



## **"CASE STUDY"**

# **GUIDED EXERCISE FOR THE SUBMISSION OF OPERATION PROPOSALS TO ECHO**

**(Instructions for use)**

In collaboration with



With the contribution of





## Monitoring and Evaluation in Humanitarian Aid: Quality Procedures

*With the contribution of*<sup>1</sup>

ECHO – Humanitarian Aid Office

Under the Grant Facility 2002 – STRAND 1 – Training and Networks.

### *Project Title*

Monitoring and Evaluation in Humanitarian Aid: Quality Procedures

### *Translation and editorial assistance*

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<sup>1</sup> This document has been produced with the financial aid of the European Union. The views expressed herein should not be taken, in any way, to reflect the official opinion of the European Community.

### INSTRUCTIONS FOR USE

This training exercise is the product of the work by a research team formed to carry out the *Monitoring and Evaluation in Humanitarian Aid: Quality Procedures* project, co-financed by ECHO. This intervention, known as ECHOTrain and presented by the SOLINT Forum, is intended to facilitate the application of the new ECHO procedures and better the quality of humanitarian projects, through the implementation of training modules and the preparation of operational tools.

The research team members are Emanuele Pinardi (Cosv), Davide Martina (Coopi), Fabrizio Alberizzi and Federico Bastia (*punto.sud* Association).

The training module includes an example of an operation funded by ECHO, in Acrobat Reader (.pdf) format, written by the team members. The guided exercise, appearing here in its original Italian version and in both English and French translations, is intended for both the headquarters staff and expatriate / local personnel of the various NGOs involved. The entire exercise is also intended to meet the training and/or self-training needs of headquarters and field personnel.

The exercise is **not intended as training on the techniques of Project Cycle Management**; readers should see instead the reference manuals, especially the ECHO manual *Project Cycle Management* (2003.)

In the definition of the operation proposal we assume that the analysis stage has been completed, namely the following phases:

- Stakeholder analysis
- Problems and needs analysis
- Analysis of objectives
- Analysis of strategies

The purpose of this exercise is to provide an **overall tool** allowing the staff involved in an **operation co-financed by ECHO** to follow its evolution, and to facilitate the writing of the Reports, while responding to the specifications stated by ECHO in the 2003 Framework Partnership Agreement.

In accordance with this purpose, the layout of the entire document follows the successive phases required for carrying out an ECHO project lasting over 6 months:

1. **PLANNING STAGE:** This section provides input for the guided exercise, in reference to the elements allowing the definition of the Logical Framework<sup>2</sup>, the definition/planning of the activities and resources needed for a correct implementation of the operation. A definition of the operation's output in the simulation is also provided, specifically regarding the requested reports and the introduction of a budget modification in the Pre-Final Report. This section contains a single document:

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<sup>2</sup> The Logical Framework has been constructed using the guidelines provided by ECHO in the "Logical Framework Guidelines" document, and the SPHERE manual.

### → Introduction

The purpose of this section is to let personnel have a reference framework for the exercise.

2. SUBMISSION OF OPERATION PROPOSAL: This section includes a model of operation proposal, built according to the specifications of the new FPA and to the new requests ECHO poses for the submission of an operation proposal. Documents in this section include:

- Single Form
- Budget Breakdown
- Logical Framework
- Workflow Planning

The purpose of this section is to let personnel prepare stronger humanitarian projects and meet the needs set forth by ECHO in the *quality partnership* defined by the 2003 FPA.

3. SUBMISSION OF INTERIM REPORT: This section includes a model of Interim Report, built according to the specifications of the new FPA and to the new requests ECHO poses for the submission of an operation proposal. Documents in this section include:

- Interim Narrative Report
- Interim Financial Report
- Logical Framework
- Workflow Planning

The purpose of this section is to let personnel understand the new requests introduced by ECHO regarding the production of reports in the interim phase.

4. SUBMISSION OF PRE-FINAL REPORT: This section includes a model of Pre-Final Report (which is mandatory for operations lasting longer than 6 months), built according to the specifications of the new FPA and to the new requests ECHO poses for the submission of an operation proposal. Documents in this section include:

- Preliminary Final Report
- Interim Financial Report (in order to highlight a budget modification)
- Logical Framework
- Workflow Planning

The purpose of this section is to let personnel understand the new requests introduced by ECHO regarding the production of reports in the pre-final phase.

5. SUBMISSION OF THE FINAL REPORT: This section includes a model of Final Report, built according to the specifications of the new FPA and to the new requests ECHO poses for the submission of an operation proposal. Documents in this section include:

- Final Narrative Report
- Final Financial Report
- Logical Framework
- Workflow Planning

The purpose of this section is to let personnel understand the new requests introduced by ECHO regarding the production of reports in the final phase.

**NOTE:**

1. The documents included **do not represent** either **ECHO official documents** or a perfect operation model to be replicated when writing an operation proposal and/or in the various phases of execution of an operation;
2. The exercise has been built around the hypothesis of an operation **CO-FINANCED** by ECHO within a **GLOBAL PLAN**. Common sense dictates that in primary emergency and emergency cases the level of detail of this operation proposal will be difficult to attain, and hardly required.

Any remarks or requests for information can be sent to the following e-mail address:  
[emergenza@coopi.org](mailto:emergenza@coopi.org)



## **"CASE STUDY"**

# **GUIDED EXERCISE FOR THE SUBMISSION OF OPERATION PROPOSALS TO ECHO**

**(Phase I: Input/output)**

In collaboration with



Published with the contribution of



### ***INSTRUCTIONS FOR USE***

This section, relative to the planning stage, provides input for the guided exercise, in reference to the elements allowing the definition of the Logical Framework<sup>1</sup> and the definition/planning of the activities and resources needed for a correct implementation of the operation. A definition of the operation's output in the simulation is also provided, specifically regarding the requested reports and the introduction of two budget modifications (a Supplementary Agreement changing the percentage of co-financing, approved by ECHO before the submission of the Interim Report, and a budget modification when submitting the Pre-Final Report). This section contains a single document:

→ Introduction

The purpose of this section is to let personnel have a reference framework for the exercise.

**NOTE:**

1. The documents included **do not represent** either **ECHO official documents** or a perfect operation model to be replicated when writing an operation proposal and/or in the various phases of execution of an operation;
2. The exercise has been built around the hypothesis of an operation **CO-FINANCED** by ECHO within a **GLOBAL PLAN**. Common sense dictates that in primary emergency and emergency cases the level of detail of this operation proposal will be difficult to attain, and hardly required.

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<sup>1</sup> The Logical Framework has been constructed using the guidelines provided by ECHO in the "Logical Framework Guidelines" document, and the SPHERE manual.

## Exercise

### ⇒ Framework of the operation

- Primary emergency decision ☐
- Emergency decision ☐
- Ad hoc decision ☐
- Global plan decision ☒
- DIPECHO ☐
- Other, please specify ☐

**Note**  
Box checked by ECHO (or by partner as per preceding discussion with the ECHO Desk Officer)

### ⇒ Type of financing

- Grant, 100% financing ☐
- Grant, co-financing ☒

5% own funds  
10% co-financing by AWD  
(Agency for World Development)

### ⇒ Duration of operation (in months): 8 months

## Input of the operation

### ⇒ QL standard (use the SPHERE manual)

### ⇒ Sectors, by activity

Sector	Main Intervention	Identified Cost (in €)
Water and Sanitation	Construction of 100 latrines	33.200
	Construction of 2 wells	16.000
Health	Rehabilitation of 2 Health Centers	40.000
	Procurement of medical material	182.500
Non-food items	Distribution of blankets	20.000
	Distribution of pots, pans, kitchen kits	75.000



### ⇒ Staff

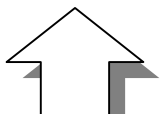
Role	Estimated Period	Identified Cost
<b>Expatriate Personnel</b>		
1 Program Manager	Duration of operation	Cost according to NGO rules including: accommodation, return travel, briefing/debriefing, insurance, mission compensation.
1 Doctor	3 months	Cost according to NGO rules including: accommodation, return travel, briefing/debriefing, insurance, mission compensation.
1 Hydrogeologist	3 months	Cost according to NGO rules including: accommodation, return travel, briefing/debriefing, insurance, mission compensation.
1 Consultant (at headquarters)	3 months	Cost according to NGO rules including: accommodation, return travel, briefing/debriefing, insurance, mission compensation.
<b>Local Personnel</b>		
1 Administrator	Duration of operation	Cost according to NGO rules including: salary, insurance.
1 Logistics Person	Duration of operation	Cost according to NGO rules including: salary, insurance, per diem.
3 Nurses	Duration of operation	Cost according to NGO rules including: salary, insurance, per diem.
3 Guards	Duration of operation	Cost according to NGO rules including: salary, insurance.

### ⇒ Resources and activities

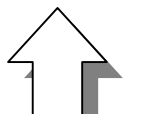
- Car, already owned by NGO (purchasing cost € 15.000, depreciation period 24 months)
- Rental car (€ 8.000)
- 2 radios (purchasing cost € 3.600 per radio, depreciation period 12 months)
- Running costs
- Operation office (rent of premises, power bill, expenses: € 9.800)
- Office consumables & supplies
- External evaluation (€ 5.000)
- Visibility activities (€ 2.500)
- Reserve (none)

### Output of the operation

Duration of project: 8 months				
	Proposal	Interim Report	Pre-Final Report	Final Report
Narrative + Annexes	Single Form ( <i>Proposal</i> )	Single Form ( <i>Interim Narrative Report</i> )	Single Form ( <i>Preliminary Narrative Report</i> )	Single Form ( <i>Final Narrative Report</i> )
Financial	A. Financial Request B. Budget Summary	Interim Financial Report	Interim Financial Report	Final Financial Report



**Request for  
amendment and  
approval by  
ECHO  
(*Supplementary  
Agreement*)**



**Budget  
Modification  
(less than  
15%)**



## **"CASE STUDY"**

# **GUIDED EXERCISE FOR THE SUBMISSION OF OPERATION PROPOSALS TO ECHO**

## **(Phase II: Proposal)**

In collaboration with



With the contribution of



### ***INSTRUCTIONS FOR USE***

This section, relative to the operation proposal, includes a model of operation proposal, built according to the specifications of the FPA 2003 and to the new requests ECHO poses for the submission of an operation proposal. Documents in this section include:

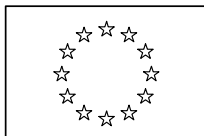
- *Single Form*
- *Budget Breakdown*
- *Logical Framework*
- *Workflow Planning*

The purpose of this section is to let personnel prepare stronger humanitarian projects and meet the needs set forth by ECHO in the *quality partnership* defined by the 2003 FPA.

#### ***NOTE:***

1. The documents included **do not represent** either **ECHO official documents** or a perfect operation model to be replicated when writing an operation proposal and/or in the various phases of execution of an operation;
2. The exercise has been built around the hypothesis of an operation **CO-FINANCED** by ECHO within a **GLOBAL PLAN**. Common sense dictates that in primary emergency and emergency cases the level of detail of this operation proposal will be difficult to attain, and hardly required.

Any remarks or requests for information can be sent to the following e-mail address:  
[emergenza@coopi.org](mailto:emergenza@coopi.org)



## SINGLE FORM FOR HUMANITARIAN AID OPERATIONS

### 1. GENERAL INFORMATION

#### 1.1. Name of humanitarian organisation

HOx (Humanitarian Organisation x)

**Note**

Insert, if applicable, the FPA number.

#### 1.2. FPA number (if applicable)

[...]

**Note**

Insert the date of proposal submission.

#### 1.3. Purpose of the submission

##### 1.3.1. Proposal

New proposal

☒

date: dd-mm-yy

Revised proposal

☐

[NOT APPLICABLE]

ECHO reference A/

[NOT APPLICABLE]

##### 1.3.2. Interim narrative report

☐

[NOT APPLICABLE]

##### 1.3.3. Preliminary final report

☐

[NOT APPLICABLE]

##### 1.3.4. Final report

☐

[NOT APPLICABLE]

#### 1.4. Grant agreement number

[NOT APPLICABLE]

#### 1.5. Implementing rules applicable to this agreement

Grant, 100% financing

☐

Grant, co-financing

☒

#### 1.6. Framework of this submission

Primary emergency decision

☐

Emergency decision

☐

Ad hoc decision

☒

Global plan decision

☐

DIPECHO

☐

Other, please specify

☐

**Note**

Box checked by ECHO or by partner as per preceding discussion with the ECHO Desk Officer

## 1.7. Executive summary of operation

### (4.1.) Title of the operation

“Restoring of minimal health conditions for the populations affected by the conflict and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland”.

### (4.2.) Country(ies) and location(s) of implementation

Interland, Cordoba Region – Dist-one and Dist-two districts.

### (4.3.) Start date of the operation

dd-mm-yy

### (4.4.) Duration in months

8 months

### (4.5.1.) Total number of direct beneficiaries

15.000

### (4.5.2.) Identify the status and give details of the beneficiaries

The operation will activate services benefiting 5.000 displaced persons (mainly women and children) and 10.000 residents in the Dist-one and Dist-two districts, affected by the disaster. They are mainly family nuclei (6-7 members per family) working in agriculture and raising small animals.

### (4.7.1.) Operation specific objective

The purpose of the operation is to intervene in an integrated manner in the two target districts, to better the overall health situation – particularly for vulnerable groups such as women and children – and to bring living conditions back to the situation preceding the disaster. For this purpose, the objective has been identified as follows:

⇒ Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 5000 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)

#### (4.7.2.) Indicators and sources of verification

Indicators for specific objective		
N.	Indicator	Source of verification
Ind. N°1	Level of water-related pathologies brought back to levels preceding disaster in the Dist-one and Dist-two districts (10.000 + 5.000 beneficiaries)	Surveys Health Centre Reports
Ind. N°2	Vaccine coverage brought back to levels preceding disaster	Surveys AWD Reports Health Centre Reports
Ind. N°3	Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones (5.000 beneficiaries)	Surveys Monthly Reports Final Evaluation
Ind. N°4	Coverage of essential health services assured according to parameters preceding disaster (10.000 + 5.000 beneficiaries)	Surveys Health Centre Reports
Ind. N°5	Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life) (5.000 persons)	Monthly Reports Final Evaluation
Ind. N°6	Reference and surveillance system restored and operational at the end of operation	Monthly Reports Final Evaluation
Ind. N°7	After 4 months, self-sufficient latrine committees (10 committees) in areas hosting displaced persons (ability to call autonomously 1 meeting per month per committee)	Community Leader Reports Final Evaluation
Ind. N°8	...	

#### (4.8.1.) Expected result 1 (Water and Sanitation)

A.1.<sup>1</sup> 2 Health centres (Dist-one and Dist-two) have access to sufficient water for their needs, through the drilling of 2 wells.

#### (4.8.2.) Expected result 2 (Water and Sanitation)

A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where displaced persons reside.

#### (4.8.3.) Expected result 3 (Health)

B.1. Organisation of essential services (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system) restored in 2 health centres (Dist-one and Dist-two – 15.000 users/year.)

#### (4.8.4.) Expected result 4 (Health)

B.2. Supplying of medical material to 2 health centres (Dist-one and Dist-two – 15.000 users/year) to ensure that services can be provided (program managed in coordination with AWD).

<sup>1</sup> Numbers refer to the annexed Logical Framework.

**(4.8.5.) Expected result 5 Non-Food Items**

**C.1.** Minimum essential household items (kitchen kit and blankets) provided to 5.000 families classified as “vulnerable”.

**(11.1.) Total budget of the operation:** EUR 555.319,30

**(11.2.) Contribution requested from EC:** EUR 472.021,41

**(11.5.) Eligibility date of expenditure:** dd/mm/yy

**2. NEEDS ASSESSMENT**

**Note**

It is always advisable to include an annex carefully showing the need assessment work done

**2.1. Date(s) of assessment**

Assessment was conducted by a Hox consultant during the months of X and X (see annex for more detail.)

**2.2. Methodology and sources of information used**

The team, including a socio-sanitary expert and three social workers, has performed the following:

- ⇒ Preliminary phase: Gathering of socio-sanitary information regarding the situation before the conflict, gathering of WHO data (inquiry conducted [...]), comparison with nearby areas (assessment conducted by XX [...]);
- ⇒ Inquiry phase: Two parallel researches have been conducted. One was based on contact with the privileged actors in the area [...]. The other was based on a form with a series of questions for the health workers in the target areas and for a sample of 200 families selected randomly.
- ⇒ Elaboration phase: Based on the data, a first estimate of needs was made and a workgroup was activated with local representatives from health care facilities, the community and district authorities. [...].

**2.3. Organisation/person(s) responsible for the assessment**

Mrs [...], public health expert.

**2.4. Problem statement and stakeholder analysis**

General statement of problems

Interland is among the world's poorest countries. Events produced by the disaster have worsened considerably the population's living conditions [...].

The disaster has also forced many families to leave their villages because of the [...], also in other districts, where the disaster had a less devastating impact. The main problems can be summarized as follows:



- ⇒ Infrastructure and transport: The disaster has severely downgraded communications and transport [...]. The local Ministry for Infrastructure is now working to activate a rehabilitation operation funded by the World Bank. [...].
- ⇒ Economy sector: The disaster has erased the little pickup the economy was showing [...]; in the affected areas there has been a severe worsening of the economy [...]
- ⇒ Health sector: This sector has been hurt by several new problems, especially the emerging of new pathologies linked to the water supply [...] diffusion [...] and risk levels can be summarized [...] (see the annexed Need Assessment for more details).

While the basic competence level of local personnel is satisfactory, general coordination and monitoring of the region's health centres is gravely lacking [...].

Some interventions are under way to support activities in the districts of XX , XY, XZ and XW, while the Dist-one and Dist-two districts are experiencing severe difficulty in restarting their activities and services. The situation has been made worse by the arrival of 5.000 IDPs from nearby districts affected by the disaster.

**Note**

It is always advisable, though not mandatory, to use the matrix provided by the European Commission's PCM manual for stakeholder analysis.

Stakeholder analysis

Communication among the various administrative offices in the region is weak, due to [...] It is hard to consider a real development of public administration at this point [...].

The main actors involved are:

- ⇒ Provincial health department whose ability to intervene has been greatly reduced by the disaster [...].
- ⇒ Local administration in the Dist-one and Dist-two districts which, because of the country's chronic problems, have a very limited role in the affected areas [...].
- ⇒ Churches: Several parishes are actively involved in the area [...].
- ⇒ International NGOs: XX has been active for years in the area, developing small agricultural projects [...].
- ⇒ Health centres: They are currently without external assistance and [...]
- ⇒ Village committees: They are fairly active in the area, especially regarding [...].
- ⇒ Women's groups: They are active in some areas, especially managing grinding mills [...].
- ⇒ [...].

**Note**

It is always advisable to illustrate the results of the need assessment using the sector breakdown from the Logical Framework

## **2.5. Findings of the assessment**

### Water & Sanitation Assessment

Water supply in the two health centres in Dist-one and Dist-two is totally lacking. The two centres have no protected water outlets; the safest source is around 2 km away. The lack of safe water is a problem especially for the centre in Dist-one, where the pressure of displaced persons is higher. In both centres, requests for help – especially for children – have risen steeply in the aftermath of the disaster [...].

The arrival of the displaced population has also caused new problems. The study has shown there is a growing risk of environmental damage due to the pressure exerted by the newly displaced families. The problem is especially severe in the Dist-one district, where the higher number of displaced persons has arrived and health conditions have worsened because of the complete absence of latrines. Currently [...].

### Public health assessment

The most severe problems are the reorganisation of the health centres regarding epidemiological control and of the reference system in accordance with national protocols [...] and the reorganisation of the vaccination system, which the disaster has disrupted [...].

### Housing (non-food items)

While the general situation of housing does not seem to have been especially hurt, some problems have been identified, particularly among certain displaced families who [...]. The main problems identified regard the hygiene conditions when preparing and storing food [...] and exposure to the cold, which affects children and sick persons particularly during the rainy season [...].

## **3. HUMANITARIAN ORGANISATION'S STRATEGY**

### **3.1. Partner's strategy in country and/or region(s) of operation**

#### General framework

HOx has been active in Cordoba since [...] because of the drought in the areas [...]. In recent years HOx has diversified its actions, aiming to strengthen institutions through professional training of cadres and the reorganisation of the services they provide. Regarding the latter sector, HOx has recently developed a permanent dialogue involving local institutions and the main organisations working in the country [...].

From the time of the disaster, HOx has begun to act as a connection between the international agencies active in the country (especially AWD) and the health authorities in the Cordoba district, for the supply of medicines and medical materials [...].

In summary, the organisation is now working on two main programs:

#### **A. Development of the nationwide health sector through programs for:**

- ⇒ Capacity building and reorganisation of regional health protocols;
- ⇒ Supplying of computer systems and training [...];
- ⇒ [...]

B. Supporting the administrative institutions in the districts of Cordoba and [...] through programs for:

- ⇒ Training;
- ⇒ Development of pilot projects in the field of [...];
- ⇒ Networking;
- ⇒ [...].

The results we obtained have brought about a strengthening especially of [...].

#### Main financing bodies

The financial support for HOx's operations can be summarized as follows:

- ⇒ EU: € 400.000 in the current year
- ⇒ Italian Ministry of Foreign Affairs: € 220.000
- ⇒ AWD: € 20.000
- ⇒ Fundraising in Italy: €15.000

#### Links with the proposal

The intervention proposal stems from knowledge of the Cordoba district and strong ties with the country's health authorities [...]. This has allowed, since the moment of the disaster, to constantly monitor its impact on the district's population. The fact that a permanent dialogue forum had been already established at the national level has allowed a first estimate of needs and the drafting of a strategic plan consistent with the available resources, the actors involved and the priorities assigned by ECHO in the emergency situation that had arisen.

### **3.2. Link between operation, the findings of the assessment and the problem statement**

The intervention proposal stems from the need to re-establish the living conditions in the areas affected by the disaster, in accordance with ECHO's Funding Decision. At this time, given the presence of other actors working in the economy and infrastructure sectors, and given HOx's experience in the health sector, priority has been given to working on better health and hygiene conditions in the Dist-one and Dist-two districts.

This choice was also based on the fact that the two health districts do not have at this time any kind of external support and, especially because of the presence of displaced persons, have begun experiencing critical levels of gastro-intestinal diseases and [...].

### **3.3. Is/are there similar operation(s) in the country/region?**

If yes, explain the measures foreseen to avoid overlap/duplication

#### Link with other operations under way locally

As noted previously, other operations by NGOs in support of health are under way in nearby districts [...].

Such operations do not however include the Dist-one and Dist-two districts. The presence of both districts at the permanent dialogue forum in the capital

will anyway assure a continuous exchange of data on the epidemiological situation and population movements [...].

The start of the AWD support programme for vaccinations and medicine supply should also be cited in this context [...].

#### Project strategy

Given this context, HOx proposes an intervention on the outstanding health problems (water-related diseases) in the two districts mentioned above [...]. The strategy can be summarized as follows:

- ⇒ On the one hand, the general health situation will be helped by intervening on the infrastructure of the two existing health centres (water outlets and small rehabilitation interventions) and on their organisation (reactivation of services in both centres);
- ⇒ On the other hand, the operation will intervene directly in the villages, producing better health conditions by building latrines in the more populated areas – particularly where displaced persons are more numerous – and supporting vulnerable family groups through the distribution of kitchen kits and blankets.

The operation will therefore support the return to normal living conditions, and will be consistent with the efforts of the local authorities and international agencies in the region [...].

### **3.4. Previous humanitarian operations with EC grants in the country/ region**

HOx has received in the last three years the following funding from the European Union:

- ⇒ Year YYYY: "Support to the institutions of [...]", Line [...], N° [...].
- ⇒ Year YYYY: "Development of health system [...]", Line [...], N° [...].

### **3.5. Have you discussed this proposal with ECHO's technical assistance office in the country/region of operation?**

Yes ☒ No ☐

#### *Comments:*

The operation was designed in cooperation with the EC head of operations, Mr. / Ms. [...] who has strongly encouraged our organisation to work for the evolution of health conditions in the Dist-one and Dist-two districts. We have also agreed that the intervention should bring direct support to the more vulnerable categories among the displaced and resident population [...]. [...] Moreover [...].

## **4. OPERATIONAL FRAMEWORK**

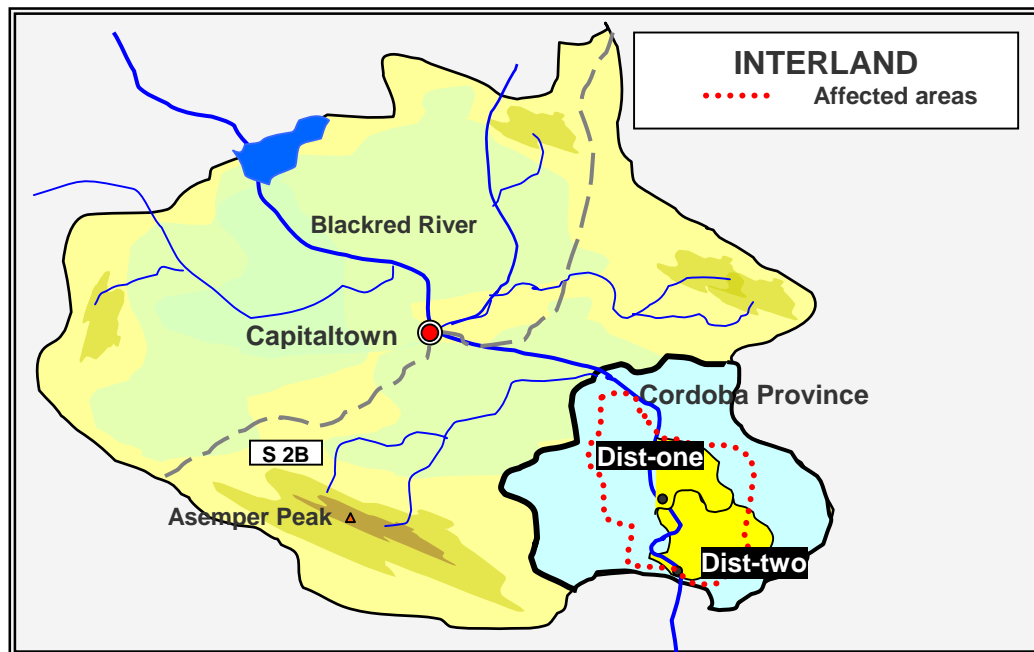
### **4.1. Title of operation**

- ⇒ Rehabilitation of minimum health conditions for populations affected by the disaster and support for health centres in the Dist-one and Dist-two districts, Cordoba Region, Interland. **[240 CHARACTERS MAXIMUM]**

**Note**

A map is mandatory, but can be included as an annex. Here it appears in the text purely for explanatory purposes.

**4.2. Exact location of the operation – Map**



**4.3. Start date of the activities in the field, (start date of the operation)**  
dd-mm-yy

**4.4. Duration in months**  
8 months

**4.5. Beneficiaries**

**4.5.1. Total number of direct beneficiaries**

The number of beneficiaries is 15.000 (users of the health centres and beneficiaries of the other services provided by the operation).

**4.5.2. Identify the status and give details of the beneficiaries:**

Beneficiaries can be identified according to the following table:

**Note**

The calculation of the number of beneficiaries and the identification criteria must be very clearly defined

Type	Status	Number	Problems Identified
<b>Displaced Persons</b>	IDPs	5.000	⇒ Poor health and hygiene conditions
<b>Displaced women in target districts</b>	IDPs	1.400	⇒ Trouble maintaining acceptable environmental hygiene conditions when preparing and storing food; ⇒ Difficulty caring for gastro-intestinal sickness in children
<b>Displaced children</b>	IDPs	2.200	⇒ Heavy incidence of gastro-intestinal sickness ⇒ Critical situation of vaccine coverage
<b>Users of health centres in the two districts</b>	Local population	10.000	⇒ Incidence of gastro-intestinal sickness; ⇒ Inadequate care; ⇒ Surveillance system not operational
<b>Children &lt; 5 year</b>	Mixed	8.500	⇒ Scarce vaccine coverage ⇒ Gastro-intestinal sickness.
<b>Women classified as “most vulnerable”</b>	Local population	3.600	⇒ Trouble maintaining acceptable environmental hygiene conditions when preparing and storing food; ⇒ Difficulty caring for gastro-intestinal sickness in children
<b>Medical and paramedical personnel in the two districts</b>	Local population	120	⇒ Organisational problems managing the post-emergency situation.

#### 4.5.3. “Catchment” population

The number of indirect beneficiaries is estimated to be 25.000 in both districts. The estimate is based on the fact that better health services and caring for displaced persons will have a positive outcome for the resident population at large.

#### 4.5.4. What are the identification mechanisms and criteria?

Beneficiaries will be identified according to the following criteria:

Type	Method of selection
<b>Displaced persons</b>	Census by local authorities
<b>Displaced women in target districts</b>	Census by local authorities
<b>Displaced children</b>	Census by local authorities
<b>Users of health centres in the two districts</b>	Users of health centres.
<b>Children &lt; 5</b>	Medical records and health census
<b>Women classified as “most vulnerable”</b>	Identified according to a points system (accommodation, age, number of children, presence/absence of husband, economic activity, extended family, presence of elderly people in family)
<b>Medical and paramedical personnel in the two districts</b>	Personnel employed by health centres.

#### 4.5.5. To what extent and how were the beneficiaries involved in the design of the operation?

The first level of involvement took the form of meetings with community representatives. Identification work was carried out in 12 meetings involving representatives of local authorities, health centre managers and doctors in charge of the areas involved.

A form with questions submitted to a sample of families allowed also to ascertain that [...].

During the feasibility phase a meeting was also convened with [...].

