>Cluster Coordinators and Co-Coordination compile minutes of discussions from this stage until end of the allocation process</i>
19 – 30 Jul	Cluster partners	Draft project proposals Partners draft and submit their proposals and budgets to cluster coordinators and co-coordinators
2 - 7 Aug	Coordinators; Co-Coordination; Peer Review Teams (PRT)	Selection of draft project proposals <ul style="list-style-type: none"> • PRTs undertake a preliminary "light" review of the proposals to ensure projects are appropriate, cost effective and in line with cluster priorities • PRTs prioritize and recommend project proposals and corresponding funding • PRTs agree on criteria for a possible funding reduction following AB decision • <i>Cluster Coordinators/Co-Coordination need to copy the CHF TS (chfsouthsudan@un.org) in emails communications with the PRT</i>
12 Aug	Coordinators; Co-Coordination	Submit Annex 1 to CHF TS Cluster Coordinators/Co-Coordination submit compiled Annex 1 to the CHF TS
12 – 14 Aug	Coordinators; Co-Coordination; CHF TS	Preparations for the Advisory Board cluster defenses <ul style="list-style-type: none"> • Cluster Coordinators/Co-Coordination prepare defense presentations and submit to CHF TS • CHF TS compile documentation and circulate to the AB
15 – 16 Aug	HC; Advisory Board; Coordinators; Co-Coordination; CHF TS	Cluster defenses to the CHF Advisory Board <ul style="list-style-type: none"> • Cluster Coordinators/Co-Coordination present and defend their funding proposal portfolios • The AB meets in a separate session to deliberate and make funding recommendations to clusters • Cluster Coordinators/Co-Coordination debriefed on the outcome of the AB by the HC
19– 26 Aug	Coordinators; Co-Coordination; PRTs; Cluster Partners; CHF TS	Implementation of AB recommendations <ul style="list-style-type: none"> • CHF TS ensures that issues raised by AB are adequately addressed and inform the HC accordingly • Cluster Coordinators/Co-Coordination allocate funds according to HC's feedback and PRTs' pre-defined criteria if cluster requested funding is not fully granted • Partners incorporate funding recommendations and submit electronically revised project proposals (including part III) to cluster coordinators with copy to chfsouthsudan@un.org
22 – 30 Aug	Coordinators; Co-Coordination; PRTs; Cluster Partners; CHF TS	Technical Review and Finalize project proposals <ul style="list-style-type: none"> • Cluster Coordinators/Co-Coordination, PRTs member, M&R Specialists and CHF TS <u>jointly review revised proposals</u> and budgets to ensure they meet technical cluster and CHF requirements and feedback to partners • Partners submit electronically final project documents to their respective Coordinators/ Co-Coordination
30 Aug	Coordinators; Co-Coordination.	Submission of final allocation documents <ul style="list-style-type: none"> • Cluster Coordinators/Co-Coordination compile final CHF allocation documents (proposals, budgets, minutes, list of final allocations per project, and any other documents that may be required) and submit them to the CHF TS
31 Aug – 4 Sep	HC; CHF TS	Final approval by HC <ul style="list-style-type: none"> • CHF TS review and compile final CHF allocation documents and prepares allocation letters for HC's signature • HC signs allocation letters to authorize disbursement or request for additional information
5 Sep onwards	CHF TS; Recipients	Contracting and Disbursement of Funds begin