#### 4.5.6. Sectors of activity

- Sector 1: Water & Sanitation
  - ⇒ *Rural water sources*: Drilling of 2 wells;
  - ⇒ *Waste disposal and latrines*: Building of 100 gender-separated latrines
- Sector 2: Health
  - ⇒ *Primary health care*: Relaunch of activities in the two health centres (vaccinations, maternity and infancy monitoring plan, reproductive health, emergency room, reference system); supply of medical materials to the two health centres (in cooperation with the AWD medicine supply program).
  - ⇒ *Rehabilitation of medical facilities*: Light rehabilitation in the two health centres
- Sector 3: Non-food Items:
  - ⇒ *Domestic items*: Distribution of kitchen kits and blankets to the more vulnerable family groups;

#### 4.5.7. Give the following information for each sector

- Total number of direct beneficiaries

**Note**  
Compare with  
previous callout

Sector	Total number of direct beneficiaries
Water & Sanitation	15.000 + 120
Health	15.000 + 120
Non-food Items	5.000

- Types of beneficiaries and number of beneficiaries per type

Sector	Category of beneficiaries	N° of beneficiaries per category
<b>Water &amp; Sanitation</b>	Displaced persons	5.000
	Displaced women in target districts	1.400
	Displaced children	2.200
	Estimated users of health centres in the two districts	10.000
	Children < 5	8.500
<b>Health</b>	Displaced persons	5.000
	Displaced women in target districts	1.400
	Displaced children	2.200
	Estimated users of health centres in the two districts	10.000
	Children < 5	8.500
	Medical and paramedical personnel in the two districts	120
<b>Non-food Items</b>	Women classified as "most vulnerable"	3.600
	Displaced women in target districts	1.400

- Location

Sector	Location
<b>Water &amp; Sanitation</b>	Dist-two and Dist-one
<b>Health</b>	Dist-two and Dist-one
<b>Non-food Items</b>	Dist-one (for the most part) e Dist-two

**Note**

The principal objective must be consistent with the Decision of the European Commission (a discussion with the ECHO staff may be needed)

#### 4.6. Principal objective

In accordance with the objective of the Decision adopted by ECHO for the funding of the Ad Hoc Decision, the general objective of the operation is defined as:

- ⇒ Contributing to the recreation of the basic conditions for public services in the disaster-affected areas of the Cordoba province.

#### 4.7. Operation-specific objective

##### 4.7.1. Specific objective

The purpose of the operation is to intervene in an integrated manner in the two target districts, to remove the causes of the higher incidence of some diseases caused by the disaster and of the vulnerability especially of women and children. For this purpose, the objective has been identified as follows:



- ⇒ Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 5000 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)

The operation intends to provide the following benefits to the various categories of beneficiaries that have been identified:

	Type of beneficiaries (see 4.5.2.)	Foreseen benefits
I	Displaced persons	⇒ Access to safe toilet facilities for the beneficiaries of the newly built latrines ⇒ Better environmental conditions for the beneficiaries; ⇒ Garanzia di cure mediche minime garantite a tutti gli sfollati.
II	Displaced women in target districts	⇒ Supply of minimum required elements for safe preparation and storage of food and water.
III	Displaced children	⇒ See "I"; ⇒ Assured vaccine coverage
IV	Users of health centres in the two districts	⇒ Less incidence of gastro-intestinal diseases (-20% and -45% in the Dist-one and Dist-two areas); ⇒ Relaunch of health care services, especially emergency room, reproductive health, surveillance, diagnosis and treatment of endemic diseases.
V	Children < 5	⇒ Assured vaccine coverage; ⇒ Less incidence of gastro-intestinal diseases
VI	Women classified as "most vulnerable"	⇒ Supply of minimum required elements for safe preparation and storage of food and water
VII	Medical and paramedical personnel in the two districts	⇒ Relaunch of general activities and of the implementation of health guidelines, infrastructure work for both centers and construction of a water outlet ⇒ Upgrading of personnel.

#### 4.7.2 Indicator(s) and source(s) of verification

Indicators for specific objective		
N.	Indicator	Source of verification
Ind. N°1	Level of water-related pathologies brought back to levels preceding disaster in the Dist-one and Dist-two districts (10.000 + 5.000 beneficiaries)	Surveys Health Centre Reports
Ind. N°2	Vaccine coverage brought back to levels preceding disaster	Surveys AWD Reports Health Centre Reports

<b>Ind. N°3</b>	Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones (5.000 beneficiaries)	Surveys Monthly Reports Final Evaluation
<b>Ind. N°4</b>	Coverage of essential health services assured according to parameters preceding disaster (10.000 + 5.000 beneficiaries)	Surveys Health Centre Reports
<b>Ind. N°5</b>	Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life) (5.000 persons)	Monthly Reports Final Evaluation
<b>Ind. N°6</b>	Reference and surveillance system restored and operational at the end of operation	Monthly Reports Final Evaluation
<b>Ind. N°7</b>	After 4 months, self-sufficient latrine committees (10 committees) in areas hosting displaced persons (ability to call autonomously 1 meeting per month per committee)	Community Leader Reports Final Evaluation
<b>Ind. N°8</b>	[...]	[...]

#### 4.8. Results and indicators

##### 4.8.1. Result 1, relevant indicator(s) and source(s) of verification

The first goal of the operation is to intervene in the two health centres in Dist-one and Dist-two, in order to ensure access to enough water to meet the needs of both centres. The expected results are summarized in this table:

Sector	A. Water and sanitation	
Result 1	A.1. The two health centres (Dist-one and Dist-two) have access to enough water for their needs	
N.	Indicator	Source of verification
<b>Ind. N°1</b>	40 litres/day per patient admitted to hospital	Monthly health centre reports.
<b>Ind. N°2</b>	5 litres/day for visiting (non-admitted) patients	Monthly health centre reports
<b>Ind. N°3</b>	1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	Monthly health centre reports
<b>Ind. N°4</b>	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Monthly health centre reports
<b>Ind. N°5</b>	Water points are fully sustained at the end of intervention	Final Evaluation Report
<b>Ind. N°6</b>	[...]	[...]

##### 4.8.2. Result 2, relevant indicator(s) and source(s) of verification

The relocation of displaced persons to existing accommodation has worsened the overall health conditions, prompting an intervention for the immediate providing of adequate toilet facilities, particularly for the female population. The expected result for this component is as follows:

Sector	A. Water and sanitation	
Result 2	A.2. 2.000 inhabitants have access to adequate and safe toilet services in the areas where the displaced population has settled.	
N.	Indicator	Source of verification
Ind. N°1	100 latrines built and used appropriately	Final technical report
Ind. N°2	Women can safely use toilet facilities	Bi-monthly leader report
Ind. N°3	Latrines are at a minimum distance of 50m from dwellings	Final technical report
Ind. N°4	[...]	[...]

#### 4.8.3. Result 3, relevant indicator(s) and source(s) of verification

The influx of new users and the related impact show the need for an intervention in support of health care facilities (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system). The expected result for this component is as follows:

Sector	B. Health	
Result 3	B.1. Strengthening of the organisation of services (Dist-one and Dist-two – 15.000 users/year) (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system)	
N.	Indicator	Source of verification
Ind. N°1	The most common causes of mortality and disease are identified, documented and monitored after the end of the operation in both centres.	Monthly report from health centres
Ind. N°2	All members of the community, including displaced persons, have potential access to priority health care	Monthly report from health centres
Ind. N°3	Representatives of the health committees are regularly consulted according to local regulations [...].	Monthly report from health centres
Ind. N°4	Target health centres adopt national standards and protocols	Monthly report from health centres
Ind. N°5	Methods of coordination with national health system are in place four months after beginning op operation	Monthly report from health centres
Ind. N°6	Surveillance system is implemented within the 4th month and data are regularly provided to the relevant institutions [...].	Monthly report from health centres
Ind. N°7	[...]	[...]

#### 4.8.4. Result 4, relevant indicator(s) and source(s) of verification

For the purpose, again, of supporting the health centres' ability to provide their services, supplying them with medical materials has been deemed fundamental. This activity will be carried out in coordination with the medicine distribution program managed by AWD:

Sector	Health	
Result 4	B.2. Two health centres (Dist-one and Dist-two – 15.000 users/year) supplied with medical materials to ensure their services can be provided (program in cooperation with AWD.)	
N.	Indicator	Source of verification
Ind. N°1	Patients have adequate medicines [...].	Monthly report from health centres
Ind. N°2	[...]	[...]
Ind. N°3	[...]	[...]

#### 4.8.5. Result 5, relevant indicator(s) and source(s) of verification

To provide better living conditions for the more disadvantaged families, the operation will include the distribution of certain goods (kitchen kits and blankets). This intervention is directed both towards displaced persons, experiencing more severe problems, and especially needy members of the local population. The expected result for this component is as follows:

Sector	C. Non-food items	
Result 5	C.1. 5.000 family groups classified as “vulnerable” provided with minimum household items.	
N.	Indicator	Source of verification
Ind. N°1	All families affected by disaster have one kitchen kit sufficient for adequate and safe preparation and storage of food [...] (large pot, pan/lid, bucket, kitchen knife, wooden spoons, spoons and cups, 1 10-litre jerrycan [...]).	Monitoring reports
Ind. N°2	All families affected by disaster have blankets [...].	Monitoring reports
Ind. N°3	[...]	[...]
Ind. N°4	[...]	[...]

**Note**

Activities must be described in a thoroughly articulated way, with an indication of when their progress should be measured.

#### 4.9. Activities

The operation involves the following activities:

⇒ **Water & Sanitation** Sector (results 1 and 2)

##### A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)

This activity involves carrying out a hydro-geological survey and meetings with local health committees and personnel to identify adequate sites. It is also foreseen to [...].

*Progress:* Results will be evaluated at the end of the survey.

##### A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)

Wells will be of the drilled type, 45 metres deep, covered with [...] and with an AFRIDEV pump [...]. The building will consist of 2 phases: :

1. Preparation of terrain, access road and materials warehouse;
2. Digging;
3. [...]

Local communities will be involved in finding construction material (sand, stones, etc.) [...]

*Progress:* Results will be evaluated at the end of the survey.

##### A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)

The operation involves setting up two Water Management Committees, one for each health centre, through coordination with local Health Committees. Such Water Management Committees will be composed of [...] and have the goal of [...]. The activation of such committees will take place at the same time as the activation of water supply points, to ensure the immediate start of operations when construction work ends.

*Progress:* One month after setting up of the Water Management Committees, a meeting will be arranged with representatives of the Health Committee to verify the progress of work [...].

##### A.2.1. Consultation with women to identify adequate places for building toilet facilities

The operation involves: [...].

*Progress:* [...]

##### A.2.2.. Construction according to international standards of 100 gender-separated latrines [...]

*Progress:* During construction of the latrines contact will be maintained with community representatives; [...]; and every month meetings with women will be organised to verify [...].

##### A.2.3. Training and equipping of 10 persons in charge of maintaining latrines [...]

*Progress:* [...]

⇒ **Health** Sector (results 3 and 4)

B.1.1. Reorganisation of the 2 health centres according to national protocols

[...]

B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres

[...]

B.1.3. Drafting of a health monitoring plan in the two target zones

[...]

B.1.4. Coordination with AWD of vaccination campaign

[...]

B.1.5. Light rehabilitation of the 2 health centres

[...]

B.2.1. Supply of medical materials to the 2 health centres

[...]

B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system

[...]

⇒ **Non-food Items** Sector (result 5)

C.1.1. Consultation with community representatives

[...]

C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”

[...]

**Note**

It is mandatory to include the work plan as an annex

**4.10. Work plan**

See the annexed document

**4.11. Monitoring, evaluation and external audit**

**4.11.1. Monitoring**

The monitoring plan includes several steps to oversee and evaluate the results. The following table defines the Terms of Reference for the monitoring plan and lists the indicators to observe when examining the operation's expected results:

**Note**

This table is a method of representing succinctly the ToRs of the monitoring plan.  
It is included with the text for reasons of simplicity even though, given its size, it should be included as an annex.

**Terms of Reference for the Monitoring Plan**

Expected result	Observed indicator	Source of verification and frequency of data collection	Person in charge	Reporting system	Decision-making process
A.1. The 2 health centres (Dist-one and Dist-two) have access to sufficient water for their needs	40 litres/day per admitted patient 5 litres/day per non-admitted patient 1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	Daily monitoring record	Person in charge of water outlet	Verification of registry by chief of operation	Weekly team meeting with doctor responsible for area
	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Daily visit and weekly report	Doctor responsible for area	Verification of report by Program Manager	Weekly team meeting with doctor responsible for area
	No faecal contamination (from coliforms) per 100 ml from source	Monthly laboratory exam	Laboratory director	Verification of results by Program Manager	Immediate intervention if standards not met
A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where the displaced population resides	Women can safely use toilet facilities	Monthly focus groups with a sample of women	Community leader	Meeting of community leaders and program manager	Weekly team meeting with doctor responsible for area
	100 latrines built and used appropriately	Technical evaluation at end of construction	Program Manager	Technical Report	Weekly team meeting with doctor responsible for area
	Latrines are at a minimum distance of 50m from dwellings	[...]	[...]	[...]	[...]
B.1. The organisation of services is strengthened in the 2 health centres (Dist-one and Dist-two, 15.000 users/year)	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
B.2. The 2 health centres (Dist-one and Dist-two, 15.000 users/year) are supplied with medical materials assuring their functioning	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
C.1. 5.000 family groups classified as "vulnerable" are provided with minimum household items.	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]





#### 4.11.2. Evaluation

- Is an evaluation foreseen during the operation?  
Yes ☐ No ☒
- Is an evaluation foreseen after the operation?  
Yes ☒ No ☐

Please see the annexes for the general Terms of Reference needed for the final evaluation.

#### 4.11.3. External audit

- Is an audit foreseen during the operation?  
Yes ☐ No ☒
- Is an audit foreseen after the operation?  
Yes ☐ No ☒

### 5. RISKS AND ASSUMPTIONS

#### 5.1. Pre-conditions

The minimum conditions to begin operations are now assured by the World Bank's effort, which has re-established communication [...].

The main obstacle is therefore represented by the occurrence of new disasters [...].

#### 5.2. Assumptions and risk assessment profile

The analysis of external conditions and risk factors can be broken down as to activities, results and objectives, indicated in the following table:

External conditions – Risk factors	Impact	Prevention / Damage reduction measures
<b>Level: pre-conditions → activities</b>		
Access to target areas assured for entire duration of operation	Impossibility / delays in carrying out foreseen activities	⇒ Considering the effort already in place by local authorities [...], there are currently no particular elements of danger [...].
<b>Level: activities → expected results</b>		
Risk of contamination of aquifers in the proximity of Health Centres	Grave health risk for users and nearby population	⇒ Possibility of drilling deeper well (remaining within 60 metres to avoid installation of electric pumps); ⇒ Possibility of moving water point beyond the 200 metres foreseen, reorganising the collection system [...].
Active participation of women and local communities to the Latrine Program	Worsening of the hygienic conditions	⇒ Training of personnel in charge of latrine maintenance ⇒ Workshops and focus group with women
[...]	[...]	⇒ [...]

<b>Level: expected results → specific objective</b>		
Uncontrolled new influx of displaced persons, producing new environmental pressure in affected areas.	Higher risk of contamination in affected areas [...]	⇒ Different location of latrines [...]; ⇒ Flexibility in the use of budget funds to cope with new needs, without changing the project objectives
Effective co-ordination with AWD (purchase and distribution of medical materials)	Disponibilità di medicinali non adeguata alle necessità	⇒ Meeting con AWD almeno bi-settimanali
[...]		
<b>Level: specific objective → main objective</b>		
[...]	[...]	⇒ [...]

### 5.3. Security

#### 5.3.1. Situation in the field

There are currently no particular security problems, both concerning communications and the situation in the target villages [...].

#### 5.3.2. Have you established a specific security protocol for this operation?

Yes ☐ No ☒ Standard procedures ☒

If yes please elaborate:

Hox's code of conduct states the following:

- [...].HOx defines the procedures in full coordination with the international agencies active in the area [...];
- [...] HOx has drafted an emergency alert plan with several procedures according to risk level [...];
- [...] an evacuation plan is in place [...].

#### 5.3.3. Have you a specific plan for security-related and medical evacuations for this operation?

Yes ☒ No ☐ Standard procedures ☐

If yes please elaborate:

The emergency alert system is organised as follows:

- Yellow level: [...] behaviour [...] communication [...]
- Orange level [...]
- Red level [...]

**5.3.4. Are your field staff and expatriates informed of and trained in these procedures?**

Yes ☒ No ☐

**6. RESOURCES REQUIRED**

**6.1. Total budget (point 11.1.)**

Total funding budgeted for entire operation amounts to EUR 555.319,30.

**6.2. Human resources**

**6.2.1. Staff included in Title 1: “Goods and services delivered to the beneficiaries”**

Status	Function and tasks
EXP.	<b>Hydrogeologist</b> with the following functions: ⇒ Identify sites and follow construction work of the 2 pumps close to the Health centres; ⇒ Project and implement the construction of latrines.
EXP.	<b>Program Manager (Doctor)</b> with the following functions: ⇒ Pro-rate salary (3 months) for the activities related to overseeing the reorganisation work for the 2 Health centres.
EXP.	<b>HOx medical and health correspondent</b> whose function is to organise and relaunch the surveillance activities and national protocols [...]
LOCAL	<b>Professional nurses</b> whose task is to assure the reorganisation of Health centres, with the following functions: ⇒ On the job training for second-level nursing personnel; ⇒ Supporting the vaccination campaign; ⇒ [...]

The cost for personnel included in Title 01 has been estimated at EUR 54.290,00.  
The estimate is based on the salary policy at HOx and the market costs in Interland.

**6.2.2. Staff included in Title 2: “Support costs”**

Status	Funzione e compiti
EXP.	<b>Program Manager (Doctor)</b> with the following functions: Pro-rate salary (5 months) as coordinator of the operation's activities and of the monitoring plan
LOCAL	<b>Administrator</b> tasked with managing the administrative part of the project, in coordination with the Program Manager.
LOCAL	<b>Logistics person</b> tasked with supporting the operation's activities, procurement and materiel logistics [...]
LOCAL	<b>Guards</b> assuring the security of the office and warehouse [...]
HQ	<b>Reference person at HOx's HQ</b> , charged with overseeing and monitoring the operation, to ensure its correct evolution and implementation [...].

The cost for personnel included in Title 02 has been estimated at EUR 56.100,00.  
The estimate is based on the salary policy at HOx and the market costs in Interland.

### 6.3. Material resources

#### 6.3.1. Equipment needed. Describe the procedure to be followed for the procurement of equipment.

Item	N°	Procurement procedures	Notes
<b>PURCHASE</b>			
Pumps	2	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Unit cost = € XXX (market cost).	AFRIDEV model
Office supplies	[...]	[...]	[...]
[...]	[...]	[...]	[...]
<b>RENTAL</b>			
4 X 4	1	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = € XXX (market cost).	Model [...]
[...]	[...]	[...]	[...]
<b>DEPRECIATION</b>			
Radio	2	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 1 year); ⇒ Value of goods = XX; ⇒ Foreseen depreciation plan: [...]	Model [...]
4 X 4	1	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 2 years); ⇒ Value of goods = XX; ⇒ Foreseen depreciation plan: [...]	Model [...]

#### 6.3.2. Goods to be purchased. Describe the procedure to be followed for the awarding of contracts.

Item	N°	Procurement procedures	Notes
<b>PURCHASE</b>			
Medical material	See annexes for details	⇒ Open local call for bids (as indicated in ANNEX V); ⇒ Cost of lot = € 182.500.	[...]
Various construction material (construction of wells, small rehabilitation interventions, latrines)	[...]	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = € xxxx, according to market costs verified in country.	[...]
[...]	[...]	[...]	[...]
<b>RENTAL</b>			
[...]	[...]	[...]	[...]
<b>DEPRECIATION</b>			
[...]	[...]	[...]	[...]

**6.3.3. If the operation requires the purchase of medicines and/or medical equipment: Do you have standard procedures for the purchase, handling and storage of these medicines/equipment?**

Yes ☒ No ☐

H0x standard procedures

H0x has had in place for years [...], according with the procedures set by the WHO.

Supplier certification procedure

H0x has a medical department, whose head is responsible for [...].

**7. *PERSPECTIVES OF THE HUMANITARIAN ORGANISATION IN TERMS OF LINKING RELIEF, REHABILITATION AND DEVELOPMENT***

**7.1. This (or similar) operation is under way since**

The proposed operation is an institutional support type of operation, already implemented by our organisation, including in Interland. We refer particularly to the [...] operations which have allowed to verify [...] It is finally important to note that [...]

**7.2. Describe the expected level of sustainability**

Two areas have been considered foremost related to sustainability:

Operational capacity of Health centres

The sustainability level of health centres remains tied to the financial means assured by the Ministry of Health, which continues to pay the salaries of medical and paramedical personnel, and by AWD which supplies essential medicines and manages the vaccination program [...].

We presume that the intervention, overall, will bring a better allocation of resources, giving the Ministry a better financial capacity through a reorganisation of its activities and overseeing of the services it provides [...].

The cost recovery system currently in place allows the coverage of XX% of structure costs [...].

Maintenance of latrines

The use of latrines in the area is widely spread and tested [...].

The operation, by supervising the work of the persons responsible for the latrines, will strengthen and verify the measures intended to [...].

In this area it should be noted that, during the assessment and feasibility phase, we have observed that there was attention on the part of the community leaders of the target groups of displaced persons (the beneficiaries of the construction of latrines) and on the part of women [...].

**7.3. Continuum strategy**

H0x is already active in the Cordoba region (programmes of [...] – see Chapter 3) and a final assessment is foreseen to define what measures should be adopted, if any, to ensure the continuity of the interventions. Contacts with

AWD and the ministry of Health are already underway to discuss possible support action for the Health centres. A project idea is currently being defined for [...].

## 8. **MAINSTREAMING**

### Human Rights

The present proposal is intended to meet the needs of the population displaced by the disaster [...] All necessary precautions have been taken to verify the impact on the local population, to avoid any possible clash with the residents who have already been affected by the disaster [...].

### Gender

According to the latest census, carried out in the year XXXX, the percentage of women (XX%) among the population in the target districts is much higher than men, because of scarce work opportunities which have pushed the male component to emigrate to nearby cities and to the capital. In this context, the intervention takes into account the heavier burden on women [...] and is based on the need for adequate, continuous discussion [...] Some activities, such as the distribution of [...] have been proposed with the goal of [...].

### Environment

The operation intends to limit environmental pressure and source pollution through the construction of latrines [...].

#### **Note**

If cost items are budgeted under the chapter “*Visibility*”, it is necessary to include a detailed Visibility Plan

## 9. **VISIBILITY PLAN AND COMMUNICATION STRATEGY**

The Visibility Plan is organised as follows (see the plan itself, in **annex**, for more details):

- a. Ample visibility will be assured through large boards with the logos of ECHO and HOx in the Health centres and the communities where the latrines will be built [...];
- b. T-shirts and doctors' white coats with the logos of ECHO and HOx will be donated to medical and paramedical personnel [...];
- c. During the meetings with local authorities and community leaders [...] the scope of the intervention and the roles of ECHO and HOx will be thoroughly explained [...];
- d. Radio programs [...];
- e. [...].

## **10. FIELD COORDINATION AND LOCAL IMPLEMENTING PARTNERS**

### **10.1. National and local authorities**

HOx is officially recognised in Interland (Registry act no. XXX) as a non-governmental entity and as such is exempt from [...].

### **10.2. Field co-ordination fora**

HOx participates in the local dialogue forum with other organisations, whose function is to [...] The goal of the participation of HOx to the forum is [...] HOx is also a partner of the Ministry of Health in defining protocols [...]

### **10.3. Implementing partner(s)**

#### **10.3.1. Name and address of implementing partner(s)**

Dist-one Health Centre and Dist-two Health Centre

#### **10.3.2. Role of implementing partner(s) in this operation**

In both cases the partner's role is to coordinate, within its assigned competence (providing of personnel and resources), the reorganisation of the two health centres, the execution of vaccine programs and the monitoring of the ongoing health-care activities.

#### **Note**

An agreement protocol is not mandatory. It appears in this example to reinforce the notion of partnership.

#### **10.3.3. Type of relationship with implementing partner(s)**

An agreement protocol has been signed with the health centres (see annexes for more detail.)

#### **10.3.4. History of previous collaboration with implementing partner(s)**

HOx has been working for several years with the Health Ministry and the Regional Health Directorate for Cordoba [...]. It should be particularly noted that [...].

#### **10.3.5. Name and title of the person(s) authorised to represent the implementing partner(s) with regard to this operation**

Mr XX (Dist-one) and Mrs XY (Dist-two)

#### **Note**

Include in this section the contracting procedures that will be followed and the names of potential contractors, if known. In case of decision not to follow ECHO procedures, an accurate explanation must be provided.

### **10.4. Contractor(s) and procedure envisaged for the award of contracts**

#### **10.4.1. Name and address of contractor(s)**

A list of potential contractors is currently not available.

#### **10.4.2. Role of contractor(s) in implementing this operation**

**10.4.3. Describe the procedure followed for the selection of contractor(s)**

All the procedures to be employed for work, service and supply contracts are in accordance with the provisions of Annex V (see also paragraphs 6.3.1. and 6.3.2. for more detail).

**11. FINANCIAL INFORMATION**

**11.1. Total budget of the operation:** € 555.319,30

**11.2. Contribution requested from European Community:** € 472.021,41  
**Percentage of the total amount:** 85 %

**11.3. Co-financing:**

11.3.1. Indicate your own contribution: € 27.765, 97

11.4.1. Contributions by other donors: € 55.531,93

Name: **AWD**

**11.4. Pre-financing requested from European Community:** € 377.617,12  
**Percentage of the total EC contribution:** 80%

**11.5. Eligibility of expenditures, date: dd-mm-yy**

(4.3.) Start date of the operation: dd-mm-yy

11.5.1. If the operation has already started explain the reason that justifies that situation: **[NOT APPLICABLE]**

- Primary emergency operation ☐
- Emergency operation ☐
- Other ☐

Please elaborate:

11.5.2. If the eligibility date of expenditure precedes the start date of the operation please justify this request **[NOT APPLICABLE]**

**12. ADMINISTRATIVE INFORMATION**

**12.1. Humanitarian organisation's official name, address, phone/fax n°**  
HOx [...]

**12.2. ECHO FPA number, (if applicable)**  
[...]

**12.3. Name and title of legal representative**  
[...]



**12.4. Name, telephone, fax and e-mail of desk officer at HQ**

[...]

**12.5. Name, telephone, fax and e-mail of the representative in the country of operation**

[...]

**12.6. Bank account**

- Name of bank: [...]
- Address of branch: [...]
- Precise denomination of the account holder: [...]
- Full account number (including bank codes): [...]
- IBAN account code, (or BIC country code if the IBAN code does not apply): [...]

**13. CONCLUSIONS AND PARTNER'S COMMENTS**

**Note**

Include in this section the modality of *exchange rate record* envisaged for the humanitarian organisation's accounts (in conformity with General Condition, art. 2.4.). If approved, ECHO will include the procedure in the Grant Agreement (art 9: *Other Specific Condition applyng to the*

LOGICAL FRAMEWORK (ECHOTrain Project): <i>Proposal</i>				
	INTERVENTION LOGIC	OBJECTIVELY VERIFIABLE INDICATORS	SOURCES OF VERIFICATION	RISKS AND ASSUMPTIONS
PRINCIPAL OBJECTIVE	Support the restoring of the essential conditions for public services in the areas hit by disaster in Cordoba Province			
SPECIFIC OBJECTIVE	Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 5.000 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)	1. Level of water-related pathologies brought back to levels preceding disaster 2. Vaccine coverage brought back to levels preceding disaster 3. Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones 4. Coverage of essential health services assured according to parameters preceding disaster 5. Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life) (5.000 persons) 6. Reference and surveillance system restored and operational at the end of operation 7. After 4 months, self-sufficient latrine committees (10 committees) in areas hosting displaced persons (ability to call autonomously 1 meeting per month per committee) 8. [...]	1, 4. Survey Forms, Monthly Report from Health Centres 2. AWD Reports and Monthly Report from Health Centres 3, 5, 6, 7. Monitoring Reports and Final Evaluation Report	Risk of new influx of displaced persons, worsening environmental pressure in affected zones
RESULTS				
	A. Water & Sanitation			
	A.1. Two Health centres (Dist-one and Dist-two) have access to sufficient water for their needs, through the drilling of 2 wells.	1. 40 litres/day per patient admitted to hospital 2. 5 litres/day for visiting (non-admitted) patients 3. 1.000 litres/day for other centre services (laundry, washing, kitchen, etc) 4. Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems) 5. Water points are fully sustained at the end of intervention 6. [...]	1, 2, 3, 4. Monthly Report from Health Centres 5. Final Evaluation Report	Active participation of Water committees in maintenance of wells  [...]
	A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where displaced persons reside.	1. 100 latrines built and used appropriately 2. Women can safely use toilet facilities 3. Latrines are at a minimum distance of 50m from dwellings 4. [...]	1. Final technical report (technical fiche) 2. Community Leaders Report (focus group and workshop) 3. Final technical report (technical fiche)	Uncontrolled influx of displaced persons, worsening environmental pressure in affected zones  [...]
	B. Health			
	B.1. Organisation of essential services (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system) restored in 2 health centres (Dist-one and Dist-two – 15.000 users/year.)	1. The most common causes of mortality and disease are identified, documented and monitored after the end of the operation in both centres. 2. All members of the community, including displaced persons, have potential access to priority health care 3. Representatives of the health committees are regularly consulted according to local regulations [...]. 4. Target health centres adopt national standards and protocols 5. Methods of coordination with national health system are in place four months after beginning of operation 6. Surveillance system is implemented within the 4th month and data are regularly provided to the relevant institutions [...]. 7. [...]	Monthly report from health centres	[...]
	B.2. Supplying of medical material to 2 health centres (Dist-one and Dist-two – 15.000 users/year) to ensure that services can be provided (program managed in coordination with AWD)	1. Patients have adequate medicines [...] 2. [...]	Monthly report from health centres	Active cooperation with AWD in supply of medicines  [...]
	C. Non food Items			
	C.1. Minimum essential household items (kitchen kit and blankets) provided to 5.000 families classified as "vulnerable".	1.All families affected by disaster have one kitchen kit sufficient for adequate and safe preparation and storage of food [...] 2.All families affected by disaster have blankets [...]. 3. [...]	Monitoring Reports	[...]
ACTIVITIES		MEANS	COSTS	
	A. Water & Sanitation			
	A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)	Construction labour Purchase of material for construction of wells Purchase of 2 Afridev pumps Rental of drill	MATERIALS AND WORK = EUR 16,000	Risk of contamination of aquifers in the proximity of Health Centres
	A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)			
	A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)			
	A.2.1. Consultation with women to identify adequate places for building toilet facilities	Construction labour Purchase of material for construction of latrines	MATERIALS AND WORK = EUR 33,200	Active participation of women
	A.2.2. Construction according to international standards of 100 gender-separated latrines			Active participation of community in maintenance of wells
	A.2.3. Training and equipping of 10 persons in charge of maintaining latrines			[...]
	B. Health			
	B.1.1. . Reorganisation of the 2 health centres according to national protocols	Labour for small rehabilitation work Purchase of materials for rehabilitation	LABOUR AND MATERIALS= EUR 40,000	Active participation of medical personnel of health centres
	B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health			Risk of halt of salary payments to medical personnel
	B.1.3. Drafting of a health monitoring plan in the two target zones			[...]
	B.1.4. Coordination of vaccination campaign with AWD			
	B.1.5. Small infrastructure work in the two Health centres			

	B.2.1. Supply of medical materials to the 2 health centres	Medical material	MEDICINES = EUR 182,500	Active participation of medical personnel of health centres
	B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system			Risk of halt of salary payments to medical personnel [...]
	C. Non food Items			
	C.1.1. Consultation with community representatives	Purchase of kitchen kits and blankets	MATERIALS = EUR 95,000	Active participation of community representatives in determining what families are vulnerable  Access to target areas assured for population census and kit distribution [...]
	C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”			
	Project Management			
	Technical personnel (TITLE 01)	<u>Expatriate Personnel</u> Project Manager Doctor Hydro-geologist <u>Local Personnel</u> Nurses	EXPATRIATE STAFF= EUR 36,050 LOCAL STAFF = EUR 18,240	Access to target areas assured for entire duration of operation
	Management personnel (TITLE 02)	<u>Expatriate Personnel</u> Project Manager HQ Personnel <u>Local Personnel</u> Administrator Logistics Person Guards	EXPATRIATE STAFF = EUR 27,700 LOCAL STAFF = EUR 28,400	[...]
	Logistics	Office Rental of 4x4 4x4 (depreciation) 2 Radios (depreciation) Running costs of 2 vehicles Running costs of 2 radios	TRANSPORT = EUR 19,400 COMMUNICATIONS = 4,800 OFFICE = EUR 10,200	[...]
	Monitoring / Evaluation			
	Execution of Monitoring Plan	Monitoring Plan (Terms of reference)		[...]
	Execution of Final Evaluation	External Final Evaluation (Terms of reference)	EXTERNAL EVALUATION = EUR 5,000	[...]
	Other Services			
	Visibility	Visibility Plan	VISIBILITY FUNDS = EUR 2,500	
			PRE-CONDITIONS	Access to target areas assured for entire duration of operation

### WORK PLAN (ECHOTrain Project): Proposal Model

[illegible]

MILESTONES	
1.	Planning of activity for siting of water outlets completed by first week of second month
2.	Health and hydro-geological surveys completed by third week of second month
3.	Siting of water outlets completed by first week of third month
4.	Guaranteed functioning of water outlets in health centres by first week of fourth month
5.	Water committees set up and functioning by second week of fourth month
[...]	

[illegible]

KEY	
PM = Project Manager	
HYD = Hydro-geologist	
HCD = Health centre Director	
RD = Person responsible of local Districts	
RLC = Person responsible of local communities	
ROLE	
L = Lead Role	
S = Support Role	



EUROPEAN COMMISSION  
HUMANITARIAN AID OFFICE (ECHO)

GRANT AGREEMENT

**Humanitarian Organisation:** Hox

**Title of the Operation:** Restoring of minimal health conditions for the populations affected by the conflict and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland

**Grant agreement number:** ECHO/[...]

## BUDGET BREAKDOWN

<b>Total estimated budget</b>	<b>555.319,30</b>
Total direct costs of the Operation	<b>518.990,00</b>
<b>Maximum EC contribution</b>	<b>472.021,41</b>
Percentage of total eligible costs	<b>85,00%</b>

Code	Heading	Initial	Modified	Actual Budget
<b>01</b>	<b>Goods &amp; services delivered to the beneficiaries</b>	<b>420.990,00</b>		
<b>01.01.</b>	<b>Food Security</b>			
01.01.01.	Basic food security			
01.01.02.	Other food distribution			
01.01.03.	Food for work			
01.01.04.	School feeding			
01.01.05.	Public Canteens			
01.01.06.	Agricultural activities			
01.01.07.	Livestock			
01.01.08.	Fisheries			
01.01.80.	Training, local capacity building			
01.01.99.	Other food and security			
<b>01.02.</b>	<b>Water and Sanitation</b>	<b>49.200,00</b>		
01.02.01.	Waste disposal and latrines	33.200,00		
01.02.02.	Rural water sources	16.000,00		
01.02.03.	Urban and municipal supply system			
01.02.04.	Water treatment			
01.02.80.	Training, local capacity building			
01.02.99.	Other water and sanitation			
<b>01.03.</b>	<b>Health</b>	<b>222.500,00</b>		
01.03.01.	Primary health care	182.500,00		
01.03.02.	Secondary health care			
01.03.03.	General health care : primary and secondary			
01.03.04.	Emergency health care			
01.03.05.	Epidemics			
01.03.06.	Drugs supply			
01.03.07.	Routine vaccination			
01.03.08.	Support of specialised institutions			
01.03.09.	Disabled population			
01.03.10.	Health education and training			
01.03.11.	Family planning			
01.03.12.	AIDS and STD			
01.03.13.	Targeted control of endemic diseases			
01.03.14.	Psychosocial			
01.03.15.	Rehabilitation of medical facilities	40.000,00		
01.03.80.	Training, local capacity building			
01.03.99.	Other health			

Code	Heading	Initial	Modified	Actual Budget
<b>01.04.</b>	<b>Nutrition</b>			
01.04.01.	Therapeutic feeding			
01.04.02.	Supplementary feeding			
01.04.03.	Supplementary and Therapeutic feeding			
01.04.04.	Nutritional education			
01.04.05.	Surveys and monitoring			
01.04.80.	Training, local capacity building			
01.04.99.	Other nutrition			
<b>01.05.</b>	<b>Shelter</b>			
01.05.01.	Emergency shelter			
01.05.02.	Post emergency/semi-permanent shelter			
01.05.80.	Training, local capacity building			
01.05.99.	Other shelter			
<b>01.06.</b>	<b>Non food items</b>	<b>95.000,00</b>		
01.06.01.	Domestic items	95.000,00		
01.06.02.	Heating and cooking fuel			
01.06.03.	Survival items			
01.06.04.	Hygiene items			
01.06.05.	Educational items			
01.06.06.	Resettlement items			
01.06.80.	Training, local capacity building			
01.06.99.	Other non food items			
<b>01.07.</b>	<b>Rehabilitation/continuum</b>			
01.07.01.	Permanent shelter			
01.07.02.	Educational facilities			
01.07.03.	Social services			
01.07.04.	Self-sufficiency			
01.07.80.	Local capacity building/training			
01.07.99.	Other rehabilitation			
<b>01.08.</b>	<b>Disaster preparedness and mitigation</b>			
01.08.01.	Infrastructure support			
01.08.02.	Advocacy and public awareness raising			
01.08.03.	Mitigation works			
01.08.04.	Mapping and data computerization			
01.08.05.	Education			
01.08.06.	Early warning systems			
01.08.07.	Research and dissemination			
01.08.08.	Facilitation of co-ordination			
01.08.09.	Institutional strengthening			
01.08.80.	Local capacity building/training			
01.08.99.	Other DIPECHO			
<b>01.09.</b>	<b>Special mandates</b>			
01.09.01.	Protection			
01.09.02.	Facilitation of co-ordination			
01.09.03.	Info management and dissemination			
01.09.04.	Family reunification/tracing			
01.09.05.	Care and maintenance			
01.09.06.	Facilitation of return			
01.09.80.	Local capacity building/training			
01.09.99.	Other special mandates			
<b>01.10.</b>	<b>Specific actions</b>			
01.10.01.	Logistics			
01.10.02.	Security and protection			
01.10.03.	Emergency rehabilitation infrastructure			
01.10.04.	Capacity building (NGOs and other humanitarian actors)			
01.10.80.	Local capacity building/training			
01.10.99.	Other specific actions			

Code	Heading	Initial	Modified	Actual Budget
<b>01. 11.</b>	<b><i>De-mining and awareness</i></b>			
01. 11.01.	De-mining			
01. 11.02.	Awareness			
01. 11.80.	Local capacity building/training			
01. 11.99.	Other de-mining			
<b>01. 12.</b>	<b><i>International transport</i></b>			
01. 12.01.	Maritime			
01. 12.02.	Overland			
01. 12.03.	Air			
<b>01. 13.</b>	<b><i>Personnel</i></b>	<b>54.290,00</b>		
01. 13.01.	Expatriate staff	36.050,00		
01. 13.02.	Local staff	18.240,00		
<b>02.</b>	<b>Support costs</b>	<b>98.000,00</b>		
<b>02 01.</b>	<b><i>Personnel</i></b>	<b>56.100,00</b>		
02. 01.01.	Expatriate staff	27.700,00		
02. 01.02.	Local staff	28.400,00		
<b>02 02.</b>	<b><i>Local logistic costs</i></b>	<b>24.600,00</b>		
02. 02.01.	Office expenses	9.800,00		
02. 02.02.	Office consumable and supplies	400,00		
02. 02.03.	Local contracted transport	8.000,00		
02. 02.04.	Distribution, storage and daily labour			
02. 02.05.	Running costs	6.400,00		
02. 02.06.	Other			
<b>02 03.</b>	<b><i>Durable equipment</i></b>	<b>9.800,00</b>		
02. 03.01.	Vehicles	5.000,00		
02. 03.02.	Communication	4.800,00		
02. 03.03.	Other			
<b>02 04.</b>	<b><i>Security</i></b>			
<b>02 05.</b>	<b><i>Feasibility, need assessment and other studies</i></b>			
<b>02 06.</b>	<b><i>Specialised services</i></b>	<b>5.000,00</b>		
02. 06.01.	External quality and quantity controls			
02. 06.02.	External evaluation	5.000,00		
02. 06.03.	External audit			
<b>02 07.</b>	<b><i>Insurance costs</i></b>			
<b>02 08.</b>	<b><i>Visibility and communication programmes</i></b>	<b>2.500,00</b>		
<b>02 09.</b>	<b><i>Others to be specified in the proposal</i></b>			
<b>03</b>	<b>Indirect costs</b>	<b>36.329,30</b>		
<b>04</b>	<b>Contingency reserve (pro memoria)</b>	<b>0,00</b>		



## **"CASE STUDY"**

# **GUIDED EXERCISE FOR THE SUBMISSION OF OPERATION PROPOSALS TO ECHO**

## **(Phase III. *Interim Report*)**

In collaboration with



With the contribution of





## INSTRUCTIONS FOR USE

This section, relative to the submission of the Interim Report, includes a model of Interim Report, built according to the specifications of the new FPA and to the new requests ECHO poses for the submission of the reference reporting. Documents in this section include:

- ➔ Interim Narrative Report
- ➔ Interim Financial Report
- ➔ Logical Framework
- ➔ Workflow Plan

The purpose of this section is to let personnel understand the new requirements introduced by ECHO in the submission of Reports for the interim phase.

It is worth to recall that the Interim Report – both the Interim Narrative Report and financial annexes (Interim Financial Report) – must be submitted according to the following procedure, which differentiates between:

- ➔ Primary emergency, emergency operations and other operations lasting under 6 months;
- ➔ Operations lasting more than 6 months.

TYPE OF PROJECT	WHEN?
<p>&lt; 6 MONTHS</p> <p>(PRIMARY EMERGENCY, EMERGENCY, OTHER OPERATIONS LASTING A MAXIMUM OF 6 MONTHS)</p>	<ul style="list-style-type: none"> <li>➔ At least 1 month before end of implementation period, if not specified otherwise (the date is set at point 4.1 of the Grant Agreement), with a detail of the expenditure up to <b>15 days</b> prior to the submission of the Report.</li> <li>➔ In case of <b>100% funding</b>, the NGO must submit to ECHO, besides the financial report, also an <b>inventory</b> of the remaining supplies, vehicles and equipment, specifying their use (General Conditions, art. 7.4). The EU must inform the NGO within 15 days from the reception of the inventory proposal, specifying in writing its acceptance or refusal (General Conditions, art. 7.4).</li> <li>➔ In case of <b>co-financing</b>, the NGO must submit the <b>inventory</b> of the remaining supplies, vehicles and equipment specifying their plans for the transfer after the end of the operation (General Conditions, art. 7.3).</li> </ul>
<p>&gt; 6 MESI</p> <p>(OPERATIONS WITH AN IMPLEMENTATION PERIOD OVER 6 MONTHS)</p>	<ul style="list-style-type: none"> <li>➔ The submission date is specified in the Grant Agreement (art. 4.1.). The Interim Financial Report must normally be sent to ECHO halfway through the project implementation period, with a detail of the expenditure up to <b>30 days</b> prior to the submission of the Report.</li> </ul>

## INTERIM NARRATIVE REPORT

The Interim Narrative Report must be written according to the following principles:

- ➔ Focus attention on activities carried out since inception of operation and on results obtained;
- ➔ Where the reference data have not been modified in the text, write NOT APPLICABLE and do not duplicate data already included in the operation proposal;
- ➔ Include in the appropriate sections all changes to the situation initially described and all new information that may have an impact on the execution of the operation;

- ➔ Update the Logical Framework and the Work Plan on the basis of results obtained, allowing a comparison with the documents submitted with the operation proposal.

The Interim Narrative Report thus focuses mainly on Section 4 of the form, where it is necessary to update, verify, complete and specify the information provided with the operation proposal (in particular Section 4.5. regarding the beneficiaries).

### INTERIM FINANCIAL REPORT

The Interim Financial Report must be written according to the following principles:

- ➔ Use exclusively the format of ANNEX 2, "Interim Financial Report".
- ➔ Use columns INITIAL, MODIFIED and ACTUAL according to the following table:

BUDGET COLUMN	DESCRIPTION
INITIAL BUDGET	Include items from the budget submitted with the Financial Request.
MODIFIED BUDGET	Include the modified budget items in case of expenditure forecasts differing from those initially submitted.
ACTUAL BUDGET	<ul style="list-style-type: none"> <li>➔ In case of <u>Primary Emergency, Emergency projects and other operations lasting not over 6 months</u>, insert the expenditure incurred (committed) up to <b>15 days</b> from the submission of the Interim Financial Report.</li> <li>➔ In case of <u>projects lasting over 6 months</u>, insert the items of expenditure incurred up to <b>30 days</b> from the date of the submission of the Interim Financial Report.</li> </ul>

- ➔ The budget in the Interim Financial Report must feature 6-digit detail, regardless of the type of project

#### **NOTE:**

1. The documents included **do not represent** either **ECHO official documents** or a perfect model of an Interim Report to be replicated when writing an operation proposal and/or in the various phases of execution of an operation;
2. The exercise has been built around the hypothesis of an operation **CO-FINANCED** by ECHO within a **GLOBAL PLAN**. Common sense dictates that in primary emergency and emergency cases the level of detail of this operation proposal will be difficult to attain, and hardly required.
3. The exercise includes a **modification of the ECHO co-financing percentage**, simulating the necessary amendment was already approved by ECHO at the time of the Interim Report submission. In the example the amendment stems from a **50% reduction of the co-financing amount originally set at 10% by another financing entity**.

Any remarks or requests for information can be sent to the following e-mail address:  
[emergenza@coop.i.org](mailto:emergenza@coop.i.org)



## SINGLE FORM FOR HUMANITARIAN AID OPERATIONS

### 1. GENERAL INFORMATION

#### 1.1. Name of humanitarian organisation

HOx (Humanitarian Organisation x)

#### 1.2. FPA number (if applicable)

[...]

**Note**

Include, if applicable, the FPA number

#### 1.3. Purpose of the submission

##### 1.3.1. Proposal

**[NOT APPLICABLE]**

New proposal ☐

Revised proposal ☐

ECHO reference A/

##### 1.3.2. Interim narrative report ☒ date: dd-mm-yy

1.3.3. Preliminary final report ☐ **[NOT APPLICABLE]**

1.3.4. Final report ☐ **[NOT APPLICABLE]**

#### 1.4. Grant agreement number ECHO/[...]

#### 1.5. Implementing rules applicable to this agreement **[NOT APPLICABLE]**

Grant, 100% financing ☐

Grant, co-financing ☐

#### 1.6. Framework of this submission **[NOT APPLICABLE]**

Primary emergency decision ☐

Emergency decision ☐

Ad hoc decision ☐

Global plan decision ☐

DIPECHO ☐

Other, please specify ☐

#### 1.7. Executive summary of operation **[NOT APPLICABLE]**

(4.1.) Title of the operation

(4.2.) Country(ies) and location(s) of implementation

(4.3.) Start date of the operation

(4.4.) Duration in months

(4.5.1.) Total number of direct beneficiaries

(4.5.2.) Identify the status and give details of the beneficiaries

- (4.7.1.) Operation specific objective
- (4.7.2.) Indicators and sources of verification
- (4.8.1.) Expected result 1
- (4.8.n.) Expected result n
- (11.1.) Total budget of the operation: EUR
- (11.2.) Contribution requested from EC: EUR
- (11.5) Eligibility date of expenditure

**Note:** If additional studies have been carried out, this chapter is intended to illustrate the results of such studies. This is fundamental in the event of significant readjustments of the operation

## **2. NEEDS ASSESSMENT [NOT APPLICABLE]**

- 2.1. Date(s) of assessment
- 2.2. Methodology and sources of information used
- 2.3. Organisation/person(s) responsible for the assessment
- 2.4. Problem statement and stakeholder analysis
- 2.5. Findings of the assessment

**Note:**  
See previous callout

## **3. HUMANITARIAN ORGANISATION'S STRATEGY [NOT APPLICABLE]**

- 3.1. Partner's strategy in country and/or region(s) of operation
- 3.2. Link between operation, the findings of the assessment and the problem statement
- 3.3. Is/are there similar operation(s) in the country/region?  
If yes, explain the measures foreseen to avoid overlap/duplication
- 3.3. Previous humanitarian operations with EC grants in the country/ region
- 3.5. Have you discussed this proposal with ECHO's technical assistance office in the country/region of operation?

**Note:** Data must be updated in relation with the advancement of work, especially as regards the beneficiaries.

**Note:** The framework of objectives may not be modified.

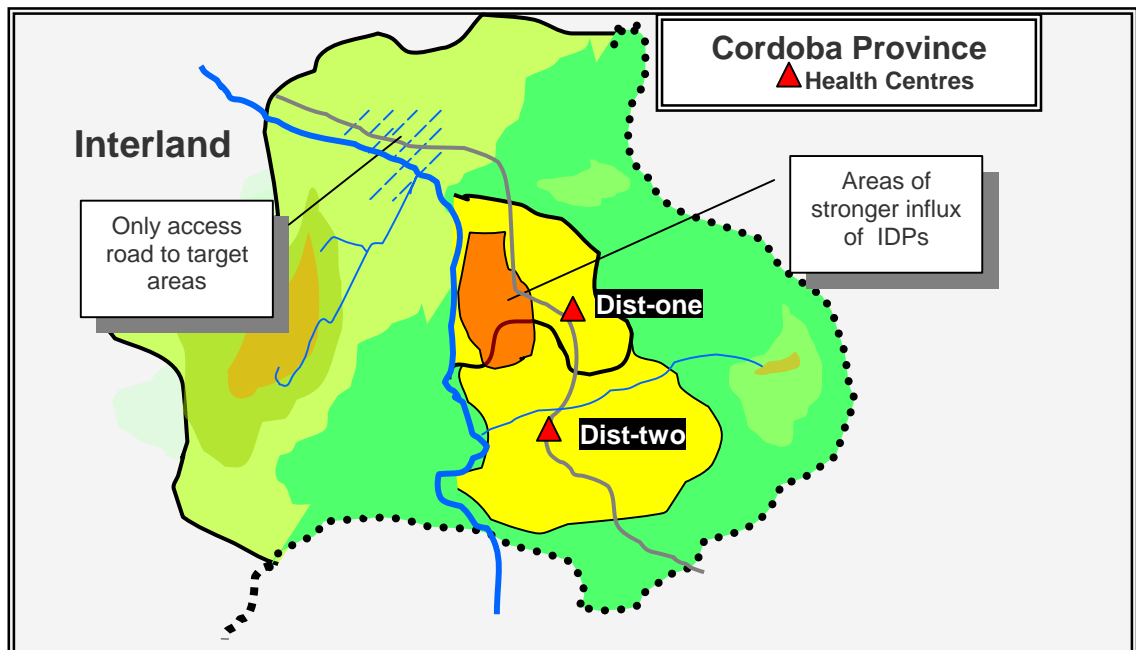
## **4. OPERATIONAL FRAMEWORK**

### **4.1. Title of operation**

⇒ Restoring of minimal health conditions for the populations affected by the disaster and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland”.

#### 4.2. Exact location of the operation

The operation is taking place according to the initial proposal as evidenced in the following map:



**Note:** Insert starting date of operation. In case this date does not correspond with the date in art. 2.2. of the GA, reasons must be explained in detail (an amendment may be needed).

#### 4.3. Start date of the activities in the field, (start date of the operation)

dd-mm-yy as per art. 2.2. of the Grant Agreement.

**Note:** Each request of extension of the implementation period **MUST** be included and motivated in this section, in order to obtain approval/refusal from ECHO

#### 4.4. Duration in months

8 months, as per art. 2.2. of the Grant Agreement

**Note:** Throughout this section, confirm, update and if possible detail more accurately the data contained in the proposal

#### 4.5. Beneficiaries

##### 4.5.1. Total number of direct beneficiaries

In the course of the operation, the number of beneficiaries has risen compared to the estimate contained in the proposal because of the arrival of newly displaced persons.

The total number of beneficiaries at this point can be estimated to be 17.500 (users of health centres and beneficiaries of other services provided by the operation).

#### 4.5.2. Identify the status and give details of the beneficiaries:

Data gathered during the implementation phase allow to update the description of beneficiaries, as indicated in the following table:

**Note:** Update the numbers and data on beneficiaries providing more detail than in the operation proposal.

Type	Status	Number
Displaced Persons	IDPs, some of which just recently arrived from nearby districts, mainly families of farmers raising small animals. In most cases families were able to carry their belongings with them.	7.500
Displaced women in target districts	IDPs.	2.800
Displaced children	IDPs; some cases of scabies have occurred [...].	2.650
Users of health centres in the two districts	Local population. Estimate was correct for both centres.	10.000
Children < 5	Mixed.	9.200
Women classified as "most vulnerable"	Local population. Their number grew after a census and arrival of newly displaced persons.	3.600
Medical and paramedical personnel in the two districts	Local population. The number was updated following minor changes in the health centres' staffing.	123

#### 4.5.3. "Catchment" population

The number of indirect beneficiaries is confirmed to be 25.000 people in both districts.

#### 4.5.4. What are the identification mechanisms and criteria?

Beneficiaries have been identified according to the criteria in the proposal:

Type	Method of selection
Displaced Persons	Census by local authorities conducted during 2nd and 3rd moth of the operation.
Displaced women in target districts	Census by local authorities conducted during 2nd and 3rd moth of the operation.
Displaced children	Census by local authorities conducted during 2nd and 3rd moth of the operation.
Users of health centres in the two districts	Estimate confirmed by data gathered for first campaign of vaccination conducted in the target areas.
Children < 5	Estimate confirmed by data gathered for first campaign of vaccination conducted in the target areas.

<b>Women classified as “most vulnerable”</b>	Identified according to a points system (accommodation, age, number of children, presence/absence of husband, economic activity, extended family, presence of elderly people in family)
<b>Medical and paramedical personnel in the two districts</b>	Personnel employed by health centres.

#### 4.5.5. To what extent and how were the beneficiaries involved in the design of the operation?

During the early period of implementation (first and second month) several meetings have been held with community representatives and groups of women to decide the location of water outlets and the first batch of latrines [...].

For the vaccination campaigns, the [...] mobilised [...]

#### 4.5.6. Sectors of activity

The sectors of activity did not differ from those identified in the operation proposal:

- Sector 1: Water & Sanitation:
  - ⇒ *Rural water sources*: Drilling of 2 wells;
  - ⇒ *Waste disposal and latrines*: Building of 100 gender-separated latrines
- Sector 2: Health
  - ⇒ *Primary health care*: Light rehabilitation and relaunch of activities in the two health centres; relaunch of vaccination activities (in coordination with AWD);
  - ⇒ *Rehabilitation of medical facilities*: Light rehabilitation in the two health centres.
- Sector 3: Non-food Items:
  - ⇒ *Domestic items*: distribution of kitchen kits and blankets to the more vulnerable family groups.

#### 4.5.7. Give the following information for each sector

- Total number of direct beneficiaries

Sector	Total number of direct beneficiaries
<b>Water &amp; Sanitation</b>	17.500 + 123
<b>Health</b>	17.500 + 123
<b>Non-food Items</b>	6.400

- Types of beneficiaries and number of beneficiaries per type

Sector	Category of beneficiaries	N° of beneficiaries per category
<b>Water &amp; Sanitation</b>	Displaced persons	7.500
	Displaced women in target districts	2.800
	Displaced children	2.650
	Estimated users of health centres in the two districts	10.000
	Children < 5	9.200
<b>Health</b>	Displaced persons	7.500
	Displaced women in target districts	2.800
	Displaced children	2.650
	Estimated users of health centres in the two districts	10.000
	Children < 5	9.200
	Medical and paramedical personnel in the two districts	123
<b>Non-food Items</b>	Women classified as "most vulnerable"	3.600
	Displaced women in target districts	2.800

- Location

Sector	Location
<b>Water &amp; Sanitation</b>	Dist-two and Dist-one
<b>Health</b>	Dist-two and Dist-one
<b>Non-food Items</b>	Dist-one (for the most part, also considering newly displaced persons) and Dist-two

#### 4.6. Principal objective

The general objective of the operation is confirmed, in accordance with the objective of the Decision adopted by ECHO for the funding of the Ad Hoc Decision, as:

- ⇒ Contributing to the recreation of the basic conditions for public services in the disaster-affected areas of the Cordoba province.

#### 4.7. Operation-specific objective

##### 4.7.1. Specific objective

The objective of the operation, with the number of beneficiaries updated to reflect the arrival of new IDPs, is confirmed:



- ⇒ Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.500 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)

At the time of the report the operation is aiming to provide the following benefits:

**Note: Actualise the tables**

	Type of beneficiaries (see 4.5.2.)	Foreseen benefits
I	<b>Displaced persons</b>	⇒ Access to safe toilet facilities for the first 3.000 beneficiaries of the newly built latrines; ⇒ Better environmental conditions for the first 3.000 beneficiaries of the newly built latrines; ⇒ Guaranteed minimum medical care for all 7.500 displaced persons
II	<b>Displaced women in target districts</b>	⇒ Supply of minimum required elements for safe preparation and storage of food and water for 2.000 women.
III	<b>Displaced children</b>	⇒ See "I"; ⇒ Assured vaccine coverage for the first group (50%) of identified displaced children
IV	<b>Users of health centres in the two districts</b>	⇒ Less incidency of gastro-intestinal diseases: -20% and -45% recorded in the Dist-one and Dist-two areas; ⇒ Relaunch of health care services begun especially for emergency room and reproductive health,
V	<b>Children &lt; 5</b>	⇒ Assured vaccine coverage for 50% of children; ⇒ Reduction of incidency of gastro-intestinal diseases by 35% and 60% in Dist-one and Dist-two areas respectively
VI	<b>Women classified as "most vulnerable"</b>	⇒ Supply of minimum required elements for safe preparation and storage of food and water for 2.500 women..
VII	<b>Medical and paramedical personnel in the two districts</b>	⇒ Relaunch of general activities and of the implementation of health guidelines, completion of infrastructure work for Dist-one centre (construction of a water outlet), beginning of rehabilitation work for the Dist-two health centre and choosing of location for water outlet, strenghtening of structures ⇒ Overseeing of expert personnel in progress, and identification of critical points to address during second part of operation.

#### 4.7.2 Indicator(s) and source(s) of verification

**Note:** Actualise the data.

Indicators for specific objective			
N.	Indicator	Actualised	Source of verification
Ind. N°1	Level of water-related pathologies brought back to levels preceding disaster in the Dist-one and Dist-two districts (10.000 + 5.000 beneficiaries)	Levels nearly reached (-10% Dist-one, -5% Dist-two) in relation to resident population. Average levels for displaced population in relation to resident population (-45% Dist-one, -20% Dist-two)	Health Centre Reports
Ind. N°2	Vaccine coverage brought back to levels preceding disaster	50% of children received vaccine	Rapporti AWD Health Centre Reports
Ind. N°3	Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones (5.000 beneficiaries)	40 latrines built and currently maintained according to standards defined by committees	Monthly Reports
Ind. N°4	Coverage of essential health services assured according to parameters preceding disaster (10.000 + 5.000 beneficiaries)	Coverage assured for Copertura garantita for emergency room and reproductive health services, partial coverage for [...]	Health Centre Reports
Ind. N°5	Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life) (5.000 persons)	2.000 families have received a kitchen kit and blankets	Monthly Reports
Ind. N°6	Reference and surveillance system restored and operational at the end of operation	Relaunch of protocols [...]	Monthly Reports
Ind. N°7	After 4 months, self-sufficient latrine committees (10 committees) in areas hosting displaced persons (ability to call autonomously 1 meeting per month per committee)	2 of the 4 latrine committees formed have already called meetings to define maintenance and use of latrines	Monthly Reports
Ind. N°8	[...]	[...]	[...]

**Note:** Actualise the data.

## 4.8. Results and indicators

### 4.8.1. Result 1, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 1	A.1. The two health centres (Dist-one and Dist-two) have access to enough water for their needs		
N.	Indicator	Actualised	Source of verification
Ind. N°1	40 litres/day per patient admitted to hospital	50 litres per day guaranteed for the Dist-one centre 20 litres guaranteed for the Dist-two centre (well not active yet)	Monthly health centre reports
Ind. N°2	5 litres/day for visiting (non-admitted) patients	5 litres guaranteed	Monthly health centre reports
Ind. N°3	1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	1.000 litres guaranteed for Dist-one center, 200 for Dist-two	Monthly health centre reports
Ind. N°4	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Water outlet for Dist-one center is maintained adequately	Monthly health centre reports
Ind. N°5	Water points are fully sustained at the end of intervention	Not applicable	Final Evaluation Report
Ind. N°6	[...]		

### 4.8.2. Result 2, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 2	A.2. 2.000 inhabitants have access to adequate and safe toilet services in the areas where the displaced population has settled.		
N.	Indicator	Actualised	Source of verification
Ind. N°1	100 latrines built and used appropriately	40 latrines built; All latrines are used appropriately	Final technical report
Ind. N°2	Women can safely use toilet facilities	Safety problems for women have not been encountered	Bi-monthly leader report
Ind. N°3	Latrines are at a minimum distance of 50m from dwellings	All latrines are up to standard	Final technical report
Ind. N°4	[...]	[...]	[...]

#### 4.8.3. Result 3, relevant indicator(s) and source(s) of verification

Sector	B. Health		
Result 3	B.1. Strengthening of the organisation of services (Dist-one and Dist-two – 15.000 users/year) (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]
Ind. N°5	[...]	[...]	[...]
Ind. N°6	[...]	[...]	[...]
Ind. N°7	[...]	[...]	[...]

#### 4.8.4. Result 4, relevant indicator(s) and source(s) of verification

Sector	Health		
Result 4	B.2. Two health centres (Dist-one and Dist-two – 15.000 users/year) supplied with medical materials to ensure their services can be provided (program in cooperation with AWD.)		
N.	Indicator	Actualised	Source of verification
Ind n. 1	[...]	[...]	[...]
Ind n. 2	[...]	[...]	[...]
Ind n. 3	[...]	[...]	[...]

#### 4.8.5. Result 5, relevant indicator(s) and source(s) of verification

Sector	C. Non-food items		
Result 5	C.1. 5.000 family groups classified as “vulnerable” provided with minimum household items (kitchen kits and blankets.)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]

- ⇒ **Note:** Actualise activities already completed or being executed and describe results obtained;
- ⇒ **Note:** Give reason for, and explain, in this section any adaptations or changes to work plan, provided they contribute to reaching the specific objective and expected results.

## 4.9. Activities

At the time of the present report (3 months 15 days into operation) the following activities have been implemented:

### ⇒ **Water & Sanitation** Sector (results 1 and 2)

#### A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)

The expatriate expert, in cooperation with local representatives of the two target areas, has carried out the hydro-geological analysis and [...].

Through the analysis, adequate sites have been identified and the technical characteristics of the wells have been defined. Depth has been set at 45 metres at the Dist-one centre and 40 metres at the Dist-two centre. [...]

*Progress:* At the end of the work, a technical report was drafted (see annexes for more detail) and a meeting with representatives of the local office and health centres was organised. [...].

#### A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)

During the 2nd and 3rd month the first water outlet for the Dist-one centre was built. The community, as was indicated in the operation proposal, took part in the search for materials and preparation of the terrain. [...].

*Progress:* At the end of the work, lab exams have been carried out to determine water quality and pumping tests were performed. [...] Both tests gave positive results.

#### A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)

During the 3rd month the community has activated, cooperating actively with the director of the Dist-one Health centre, the Water committee. The committee is composed of [...] and has the purpose of [...]

To ensure that it could be immediately operational, a training module was produced. It is structured as follows [...].

*Progress:* The head of the operation has taken part in the activation of the Water committee, by participating in the meetings with the Health committees. [...]

#### A.2.1. Consultation with women to identify adequate places for building toilet facilities

The consultations have taken place [...] and have led to [...].

*Progress:* [...].

#### A.2.2. Construction according to international standards of 100 gender-separated latrines

40 of the 100 latrines foreseen in the project have been built [...]. The remaining 60 [...].

*Progress:* During construction of the latrines constant contact will be kept with community representatives [...].

#### A.2.3. Training and equipping of 10 persons in charge of maintaining latrines

[...]

*Progress:* Every month, meetings with a sample of women will be organised to verify [...].

⇒ **Health** Sector (results 3 and 4)

B.1.1. Reorganisation of the 2 health centres according to national protocols

[...]

B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres

[...]

B.1.3. Drafting of a health monitoring plan in the two target zones

[...]

B.1.4. Coordination with AWD of vaccination campaign

[...]

B.1.5. Light rehabilitation of the 2 health centres

[...]

B.2.1. Supply of medical materials to the 2 health centres

[...]

B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system

[...]

⇒ **Non-food Items** Sector (result 5)

C.1.1. Consultation with community representatives

[...]

C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”

[...]

**Note**

- ⇒ Specify if timetable has been met and, if applicable, what changes have been made and for what reasons;
- ⇒ Specify the impact of such changes
- ⇒ Update the work plan accordingly and include it as an annex.

#### 4.10. Work plan

Work has been carried out according to the timetable, except for the construction of the well for the Dist-two Health centre. Because of a more pressing state of emergency in Dist-one, work has been concentrated initially in this district [...].

For these reasons it has been decided to postpone the beginning of construction of the Dist-two well to the 4th month [...].

For the actualised work plan please see the annexed document.

#### 4.11. Monitoring, evaluation and external audit

##### 4.11.1. Monitoring

The monitoring plan has been defined according to the following table, listing the indicators to observe when examining the operation's expected results:

**Note:** Actualise the Terms of Reference of the monitoring plan in relation to the execution of the plan, highlighting any changes if and where applicable

## Actualised Terms of Reference for the Monitoring Plan

Expected result	Observed indicator	Source of verification and frequency of data collection	Person in charge	Reporting system	Decision-making process
A.1. The 2 health centres (Dist-one and Dist-two) have access to sufficient water for their needs	40 litres/day per admitted patient 5 litres/day per non-admitted patient 1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	Daily monitoring record	<b>Head of warehouse for the Dist-one centre</b>	Verification of registry by chief of operation	Weekly team meeting with doctor responsible for area
	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Daily visit and weekly report	Doctor responsible for area	Verification of report by Program Manager	Weekly team meeting with doctor responsible for area
	No faecal contamination (from coliforms) per 100 ml from source	Monthly laboratory exam	Laboratory director	Verification of results by Program Manager	Immediate intervention if standards not met
A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where the displaced population resides	Women can safely use toilet facilities	Monthly focus groups with a sample of women	Community leader	Meeting of community leaders and program manager	Weekly team meeting with doctor responsible for area
	100 latrines built and used appropriately	Technical evaluation at end of construction	Program Manager	Technical Report	Weekly team meeting with doctor responsible for area
	Latrines are at a minimum distance of 50m from dwellings	[...]	[...]	[...]	[...]
B.1. The organisation of services is strengthened in the 2 health centres (Dist-one and Dist-two, 15.000 users/year)	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
B.2. The 2 health centres (Dist-one and Dist-two, 15.000 users/year) are supplied with medical materials assuring their functioning	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
C.1. 5.000 family groups classified as "vulnerable" are provided with minimum household items.	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]

#### 4.11.2. Evaluation

- Is an evaluation foreseen during the operation?  
Yes ☐ No ☒
- Is an evaluation foreseen after the operation?  
Yes ☒ No ☐

The final Terms of Reference, together with the CVs of the evaluators, will be included with the Pre-final report.

#### 4.11.3. External audit

- Is an audit foreseen during the operation?  
Yes ☐ No ☒
- Is an audit foreseen after the operation?  
Yes ☐ No ☒

**Note:** Fill in this section only if:  
⇒ Risks and assumptions have occurred;  
⇒ Security conditions have changed.

### 5. RISKS AND ASSUMPTIONS [NOT APPLICABLE]

No significant changes in the security conditions are currently identifiable and [...]. Moreover, none of the risks foreseen in the project has occurred, while all assumptions have. We consider it fundamental, however, to [...].

#### 5.1. Pre-conditions

#### 5.2. Assumptions and risk assessment profile

#### 5.3. Security

##### 5.3.1. Situation in the field

##### 5.3.2. Have you established a specific security protocol for this operation?

Yes ☐ No ☒ Standard procedures ☒

For more detail see operation proposal.

##### 5.3.3. Have you a specific plan for security-related and medical evacuations for this operation?

Yes ☒ No ☐ Standard procedures ☐

For more detail see operation proposal.

##### 5.3.4. Are your field staff and expatriates informed of and trained in these procedures?

Yes ☒ No ☐

For more detail see operation proposal.



## 6. RESOURCES REQUIRED

### 6.1. Total budget (point 11.1.)

**Note:** Include in this section:

- ⇒ Percentage of budget already spent / committed;
- ⇒ Update / confirmation of data included in operation proposal (each budget change must be highlighted and justified).

As there has been a decrease in the co-financing percentage from AWD related to the distribution of medicines to the health centres (which have received medicines from other donors), a *supplementary agreement* to increase the percentage of co-financing from ECHO, so as to assure the full range of foreseen operations, has been requested to ECHO.

For this reason, on dd-mm-yy, a written request has been submitted to the Desk Officer with ECHO in Brussels, after previous discussion with the ECHO Field Expert. ECHO **approved the amendment** on dd-mm-yy and **a supplementary agreement has been signed by both parties** on dd-mm-yy (see Annexes for more details).

The new total estimated budget of the operation will amount to EUR 525.609,71.

The budget reduction approved by ECHO is 5% of the total estimated budget of the Budget Breakdown, amounting to EUR 27.765,97 (or half the AWD contribution initially foreseen); ECHO contribution has been raised from 85% (on a budget of EUR 527.553,33) to 89,43% of the new budget, with a decrease of funds initially foreseen by ECHO (from EUR 472.021,41 to EUR 470.077,77) because of an overall 7% reduction of administrative costs.

The percentage of the budget already committed is 42% of the new total estimated budget.

**Note:** Confirm or update the human resources effectively employed for the operation. Each budget change must be highlighted and justified.

### 6.2. Human resources

#### 6.2.1. Staff included in Title 1: “Goods and services delivered to the beneficiaries”

As per initial proposal.

The operation has incurred costs for the staff included under Title 01 for a total amount of € 18.000,00.

The estimate is based on the salary policy at HOx and the market costs in Interland.

#### 6.2.2. Staff included in Title 2: “Support costs”

As per initial proposal.

The operation has incurred costs for the staff included under Title 02 for a total amount of € 24.500,00.

The estimate is based on the salary policy at HOx and the market costs in Interland.

**Note:** Confirm or update the goods and services procured for the operation and the procurement procedures that have been followed. Each budget change must be highlighted and justified.

### 6.3. Material resources

#### 6.3.1. Equipment needed. Describe the procedure to be followed for the procurement of equipment.

As was foreseen, the following purchases / rentals / depreciations have been made:

Item	N°	Procurement procedures followed	Item
<b>PURCHASE</b>			
Pumps	2	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Purchasing cost / unit = € XXX; purchase made [...].	AFRIDEV Model
<b>RENTAL</b>			
4 X 4	1	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = € XXX, rental made [...].	Model [...]
<b>DEPRECIATION</b>			
Radio	2	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 1 year); ⇒ Value of goods = XX; ⇒ Foreseen depreciation plan: [...]	Model [...]
4 X 4	1	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 2 years); ⇒ Value of goods = XX; ⇒ Foreseen depreciation plan: [...]	Model [...]

#### 6.3.2. Goods to be purchased. Describe the procedure to be followed for the awarding of contracts.

Item	N°	Procurement procedures followed	Notes
<b>ACQUISITO</b>			
Medical material (purchase of first lot)	See annexes for details	⇒ Open local call for bids (as indicated in ANNEX V) won by Firm XXX (see annex for further details), estimate of cost determined by market price lists; ⇒ Cost of first lot of material = € 80.000,00.	[...]
Various construction material (construction of wells, small rehabilitation interventions, latrines)	[...]	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = € XXX.	[...]
<b>PURCHASE</b>			
[...]	[...]	[...]	[...]
<b>DEPRECIATION</b>			
[...]	[...]	[...]	[...]

**6.3.3. If the operation requires the purchase of medicines and/or medical equipment: Do you have standard procedures for the purchase, handling and storage of these medicines/equipment?**

Yes ☒ No ☐

For further details, see operation proposal.

**Note**

Fill in this section only if changes have occurred

**7. PERSPECTIVES OF THE HUMANITARIAN ORGANISATION IN TERMS OF LINKING RELIEF, REHABILITATION AND DEVELOPMENT**

**[NOT APPLICABLE]** For the details, see operation proposal.

- 7.1. This (or similar) operation is under way since
- 7.2. Describe the expected level of sustainability
- 7.3. Continuum strategy

**Note**

Fill in this section only if changes have occurred

**8. MAINSTREAMING**

**[NOT APPLICABLE]** For the details, see operation proposal.

**Note**

Mention activities carried out for implementation of Visibility Plan

**9. VISIBILITY PLAN AND COMMUNICATION STRATEGY**

The following activities under the Visibility Plan have been carried out:

- a. Large boards installed with the logos of ECHO and HOx in the Health centres and the communities where the latrines will be built [...];
- b. T-shirts and doctors' white coats with the logos of ECHO and HOx have been donated to medical and paramedical personnel [...];
- c. The scope of the intervention and the roles of ECHO and HOx have been thoroughly explained during meetings with local authorities and community leaders [...];
- d. A radio program has been produced; the first broadcast was done on dd/mm/YY. A rerun will air [...].

**Note**

Insert in this section the activities carried out and/or problems encountered

**10. FIELD COORDINATION AND LOCAL IMPLEMENTING PARTNERS****10.1. National and local authorities**

HOx is officially recognised in Interland (Registry act no. XXX) as a non-governmental entity and as such is exempt from [...]. It was therefore not necessary to [...].

**10.2. Field co-ordination fora**

HOx has participated in two meetings of the local dialogue forum with other organisations [...] the meetings have been held in the capital [...] on dd/mm/YY in order to discuss [...] it has been decided [...]

**Note**

Update or confirm in this section the data contained in the proposal

**10.3. Implementing partner(s)****10.3.1. ~~Name and address of implementing partner(s)~~**

As per initial proposal: Health Centre of Dist-one and Health Centre of Dist-two.

**10.3.2. Role of implementing partner(s) in this operation**

In both cases the partners have participated actively, within their assigned competence (providing of personnel and resources), in [...]. To actualise the census, besides, the partners have carried out two surveys [...].

**10.3.3. Type of relationship with implementing partner(s)**

As per initial proposal.

**10.3.4. History of previous collaboration with implementing partner(s)**

As per initial proposal.

**10.3.5. Name and title of the person(s) authorised to represent the implementing partner(s) with regard to this operation**

Mr XX (Dist-one), as per initial proposal: Mr ZX – and not Ms XY as indicated on initial proposal – because of staffing changes (Dist-two).

**Note**

Update or confirm in this section the data contained in the proposal

**10.4. Contractor(s) and procedure envisaged for the award of contracts****10.4.1. Name and address of contractor(s)****10.4.2. Role of contractor(s) in implementing this operation**

#### 10.4.3. Describe the procedure followed for the selection of contractor(s)

All the procedures to be employed for work, service and supply contracts are in accordance with the provisions of Annex V (see also paragraphs 6.3.1. and 6.3.2. for more detail).

**Note**

Update or confirm in this section the data contained in the proposal. If changes are made it is **NECESSARY** to provide the reasons.

### 11. FINANCIAL INFORMATION

#### 11.1. Total budget of the operation:

€ 525.609,71

As there has been a decrease in the co-financing percentage from AWD related to the distribution of medicines to the Health centres (which have received medicines from other donors), the new total estimated budget **approved by ECHO** on dd-mm-yy, will amount to EUR 525.609,71.

#### 11.2. Contribution requested from European Community:

€ 470.077,77

Percentage of the total amount:

89,43 %

A **supplementary agreement** to increase the percentage of co-financing from ECHO, so as to assure the full range of foreseen operations, has been signed by both parties and approved by ECHO on dd-mm-yy (see Annexes for more details).

The **budget reduction approved by ECHO** is 5% of the total estimated budget of the Budget Breakdown, amounting to EUR 27.765,97 (or half the AWD contribution initially foreseen); ECHO contribution has been raised from 85% (on a budget of EUR 527.553,33) to 89,43% of the new budget, with a decrease of funds initially foreseen by ECHO (from EUR 472.021,41 to EUR 470.077,77) because of an overall 7% reduction of administrative costs.

#### 11.3. Co-financing:

11.3.1. Indicate your own contribution: **[NOT APPLICABLE]**

11.4.1. Contributions by other donors:

€ 27.765,97

Name: AWD

Because of a donation of medicines from another entity, AWD has decided to decrease the funding for the supply of medicines, reducing its co-financing amount by 50%. The amount of AWD co-financing has therefore decreased from EUR 55.531,93 to EUR 27.765,97.

#### 11.4. Pre-financing requested from European Community:

€ 376.062,21

Percentage of the total EC contribution:

80%

**Note:** If the pre-financing amount is paid in two instalments (art.5.1. GA) and the percentage of budget committed is at least 70% of the first instalment, the second payment can be requested in this paragraph.

Since an amount corresponding to 42% of the total estimated budget has been committed – corresponding to more than 70% of the previous payment – **we request** (as per article 5.1. of the GA) the payment of the **second pre-financing instalment** (amount fixed in article 5.1. of the Grant Agreement), corresponding to Euros 140.051,51 .

11.5. Eligibility of expenditures, date : **[NOT APPLICABLE]**

(4.3.) Start date of the operation : **[NOT APPLICABLE]**

11.5.1. If the operation has already started explain the reason that justifies that situation: **[NOT APPLICABLE]**

- Primary emergency operation ☐
- Emergency operation ☐
- Other ☐

Please elaborate:

11.5.2. If the eligibility date of expenditure precedes the start date of the operation please justify this request **[NOT APPLICABLE]**

**Note**  
Fill in this section only if changes have occurred.

**12. ADMINISTRATIVE INFORMATION [NOT APPLICABLE]**

12.1. Humanitarian organisation's official name, address, phone/fax n°

12.2. ECHO FPA number, (if applicable)

12.3. Name and title of legal representative

12.4. Name, telephone, fax and e-mail of desk officer at HQ

12.5. Name, telephone, fax and e-mail of the representative in the country of operation

12.6. Bank account

- Name of bank:
- Address of branch:
- Precise denomination of the account holder:
- Full account number (including bank codes):
- IBAN account code, (or BIC country code if the IBAN code does not apply):

**13. CONCLUSIONS AND PARTNER'S COMMENTS**

It is emerging, at this stage of the operation, that – notwithstanding the intervention – the health conditions of the displaced population remain precarious. The near-complete lack of safe water outlets is a worsening factor [...].

[...] It is therefore being verified whether to take additional steps, and if so what, to ensure that the objectives of the operation are met [...].

LOGICAL FRAMEWORK (ECHOTrain Project): Interim Model					
	INTERVENTION LOGIC	OBJECTIVELY VERIFIABLE INDICATORS	SOURCES OF VERIFICATION	RISKS AND ASSUMPTIONS	
PRINCIPAL OBJECTIVE	Support the restoring of the essential conditions for public services in the areas hit by disaster in Cordoba Province	<div>Note</div> Update (if there are changes) the expected number of beneficiaries at the end of operation. In the example, modifications are in red.			
SPECIFIC OBJECTIVE	Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.500 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)	1. Level of water-related pathologies brought back to levels preceding disaster for the population already benefited by operation 2. Vaccine coverage brought back to levels preceding disaster for 50% of children 3. Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones for persons using the first 40 latrines built (3.000 beneficiaries) 4. Coverage of essential health services assured according to parameters preceding disaster for emergency room and reproductive health services 5. Conditions brought back to normal (from lack of basic elements necessary for daily life) for 2.000 families (2.000 women out of 5.000 expected at end of operation) 6. Reference and surveillance system restored and operational at the end of operation [NOT APPLICABLE AT THIS STAGE] 7. After 4 months, self-sufficient latrine committees in areas hosting displaced persons (ability to call autonomously 1 meeting per month per committee) [2 committees already active out of 4 set up]	1, 4. Survey Forms, Monthly Report from Health Centres 2. AWD Reports and Monthly Report from Health Centres 3, 5, 6, 7. Monitoring Reports and Final Evaluation Report <div>Note</div> Modify indicator thresholds to show level of performance reached (in the example the actualisation of the indicator is shown in red)	Risk of new influx of displaced persons, worsening environmental pressure in affected zones	
RESULTS	<div>Note</div> Update expected results indicating services actually carried out until Interim Report (15 days before submission of Report to ECHO)				
	A. Water & Sanitation				
	A.1. 1 Health centre (Dist-one) has enough water for its needs (the Dist-two centre will meet standards at a later time)	1. 50 litres/day per admitted patient (Dist-one, against a forecast estimate of 40 l /day), 20 litres/day for Dist-two 2. 5 litres/day per non-admitted patient for Dist-one and Dist-two 3. 1000 litres/day guaranteed for other services (laundry, kitchen etc) for Dist-one; 200 for Dist-two 4. Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems) for Dist-one 5. Water points are fully sustained at the end of intervention [NOT APPLICABLE]	1, 2, 3, 4. Monthly Report from Health Centres 5. Final Evaluation Report <div>Note</div> Modify indicator thresholds to show level of performance reached (in the example the actualisation of the indicator is shown in red)	Active participation of Water committees in maintenance of wells [...]	
	A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where displaced persons reside (the other 3.000 beneficiaries will meet same standards in coming months)	1. 40 latrines built and used appropriately 2. Women can safely use toilet facilities already in place 3. The 40 latrines already built are at a minimum distance of 50m from dwellings	1. Final technical report (technical fiche) 2. Community Leaders Report (focus group and workshop) 3. Final technical report (technical fiche)	Uncontrolled influx of displaced persons, worsening environmental pressure in affected zones [...]	
	B. Health				
	B.1. Organisation of essential services (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system) strengthened in 2 health centres (Dist-one and Dist-two – 15.000 users/year.)	[...]	Monthly report from health centres	[...]	
	B.2. Supplying of medical material to 2 health centres (Dist-one and Dist-two – 15.000 users/year) to ensure that services can be provided (program managed in coordination with AWD)	[...]	Monthly report from health centres	Active cooperation with AWD in supply of medicines [...]	
	C. Non food Items				
	C.1. Minimum essential household items (kitchen kit and blankets) provided to 2.500 families classified as "vulnerable".	[...]	Monitoring Reports	[...]	
	ACTIVITIES	MEANS		COSTS	<div>Note</div> Actualise figures showing expenditure up to 15 days from submission of Interim Report
		A. Water & Sanitation			
A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)		Construction labour Purchase of material for construction of wells Purchase of 2 Afridev pumps Rental of drill	MATERIALS AND WORK = EUR 12,000	Risk of contamination of aquifers in the proximity of Health Centres	
A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)					
A.1.3. Setting up of 2 Water Management Committees (handover of health centres,					
A.2.1. Consultation with women to identify adequate places for building toilet facilities		Construction labour Purchase of material for construction of latrines	MATERIALS AND WORK = EUR 11,300	Active participation of women	
A.2.2.. Construction according to international standards of 100 gender-separated latrines				Active participation of community in maintenance of wells [...]	
A.2.3. Training and equipping of 10 persons in charge of maintaining latrines					

	B. Health			
	B.1.1. . Reorganisation of the 2 health centres according to national protocols	Labour for small rehabilitation work Purchase of materials for rehabilitation	LABOUR AND MATERIALS= EUR 12,000	Active participation of medical personnel of health centres  Risk of halt of salary payments to medical personnel  [...]
	B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health			
	B.1.3. Drafting of a health monitoring plan in the two target zones			
	B.1.4. Coordination of vaccination campaign with AWD			
	B.1.5. Small infrastructure work in the two Health centres			
	B.2.1. Supply of medical materials to the 2 health centres	Medical material	MEDICINES = EUR 80,000	Active participation of medical personnel of health centres  Risk of halt of salary payments to medical personnel  [...]
	B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system			
	C. Non food Items			
	C.1.1. Consultation with community representatives	Purchase of kitchen kits and blankets	MATERIALS = EUR 35,000	Active participation of community representatives in determining what families are vulnerable  Access to target areas assured for population census and kit distribution  [...]
	C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”			
	Project Management			
	Technical personnel (TITLE 01)	<u>Expatriate Personnel</u> Project Manager Doctor Hydro-geologist <u>Local Personnel</u> Nurses	EXPATRIATE STAFF= EUR 8,400 LOCAL STAFF = EUR 9,600	Access to target areas assured for entire duration of operation
	Management personnel (TITLE 02)	<u>Expatriate Personnel</u> Project Manager HQ Personnel <u>Local Personnel</u> Administrator Logistics Person Guards	EXPATRIATE STAFF = EUR 11,300 LOCAL STAFF = EUR 13,200	
	Logistics	Office Rental of 4x4 4x4 (depreciation) 2 Radios (depreciation) Running costs of 2 vehicles Running costs of 2 radios	TRANSPORT = EUR 8,975 COMMUNICATIONS = 1,800 OFFICE = EUR 4,300	[...]
	Monitoring / Evaluation			
	Execution of Monitoring Plan	Monitoring Plan (Terms of reference)		[...]
	Execution of Final Evaluation	External Final Evaluation (Terms of reference)	EXTERNAL EVALUATION = EUR 0	[...]
	Other Services			
	Visibility	Visibility Plan	VISIBILITY FUNDS = EUR 1,450	
				PRE-CONDITIONS



**Note**  
Changes to the responsibility plan must also be notified (none in this case)

[illegible]

KEY
PM = Project Manager
HYD = Hydro-geologist
HCD = Health centre Director
RD = Person responsible of local Districts
RLC = Person responsible of local communities
ROLE
L = Lead Role
S = Support Role



EUROPEAN COMMISSION  
HUMANITARIAN AID OFFICE (ECHO)

GRANT AGREEMENT

**Humanitarian Organisation:** Hox

**Title of the Operation:** Restoring of minimal health conditions for the populations affected by the conflict and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland

**Grant agreement number:** ECHO/[...]

## INTERIM FINANCIAL REPORT

**Total estimated budget**

Total direct costs of the Operation

**Maximum EC contribution**

Percentage of total eligible costs

525.609,71
491.224,03
470.077,77
89,43%

Code	Heading	Initial	Modified	Actual Budget
<b>01</b>	<b>Goods &amp; services delivered to the beneficiaries</b>	<b>420.990,00</b>	<b>393.224,03</b>	<b>168.300,00</b>
<b>01.01.</b>	<b>Food Security</b>			
01.01.01.	Basic food security			
01.01.02.	Other food distribution			
01.01.03.	Food for work			
01.01.04.	School feeding			
01.01.05.	Public Canteens			
01.01.06.	Agricultural activities			
01.01.07.	Livestock			
01.01.08.	Fisheries			
01.01.80.	Training, local capacity building			
01.01.99.	Other food and security			
<b>01.02.</b>	<b>Water and Sanitation</b>	<b>49.200,00</b>	<b>49.200,00</b>	<b>23.300,00</b>
01.02.01.	Waste disposal and latrines	33.200,00	33.200,00	11.300,00
01.02.02.	Rural water sources	16.000,00	16.000,00	12.000,00
01.02.03.	Urban and municipal supply system			
01.02.04.	Water treatment			
01.02.80.	Training, local capacity building			
01.02.99.	Other water and sanitation			
<b>01.03.</b>	<b>Health</b>	<b>222.500,00</b>	<b>194.734,03</b>	<b>92.000,00</b>
01.03.01.	Primary health care	182.500,00	154.734,03	80.000,00
01.03.02.	Secondary health care			
01.03.03.	General health care : primary and secondary			
01.03.04.	Emergency health care			
01.03.05.	Epidemics			
01.03.06.	Drugs supply			
01.03.07.	Routine vaccination			
01.03.08.	Support of specialised institutions			
01.03.09.	Disabled population			
01.03.10.	Health education and training			
01.03.11.	Family planning			
01.03.12.	AIDS and STD			
01.03.13.	Targeted control of endemic diseases			
01.03.14.	Psychosocial			
01.03.15.	Rehabilitation of medical facilities	40.000,00	40.000,00	12.000,00
01.03.80.	Training, local capacity building			
01.03.99.	Other health			

Code	Heading	Initial	Modified	Actual Budget
<b>01.04.</b>	<b>Nutrition</b>			
01.04.01.	Therapeutic feeding			
01.04.02.	Supplementary feeding			
01.04.03.	Supplementary and Therapeutic feeding			
01.04.04.	Nutritional education			
01.04.05.	Surveys and monitoring			
01.04.80.	Training, local capacity building			
01.04.99.	Other nutrition			
<b>01.05.</b>	<b>Shelter</b>			
01.05.01.	Emergency shelter			
01.05.02.	Post emergency/semi-permanent shelter			
01.05.80.	Training, local capacity building			
01.05.99.	Other shelter			
<b>01.06.</b>	<b>Non food items</b>	<b>95.000,00</b>	<b>95.000,00</b>	<b>35.000,00</b>
01.06.01.	Domestic items	95.000,00	95.000,00	35.000,00
01.06.02.	Heating and cooking fuel			
01.06.03.	Survival items			
01.06.04.	Hygiene items			
01.06.05.	Educational items			
01.06.06.	Resettlement items			
01.06.80.	Training, local capacity building			
01.06.99.	Other non food items			
<b>01.07.</b>	<b>Rehabilitation/continuum</b>			
01.07.01.	Permanent shelter			
01.07.02.	Educational facilities			
01.07.03.	Social services			
01.07.04.	Self-sufficiency			
01.07.80.	Local capacity building/training			
01.07.99.	Other rehabilitation			
<b>01.08.</b>	<b>Disaster preparedness and mitigation</b>			
01.08.01.	Infrastructure support			
01.08.02.	Advocacy and public awareness raising			
01.08.03.	Mitigation works			
01.08.04.	Mapping and data computerization			
01.08.05.	Education			
01.08.06.	Early warning systems			
01.08.07.	Research and dissemination			
01.08.08.	Facilitation of co-ordination			
01.08.09.	Institutional strengthening			
01.08.80.	Local capacity building/training			
01.08.99.	Other DIPECHO			
<b>01.09.</b>	<b>Special mandates</b>			
01.09.01.	Protection			
01.09.02.	Facilitation of co-ordination			
01.09.03.	Info management and dissemination			
01.09.04.	Family reunification/tracing			
01.09.05.	Care and maintenance			
01.09.06.	Facilitation of return			
01.09.80.	Local capacity building/training			
01.09.99.	Other special mandates			
<b>01.10.</b>	<b>Specific actions</b>			
01.10.01.	Logistics			
01.10.02.	Security and protection			
01.10.03.	Emergency rehabilitation infrastructure			
01.10.04.	Capacity building (NGOs and other humanitarian actors)			
01.10.80.	Local capacity building/training			
01.10.99.	Other specific actions			

Code	Heading	Initial	Modified	Actual Budget
<b>01. 11.</b>	<b><i>De-mining and awareness</i></b>			
01. 11.01.	De-mining			
01. 11.02.	Awareness			
01. 11.80.	Local capacity building/training			
01. 11.99.	Other de-mining			
<b>01. 12.</b>	<b><i>International transport</i></b>			
01. 12.01.	Maritime			
01. 12.02.	Overland			
01. 12.03.	Air			
<b>01. 13.</b>	<b><i>Personnel</i></b>	<b>54.290,00</b>	<b>54.290,00</b>	<b>18.000,00</b>
01. 13.01.	Expatriate staff	36.050,00	36.050,00	8.400,00
01. 13.02.	Local staff	18.240,00	18.240,00	9.600,00
<b>02.</b>	<b>Support costs</b>	<b>98.000,00</b>	<b>98.000,00</b>	<b>41.025,00</b>
<b>02 01.</b>	<b><i>Personnel</i></b>	<b>56.100,00</b>	<b>56.100,00</b>	<b>24.500,00</b>
02. 01.01.	Expatriate staff	27.700,00	27.700,00	11.300,00
02. 01.02.	Local staff	28.400,00	28.400,00	13.200,00
<b>02 02.</b>	<b><i>Local logistic costs</i></b>	<b>24.600,00</b>	<b>24.600,00</b>	<b>11.400,00</b>
02. 02.01.	Office expenses	9.800,00	9.800,00	4.200,00
02. 02.02.	Office consumable and supplies	400,00	400,00	100,00
02. 02.03.	Local contracted transport	8.000,00	8.000,00	4.000,00
02. 02.04.	Distribution, storage and daily labour			
02. 02.05.	Running costs	6.400,00	6.400,00	3.100,00
02. 02.06.	Other			
<b>02 03.</b>	<b><i>Durable equipment</i></b>	<b>9.800,00</b>	<b>9.800,00</b>	<b>3.675,00</b>
02. 03.01.	Vehicles	5.000,00	5.000,00	1.875,00
02. 03.02.	Communication	4.800,00	4.800,00	1.800,00
02. 03.03.	Other			
<b>02 04.</b>	<b><i>Security</i></b>			
<b>02 05.</b>	<b><i>Feasibility, need assesment and other studies</i></b>			
<b>02 06.</b>	<b><i>Specialised services</i></b>	<b>5.000,00</b>	<b>5.000,00</b>	
02. 06.01.	External quality and quantity controls			
02. 06.02.	External evaluation	5.000,00	5.000,00	
02. 06.03.	External audit			
<b>02 07.</b>	<b><i>Insurance costs</i></b>			
<b>02 08.</b>	<b><i>Visibility and communication programmes</i></b>	<b>2.500,00</b>	<b>2.500,00</b>	<b>1.450,00</b>
<b>02 09.</b>	<b><i>Others to be specified in the proposal</i></b>			
<b>03</b>	<b>Indirect costs</b>	<b>36.329,30</b>	<b>34.385,68</b>	<b>10.500,00</b>
<b>04</b>	<b>Contingency reserve (pro memoria)</b>	<b>0,00</b>	<b>0,00</b>	<b>0,00</b>



## **"CASE STUDY"**

# **GUIDED EXERCISE FOR THE SUBMISSION OF OPERATION PROPOSALS TO ECHO**

## **(Phase IV. *Preliminary Report*)**

In collaboration with



With the contribution of



## INSTRUCTIONS FOR USE

This section, relative to the submission of the *Preliminary Final Report*, includes a model of *Preliminary Final Report*, (**mandatory for operations lasting over 6 months**), built according to the specifications of the FPA 2003 and to the new requests ECHO poses for the submission of the reference reporting. Documents in this section include:

- ➔ Preliminary Final Report
- ➔ Interim Financial Report (included to highlight a budget modification)
- ➔ Logical Framework
- ➔ Workflow Plan

The purpose of this section is to let personnel understand the new requirements introduced by ECHO in the submission of Reports for the preliminary phase.

It is worth to recall that the Preliminary Final Report – both the narrative (Preliminary Final Report – mandatory) and financial annexes (Interim Financial Report, to be submitted only if budget modifications are needed) – must be submitted only in case of operations lasting over 6 months:

TYPE OF PROJECT	WHEN?
< 6 MONTHS  (PRIMARY EMERGENCY, EMERGENCY, OTHER OPERATIONS LASTING A MAXIMUM OF 6 MONTHS)	➔ NOT REQUIRED
> 6 MONTHS  (OPERATIONS WITH AN IMPLEMENTATION PERIOD OVER 6 MONTHS)	<p>➔ 1 month before end of implementation period (the date is set at point 4.1 of the Grant Agreement). The narrative report, and if applicable the financial one, must cover in detail all activity (and expenses if applicable) up to <b>30 days</b> prior to the submission of the report(s).</p> <p>➔ <u>INVENTORY ANNEXED TO PRELIMINARY FINAL REPORT</u> Both <b>in case of 100% funding</b> and <b>in case of co-financing</b>, the NGO must submit to ECHO also an <b>inventory</b> of the remaining supplies, vehicles and equipment, specifying their use (General Conditions, art. 7.4 and 7.3.).</p> <p>➔ <u>BUDGET MODIFICATIONS</u> In this phase, if budget modifications are to be introduced implying a transfer from Title 01 to Title 02 (or vice versa) <b>above 15% of direct costs</b>, it is <b>necessary</b> to include the new budget proposal with the Preliminary Final Report (using the format of the Interim Financial Report), indicating the changes requested and the expenditure incurred up to 30 days before the date of submission of the Preliminary Narrative Report (two months after the end of the operation.) It is however <u>always advisable</u> to submit any budget modification, using the Interim Financial Report format, even when carrying out modifications below 15%.</p>

### **PRELIMINARY FINAL REPORT**

The *Preliminary Final Report* must be written according to the following principles:

- ➔ Write the report according to the same principles used for the Interim report;
- ➔ Provide ECHO staff with an accurate estimate of the degree of realisation of the specific objective of the operation, especially in reference to the data gathered through the indicator verification sources;
- ➔ Allow ECHO personnel to make a final visit before the end of the operation to evaluate the results obtained while the operation is still being executed;
- ➔ Where the reference data have not been modified in the text, write NOT APPLICABLE and do not duplicate data already included in the operation proposal;
- ➔ Include in the appropriate sections all changes to the situation initially described and all new information that may have an impact on the execution of the operation;
- ➔ Update the Logical Framework and the Work Plan on the basis of results obtained, allowing a comparison with the documents submitted with the operation proposal.

### **INTERIM FINANCIAL REPORT**

The Interim Financial Report must be submitted in this phase only if the operation lasts more than 6 months **and** if:

- ➔ There are budget modifications requests between Title 01 and Title 02 above 15% of direct costs, to be indicated using exclusively the format of ANNEX 2 (Interim Financial Report) (**MANDATORY**);
- ➔ There have been budget modifications between Title 01 and Title 02 under 15% of direct costs, to be indicated using exclusively the format of ANNEX 2 (Interim Financial Report) (**ADVISABLE BUT NOT MANDATORY**).

The budget in the Interim Financial Report must feature 6-digit detail, regardless of the type of project

#### **NOTE:**

1. The documents included **do not represent** either **ECHO official documents** or a perfect model of an Interim Report to be replicated when writing an operation proposal and/or in the various phases of execution of an operation;
2. The exercise has been built around the hypothesis of an operation **CO-FINANCED** by ECHO within a **GLOBAL PLAN**. Common sense dictates that in primary emergency and emergency cases the level of detail of this Interim Report will be difficult to attain, and hardly required. However, every effort should be made to ensure that the operation and its impact be monitored properly.
3. The exercise includes a **modification within expenditure chapters and a transfer of budget items between Titles 01 and 02 below 15%** (unilateral modification procedure with notification to ECHO). As it is always advisable to submit in the preliminary phase any budget modification, using the Interim Financial Report format, even when carrying out modifications below 15% (while it is mandatory for modifications above 15%), the exercise includes both the narrative and the financial report.

Any remarks or requests for information can be sent to the following e-mail address:  
[emergenza@coopi.org](mailto:emergenza@coopi.org)



## SINGLE FORM FOR HUMANITARIAN AID OPERATIONS

### 1. GENERAL INFORMATION

#### 1.1. Name of humanitarian organisation

HOx

#### 1.2. FPA number (if applicable)

[...]

**Note**

Include, if applicable, the FPA number

#### 1.3. Purpose of the submission

##### 1.3.1. Proposal

**[NOT APPLICABLE]**

New proposal ☐

Revised proposal ☐

ECHO reference A/

##### 1.3.2. Interim narrative report ☐

**[NOT APPLICABLE]**

##### 1.3.3. Preliminary final report ☒ date: dd-mm-yy

##### 1.3.4. Final report ☐

**[NOT APPLICABLE]**

#### 1.4. Grant agreement number

ECHO/[...]

#### 1.5. Implementing rules applicable to this agreement

**[NOT APPLICABLE]**

Grant, 100% financing ☐

Grant, co-financing ☐

#### 1.6. Framework of this submission

**[NOT APPLICABLE]**

Primary emergency decision ☐

Emergency decision ☐

Ad hoc decision ☐

Global plan decision ☐

DIPECHO ☐

Other, please specify ☐

#### 1.7. Executive summary of operation

**[NOT APPLICABLE]**

(4.1.) Title of the operation

(4.2.) Country(ies) and location(s) of implementation

(4.3.) Start date of the operation

(4.4.) Duration in months

(4.5.1.) Total number of direct beneficiaries

(4.5.2.) Identify the status and give details of the beneficiaries



- (4.7.1.) Operation specific objective
- (4.7.2.) Indicators and sources of verification
- (4.8.1.) Expected result 1
- (4.8.n.) Expected result n
- (11.1.) Total budget of the operation: EUR
- (11.2.) Contribution requested from EC: EUR
- (11.5.) Eligibility date of expenditure

**Note:** If additional studies have been carried out, this chapter is intended to illustrate the results of such studies. This is fundamental in the event of significant readjustments of the operation

## **2. NEEDS ASSESSMENT [NOT APPLICABLE]**

- 2.1. Date(s) of assessment
- 2.2. Methodology and sources of information used
- 2.3. Organisation/person(s) responsible for the assessment
- 2.4. Problem statement and stakeholder analysis
- 2.5. Findings of the assessment

**Note:**  
See previous callout

## **3. HUMANITARIAN ORGANISATION'S STRATEGY [NOT APPLICABLE]**

- 3.1. Partner's strategy in country and/or region(s) of operation
- 3.2. Link between operation, the findings of the assessment and the problem statement
- 3.3. Is/are there similar operation(s) in the country/region?  
If yes, explain the measures foreseen to avoid overlap/duplication
- 3.3. Previous humanitarian operations with EC grants in the country/ region
- 3.5. Have you discussed this proposal with ECHO's technical assistance office in the country/region of operation?

**Note:** Data must be updated in relation with the advancement of work, especially as regards the beneficiaries.

**Note:** The framework of objectives may not be modified.

**Note:** The matrix of the Logical Framework must be adapted considering the results obtained.

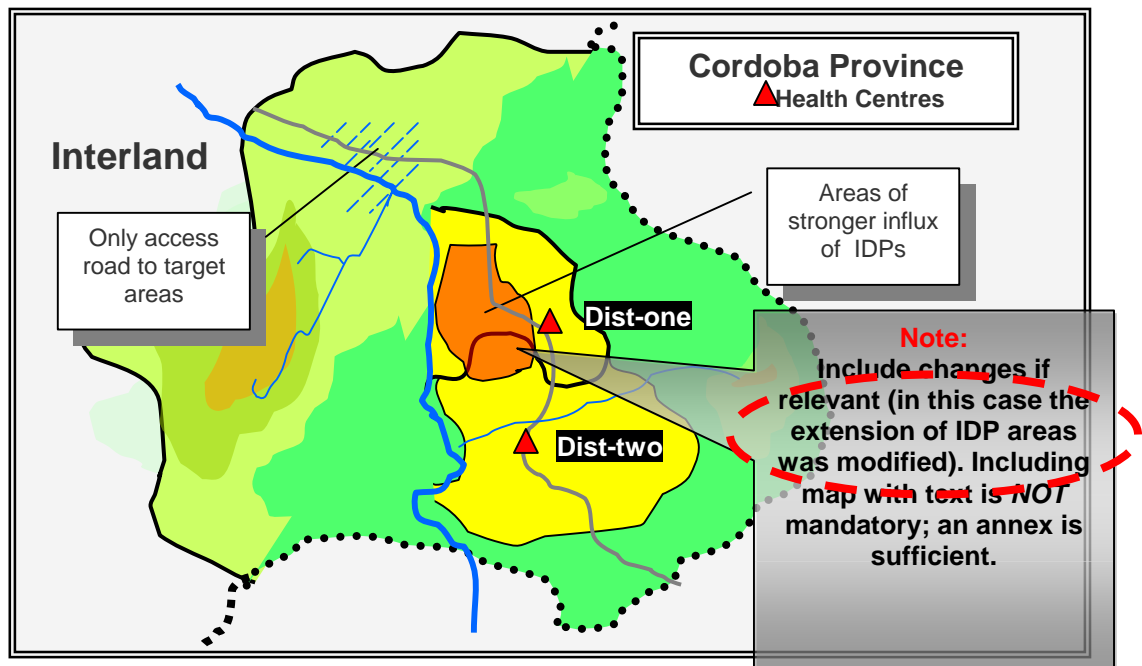
## **4. OPERATIONAL FRAMEWORK**

### **4.1. Title of operation**

- ⇒ Restoring of minimal health conditions for the populations affected by the disaster and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland”.

#### 4.2. Exact location of the operation

The operation is taking place according to the initial proposal as evidenced in the following map:



#### 4.3. Start date of the activities in the field, (start date of the operation)

dd-mm-yy as per art. 2.2. of the Grant Agreement.

**Note:** Each request of extension of the implementation period MUST be included and motivated in this section, in order to obtain approval/refusal from ECHO

#### 4.4. Duration in months

8 months, as per art. 2.2. of the Grant Agreement

**Note:** Throughout this section, confirm, update and if possible detail more accurately the data contained in the proposal

#### 4.5. Beneficiaries

##### 4.5.1. Total number of direct beneficiaries

We confirm that, as stated in the Interim Report, the number of beneficiaries has risen compared to the estimate contained in the proposal because of the arrival of newly displaced persons. The total number of beneficiaries is confirmed to be 17.500 (users of health centres and beneficiaries of other services provided by the operation).

##### 4.5.2. Identify the status and give details of the beneficiaries:

45 days before the end of the operation, the data gathered during the implementation phase allow to update the description of beneficiaries, as indicated in the following table:

**Note:** Update, if necessary, the numbers and data on beneficiaries providing more detail than in the Interim Report.

Type	Status	Number
Displaced Persons	IDPs, some of which just recently arrived from nearby districts, mainly families of farmers raising small animals. In most cases families were able to carry their belongings with them.	7.500
Displaced women in target districts	IDPs.	2.800
Displaced children	IDPs; some cases of scabies have occurred [...].	2.650
Users of health centres in the two districts	Local population. Estimate was correct for both centres.	10.000
Children < 5	Mixed.	9.200
Women classified as “most vulnerable”	Local population. Their number grew after a census and arrival of newly displaced persons.	3.600
Medical and paramedical personnel in the two districts	Local population. The number was updated following minor changes in the health centres' staffing.	123

#### 4.5.3. “Catchment” population

The number of indirect beneficiaries is confirmed to be 25.000 people in both districts.

#### 4.5.4. What are the identification mechanisms and criteria?

[NOT APPLICABLE]. For more detail see initial proposal and Interim Report.

#### 4.5.5. To what extent and how were the beneficiaries involved in the design of the operation?

[NOT APPLICABLE]. For more detail see initial proposal and Interim Report.

#### 4.5.6. Sectors of activity

**Note:**  
Include any changes if relevant (in this example the results for the “Water & Sanitation” sector are modified.)

The influx of new IDPs has caused, in the recent months, a severe degradation of health and hygiene conditions especially regarding water supply (excessive pressure on existing water outlets; unsafe sources). After evaluation of the situation, a decision was made to intervene in order to stop further degradation and meet the operation's goals, through the construction of 6 safe water outlets (hand wells) [...].

This intervention was possible also considering the fact that the number of latrines was reduced from 100 to 90, as the operation's objectives had already been met in that respect [...].

Both decisions have been coordinated with local and community representatives, considering carefully the priorities of beneficiaries in the changed context [...].

Regarding all sectors, changes are as follows:

- Sector 1: Water & Sanitation:
  - ⇒ *Rural water sources*: Construction of **8** wells (instead of 2 as foreseen in operation proposal);
  - ⇒ *Waste disposal and latrines*: Construction of **90** gender-separated latrines (instead of 100 foreseen originally).
- Sector 2: Health:
  - ⇒ *Primary health care*: Relaunch of activities in the two health centres (vaccinations, maternity and infancy monitoring plan, reproductive health, emergency room, reference system); supply of medical materials to ensure proper services (in cooperation with the AWD medicine supply program).
  - ⇒ *Rehabilitation of medical facilities*: Light rehabilitation of the two health centres.
- Sector 3: Non-food Items:
  - ⇒ *Domestic items*: Distribution of kitchen kits and blankets to the more vulnerable family groups.

#### 4.5.7. Give the following information for each sector

- Total number of direct beneficiaries

Settore	Numero totale dei beneficiari diretti
<b>Water &amp; Sanitation</b>	17.500 + 123
<b>Health</b>	17.500 + 123
<b>Non-food Items</b>	6.400

- Types of beneficiaries and number of beneficiaries per type

Sector	Category of beneficiaries	N° of beneficiaries per category
<b>Water &amp; Sanitation</b>	Displaced persons	<b>7.500</b>
	Displaced women in target districts	2.800
	Displaced children	2.650
	Estimated users of health centres in the two districts	10.000
	Children < 5	9.200
<b>Health</b>	Displaced persons	7.500
	Displaced women in target districts	2.800
	Displaced children	2.650

	Estimated users of health centres in the two districts	10.000
	Children < 5	9.200
	Medical and paramedical personnel in the two districts	123
<b>Non-food Items</b>	Women classified as "most vulnerable"	3.600
	Displaced women in target districts	2.800

- Location

Sector	Location
<b>Water &amp; Sanitation</b>	Dist-two and Dist-one
<b>Health</b>	Dist-two and Dist-one
<b>Non-food Items</b>	Dist-one (for the most part, also considering newly displaced persons) and Dist-two

#### 4.6. Principal objective

The general objective of the operation is confirmed, in accordance with the objective of the Decision adopted by ECHO for the funding of the Ad Hoc Decision, as:

- ⇒ Contributing to the recreation of the basic conditions for public services in the disaster-affected areas of the Cordoba province.

#### 4.7. Operation-specific objective

##### 4.7.1. Specific objective

The objective of the operation, with the number of beneficiaries updated as in the Interim Report, is confirmed:

- ⇒ Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.500 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)

The operation follows the specifications of the initial proposal, assuring the following benefits, listed by type of beneficiary:

**Note: Update the data considering the activities that have been carried out**

	Type of beneficiaries (see 4.5.2.)	Foreseen benefits
I	<b>Displaced persons</b>	<ul style="list-style-type: none"> <li>⇒ Access to safe toilet facilities for 6.500 users beneficiaries of the latrines built 45 days before the end of operation (80 latrines)</li> <li>⇒ Access to safe water outlets for 1.800 beneficiaries;</li> <li>⇒ Better environmental and health conditions for the first 6.000 beneficiaries of the first lot of newly built latrines;</li> <li>⇒ Guaranteed minimum medical care for all 7.500 displaced persons..</li> </ul>
II	<b>Displaced women in target districts</b>	<ul style="list-style-type: none"> <li>⇒ Supply of minimum required elements for safe preparation and storage of food and water for 2.822 women;</li> </ul>
III	<b>Displaced children</b>	<ul style="list-style-type: none"> <li>⇒ See "I";</li> <li>⇒ Assured vaccine coverage for identified displaced children (2.713)</li> </ul>
IV	<b>Users of health centres in the two districts</b>	<ul style="list-style-type: none"> <li>⇒ Less incidence of gastro-intestinal diseases: -20% and -45% recorded in the Dist-one and Dist-two areas;</li> <li>⇒ Relaunch of health care services begun especially for emergency room, reproductive health and maternity / child health; strengthening of diagnosis and treatment of endemic diseases.</li> </ul>
V	<b>Children &lt; 5</b>	<ul style="list-style-type: none"> <li>⇒ Assured vaccine coverage for 100% of children;</li> <li>⇒ Reduction of incidence of gastro-intestinal diseases by 55% and 60% in Dist-one and Dist-two areas respectively</li> </ul>
VI	<b>Women classified as "most vulnerable"</b>	<ul style="list-style-type: none"> <li>⇒ Supply of minimum required elements for safe preparation and storage of food and water for 2.500 women.</li> </ul>
VII	<b>Medical and paramedical personnel in the two districts</b>	<ul style="list-style-type: none"> <li>⇒ Restarting of general activities and of the implementation of health guidelines, completion of infrastructure work for Dist-one and Dist-two health centres (construction of water outlets completed)</li> <li>⇒ Overseeing of expert personnel in progress, and identification of critical points to address during final part of operation.</li> </ul>

**Note:**  
Update the values of indicators to 45 days before end of operation.

#### 4.7.2 Indicator(s) and source(s) of verification

Indicators for specific objective			
N.	Indicator	Actualised	Source of verification
Ind. N°1	Level of water-related pathologies brought back to levels preceding disaster	Levels reached (better performance for Dist-two area)	Health Centre Reports
Ind. N°2	Vaccine coverage brought back to levels preceding disaster	100% of children vaccinated	AWD Reports Health Centre Reports
Ind. N°3	Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones	80 latrines built and currently maintained according to standards defined by committees Construction of 6 hand wells	Monthly Reports
Ind. N°4	Coverage of essential health services assured according to parameters preceding disaster	Coverage assured for emergency room, reproductive health and maternity / child health services Partial coverage for diagnosis and treatment of endemic diseases	Health Centre Reports
Ind. N°5	Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life)	5.057 families have received a kitchen kit and blankets	Monthly Reports
Ind. N°6	Reference and surveillance system restored and operational at the end of operation	Relaunch of protocols [...]	Monthly Reports
Ind. N°7	After 4 months, self-sufficient latrine committees (10 committees) in areas hosting displaced persons	8 committees meeting regularly (80 latrines have been completed) 6 water committees created for newly-built wells (4 meeting regularly, 2 being set up)	Monthly Reports
Ind. N°8	[...]	[...]	[...]

## 4.8. Results and indicators

### 4.8.1. Result 1, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 1	A.1. The two health centres (Dist-one and Dist-two) have access to enough water for their needs		
N.	Indicator	Actualised	Source of verification
Ind. N°1	40 litres/day per patient admitted to hospital	50 litres per day guaranteed for both centres	Monthly health centre reports
Ind. N°2	5 litres/day for visiting (non-admitted) patients	5 litres guaranteed	Monthly health centre reports
Ind. N°3	1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	1.000 litres guaranteed for both centres	Monthly health centre reports
Ind. N°4	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Both water outlets are maintained in a fully satisfactory way	Monthly health centre reports
Ind. N°5	Water points are fully sustained at the end of intervention	Water outlets appear to be fully sustainable by both health centres	Monitoring Mission
Ind. N°6	[...]	[...]	[...]

### 4.8.2. Result 2, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 2	A.2. 2.000 inhabitants have access to adequate and safe toilet services in the areas where the displaced population has settled.		
N.	Indicator	Actualised	Source of verification
Ind. N°1	100 latrines built and used appropriately	80 latrines built; All latrines are used appropriately	Final technical report
Ind. N°2	Women can safely use toilet facilities	Safety problems for women have not been encountered	Bi-monthly leader report
Ind. N°3	Latrines are at a minimum distance of 50m from dwellings	All latrines are up to standard	Final technical report
Ind. N°4	[...]	[...]	[...]



#### 4.8.3.Result 3, relevant indicator(s) and source(s) of verification

Sector	B. Health		
Result 3	B.1. Strengthening of the organisation of services (Dist-one and Dist-two – 15.000 users/year) (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]
Ind. N°5	[...]	[...]	[...]
Ind. N°6	[...]	[...]	[...]
Ind. N°7	[...]	[...]	[...]

#### 4.8.4. Result 4, relevant indicator(s) and source(s) of verification

Sector	Health		
Result 4	B.2. Two health centres (Dist-one and Dist-two – 15.000 users/year) supplied with medical materials to ensure their services can be provided (program in cooperation with AWD.)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]

#### 4.8.5. Result 5, relevant indicator(s) and source(s) of verification

Sector	C. Non-food items		
Result 5	C.1. 5.000 family groups classified as “vulnerable” provided with minimum household items (kitchen kits and blankets.)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]

- ⇒ **Note:** Actualise activities already completed or being executed and describe results obtained;
- ⇒ **Note:** Give reason for, and explain, in this section any adaptations or changes to work plan, provided they contribute to reaching the specific objective and expected results.

#### 4.9. Activities

At the time of the present report (**6 months and 15 days into operation**) the following activities have been implemented:

⇒ Settore **Water & Sanitation** (risultati 1 e 2)

A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)

**Already completed** (see Interim Report.)

A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)

During the 4th month the water outlet for the Dist-two centre was built. The community, as was indicated in the operation proposal, took part in the search for materials and preparation of the terrain [...].

*Progress:* At the end of the work, lab exams have been carried out to determine water quality and punping tests were performed. [...] Both tests gave positive results.

A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)

During the 3rd month the community has activated, cooperating actively with the director of the Dist-one Health centre, the Water committee. The committee is composed of [...] and has the purpose of [...].

To ensure that it could be immediately operational, a training module was produced. It is structured as follows: [...]

*Progress:* The head of the operation has taken part in the activation of the Water committee, by participating in the meetings with the Health committees. [...]

A.2.1. Consultation with women to identify adequate places for building toilet facilities

The consultations have taken place [...] and have led to [...].

*Progress:* [...].

A.2.2. Construction according to international standards of 100 gender-separated latrines

As explained above, the number of latrines to be built has been reduced to 90 in light of a changed situation [...].

In the three months up to the date of this report 40 more latrines have been built, for a total of 80 [...]. The remaining 10 will [...].

*Progress:* At the end of the construction of each latrine, it was [...]

A.2.3. Training and equipping of 10 persons in charge of maintaining latrines  
[...]

Every month, meetings with a sample of women will be organised to verify [...]. 8 persons in charge of the 80 latrines built have been trained and equipped. .

**Note:** Inclusion of a new activity

A.2.4. Construction of 6 new water outlets

As explained above, it was decided to build six new water outlets because of new needs that have emerged [...]. [...] Hydro-geological surveys have been carried out [...]. [...] Meetings with community [...]. [...] Construction of hand-operated wells [...]. [...] Setting up of water committees, training and handover [...].

⇒ **Health** Sector (results 3 and 4)

B.1.1. Reorganisation of the 2 health centres according to national protocols

[...]

B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres

[...]

B.1.3. Drafting of a health monitoring plan in the two target zones

[...]

B.1.4. Coordination with AWD of vaccination campaign

[...]

B.1.5. Light rehabilitation of the 2 health centres

[...]

B.2.1. Supply of medical materials to the 2 health centres

[...]

B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system

[...]

⇒ **Non-food Items** Sector (result 5)

C.1.1. Consultation with community representatives

[...]

C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”

[...]

**Note**

- ⇒ Specify if timetable has been met and, if applicable, what changes have been made and for what reasons;
- ⇒ Specify the impact of such changes
- ⇒ Update the work plan accordingly and include it as an annex.

**4.10. Work plan**

Work has been carried out according to the timetable for the related months, making up for the delay due to the fact that the well at the Dist-two centre had not been built yet [...].

Planning also had to be adapted because of the need to build the six additional wells [...]. The changes refer to the inclusion of the new activity (construction of new wells) without changing the initial estimates in any way.

The decrease of the number of latrines needed stems from an evaluation made together with local and community representatives, which determined that the 90 already built were sufficient as opposed to an estimated 100.

For the actualised work plan please see the annexed document.

**4.11. Monitoring, evaluation and external audit**

**4.11.1. Monitoring**

The monitoring plan has been defined according to the following table, listing the indicators to observe when examining the operation's expected results:



**Note:** Actualise the Terms of Reference of the monitoring plan in relation to the execution of the plan, highlighting any changes if and where applicable

## Actualised Terms of Reference for the Monitoring Plan

Expected result	Observed indicator	Source of verification and frequency of data collection	Person in charge	Reporting system	Decision-making process
A.1. The 2 health centres (Dist-one and Dist-two) have access to sufficient water for their needs	40 litres/day per admitted patient 5 litres/day per non-admitted patient 1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	Daily monitoring record	<b>Head of warehouse for the Dist-one centre</b>	Verification of registry by chief of operation	Weekly team meeting with doctor responsible for area
	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Daily visit and weekly report	Doctor in charge of area	Verification of report by Program Manager	Weekly team meeting with doctor responsible for area
	No faecal contamination (from coliforms) per 100 ml from source	Monthly laboratory exam	Lab director	Verification of results by Program Manager	Immediate intervention if standards not met
A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where the displaced population resides	Women can safely use toilet facilities	Monthly focus groups with a sample of women	Community leader	Meeting of community leaders and program manager	Weekly team meeting with doctor responsible for area
	100 latrines built and used appropriately	Technical evaluation at end of construction	Program Manager	Technical Report	Weekly team meeting with doctor responsible for area
	Latrines are at a minimum distance of 50m from dwellings	[...]	[...]	[...]	[...]
B.1. The organisation of services is strengthened in the 2 health centres (Dist-one and Dist-two, 15.000 users/year)	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
B.2. The 2 health centres (Dist-one and Dist-two, 15.000 users/year) are supplied with medical materials assuring their functioning	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
C.1. 5.000 family groups classified as "vulnerable" are provided with minimum household items.	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]

**Note**

If a final evaluation is foreseen, it is **NECESSARY** to provide as an annex to the Pre-Final Report the final ToR and the CVs of the evaluators

#### 4.11.2. Evaluation

- Is an evaluation foreseen during the operation?  
Yes ☐ No ☒
- Is an evaluation foreseen after the operation?  
Yes ☒ No ☐

The final ToRs annexed have been agreed upon with the ECHO expert. For a more efficient evaluation, taking into consideration some changes in project implementation, a budget modification has been made.

Following Annex V procedure, a **negotiated procedure** was applied, inviting to negotiate a number of 4 candidates.

#### 4.11.3. External audit

- Is an audit foreseen during the operation?  
Yes ☐ No ☒
- Is an audit foreseen after the operation?  
Yes ☐ No ☒

**Note: Fill in this section only if:**

- ⇒ Risks and assumptions have occurred;
- ⇒ Security conditions have changed.

In this case, the situation is described that brought to the construction of new wells.

### 5. RISKS AND ASSUMPTIONS [NOT APPLICABLE]

The arrival of new displaced persons has resulted in [...]. [...] The degradation of the conditions of the water outlets [...].

5.1. Pre-conditions

5.2. Assumptions and risk assessment profile

5.3. Security

5.3.1. Situation in the field

5.3.2. Have you established a specific security protocol for this operation?

Yes ☐ No ☐ Standard procedures ☒

For further details see operation proposal.

5.3.3. Have you a specific plan for security-related and medical evacuations for this operation?

Yes ☒ No ☐ Standard procedures ☐

For further details see operation proposal.

5.3.4. Are your field staff and expatriates informed of and trained in these procedures?

Yes ☒ No ☐

For further details see operation proposal.

## 6. RESOURCES REQUIRED

**Note:** Include in this section:

- ⇒ Percentage of budget already spent / committed;
- ⇒ Update / confirmation of data included in operation proposal (each budget change must be highlighted and justified).

**Note:** Include information clarifying the degree of implementation obtained.

**Note:** Update / confirm the data.

**Note:** Each budget change must be highlighted and justified. Changes less than 15% of direct costs may be notified both providing the financial annexe (Annex 2 in the format of the *interim financial report*) or using the single form as in the present case study. Changes above 15% of direct costs must be notified using the format of the *interim financial report*.

### 6.1. Total budget (point 11.1.)

Pursuant to the supplementary agreement signed on dd-mm-yy, the total budget of the operation has been redefined as being EUR 525.609,71; a modification was also made to the percentage of ECHO co-financing from 85% of the old budget to 89.43% of the new budget, for a total amount of EUR 470.077,77).

The percentage of the budget already committed is 84.8%.

No change in the overall amount of the budget is foreseen, but **modifications between the chapters** have been made to answer needs that have arisen in the course of operations [...]. For more details on budget modifications, the format of the **updated Interim Financial Report** is annexed.

**Note:** Confirm or update the human resources effectively employed for the operation. Each budget change must be highlighted and justified.

### 6.2. Human resources

#### 6.2.1. Staff included in Title 1: “Goods and services delivered to the beneficiaries”

To ensure completion of the construction work on the six new wells the stay of the expatriate hydro-geologist was prolonged [...].

Because of positive results achieved, on the other hand, the stay of the expatriate doctor was shortened [...]

Such changes however have not affected the overall cost forecast for this budget item at €54.290,00.

The operation has incurred costs for the staff included under Title 01 for a total amount of 41.060,00.

#### 6.2.2. Staff included in Title 2: “Support costs”

Some very small cost modifications have been necessary to adequate the budget to the fact that both expatriate and local staff have spent more time in the field (particularly regarding an increase of per-diem expenditures).

Such changes have **affected the overall cost forecast for this budget item**, from €56.100,00 to €66.100,00.

The operation has incurred costs for the staff included under Title 02 for a total amount of 50.800,00.

**Note:** Confirm or update the goods and services procured for the operation and the procurement procedures that have been followed. Each budget change must be highlighted and justified.

### 6.3. Material resources

Some budget modifications have been made to **allow construction of the six new wells**. The amounts budgeted for purchase of medical materials and construction of latrines have decreased because of the early completion of the operation's objectives; the cost of small rehabilitations has also slightly decreased. None of these changes have had a negative impact on the project and on the expected results and objectives.

#### 6.3.1. Equipment needed. Describe the procedure to be followed for the procurement of equipment.

The following purchases / rentals / depreciations have been made up to this time:

Item	Note	N° purchased	Procurement procedures followed
<b>PURCHASE</b>			
Pumps	Model [...]	6	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Purchasing cost / unit = €XXX; purchase made [...]. ⇒ Total cost = €XXX
[...]	[...]	[...]	⇒ [...]
<b>RENTAL</b>			
4 X 4	Model [...]	1	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = €XXX, rental made [...]. ⇒ Total cost = €XXX
Truck	Model [...]	1	⇒ To facilitate construction work of the 6 new wells a truck was rented for two months; ⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = €XXX, rental made [...]. ⇒ Total cost = €XXX
[...]	[...]	[...]	⇒ [...]
<b>DEPRECIATION</b>			
Radio	Modello [...]	2	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 1 year); ⇒ Value of goods = XX; ⇒ Depreciation plan applied: [...] ⇒ Total cost = €XXX
4 X 4	Model [...]	1	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 2 years); ⇒ Value of goods = XX; ⇒ Depreciation plan applied: [...] ⇒ Total cost = €XXX
[...]	[...]	[...]	⇒ [...]



**6.3.2. Goods to be purchased. Describe the procedure to be followed for the awarding of contracts.**

Item	Note	N° purchased	Procurement procedures followed
<b>PURCHASE</b>			
Medical material (purchase of second lot)	[...]	See annexes for details	⇒ Open local call for bids (as indicated in ANNEX V) won by Firm XXX (see annex for further details), estimate of cost determined by market price lists; ⇒ Cost of second lot of material = € 68.000 (forecast was € 70.000). ⇒ Total cost (first + second lot) = € 80.000 + € 94.468,06 = € 122.234,03
Medical material (purchase made by AWD)	[...]	See annexes for details	⇒ [...]
Purchase of various materials for construction of wells (concrete, casings, manhole covers, small equipment, etc)	[...]	2	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = € XXX.
Purchase of material for construction of 6 wells	[...]	6	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = € XXX.
[...]	[...]	[...]	[...]
<b>RENTAL</b>			
[...]	[...]	[...]	[...]
<b>DEPRECIATION</b>			
[...]	[...]	[...]	[...]

**6.3.3. If the operation requires the purchase of medicines and/or medical equipment: Do you have standard procedures for the purchase, handling and storage of these medicines/equipment?**

Yes ☒ No ☐

For further details see operation proposal.

**Note**  
Fill in this section only if changes have occurred

## **7. PERSPECTIVES OF THE HUMANITARIAN ORGANISATION IN TERMS OF LINKING RELIEF, REHABILITATION AND DEVELOPMENT**

**[NOT APPLICABLE]** Per dettagli si veda la proposta di progetto.

- 7.1. This (or similar) operation is under way since
- 7.2. Describe the expected level of sustainability
- 7.3. Continuum strategy

**Note**  
Fill in this section only if changes have occurred

## **8. MAINSTREAMING**

**[NOT APPLICABLE]** For details see operation proposal.

**Note**  
Mention activities carried out for implementation of Visibility Plan

## **9. VISIBILITY PLAN AND COMMUNICATION STRATEGY**

The Visibility Plan has been carried out according to the program detailed in the Interim Report. In the period examined by the present report activity included:

- a. Large boards installed with the logos of ECHO and HOx in the Health centres and the communities where the latrines have been built [...];
- b. T-shirts and doctors' white coats with the logos of ECHO and HOx have been donated to medical and paramedical personnel [...];
- c. The scope of the intervention and the roles of ECHO and HOx have been thoroughly explained during meetings with local authorities and community leaders [...];
- d. Two more radio programs (three altogether since beginning of operations) have been produced in the 5th and 7th month.

**Note**  
Mention activities carried out and/or problems have occurred

## **10. FIELD COORDINATION AND LOCAL IMPLEMENTING PARTNERS**

### **10.1. National and local authorities**

HOx is officially recognised in Interland (Registry act no. XXX) as a non-governmental entity and as such is exempt from [...]. As detailed in the Interim Report, it was therefore not necessary to [...].

## 10.2. Field co-ordination fora

HOx has participated in four more meetings of the local dialogue forum with other organisations, making a total of six [...] the meetings have been held in the capital, in the 5th and 7th month, while one, in the 6th month, was [...] the meetings discussed [...] it has been decided [...].

## 10.3. Implementing partner(s)

**Note**  
Update or confirm in this section the data contained in the proposal and the Interim report

### 10.3.1. ~~Name and address of implementing partner(s)~~

As per initial proposal: Health Centre of Dist-one and Health Centre of Dist-two.

### 10.3.2. Role of implementing partner(s) in this operation

In both cases the partners have participated actively, within their assigned competence (providing of personnel and resources), in [...].  
A team for the Dist-one area has been formed whose goal is to define a new development plan for safe water outlets [...]. Similar consultations are underway in Dist-two [...].

### 10.3.3. Type of relationship with implementing partner(s)

As per initial proposal.

### 10.3.4. History of previous collaboration with implementing partner(s)

As per initial proposal.

### 10.3.5. Name and title of the person(s) authorised to represent the implementing partner(s) with regard to this operation

Mr XX (Dist-one), as per initial proposal; Mr ZX, because of staffing changes, as explained in the Interim Report (Dist-two).

**Note**  
Update or confirm in this section the data contained in the proposal

## 10.4. Contractor(s) and procedure envisaged for the award of contracts

### 10.4.1. Name and address of contractor(s)

### 10.4.2. Role of contractor(s) in implementing this operation

### 10.4.3. Describe the procedure followed for the selection of contractor(s)

All the procedures for procurement of material, equipment and vehicles are in accordance with the provisions of Annex V (see also paragraphs 6.3.1. and 6.3.2. for more detail).

Details on procedures followed for the external evaluation are in paragraph 4.11.2.

**Note**

Update or confirm in this section the data contained in the proposal. If changes are made it is **NECESSARY** to provide the reasons.

**11. FINANCIAL INFORMATION**

11.1. Total budget of the operation: € 525.609,71

11.2. Contribution requested from European Community: € 470.077,77  
Percentage of the total amount: 89,43 %

**11.3. Co-financing:**

11.3.1. Indicate your own contribution: **[NOT APPLICABLE]**

11.4.1. Contributions by other donors: € 27.765,97  
Name: AWD

11.4. Pre-financing requested from European Community: **[NOT APPLICABLE]**  
Percentage of the total EC contribution: **[NOT APPLICABLE]**

11.5. Eligibility of expenditures, date : **[NOT APPLICABLE]**

(4.3.) Start date of the operation : **[NOT APPLICABLE]**

11.5.1. If the operation has already started explain the reason that justifies that situation: **[NOT APPLICABLE]**

- Primary emergency operation ☐
- Emergency operation ☐
- Other ☐

Please elaborate:

11.5.2. If the eligibility date of expenditure precedes the start date of the operation please justify this request **[NOT APPLICABLE]**

**Note**

Fill in this section only if changes have occurred.

Humanitarian operations  
Narrative Report

**12. ADMINISTRATIVE INFORMATION [NOT APPLICABLE]**

- 12.1. Humanitarian organisation's official name, address, phone/fax n°
- 12.2. ECHO FPA number, (if applicable)
- 12.3. Name and title of legal representative
- 12.4. Name, telephone, fax and e-mail of desk officer at HQ
- 12.5. Name, telephone, fax and e-mail of the representative in the country of operation
- 12.6. Bank account
  - Name of bank:
  - Address of branch:
  - Precise denomination of the account holder:
  - Full account number (including bank codes):
  - IBAN account code, (or BIC country code if the IBAN code does not apply):

**13. CONCLUSIONS AND PARTNER'S COMMENTS**

As stated in the Interim Report, work in the months referred to in the present report has been directed mainly at addressing the precarious conditions of the non-protected sources used by the displaced population. The changes in the operation have allowed an efficient response to the new needs that have arisen, making the operation meet its objectives fully. [...]

LOGICAL FRAMEWORK (ECHOTrain Project): Pre-final Model				
	INTERVENTION LOGIC	OBJECTIVELY VERIFIABLE INDICATORS	SOURCES OF VERIFICATION	RISKS AND ASSUMPTIONS
PRINCIPAL OBJECTIVE	Support the restoring of the essential conditions for public services in the areas hit by disaster in Cordoba Province	<div>Note Update (if there are changes) the expected number of beneficiaries at the end of operation. In the example, as already stated in the Interim Report, modifications are in red.</div>		
SPECIFIC OBJECTIVE	Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.500 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)	<div>1. Level of water-related pathologies brought back to levels preceding disaster</div> <div>2. Vaccine coverage brought back to levels preceding disaster for 2.713 children (100%)</div> <div>3. Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones for persons using the first 80 latrines built (6.000 displaced persons)</div> <div>4. Coverage of essential health services assured according to parameters preceding disaster for emergency room, reproductive health and mother/child health; strengthened for diagnosis and treatment of endemic diseases.</div> <div>5. Conditions brought back to normal (from lack of basic elements necessary for daily life) for 6.057 families (5.057 women versus 5.000 expected at end of operation)</div> <div>6. Reference and surveillance system restored and operational at the end of operation regarding adherence to national protocols and surveillance system</div> <div>7. After 4th month, self-sufficient latrine committees in areas hosting displaced persons (8 latrine, 6 water committees already active; all latrine, 4 water committees call regularly own meeting)</div> <div>Note Modify indicator thresholds to show level of performance reached (in the example the actualisation of the indicator is shown in red)</div> <div>Note Indicators take into account additional activities (in this case water outlets - indicator no. 7)</div>	<div>1, 4. Survey Forms, Monthly Report from Health Centres</div> <div>2. AWD Reports and Monthly Report from Health Centres</div> <div>3, 5, 6, 7. Monitoring Reports and Final Evaluation Report</div>	<div>Risk of new influx of displaced persons, worsening environmental pressure in affected zones</div> <div>[...]</div>
RESULTS	<div>Note Update expected results indicating services actually carried out until Preliminary Report (15 days before submission of Report to ECHO)</div>			
	A. Water & Sanitation			
	<div>A. Two health centres (Dist-one and Dist-two) have enough water for their needs</div>	<div>1. 50 litres/day per admitted patient guaranteed for both Health Centres</div> <div>2. 5 litres/day per non-admitted patient guaranteed for both Health Centres</div> <div>3. 1000 litres/day guaranteed for other services (laundry, kitchen etc) guaranteed for both Health Centres</div> <div>4. Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems) for water outlets of both Centres</div> <div>5. Water outlets fully sustainable at end of operation [NOT APPLICABLE AT THIS STAGE]</div> <div>Note Modify indicator thresholds to show level of performance reached (in the example the actualisation of the indicator is shown in red)</div>	<div>1, 2, 3, 4. Monthly Report from Health Centres</div> <div>5. Final Evaluation Report</div>	<div>Active participation of Water committees in maintenance of wells</div> <div>[...]</div>
	<div>A.2. 2.000 residents have access to adequate and safe toilet facilities and safe water outlets in the critical areas where displaced persons reside</div>	<div>1. 80 latrines and 6 wells built and used appropriately</div> <div>2. Women can safely use toilet facilities already in place</div> <div>3. The 80 latrines already built are at a minimum distance of 50m from dwellings</div>	<div>1. Final technical report (technical fiche)</div> <div>2. Community Leaders Report (focus group and workshop)</div> <div>3. Final technical report (technical fiche)</div>	<div>Uncontrolled influx of displaced persons, worsening environmental pressure in affected zones</div> <div>[...]</div>
	B. Health			
	<div>B.1. Organisation of essential services (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system) strengthened in 2 health centres (Dist-one and Dist-two – 15.000 users/year.)</div>	<div>[...]</div> <div>Note The introduction of a new activity means service has been expanded (reference in this case is to the water outlets whose construction was decided during operation, as specified in the single form)</div>	<div>Monthly report from health centres</div>	<div>[...]</div>
	<div>B.2. Supplying of medical material to 2 health centres (Dist-one and Dist-two – 15.000 users/year) to ensure that services can be provided (program managed in coordination with AWD)</div>		<div>Monthly report from health centres</div>	<div>Active cooperation with AWD in supply of medicines</div> <div>[...]</div>
	C. Non food Items			
	<div>C.1. C.1. Minimum essential household items (kitchen kit and blankets) provided to 6.057 families classified as "vulnerable".</div>	<div>[...]</div>	<div>Monitoring Reports</div>	<div>[...]</div>
ACTIVITIES		MEANS	COSTS	<div>Note Actualise figures showing expenditure up to 15 days from submission of Preliminary Report.</div>
	A. Water & Sanitation			
	<div>A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)</div>	<div>Construction labour</div> <div>Purchase of material for construction of wells</div> <div>Purchase of 2 Afridev pumps</div> <div>Rental of drill</div>	<div>MATERIALS AND WORK = EUR 16,000</div>	<div>Risk of contamination of aquifers in the proximity of Health Centres</div>
	<div>A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)</div>			
	<div>A.1.3. Setting up of 2 Water Management Committees (handover of health centres,</div>			
	<div>A.2.1. Consultation with women to identify adequate places for building toilet facilities</div>	<div>Construction labour</div> <div>Purchase of material for construction of latrines</div>	<div>MATERIALS AND WORK = EUR 15,000</div>	<div>Active participation of women</div>
	<div>A.2.2.. Construction according to international standards of 100 gender-separated latrines</div>	<div>Note A new activity was included</div>		<div>Active participation of community in maintenance of wells</div>
	<div>A.2.3. Training and equipping of 10 persons in charge of maintaining latrines</div>			<div>[...]</div>
	<div>A.2.4. Construction of 6 new water outlets</div>	<div>Construction labour</div> <div>Purchase of material for construction of wells</div> <div>Purchase of 6 Afridev pumps</div> <div>Rental of truck</div>	<div>MATERIALS AND WORK = EUR 36,850</div>	<div>Active participation of community in maintenance of latrines</div> <div>[...]</div>

	B. Health		
	B.1.1. . Reorganisation of the 2 health centres according to national protocols	Labour for small rehabilitation work Purchase of materials for rehabilitation	LABOUR AND MATERIALS= EUR 28,000
	B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health		Active participation of medical personnel of health centres
	B.1.3. Drafting of a health monitoring plan in the two target zones		Risk of halt of salary payments to medical personnel
	B.1.4. Coordination of vaccination campaign with AWD		[...]
	B.1.5. Small infrastructure work in the two Health centres		
	B.2.1. Supply of medical materials to the 2 health centres	Medical material	MEDICINES = EUR 115,000
	B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system		Active participation of medical personnel of health centres
			Risk of halt of salary payments to medical personnel
			[...]
	C. Non food Items		
	C.1.1. Consultation with community representatives	Purchase of kitchen kits and blankets	MATERIALS = EUR 90,000
	C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as "vulnerable"		Active participation of community representatives in determining what families are vulnerable
			Access to target areas assured for population census and kit distribution
			[...]
	Project Management		
	Technical personnel (TITLE 01)	Expatriate Personnel Project Manager Doctor Hydro-geologist Local Personnel Nurses	EXPATRIATE STAFF= EUR 24,560 LOCAL STAFF = EUR 16,500
	Management personnel (TITLE 02)	Expatriate Personnel Project Manager HQ Personnel Local Personnel Administrator Logistics Person Guards	EXPATRIATE STAFF = EUR 24,000 LOCAL STAFF = EUR 26,800
	Logistics	Office Rental of 4x4 4x4 (depreciation) 2 Radios (depreciation) Running costs of 2 vehicles Running costs of 2 radios	TRANSPORT = EUR 16.820 COMMUNICATION = 3.600 OFFICE =EUR 8.720
			[...]
	Monitoring / Evaluation		
	Execution of Monitoring Plan	Monitoring Plan (Terms of reference)	[...]
	Execution of Final Evaluation	External Final Evaluation (Terms of reference)	EXTERNAL EVALUATION = EUR 0
			[...]
	Other Services		
	Visibility	Visibility Plan	VISIBILITY FUNDS = EUR 2,280
		PRE-CONDITIONS	Access to target areas assured for entire duration of operation

## WORK PLAN (ECHOTrain Project): Pre-Final Model

ACTIVITY	Month I				Month II				Month III				Month IV				Month V				Month VI				Month VII				Month VIII				Responsibility					
	I	II	III	IV	I	II	III	IV	I	II	III	IV	I	II	III	IV	I	II	III	IV	I	II	III	IV	I	II	III	IV	PM	HYD	HCD	RD	RLC	[...]				
A. Water & Sanitation																																						
A.1. Two health centres (Dist-one and Dist-two) have enough water for their needs																																						
A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)																																						
Setting up of work team																																						
Planning of activity and discussion with key actors																																						
Health and hydro-geological surveys																																						
Sharing of information with key actors and decision-making process																																						
A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)																																						
Rental of equipment																																						
Readying by community of water outlet access area																																						
Drilling and construction of well																																						
Installing pump, testing and analysis of water																																						
A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)																																						
Meetings with community and setting up of water committee																																						
Training water point committee																																						
Follow-up and monitoring																																						
A.2. 2.000 residents have access to adequate and safe toilet facilities and safe water outlets in the critical areas where displaced persons reside																																						
A.2.1. Consultation with women to identify adequate places for building toilet facilities																																						
[...]																																						
A.2.2. Construction according to international standards of 100 gender-separated latrines																																						
[...]																																						
A.2.3. Training and equipping of 10 persons in charge of maintaining latrines																																						
[...]																																						
A.2.4. Construction of 6 new water outlets																																						
Rental of equipment																																						
Readying by community of water outlet access area																																						
Drilling and construction of wells																																						
Installing pump, testing and analysis of water																																						
Follow-up and monitoring																																						
B. Health																																						
B.1. Organisation of essential services (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system) strengthened in 2 health centres (Dist-one and Dist-two – 15.000 users/year)																																						
B.1.1. Reorganisation of the 2 health centres according to national protocols																																						
[...]																																						
B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres																																						
[...]																																						
B.1.3. Drafting of a health monitoring plan in the two target zones																																						
[...]																																						
B.1.4. Coordination of vaccination campaign with AWD																																						
[...]																																						
B.1.5. Small infrastructure work in the two Health centres																																						
[...]																																						
B.2. Supplying of medical material to 2 health centres (Dist-one and Dist-two – 15.000 users/year) to ensure that services can be provided (program managed in coordination with AWD)																																						
B.2.1. Supply of medical materials to the 2 health centres																																						
[...]																																						
B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system																																						
[...]																																						
C. Non food Items																																						
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[...]																																						
Project Management																																						
Technical personnel (TITLE 01)																																						
Management personnel (TITLE 02)																																						
Logistics																																						
Monitoring / Evaluation																																						
Execution of Monitoring Plan																																						
Execution of Final Evaluation																																						
Other Services																																						
Visibility																																						
MILESTONES																																						
1. Planning of activity for siting of water outlets completed by first week of second month																																						
2. Health and hydro-geological surveys completed by third week of second month																																						
3. Siting of water outlets completed by first week of third month																																						
4. Guaranteed functioning of water outlets in health centres by first week of fourth month																																						
5. Water committees set up and functioning by second week of fourth month																																						
[...]																																						
KEY																																						
PM = Project Manager																																						
HYD = Hydro-geologist																																						
HCD = Health centre Director																																						
RD = Person responsible of local Districts																																						
RLC = Person responsible of local communities																																						
ROLE																																						





EUROPEAN COMMISSION  
HUMANITARIAN AID OFFICE (ECHO)

GRANT AGREEMENT

**Humanitarian Organisation:** Hox

**Title of the Operation:** Restoring of minimal health conditions for the populations affected by the conflict and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland

**Grant agreement number:** ECHO/[...]

## INTERIM FINANCIAL REPORT

<b>Total estimated budget</b>	525.609,71
Total direct costs of the Operation	491.224,03
<b>Maximum EC contribution</b>	470.077,77
Percentage of total eligible costs	89,43%

Code	Heading	Initial	Modified	Actual Budget
<b>01</b>	<b>Goods &amp; services delivered to the beneficiaries</b>	<b>393.224,03</b>	<b>373.224,03</b>	<b>355.140,00</b>
<b>01.01.</b>	<b>Food Security</b>			
01.01.01.	Basic food security			
01.01.02.	Other food distribution			
01.01.03.	Food for work			
01.01.04.	School feeding			
01.01.05.	Public Canteens			
01.01.06.	Agricultural activities			
01.01.07.	Livestock			
01.01.08.	Fisheries			
01.01.80.	Training, local capacity building			
01.01.99.	Other food and security			
<b>01.02.</b>	<b>Water and Sanitation</b>	<b>49.200,00</b>	<b>76.700,00</b>	<b>67.850,00</b>
01.02.01.	Waste disposal and latrines	33.200,00	15.750,00	15.000,00
01.02.02.	Rural water sources	16.000,00	60.950,00	52.850,00
01.02.03.	Urban and municipal supply system			
01.02.04.	Water treatment			
01.02.80.	Training, local capacity building			
01.02.99.	Other water and sanitation			
<b>01.03.</b>	<b>Health</b>	<b>194.734,03</b>	<b>152.234,03</b>	<b>143.000,00</b>
01.03.01.	Primary health care	154.734,03	122.234,03	115.000,00
01.03.02.	Secondary health care			
01.03.03.	General health care : primary and secondary			
01.03.04.	Emergency health care			
01.03.05.	Epidemics			
01.03.06.	Drugs supply			
01.03.07.	Routine vaccination			
01.03.08.	Support of specialised institutions			
01.03.09.	Disabled population			
01.03.10.	Health education and training			
01.03.11.	Family planning			
01.03.12.	AIDS and STD			
01.03.13.	Targeted control of endemic diseases			
01.03.14.	Psychosocial			
01.03.15.	Rehabilitation of medical facilities	40.000,00	30.000,00	28.000,00
01.03.80.	Training, local capacity building			
01.03.99.	Other health			

Code	Heading	Initial	Modified	Actual Budget
<b>01.04.</b>	<b>Nutrition</b>			
01.04.01.	Therapeutic feeding			
01.04.02.	Supplementary feeding			
01.04.03.	Supplementary and Therapeutic feeding			
01.04.04.	Nutritional education			
01.04.05.	Surveys and monitoring			
01.04.80.	Training, local capacity building			
01.04.99.	Other nutrition			
<b>01.05.</b>	<b>Shelter</b>			
01.05.01.	Emergency shelter			
01.05.02.	Post emergency/semi-permanent shelter			
01.05.80.	Training, local capacity building			
01.05.99.	Other shelter			
<b>01.06.</b>	<b>Non food items</b>	<b>95.000,00</b>	<b>90.000,00</b>	<b>90.000,00</b>
01.06.01.	Domestic items	95.000,00	90.000,00	90.000,00
01.06.02.	Heating and cooking fuel			
01.06.03.	Survival items			
01.06.04.	Hygiene items			
01.06.05.	Educational items			
01.06.06.	Resettlement items			
01.06.80.	Training, local capacity building			
01.06.99.	Other non food items			
<b>01.07.</b>	<b>Rehabilitation/continuum</b>			
01.07.01.	Permanent shelter			
01.07.02.	Educational facilities			
01.07.03.	Social services			
01.07.04.	Self-sufficiency			
01.07.80.	Local capacity building/training			
01.07.99.	Other rehabilitation			
<b>01.08.</b>	<b>Disaster preparedness and mitigation</b>			
01.08.01.	Infrastructure support			
01.08.02.	Advocacy and public awareness raising			
01.08.03.	Mitigation works			
01.08.04.	Mapping and data computerization			
01.08.05.	Education			
01.08.06.	Early warning systems			
01.08.07.	Research and dissemination			
01.08.08.	Facilitation of co-ordination			
01.08.09.	Institutional strengthening			
01.08.80.	Local capacity building/training			
01.08.99.	Other DIPECHO			
<b>01.09.</b>	<b>Special mandates</b>			
01.09.01.	Protection			
01.09.02.	Facilitation of co-ordination			
01.09.03.	Info management and dissemination			
01.09.04.	Family reunification/tracing			
01.09.05.	Care and maintenance			
01.09.06.	Facilitation of return			
01.09.80.	Local capacity building/training			
01.09.99.	Other special mandates			
<b>01.10.</b>	<b>Specific actions</b>			
01.10.01.	Logistics			
01.10.02.	Security and protection			
01.10.03.	Emergency rehabilitation infrastructure			
01.10.04.	Capacity building (NGOs and other humanitarian actors)			
01.10.80.	Local capacity building/training			
01.10.99.	Other specific actions			

Code	Heading	Initial	Modified	Actual Budget
<b>01. 11.</b>	<b>De-mining and awareness</b>			
01. 11.01.	De-mining			
01. 11.02.	Awareness			
01. 11.80.	Local capacity building/training			
01. 11.99.	Other de-mining			
<b>01. 12.</b>	<b>International transport</b>			
01. 12.01.	Maritime			
01. 12.02.	Overland			
01. 12.03.	Air			
<b>01. 13.</b>	<b>Personnel</b>	<b>54.290,00</b>	<b>54.290,00</b>	<b>41.060,00</b>
01. 13.01.	Expatriate staff	36.050,00	36.050,00	24.560,00
01. 13.02.	Local staff	18.240,00	18.240,00	16.500,00
<b>02.</b>	<b>Support costs</b>	<b>98.000,00</b>	<b>118.000,00</b>	<b>82.220,00</b>
<b>02 01.</b>	<b>Personnel</b>	<b>56.100,00</b>	<b>66.100,00</b>	<b>50.800,00</b>
02. 01.01.	Expatriate staff	27.700,00	32.700,00	24.000,00
02. 01.02.	Local staff	28.400,00	33.400,00	26.800,00
<b>02 02.</b>	<b>Local logistic costs</b>	<b>24.600,00</b>	<b>29.600,00</b>	<b>21.790,00</b>
02. 02.01.	Office expenses	9.800,00	9.800,00	8.400,00
02. 02.02.	Office consumable and supplies	400,00	400,00	320,00
02. 02.03.	Local contracted transport	8.000,00	13.000,00	7.250,00
02. 02.04.	Distribution, storage and daily labour			
02. 02.05.	Running costs	6.400,00	6.400,00	5.820,00
02. 02.06.	Other			
<b>02 03.</b>	<b>Durable equipment</b>	<b>9.800,00</b>	<b>9.800,00</b>	<b>7.350,00</b>
02. 03.01.	Vehicles	5.000,00	5.000,00	3.750,00
02. 03.02.	Communication	4.800,00	4.800,00	3.600,00
02. 03.03.	Other			
<b>02 04.</b>	<b>Security</b>			
<b>02 05.</b>	<b>Feasability, need assesment and other studies</b>			
<b>02 06.</b>	<b>Specialised services</b>	<b>5.000,00</b>	<b>10.000,00</b>	<b>0,00</b>
02. 06.01.	External quality and quantity controls			
02. 06.02.	External evaluation	5.000,00	10.000,00	0,00
02. 06.03.	External audit			
<b>02 07.</b>	<b>Insurance costs</b>			
<b>02 08.</b>	<b>Visibility and communication programmes</b>	<b>2.500,00</b>	<b>2.500,00</b>	<b>2.280,00</b>
<b>02 09.</b>	<b>Others to be specified in the proposal</b>			
<b>03</b>	<b>Indirect costs</b>	<b>34.385,68</b>	<b>34.385,68</b>	<b>28.700,00</b>
<b>04</b>	<b>Contingency reserve (pro memoria)</b>	<b>0,00</b>	<b>0,00</b>	<b>0,00</b>



## **"CASE STUDY"**

# **GUIDED EXERCISE FOR THE SUBMISSION OF OPERATION PROPOSALS TO ECHO**

**(Phase V. *Final Report*)**

In collaboration with



With the contribution of



## INSTRUCTIONS FOR USE

This section presents a model of Final Report, built according to the specifications of the FPA 2003 and to the new requests ECHO poses for the submission of the reference reporting. Documents in this section include:

- ➔ Final Narrative Report
- ➔ Final Financial Report
- ➔ Logical Framework
- ➔ Workflow Plan

The purpose of this section is to let personnel understand the new requirements introduced by ECHO in the submission of Reports for the final phase.

It is worth to recall that the Final Report – both the narrative (Final Narrative Report) and financial annexes (Final Financial Report) – must be submitted according to the following procedure, which differentiates between:

- ➔ Primary emergency, emergency, and other operations lasting a maximum of 6 months;
- ➔ Operations lasting more than 6 months.

TYPE OF PROJECT	WHEN?
< 6 MONTHS  (PRIMARY EMERGENCY, EMERGENCY, OTHER OPERATIONS LASTING A MAXIMUM OF 6 MONTHS)	➔ <u>FINAL REPORT</u> Within <b>6 weeks</b> from end of implementation period (date set in point 4.1. of Grant Agreement), if not otherwise specified in Grant Agreement.
> 6 MONTHS  (OPERATIONS WITH AN IMPLEMENTATION PERIOD OVER 6 MONTHS)	➔ <u>FINAL REPORT</u> Within <b>3 months</b> from end of implementation period

## FINAL NARRATIVE REPORT

The Final Narrative Report must be written according to the following principles:

- ➔ Show the degree of realisation of the specific objective and of the expected results of the operation, with special reference to the data gathered through the indicator verification sources;
- ➔ Provide Logical Framework and final Work Plan of the operation, updated according to results obtained, allowing a comparison between expected and obtained results.

Therefore, when submitting the narrative report the most important parts besides the Logical Framework and updated Work Plan, are sections 4, 6, 7, 8 and 9, which MUST BE FILLED OUT MANDATORILY.

### FINAL FINANCIAL REPORT

The Final Financial Report must be written according to the following procedure:

- ➔ Use exclusively the format of ANNEX 2 (“Breakdown of expenditure – Final Financial Report”);
- ➔ The budget in the Final Financial Report must feature **at least 8-digit** detail, regardless of the type of project

**NOTE:** Concerning the real expenditure incurred for the operation, the cost and type of each Element must be indicated in detail.

As ECHO does not impose its own codification of elements, NGOs are free to provide a detail of elements in the manner that they wish. However, the level of detail must be sufficiently clear and all products, good and services needed for the implementation of the operation must be described thoroughly, specifying their nature, number, duration, unit cost and total cost.

#### **NOTE:**

1. The documents included **do not represent** either **ECHO official documents** or a perfect model of an Interim Report to be replicated when writing an operation proposal and/or in the various phases of execution of an operation;
2. The exercise has been built around the hypothesis of an operation **CO-FINANCED** by ECHO within a **GLOBAL PLAN**. Common sense dictates that in primary emergency and emergency cases the level of detail of this Interim Report will be difficult to attain, and hardly required. However, every effort should be made to ensure that the operation and its impact be monitored properly.

Any remarks or requests for information can be sent to the following e-mail address:  
[emergenza@coopi.org](mailto:emergenza@coopi.org)



## SINGLE FORM FOR HUMANITARIAN AID OPERATIONS

### 1. GENERAL INFORMATION

#### 1.1. Name of humanitarian organisation

HOx

#### 1.2. FPA number (if applicable)

[...]

**Note**

Include, if applicable, the FPA number

#### 1.3. Purpose of the submission

##### 1.3.1. Proposal

New proposal ☐

Revised proposal ☐

ECHO reference A/

[NOT APPLICABLE]

##### 1.3.2. Interim narrative report ☐

[NOT APPLICABLE]

##### 1.3.3. Preliminary final report ☐

[NOT APPLICABLE]

##### 1.3.4. Final report ☒ date: dd-mm-yy

#### 1.4. Grant agreement number ECHO/[...]

#### 1.5. Implementing rules applicable to this agreement [NOT APPLICABLE]

Grant, 100% financing ☐

Grant, co-financing ☐

#### 1.6. Framework of this submission [NOT APPLICABLE]

Primary emergency decision ☐

Emergency decision ☐

Ad hoc decision ☐

Global plan decision ☐

DIPECHO ☐

Other, please specify ☐

#### 1.7. Executive summary of operation [NOT APPLICABLE]

(4.1.) Title of the operation

(4.2.) Country(ies) and location(s) of implementation

(4.3.) Start date of the operation

(4.4.) Duration in months

(4.5.1.) Total number of direct beneficiaries

- (4.5.2.) Identify the status and give details of the beneficiaries
- (4.7.1.) Operation specific objective
- (4.7.2.) Indicators and sources of verification
- (4.8.1.) Expected result 1
- (4.8.n.) Expected result n
- (11.1.) Total budget of the operation: EUR
- (11.2.) Contribution requested from EC: EUR
- (11.5.) Eligibility date of expenditure

## **2. NEEDS ASSESSMENT**

**[NOT APPLICABLE]**

- 2.1. Date(s) of assessment
- 2.2. Methodology and sources of information used
- 2.3. Organisation/person(s) responsible for the assessment
- 2.4. Problem statement and stakeholder analysis
- 2.5. Findings of the assessment

## **3. HUMANITARIAN ORGANISATION'S STRATEGY [NOT APPLICABLE]**

- 3.1. Partner's strategy in country and/or region(s) of operation
- 3.2. Link between operation, the findings of the assessment and the problem statement
- 3.3. Is/are there similar operation(s) in the country/region?  
If yes, explain the measures foreseen to avoid overlap/duplication
- 3.3. Previous humanitarian operations with EC grants in the country/ region
- 3.5. Have you discussed this proposal with ECHO's technical assistance office in the country/region of operation?

**Note:** Data must be updated in relation with the advancement of work, especially as regards the beneficiaries.

**Note:** The matrix of the Logical Framework must be adapted considering the results obtained.

## **4. OPERATIONAL FRAMEWORK**

### **4.1. Title of operation**

⇒ Restoring of minimal health conditions for the populations affected by the disaster and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland”.

### **4.2. Exact location of the operation**

The operation has taken place in the locations foreseen in the initial proposal. Please see the annexes for maps of the areas of operation.



**4.3. Start date of the activities in the field, (start date of the operation)**

dd-mm-yy as per art. 2.2. of the Grant Agreement.

**4.4. Duration in months**

8 months, as per art. 2.2. of the Grant Agreement

**Note:** Throughout this section, confirm, update and if possible detail more accurately the data provided previously

**4.5. Beneficiaries**

**4.5.1. Total number of direct beneficiaries**

As stated in the Interim and Preliminary Reports, the operation regarded a number of beneficiaries higher than the estimate contained in the proposal because of the arrival of newly displaced persons. The final total number of beneficiaries is 17.500 (users of health centres and beneficiaries of other services provided by the operation).

**4.5.2. Identify the status and give details of the beneficiaries:**

The data gathered during the census and monitoring phase allow to update the description of beneficiaries, as indicated in the following table:

**Note:** End of operation data must be as accurate as possible

Type	Status	Number
Displaced Persons	IDPs, some of which just recently arrived from nearby districts, mainly families of farmers raising small animals. In most cases families were able to carry their belongings with them.	7.488
Displaced women in target districts	IDPs.	2.822
Displaced children	IDPs; some cases of scabies have occurred [...].	2.713
Users of health centres in the two districts	Local population. Estimate was correct for both centres.	10.345
Children < 5	Mixed.	9.314
Women classified as "most vulnerable"	Local population. Their number grew after a census and arrival of newly displaced persons.	3.411
Medical and paramedical personnel in the two districts	Local population. The number was updated following minor changes in the health centres' staffing.	125

#### 4.5.3. “Catchment” population

The number of indirect beneficiaries is confirmed to have been 25.000 people in both districts.

#### 4.5.4. What are the identification mechanisms and criteria?

[NOT APPLICABLE]. For more detail see initial proposal and Interim Report.

#### 4.5.5. To what extent and how were the beneficiaries involved in the design of the operation?

[NOT APPLICABLE]. For more detail see initial proposal and Interim Report.

**Note:**

Include any changes if relevant

#### 4.5.6. Sectors of activity

The Work Plan has not been modified from what was specified in the Preliminary Final Report:

- Sector 1: Water & Sanitation:
  - ⇒ *Rural water sources*: Construction of eight wells;
  - ⇒ *Waste disposal and latrines*: Construction of 90 gender-separated latrines
- Sector 2: Health
  - ⇒ *Primary health care*: Relaunch of activities in the two health centres (vaccinations, maternity and infancy monitoring plan, reproductive health, emergency room, reference system); supply of medical materials and relaunch of vaccination activities (in collaboration with AWD).
  - ⇒ *Rehabilitation of medical facilities*: Light rehabilitation of the two health centres.
- Sector 3: Non-food Items:
  - ⇒ *Domestic items*: Distribuzione di kit di pentole e coperte ai nuclei familiari maggiormente vulnerabili.

#### 4.5.7. Give the following information for each sector

- Total number of direct beneficiaries

Sector	Total number of direct beneficiaries
Water & Sanitation	17.500 + 123
Health	17.500 + 123
Non-food Items	6.400

- Types of beneficiaries and number of beneficiaries per type

Sector	Category of beneficiaries	N° of beneficiaries per category
<b>Water &amp; Sanitation</b>	Displaced persons	7.488
	Displaced women in target districts	2.822
	Displaced children	2.713
	Estimated users of health centres in the two districts	10.345
	Children < 5	9.314
<b>Health</b>	Displaced persons	7.488
	Displaced women in target districts	2.822
	Displaced children	2.713
	Estimated users of health centres in the two districts	10.345
	Children < 5	9.314
	Medical and paramedical personnel in the two districts	125
<b>Non-food Items</b>	Women classified as "most vulnerable"	3.650
	Displaced women in target districts	2.822

- Location

Sector	Location
<b>Water &amp; Sanitation</b>	Dist-two and Dist-one
<b>Health</b>	Dist-two and Dist-one
<b>Non-food Items</b>	Dist-one (for the most part, also considering newly displaced persons) and Dist-two

#### 4.6. Principal objective

The general objective of the operation is confirmed, in accordance with the objective of the Decision adopted by ECHO for the funding of the Ad Hoc Decision, as:

⇒ Contributing to the recreation of the basic conditions for public services in the disaster-affected areas of the Cordoba province.

#### 4.7. Operation-specific objective

##### 4.7.1. Specific objective

**Note:**

Adding a comment to the data is IMPORTANT

The objective of the operation, with the number of beneficiaries updated as in the Interim Report, is confirmed:

⇒ Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.500

displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)

The operation has brought the following benefits, listed by category of beneficiaries:

	Type of beneficiaries (see 4.5.2.)	Benefits
I	Displaced persons	<ul style="list-style-type: none"> <li>⇒ Access to safe toilet facilities for <b>7.488</b> beneficiaries of the latrines;</li> <li>⇒ Better environmental and hygiene conditions for 7.488 beneficiaries of the latrines;</li> <li>⇒ <b>Construction of 90 latrines and 6 safe water points;</b></li> <li>⇒ <del>Guaranteed minimum medical care for all 7.488 displaced persons.</del></li> </ul>
II	Displaced women in target districts	<ul style="list-style-type: none"> <li>⇒ Supply of minimum required elements for safe preparation and storage of food and water for <b>2.822 women</b>;</li> </ul>
III	Displaced children	<ul style="list-style-type: none"> <li>⇒ See "I";</li> <li>⇒ Assured vaccine coverage for identified displaced children (<b>2.713</b>)</li> </ul>
IV	Users of health centres in the two districts	<ul style="list-style-type: none"> <li>⇒ Less incidence of gastro-intestinal diseases: <b>-20% and -45%</b> recorded in the Dist-one and Dist-two areas;</li> <li>⇒ Relaunch of health care services begun especially for emergency room, reproductive health and maternity / child health; strenghtening of diagnosis and treatment of endemic diseases.</li> </ul>
V	Children < 5	<ul style="list-style-type: none"> <li>⇒ Assured vaccine coverage for <b>2.713 children</b>;</li> <li>⇒ Reduction of incidence of gastro-intestinal diseases by <b>60% and 65%</b> in Dist-one and Dist-two areas respectively</li> </ul>
VI	Women classified as "most vulnerable"	<ul style="list-style-type: none"> <li>⇒ Supply of minimum required elements for safe preparation and storage of food and water for <b>5.057 women</b>.</li> </ul>
VII	Medical and paramedical personnel in the two districts	<ul style="list-style-type: none"> <li>⇒ Restarting of general activities and of the implementation of health guidelines, completion of infrastructure work for Dist-one and Dist-two health centres (construction of water outlets completed);</li> <li>⇒ Strenghtening of management / supervision ability of medical and nursing personnel in both districts.</li> </ul>

The data appear to confirm that the operation has met all expected benefits for all categories of beneficiaries [...]. It is worth noting in particular that [...].

#### 4.7.2 Indicator(s) and source(s) of verification

Indicators for specific objective			
N.	Indicator	Actualised	Source of verification
Ind. N°1	Level of water-related pathologies brought back to levels preceding disaster	Levels reached (better performance for Dist-two area)	Health Centre Reports
Ind. N°2	Vaccine coverage brought back to levels preceding disaster	100% of children vaccinated	AWD Reports Health Centre Reports
Ind. N°3	Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones	<b>90 latrines</b> built and currently maintained according to standards defined by committees Construction of 6 hand wells	Monthly Reports
Ind. N°4	Coverage of essential health services assured according to parameters preceding disaster	Coverage assured for emergency room, reproductive health, maternity / child health services and diagnosis and treatment of endemic diseases	Health Centre Reports
Ind. N°5	Coverage of essential health services assured according to parameters preceding disaster	5.057 families have received a kitchen kit and blankets	Monthly Reports
Ind. N°6	Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life)	Relaunch of protocols [...]	Monthly Reports
Ind. N°7	Reference and surveillance system restored and operational at the end of operation	9 Committees meeting regularly 6 Water committees meeting regularly	Monthly Reports
Ind. N°8	[...]	[...]	[...]

**Note:** Data must be commented in final report

The data appear to confirm that the operation has met all expected objectives [...]. It is worth noting in particular that [...]. Some indicators also appear to prove that [...].

## 4.8. Results and indicators

### 4.8.1. Result 1, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 1	A.1. The two health centres (Dist-one and Dist-two) have access to enough water for their needs		
N.	Indicator	Actualised	Source of verification
Ind. N°1	40 litres/day per patient admitted to hospital	50 litres per day guaranteed for both centres	Monthly health centre reports
Ind. N°2	5 litres/day for visiting (non-admitted) patients	5 litres guaranteed	Monthly health centre reports
Ind. N°3	1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	1.000 litres guaranteed for both centres	Monthly health centre reports
Ind. N°4	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Both water outlets are maintained in a fully satisfactory way	Monthly health centre reports
Ind. N°5	Water points are fully sustained at the end of intervention	Water outlets appear to be fully sustainable by both health centres	Final Evaluation Report
Ind. N°6	[...]	[...]	[...]

**Note:** Data in final report must be commented also for all results obtained

The data appear to confirm that the operation has met its expected objective in reference to expected result A.1 [...] It is worth noting in particular that [...]. Some indicators also appear to prove that [...].

### 4.8.2. Result 2, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 2	A.2. 2.000 inhabitants have access to adequate and safe toilet services in the areas where the displaced population has settled.		
N.	Indicator	Actualised	Source of verification
Ind. N°1	100 latrines built and used appropriately	90 latrines built; All latrines are used appropriately	Final technical report
Ind. N°2	Women can safely use toilet facilities	Safety problems for women have not been encountered	Bi-monthly leader report

Ind. N°3	Latrines are at a minimum distance of 50m from dwellings	All latrines are up to standard	Final technical report
Ind. N°4	<b>Water outlets with standard features</b>	<b>According to standard</b>	Final Evaluation Report

**Note:** New indicators have been inserted for the new activities

The data appear to confirm that the operation has met its expected objective in reference to expected result A.2 [...] It is worth noting in particular that [...]. Some indicators also appear to prove that [...].

#### 4.8.3.Result 3, relevant indicator(s) and source(s) of verification

Sector	B. Health		
Result 3	B.1. Strengthening of the organisation of services (Dist-one and Dist-two – 15.000 users/year) (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]
Ind. N°5	[...]	[...]	[...]
Ind. N°6	[...]	[...]	[...]
Ind. N°7	[...]	[...]	[...]

The data appear to confirm that the operation has met its expected objective in reference to expected result B.1 [...] It is worth noting in particular that [...]. Some indicators also appear to prove that [...].

#### 4.8.4. Result 4, relevant indicator(s) and source(s) of verification

Sector	Health		
Result 4	B.2. Two health centres (Dist-one and Dist-two – 15.000 users/year) supplied with medical materials to ensure their services can be provided (program in cooperation with AWD.)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]

The data appear to confirm that the operation has met its expected objective in reference to expected result B.2 [...] It is worth noting in particular that [...]. Some indicators also appear to prove that [...].

#### 4.8.5. Result 5, relevant indicator(s) and source(s) of verification

Sector	C. Non-food items		
Result 5	C.1. 5.000 family groups classified as “vulnerable” provided with minimum household items (kitchen kits and blankets.)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]

The data appear to confirm that the operation has met its expected objective in reference to expected result C.1 [...] It is worth noting in particular that [...]. Some indicators also appear to prove that [...].

- ⇒ **Note:** In the final report ALL ACTIVITIES have to be fully described even if concluded and explained in previous reports.
- ⇒ **Note:** Give reason for, and explain, in this section any adaptations or changes to work plan, provided they contribute to reaching the specific objective and expected results.

#### 4.9. Activities

In order to achieve the foreseen objectives the following activities have been implemented:

⇒ **Water & Sanitation** sector (result 1 and 2)

##### A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)

The expatriate expert, in cooperation with local representatives of the two target areas, has carried out the hydro-geological analysis and [...].

Through the analysis, adequate sites have been identified and the technical characteristics of the wells have been defined. Depth has been set at 45 metres at the Dist-one centre and 40 metres at the Dist-two centre. [...]

*Progress:* At the end of the work, a technical report was drafted (see annexes for more detail) and a meeting with representatives of the local office and health centres was organised. [...].

##### A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)

During the 2nd and 3rd month the first water outlet for the Dist-one centre was built...

During the 4th month the water outlet for the Dist-two centre was built....

The community, as was indicated in the operation proposal, took part in the search for materials and preparation of the terrain

[...].



*Progress:* At the end of the work, lab exams have been carried out to determine water quality and punping tests were performed. [...] Both tests gave positive results.

A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)

During the 3rd month the community has activated, cooperating actively with the director of the Dist-one Health centre, the Water committee. The committee is composed of [...] and has the purpose of [...]

To ensure that it could be immediately operational, a training module was produced. It is structured as follows: [...]

*Progress:* The head of the operation has taken part in the activation of the Water committee, by participating in the meetings

A.2.1. Consultation with women to identify adequate places for building toilet facilities

The consultations have taken place [...] and have led to [...].

*Progress:* [...].

A.2.2. Construction according to international standards of 90 gender-separated latrines

Latrines have been provided...

*Progress:* At the end of the construction of each latrine, it was [...] Contacts with community representatives [...].

A.2.3. Training and equipping of 9 persons in charge of maintaining latrines

[...]

*Progress:* Every month, meetings with a sample of women have been organised to verify [...].

**Note: Explain in detail the new activities that have been introduced**

A.2.4. Construction of 6 new water outlets

As explained in the Preliminary Report, it was decided to build six new water outlets because of new needs that have emerged [...]. Work has been completed in the course of [...], after carrying out a thorough hydro-geological survey [...]. [...] Meetings with community [...]. Setting up of water committees, training and handover were completed [...].

*Progress:* [...]

⇒ **Health Sector** (results 3 and 4)

B.1.1. Reorganisation of the 2 health centres according to national protocols

[...]

B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres

[...]

B.1.3. Drafting of a health monitoring plan in the two target zones

[...]

B.1.4. Coordination with AWD of vaccination campaign

[...]

B.1.5. Light rehabilitation of the 2 health centres

[...]

B.2.1. Supply of medical materials to the 2 health centres

[...]

B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system

[...]

⇒ **Non-food Items** Sector (result 5)

C.1.1. Consultation with community representatives

[...]

C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”

[...]

**Note**

- ⇒ Specify if timetable has been met and, if applicable, what changes have been made and for what reasons;
- ⇒ Specify the impact of such changes;
- ⇒ Update the work plan accordingly and include it as an annex.

**4.10. Work plan**

Work has been carried out according to the annexed plan. Construction of the 6 wells has been done according to what has been defined in the Preliminary Report [...]. For the final work plan please see the annexed document.

**4.11. Monitoring, evaluation and external audit**

**4.11.1. Monitoring**

The monitoring plan has been defined according to the following table, listing the indicators to observe when examining the operation's expected results:

**Note:** Actualise the Terms of Reference of the monitoring plan in relation to the execution of the plan, highlighting any changes if and where applicable

## Actualised Terms of Reference for the Monitoring Plan

Expected result	Observed indicator	Source of verification and frequency of data collection	Person in charge	Reporting system	Decision-making process
A.1. The 2 health centres (Dist-one and Dist-two) have access to sufficient water for their needs	40 litres/day per admitted patient 5 litres/day per non-admitted patient 1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	Daily monitoring record	Head of warehouse for the Dist-one and Dist-two centres	Verification of registry by chief of operation	Weekly team meeting with doctor responsible for area
	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Daily visit and weekly report	Doctor in charge of area	Verification of report by Program Manager	Weekly team meeting with doctor responsible for area
	No faecal contamination (from coliforms) per 100 ml from source	Monthly laboratory exam	Lab director	Verification of results by Program Manager	Immediate intervention if standards not met
A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where the displaced population resides	Women can safely use toilet facilities	Monthly focus groups with a sample of women	Community leader	Meeting of community leaders and program manager	Weekly team meeting with doctor responsible for area
B.1. The organisation of services is strengthened in the 2 health centres (Dist-one and Dist-two, 15.000 users/year)	100 latrines built and used appropriately	Technical evaluation at end of construction	Program Manager	Technical Report	Weekly team meeting with doctor responsible for area
	Latrines are at a minimum distance of 50m from dwellings	[...]	[...]	[...]	...
	<b>Wells built according to SPHERE standards</b>	<b>Technical evaluation</b>	...	...	
B.1. The organisation of services is strengthened in the 2 health centres (Dist-one and Dist-two, 15.000 users/year)	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
B.2. The 2 health centres (Dist-one and Dist-two, 15.000 users/year) are supplied with medical materials assuring their functioning	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
C.1. 5.000 family groups classified as "vulnerable"	[...]	[...]	[...]	[...]	[...]

**Note:** Actualise with new activities carried out

are provided with minimum household items.

[...]

[...]

[...]

[...]

[...]

- ⇒ **Note:** If a final evaluation is foreseen it is **NECESSARY** to include the Evaluation Report with the Final Report.
- ⇒ **Note:** Include in text the most relevant elements emerging from evaluation.

#### 4.11.2. Evaluation

- Is an evaluation foreseen during the operation?  
Yes ☐ No ☒
- Is an evaluation foreseen after the operation?  
Yes ☒ No ☐

Evaluation has confirmed that [...]. Problems encountered have [...]. The most significant elements emerging from the Evaluation Report are the following three (for more detail see **annexed final report**)

- A. Contact work with beneficiaries [...];
- B. Connection between centres and provincial offices [...]
- C. [...]

In conclusion [...]. [...] **Lessons learned** [...].

#### 4.11.3. External audit

- Is an audit foreseen during the operation?  
Yes ☐ No ☒
- Is an audit foreseen after the operation?  
Yes ☐ No ☒

- Note:** Fill in this section only if:
- ⇒ Risks and assumptions have occurred;
  - ⇒ Security conditions have changed.

### 5. **RISKS AND ASSUMPTIONS [NOT APPLICABLE]**

5.1. Pre-conditions

5.2. Assumptions and risk assessment profile

5.3. Security

5.3.1. Situation in the field

5.3.2. Have you established a specific security protocol for this operation?

Yes ☐ No ☐ Standard procedures ☒

For further details see operation proposal.

5.3.3. Have you a specific plan for security-related and medical evacuations for this operation?

Yes ☒ No ☐ Standard procedures ☐

For further details see operation proposal.

5.3.4. Are your field staff and expatriates informed of and trained in these procedures?

Yes ☒ No ☐

For further details see operation proposal.

**Note:** Include all information necessary to aid COMPREHENSION of the Financial Report (which will feature all the details).

**Note:** Update / confirm the data.

**Note:** Each budget change must be highlighted and justified.

## 6. **RESOURCES REQUIRED**

### 6.1. **Total budget (point 11.1.)**

The percentage of the budget committed amounts to 100% of forecast budget, for a total amount of EUR 525.609,71.

No change to the overall amount of the budget has been made. However, as specified in previous reports, some changes have been made between budget chapters to meet certain needs that have arisen during operation [...].

In particular, a transfer of [...] has occurred between Title 01 and Title 02, in relation to the initial proposal, mainly due to [...] The more relevant modifications between budget chapters have occurred in relation to [...] with the purpose of [...]

All modifications made during operation have assured that objectives were met [...] by flexibly answering the needs of the beneficiaries [...]

The budget amount committed by AWD was EUR 27.765,97, spent for the purchase of medicines.

The budget amount committed by HOx is EUR 27.765,97, as per the initial proposal.

## 6.2. Human resources

### 6.2.1. Staff included in Title 1: “Goods and services delivered to the beneficiaries”

Status	Function and tasks	Final months of salary
EXP.	<b>Hydrogeologist</b> with the following functions: ⇒ Identify sites and follow construction work of the 2 pumps close to the Health centres; ⇒ Project and implement the construction of latrines. ⇒ Identify sites and follow construction work of the 6 new water outlets	4
EXP.	<b>Program Manager (Doctor)</b> with the following functions: ⇒ Pro-rate salary (3 months) for the activities related to overseeing the reorganisation work for the 2 Health centres.	3
EXP.	<b>HOx medical and health correspondent</b> whose function is to: ⇒ Organise and relaunch the surveillance activities and national protocols [...]	2
LOCAL	<b>Professional nurses</b> whose task is to assure the reorganisation of Health centres, with the following functions: ⇒ On the job training for second-level nursing personnel; ⇒ Supporting the vaccination campaign; ⇒ [...]	24 (3 X 8)

The operation has incurred costs for the staff included under Title 01 for a total amount of € 54.290,00. Estimates have taken into account the salary policy at HOx and the market costs in Interland.

### 6.2.2. Staff included in Title 2: “Support costs”

Status	Function and tasks	Final months of salary
EXP.	<b>Program Manager (Doctor)</b> with the following functions: ⇒ Pro-rate salary (5 months) as coordinator of the operation's activities and of the monitoring plan	5
LOCAL	<b>Administrator</b> tasked with managing the administrative part of the project, in coordination with the Program Manager.	8
LOCAL	<b>Logistics person</b> tasked with supporting the operation's activities, procurement and materiel logistics [...]	8
LOCAL	<b>Guards</b> assuring the security of the office and warehouse [...]	24 (8 X 3)
HQ	<b>Reference person at HOx's HQ</b> , charged with overseeing and monitoring the operation, to ensure its correct evolution and implementation [...].	3

The operation has incurred costs for the staff included under Title 02 for a total amount of € 66.100,00. Estimates have taken into account the salary policy at HOx and the market costs in Interland.

### 6.3. Material resources

#### 6.3.1. Equipment needed. Describe the procedure to be followed for the procurement of equipment.

The following purchases / rentals / depreciations have been made:

Item	Notes	N° procured	Procurement procedures followed
<b>PURCHASE</b>			
Pumps	Model [...]	8	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Purchasing cost / unit = €XXX; purchase made [...]. ⇒ Total cost = €XXX
[...]	[...]	[...]	⇒ [...]
<b>RENTAL</b>			
4 X 4	Model [...]	1	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = €XXX, rental made [...]. ⇒ Total cost = €XXX
Truck	Model [...]	1	⇒ To facilitate construction work of the 6 new wells a truck was rented for two months; ⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = €XXX, rental made [...]. ⇒ Total cost = €XXX
[...]	[...]	[...]	⇒ [...]
<b>DEPRECIATION</b>			
Radio	Model [...]	2	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 1 year); ⇒ Value of goods = XX; ⇒ Depreciation plan applied: [...] ⇒ Total cost = €XXX
4 X 4	Model [...]	1	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 2 years); ⇒ Value of goods = XX; ⇒ Depreciation plan applied: [...] ⇒ Total cost = €XXX
[...]	[...]	[...]	⇒ [...]



### 6.3.2. Goods to be purchased. Describe the procedure to be followed for the awarding of contracts.

Item	Note	N° procured	Procurement procedures followed
<b>PURCHASE</b>			
Medical material	[...]	See annexes for details	⇒ Open local call for bids (as indicated in ANNEX V) won by Firm XXX (see annex for further details), estimate of cost determined by market price lists; ⇒ Total cost (first + second lot + AWD material = €XXX)
Purchase of various materials for construction of wells (concrete, casings, manhole covers, small equipment, etc)	[...]	2	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = €XXX.
Purchase of material for construction of 6 wells	[...]	6	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = €XXX.
[...]	[...]	[...]	[...]
<b>RENTAL</b>			
[...]	[...]	[...]	[...]
<b>DEPRECIATION</b>			
[...]	[...]	[...]	[...]

### 6.3.3. If the operation requires the purchase of medicines and/or medical equipment: Do you have standard procedures for the purchase, handling and storage of these medicines/equipment?

Yes ☒ No ☐

For further details see operation proposal.

**Note:** Mandatory section.  
Fill in carefully and provide a critical reading

## 7. PERSPECTIVES OF THE HUMANITARIAN ORGANISATION IN TERMS OF LINKING RELIEF, REHABILITATION AND DEVELOPMENT

### 7.1. This (or similar) operation is under way since

The operation is an institutional support type of operation, already implemented by our organisation, including in Interland. We refer particularly to the [...] operations which have allowed to verify [...] It is finally important to note that [...] The experience acquired leads us to believe that in the future it will be fundamental [...].

## 7.2. Describe the expected level of sustainability

Besides the two main areas of sustainability described in the operation proposal, a third one has been added, relating to the construction (new activity) of 6 water outlets.

### Operational capacity of Health centres

The sustainability level of health centres remains tied to the financial means assured by the Ministry of Health, which continues to pay the salaries of medical and paramedical personnel, and by AWD which supplies essential medicines and manages the vaccination program [...].

The intervention has allowed more coordination with the Ministry, and the reorganisation of [...]

Cooperation with AWD will also assure in the future [...]. For a full sustainability of the health centres it is also fundamental [...]

### Maintenance of latrines and wells

The use of latrines in the area, already widely spread and tested, has not shown any problems; the construction of the latrines using materials found locally and the active part played by the local communities lead us to believe that maintenance will [...]

### Water outlets

The wells, included in the operation so as to better the living conditions of the displaced population, have been received very favourably by the groups of women, who have taken charge of their maintenance and management [...]. It appears therefore reasonable to expect [...].

## 7.3. Continuum strategy

HOx will continue its activity in the Cordoba province thanks to a new project funded by [...]. The purpose of the project is to [...] and it will involve directly [...]. Activity is expected to begin [...].

Moreover, on the basis of the meetings with the ECHO Field Officer, we plan to submit a project, currently in the feasibility study phase, for [...]. ...

**Note: Mandatory section.**

**Fill in carefully and provide a critical reading of the changes brought by the project**

## 8. MAINSTREAMING

### Human Rights

The operation has answered the needs of the population displaced by the disaster [...]. All necessary steps have been taken to verify its impact on the local population, in constant dialogue with the local community, the communities of displaced persons and local authorities [...]. The fact that HOx personnel took part in the permanent dialogue for assured that [...].

The living conditions of displaced persons, though still precarious, have become visibly better, as explained in other parts of the Final Report [...]. There have been no

instances of tension between the resident and displaced populations, also thanks to [...]. [...]

#### Gender

The operation has let women groups affirm their role significantly, as they have supported the [...]

Their work has been especially important for [...]

Working with local leaders has also allowed communication between [...].

[...]

#### Environment

The appropriate use of latrines has reduced in a relevant way the [...].

The construction of water outlets has allowed a better [...].

**Note: Mandatory section.**

**Fill in carefully and provide a critical reading of the changes brought by the project**

## **9. VISIBILITY PLAN AND COMMUNICATION STRATEGY**

The Visibility Plan has been completed and the following activities carried out:

- a. Large boards installed with the logos of ECHO and HOx in the Health centres and the communities where the latrines have been built [...]; The panels have also been placed near the **6 new wells built** [...].
- b. T-shirts and doctors' white coats with the logos of ECHO and HOx have been donated to medical and paramedical personnel [...];
- c. The scope of the intervention and the roles of ECHO and HOx have been thoroughly explained during meetings with local authorities and community leaders [...];
- d. Three radio programmes have been produced and broadcast on [...], with the purpose of [...].

## **10. FIELD COORDINATION AND LOCAL IMPLEMENTING PARTNERS**

### **10.1. National and local authorities**

HOx is officially recognised in Interland (Registry act no. XXX) as a non-governmental entity and as such is exempt from [...]. As detailed in the previous reports, it was therefore not necessary to [...].

### **10.2. Field co-ordination fora**

Coordination work has allowed to work on two different levels:

- A. In the first place [...];
- B. Secondly [...].

**Note**

Update or confirm in this section the data contained in the proposal

### **10.3. Implementing partner(s)**

#### **10.3.1. Name and address of implementing partner(s)**

As per initial proposal: Health Centre of Dist-one and Health Centre of Dist-two.

#### **10.3.2. Role of implementing partner(s) in this operation**

In both cases the partners have participated actively, within their assigned competence (providing of personnel and resources), in [...].

Two surveys have been carried out to [...]

Two teams, one for the Dist-one area and another for Dist-two, have been formed with the goal of defining a new development plan for safe water outlets [...]. The teams are still active and are pursuing their work [...].

#### **10.3.3. Type of relationship with implementing partner(s)**

As per initial proposal.

#### **10.3.4. History of previous collaboration with implementing partner(s)**

As per initial proposal.

#### **10.3.5. Name and title of the person(s) authorised to represent the implementing partner(s) with regard to this operation**

Mr XX (Dist-one), as per initial proposal; Mr ZX, because of staffing changes, as explained in the Interim Report (Dist-two).

**Note**

Update or confirm in this section the data contained in the proposal

### **10.4. Contractor(s) and procedure envisaged for the award of contracts**

#### **10.4.1. Name and address of contractor(s)**

#### **10.4.2. Role of contractor(s) in implementing this operation**

#### **10.4.3. Describe the procedure followed for the selection of contractor(s)**

All the procedures for procurement of material, equipment and vehicles have been in accordance with the provisions of Annex V (see also paragraphs 6.3.1. and 6.3.2. for more detail).

**Note**  
Indicate in this section the estimated and final figures.

## **11. FINANCIAL INFORMATION**

**11.1. Total budget of the operation:** € 525.609,71 (~~estimated~~ € 525.609,71)

**11.2. Contribution requested from European Community:**  
€ 470.077,77 (~~estimated~~ € 470.077,77)

**Percentage of the total amount:** 89,43 % (~~estimated~~ 89,43%)

### **11.3. Co-financing:**

**11.3.1. Indicate your own contribution:** € 27.765,97

**11.4.1. Contributions by other donors:** € 27.765,97

Name: AWD

**11.4. Pre-financing requested from European Community:** [NOT APPLICABLE]

**Percentage of the total EC contribution:** [NOT APPLICABLE]

**11.5. Eligibility of expenditures, date :** [NOT APPLICABLE]

**(4.3.) Start date of the operation :** [NOT APPLICABLE]

**11.5.1. If the operation has already started explain the reason that justifies that situation:** [NOT APPLICABLE]

- Primary emergency operation ☐
- Emergency operation ☐
- Other ☐

Please elaborate:

**11.5.2. If the eligibility date of expenditure precedes the start date of the operation please justify this request** [NOT APPLICABLE]

## **12. ADMINISTRATIVE INFORMATION**

**12.1. Humanitarian organisation's official name, address, phone/fax n°**

HOx [...]

**12.2. ECHO FPA number, (if applicable)**

[...]

**12.3. Name and title of legal representative**

[...]

**12.4. Name, telephone, fax and e-mail of desk officer at HQ**

[...]

**12.5. Name, telephone, fax and e-mail of the representative in the country of operation**

[...]

## **12.6. Bank account**

- Name of bank: [...]
- Address of branch: [...]
- Precise denomination of the account holder: [...]
- Full account number (including bank codes): [...]
- IBAN account code, (or BIC country code if the IBAN code does not apply): [...]

## **13. CONCLUSIONS AND PARTNER'S COMMENTS**

The operation has shown that in situations [...]. The contribution of local communities [...] and authorities [...]. Some problems, mainly related to [...], could have been avoided if [...].

[...]

LOGICAL FRAMEWORK (ECHOTrain Project): Model of Final Report					
	INTERVENTION LOGIC	OBJECTIVELY VERIFIABLE INDICATORS	SOURCES OF VERIFICATION	RISKS AND ASSUMPTIONS	
PRINCIPAL OBJECTIVE	Support the restoring of the essential conditions for public services in the areas hit by disaster in Cordoba Province	<b>Note</b> In the final logical framework table, include exact and actualised figures for beneficiaries (in this case the number of displaced persons is known thanks to census carried out during operation)			
SPECIFIC OBJECTIVE	Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.488 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)	1. Level of water-related pathologies brought back to levels preceding disaster (with better performance of the Dist-two centre) 2. Vaccine coverage brought back to levels preceding disaster for 2.713 children (100%) 3. Health and hygiene conditions in the dwellings of displaced persons (7.488 according to census) brought to standards in use in affected, regarding availability of latrines and safe water outlets 4. Coverage of essential health services assured according to parameters preceding disaster for emergency room, reproductive health, mother/child health and diagnosis and treatment of endemic diseases 5. Conditions brought back to normal (from lack of basic elements necessary for daily life) for 5.057 families 6. Reference and surveillance system restored and operational at the end of operation regarding adherence to national protocols, connection with 2nd-level health institutions and surveillance system  7. 9 Latrine Committees and 6 Water Committees managing satisfactorily latrines and water outlets in target areas, as estimated in proposal (average 1 meeting / month per committee)	1. 4. Survey Forms, Monthly Report from Health Centres 2. AWD Reports and Monthly Report from Health Centres 3. 5, 6, 7. Monitoring Reports and Final Evaluation Report  <b>Note</b> Modify indicator thresholds to show level of performance reached (in the example the actualisation of the indicator is shown in red)	Risk of new influx of displaced persons, worsening environmental pressure in affected zones  [...]	
RESULTS	<b>Note</b> Update expected results indicating services actually carried out				
	A. Water & Sanitation				
	A.1. Two health centres (Dist-one and Dist-two) have enough water for their needs	1. 50 litres/day per admitted patient guaranteed for both Health Centres 2. 5 litres/day per non-admitted patient guaranteed for both Health Centres 3. 1000 litres/day guaranteed for other services (laundry, kitchen etc) guaranteed for both Health Centres 4. Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems) for water outlets of both Centres 5. Water outlets fully sustainable at end of operation	1. 2, 3, 4. Monthly report from Health centres 5. Final Evaluation Report	Active participation of Water committees in maintenance of wells  [...]	
	A.2. 5.000 residents have access to adequate and safe toilet facilities and safe water outlets in the critical areas where displaced persons reside	1. 90 latrines and 6 wells built and used appropriately 2. Women can safely use toilet facilities already in place 3. The 90 latrines already built are at a minimum distance of 50m from dwellings 4. The 6 additional water outlets meet the standard criteria defined by SPHERE	1. Final technical report (technical fiche) 2. Community Leaders Report (focus group and workshop) 3. Final technical report (technical fiche)	Uncontrolled influx of displaced persons, worsening environmental pressure in affected zones  [...]	
	B. Health				
	B.1. Organisation of essential services (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system) strengthened in 2 health centres (Dist-one and Dist-two – 15.000 users/year.)	[...]	Monthly report from health centres	[...]	
	B.2. Supplying of medical material to 2 health centres (Dist-one and Dist-two – 15.000 users/year) to ensure that services can be provided (program managed in coordination with AWD)	[...]	health centres	Active cooperation with AWD in supply of medicines  [...]	
	C. Non food Items				
	C.1. Minimum essential household items (kitchen kit and blankets) provided to 5.057 families classified as "vulnerable".	[...]	Monitoring Reports	[...]	
	ACTIVITIES	<b>Note</b> Activities are updated in reference to what has been implemented	MEANS		COSTS <b>Note</b> Actualise figures showing expenditure actually incurred at end of operation
		A. Water & Sanitation			
A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)		Construction labour Purchase of material for construction of wells Purchase of 2 Afridev pumps Rental of drill	MATERIALS AND WORK = EUR 16,000		
A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)					
A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)					
A.2.1. Consultation with women to identify adequate places for building toilet facilities		Construction labour Purchase of material for construction of latrines	MATERIALS AND WORK = EUR 15,750		
A.2.2. Construction according to international standards of 90 gender-separated latrines		<b>Note</b> Inclusion of new activity is confirmed as defined in Preliminary Report	Active participation of community in maintenance of latrines  [...]		
A.2.3. Training and equipping of 6 persons in charge of maintaining latrines					
A.2.4. Construction of 6 new water outlets		Construction labour Purchase of material for construction of wells Purchase of 6 Afridev pumps Rental of truck	MATERIALS AND WORK = EUR 44,950		

B. Health			
B.1.1. . Reorganisation of the 2 health centres according to national protocols	Labour for small rehabilitation work Purchase of materials for rehabilitation	MATERIALS AND WORK = <b>EUR 30,000</b>	Active participation of medical personnel of health centres  Risk of halt of salary payments to medical personnel  [...]
B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres			
B.1.3. Drafting of a health monitoring plan in the two target zones			
B.1.4. Coordination of vaccination campaign with AWD			
B.1.5. Small infrastructure work in the two Health centres			
B.2.1. Supply of medical materials to the 2 health centres	Medical material	MEDICINES = <b>EUR 122,234.03</b>	Active participation of medical personnel of health centres  Risk of halt of salary payments to medical personnel  [...]
B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system			
C. Non food Items			
C.1.1. Consultation with community representatives	Purchase of kitchen kits and blankets	MATERIALS = <b>EUR 90,000</b>	Active participation of community representatives in determining what families are vulnerable  Access to target areas assured for population census and kit distribution  [...]
C.1.2. Distribution of blankets and kitchen kits to <b>5.057</b> families classified as "vulnerable"			
Project Management			
Technical personnel (TITLE 01)	Expatriate Personnel Project Manager (3 months) Doctor (3 months) Hydro-geologist (3 months) Local Personnel Nurses (8 months)	EXPATRIATE STAFF= <b>EUR 36,050</b> LOCAL STAFF = <b>EUR 18,240</b>	Access to target areas assured for entire duration of operation
Management personnel (TITLE 02)	Expatriate Personnel Project Manager (5 months) HQ Personnel (3 months) Local personnel Administrator (8 months) Logistics Person (8 months) Guards (8 months)	EXPATRIATE STAFF= <b>EUR 32,700</b> LOCAL STAFF = <b>EUR 33,400</b>	[...]
Logistics	Office (8 months) 4x4 Rental (8 months) 4x4 (8 months - depreciation) 2 Radios (8 months - depreciation) Running costs for 2 vehicles (8 months) Running Costs for 2 radios (8 months)	TRANSPORT = <b>EUR 19,400</b> COMMUNICATIONS = <b>EUR 4,800</b> OFFICE = <b>EUR 10,200</b>	[...]
Monitoring / Evaluation			
Execution of Monitoring Plan	Monitoring Plan (Terms of reference)		[...]
Execution of Final Evaluation	External Final Evaluation (Terms of reference)	EXTERNAL EVALUATION = <b>EUR 10,000</b>	[...]
Other Services			
Visibility	Visibility Plan	VISIBILITY FUNDS = <b>EUR 2,500</b>	
		PRE-CONDITIONS	Access to target areas assured for entire duration of operation



**Note**  
Changes to responsibility plan must also be notified (none in this case)

KEY
PM = Project Manager
HYD = Hydro-geologist
HCD = Health centre Director
RD = Person responsible of local Districts
RLC = Person responsible of local communities
ROLE
L = Lead Role
S = Support Role

MILESTONES	
1.	Planning of activity for siting of water outlets completed by first week of second month
2.	Health and hydro-geological surveys completed by third week of second month
3.	Siting of water outlets completed by first week of third month
4.	Guaranteed functioning of water outlets in health centres by first week of fourth month
5.	Water committees set up and functioning by second week of fourth month
[...]	



EUROPEAN COMMISSION  
HUMANITARIAN AID OFFICE (ECHO)

# GRANT AGREEMENT

**Humanitarian Organisation:** Hox

**Title of operation:** Restoring of minimal health conditions for the populations affected by the conflict and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland

**Grant agreement number:** ECHO/...

## BREAKDOWN OF EXPENDITURE - FINAL FINANCIAL REPORT

Code	Heading	Quantity	Unit	Duration	Unit	Unit price in EUR	Total in EUR	Accounting reference number
01	<b>TITLE : Goods and services delivered to the beneficiaries (direct costs)</b>						<b>373.224,03</b>	<b>1</b>
<b>01.01</b>	<b>Food Security</b>							
01.01.01.	Basic Food security							
01.01.02.	Other food distribution							
01.01.03.	Food for work							
01.01.04.	School feeding							
01.01.05.	Public Canteens							
01.01.06.	Agricultural activities							
01.01.07.	Livestock							
01.01.08.	Fisheries							
01.01.80.	Training, local capacity building							
01.01.99.	Other food and security							
<b>01.02</b>	<b>Water and sanitation</b>						<b>76.700,00</b>	<b>10</b>
01.02.01.	Waste disposal and latrines						<b>15.750,00</b>	
01.02.01.01	Materiali	90	latrina			100,00	9.000,00	
01.02.01.02	Lavoro	90	latrina	0,5	mese	150,00	6.750,00	
01.02.02.	Rural water sources						<b>60.950,00</b>	
01.02.02.01	Lavoro	8	pozzo	3	mese	1.100,00	26.400,00	
01.02.02.02	Materiali	8	pozzo			1.500,00	12.000,00	
01.02.02.03	Pompe	8	pozzo			2.000,00	16.000,00	
01.02.02.04	Affitto trivella	2	pozzo			3.275,00	6.550,00	
01.02.03.	Urban and municipal supply system							
01.02.04.	Water treatment							
01.02.80.	Training, local capacity building							
01.02.99.	Other water and sanitation							

Code	Heading	Quantity	Unit	Duration	Unit	Unit price in EUR	Total in EUR	Accounting reference number
<b>01.03</b>	<b>Health</b>						<b>152.234,03</b>	<b>11</b>
01.03.01	Primary Health care						<b>122.234,03</b>	
01.03.01.01	Materiali medici		kit				122.234,03	
01.03.02.	Secondary health care							
01.03.04.	Emergency health care							
01.03.05.	Epidemics							
01.03.06.	Drugs supply							
01.03.07.	Routine vaccination							
01.03.08.	Support of specialised institutions							
01.03.09.	Disabled population							
01.03.10.	Health education and training							
01.03.11.	Family planning							
01.03.12.	AIDS and STD							
01.03.13.	Targeted control of endemic diseases							
01.03.14.	Psychosocial							
01.03.15.	Rehabilitation of medical facilities						<b>30.000,00</b>	
01.03.15.01	Materiali		kit			17.000,00	17.000,00	
01.03.15.02	Lavoro		centro			6.500,00	13.000,00	
01.03.80.	Training, local capacity building							
01.03.99.	Other health							
<b>01.04</b>	<b>Nutrition</b>							
01.04.01	Therapeutic feeding							
01.04.02.	Supplementary feeding							
01.04.03.	Supplementary and therapeutic feeding							
01.04.04.	Nutritional education							
01.04.05.	Surveys and monitoring							
01.04.80.	Training, local capacity building							
01.04.99	Other nutrition							
<b>01.05.</b>	<b>Shelter</b>							
01.05.01.	Emergency shelter							
01.05.02.	Post emergency/semi-permanent shelter							
01.05.80.	Training, local capacity building							
01.05.99.	Other shelter							

Code	Heading	Quantity	Unit	Duration	Unit	Unit price in EUR	Total in EUR	Accounting reference number
<b>01.06</b>	<b>Non food items</b>						<b>90.000,00</b>	<b>12</b>
01.06.01.	Domestic items						<b>90.000,00</b>	
01.06.01.01	Pentolame	5.000	Kit		1	13,00	65.000,00	
01.06.01.02	Coperte	5.000	kit		1	5,00	25.000,00	
01.06.02.	Heating and cooking fuel							
01.06.03.	Survival items							
01.06.04.	Hygiene items							
01.06.05.	Educational items							
01.06.06.	Resettlement items							
01.06.80.	Training, local capacity building							
01.06.99.	Other non food items							
<b>01.07</b>	<b>Rehabilitation / continuum</b>							
01.07.01.	Permanent shelter							
01.07.02.	Educational facilities							
01.07.03.	Social services							
01.07.04.	Self-sufficiency							
01.07.80.	Local capacity building/training							
01.07.99.	Other rehabilitation							
<b>01.08</b>	<b>Disaster preparedness and mitigation</b>							
01.08.01.	Infrastructure support							
01.08.02.	Advocacy and public awareness raising							
01.08.03.	Mitigation works							
01.08.04.	Mapping and data computerization							
01.08.05.	Education							
01.08.06.	Early warning systems							
01.08.07.	Research and dissemination							
01.08.08.	Facilitation of co-ordination							
01.08.09.	Institutional strengthening							
01.08.80.	Local capacity building/training							
01.08.99.	Other DIPECHO							
<b>01.09</b>	<b>Special mandates</b>							
01.09.01.	Protection							
01.09.02.	Facilitation of co-ordination							
01.09.03.	Info management and dissemination							
01.09.04.	Family reunification/tracing							
01.09.05.	Care and maintenance							
01.09.06.	Facilitation of return							
01.09.80.	Local capacity building/training							
01.09.99.	Other special mandates							

Code	Heading	Quantity	Unit	Duration	Unit	Unit price in EUR	Total in EUR	Accounting reference number
<b>01.10</b>	<b>Specific actions</b>							
01.10.01.	Logistics							
01.10.02.	Security and protection							
01.10.03.	Emergency rehabilitation infrastructure							
01.10.04.	Capacity building of NGOs							
01.10.80.	Local capacity building/training							
01.10.99.	Other specific actions							
<b>01.11</b>	<b>De-mining and awareness</b>							
01.11.01.	De-mining							
01.11.02.	Awareness							
01.11.80.	Local capacity building/training							
01.11.99.	Other de-mining							
<b>01.12</b>	<b>International transport</b>							
01.12.01.	Maritime							
01.12.02.	Overland							
01.12.03.	Air							
<b>01.13</b>	<b>Personnel</b>						<b>54.290,00</b>	<b>13</b>
01.13.01.	Expatriate staff						<b>36.050,00</b>	
01.13.01.01.	Medico						<b>8.900,00</b>	
01.13.01.01.01	Salario	1	uomo	2	mese	2.000,00	4.000,00	
01.13.01.01.02	Alloggio	1	uomo	2	mese	300,00	600,00	
01.13.01.01.03	Viaggi	1	ticket			1.200,00	1.200,00	
01.13.01.01.04	Briefing/debriefing	1	uomo	0,2	mese	2.000,00	400,00	
01.13.01.01.05	Assicurazione	1	uomo	2	mese	150,00	300,00	
01.13.01.01.06	Indennità missione	1	uomo	20	giorno	120,00	2.400,00	
01.13.01.02.	Idrogeologo						<b>16.200,00</b>	
01.13.01.02.01	Salario	1	uomo	4	mese	2.000,00	8.000,00	
01.13.01.02.02	Alloggio	1	uomo	4	mese	300,00	1.200,00	
01.13.01.02.03	Viaggi	1	ticket			1.200,00	1.200,00	
01.13.01.02.04	Briefing/debriefing	1	uomo	0,2	mese	2.000,00	400,00	
01.13.01.02.05	Assicurazione	1	uomo	4	mese	150,00	600,00	
01.13.01.02.06	Indennità missione	1	uomo	40	giorno	120,00	4.800,00	
01.13.01.03.	Program manager						<b>10.950,00</b>	
01.13.01.03.01	Salario	1	uomo	3	mese	2.000,00	6.000,00	
01.13.01.03.02	Alloggio	1	uomo	3	mese	300,00	900,00	
01.13.01.03.03	Assicurazione	1	uomo	3	mese	150,00	450,00	
01.13.01.03.04	Indennità di missione	1	uomo	30	giorno	120,00	3.600,00	
01.13.02.	Local staff						<b>18.240,00</b>	
01.13.02.01.	Infermieri						<b>18.240,00</b>	
01.13.02.01.01	salario	3	uomo	8	mese	650,00	15.600,00	
01.13.02.01.02	assicurazione	3	uomo	8	mese	60,00	1.440,00	
01.13.02.01.03	Indennità di missione	3	uomo	80	giorno	5,00	1.200,00	

Code	Heading	Quantity	Unit	Duration	Unit	Unit price in EUR	Total in EUR	Accounting reference number
2	TITLE : Support costs (direct costs)						118.000,00	2
02.01.	<b>Personnel</b>						66.100,00	20
02.01.01.	Expatriate staff						32.700,00	
02.01.01.01.	Program manager						23.650,00	
02.01.01.01.01	Salario	1	uomo	5	mese	2.000,00	10.000,00	
02.01.01.01.02	Alloggio	1	uomo	5	mese	300,00	1.500,00	
02.01.01.01.03	Viaggi	1	ticket			1.200,00	1.200,00	
02.01.01.01.04	Briefing/debriefing	1	uomo	0,2	mese	2.000,00	400,00	
02.01.01.01.05	Assicurazione	1	uomo	5	mese	150,00	750,00	
02.01.01.01.06	Indennità missione	1	uomo	81	giorno	120,00	9.800,00	
02.01.01.02.	Consulente HQ						9.050,00	
02.01.01.02.01	Salario	1	uomo	3	mese	1.500,00	4.500,00	
02.01.01.02.02	Alloggio	1	uomo	1	mese	300,00	300,00	
02.01.01.02.03	Viaggi	2	ticket			1.150,00	2.300,00	
02.01.01.02.04	Assicurazione	1	uomo	1	mese	150,00	150,00	
02.01.01.02.05	Indennità missione	1	uomo	15	giorno	120,00	1.800,00	
02.01.02.	Local staff						33.400,00	
02.01.02.01.	Amministratore						10.440,00	
02.01.02.01.01	salario	1	uomo	8	mese	1.245,00	9.960,00	
02.01.02.01.02	assicurazione	1	uomo	8	mese	60,00	480,00	
02.01.02.02.	Logista						17.680,00	
02.01.02.02.01	salario	1	uomo	8	mese	650,00	5.200,00	
02.01.02.02.02	assicurazione	1	uomo	8	mese	60,00	480,00	
02.01.02.02.03	Indennità missione	1	uomo	100	giorno	120,00	12.000,00	
02.01.02.03.	Guardie						5.280,00	
02.01.02.03.01	salario	3	uomo	8	mese	160,00	3.840,00	
02.01.02.03.02	assicurazione	3	uomo	8	mese	60,00	1.440,00	
02.02.	<b>Local logistic costs</b>						29.600,00	21
02.02.01.	Office expenses						9.800,00	
02.02.01.01	Affitto locali	1	locale	8	mese	300,00	2.400,00	
02.02.01.02	Luce e spese varie	1	totale	8	mese	925,00	7.400,00	
02.02.02.	Office consumable and supplies						400,00	
02.02.02.01	spese di cancelleria	1	totale	8	mese	50,00	400,00	
02.02.03.	Local contracted transport						13.000,00	
02.02.03.01	4x4 affitto	1	unità	8	affitto	1.000,00	8.000,00	
02.02.03.02	Camion affitto	1	unità	2	affitto	2.500,00	5.000,00	
02.02.04	Distribution, storage and daily labour							
02.02.05.	Running costs						6.400,00	
02.02.05.01	Benzina e spese di mantenimento veicoli	2	veicolo	8	mese	400,00	6.400,00	
02.02.06.	Other							
02.03.	<b>Durable equipment</b>						9.800,00	22
02.03.01.	Vehicles						5.000,00	
02.03.01.01	4x4 landcruiser	1	unità	8	ammort.	625,00	5.000,00	
02.03.02.	Communication						4.800,00	
02.03.02.01	set radio	2	unità	8	ammort.	300,00	4.800,00	
02.03.03	Other							

Code	Heading	Quantity	Unit	Duration	Unit	Unit price in EUR	Total in EUR	Accounting reference number
02.04	<b>Security</b>							
02.05.	<b>Feasibility, need assesment and other studies</b>							
02.06.	<b>Specialised services</b>						10.000,00	23
02.06.01.	External quality and quantity controles							
02.06.02.	External evaluation							
02.06.02.01	Valutazione	1	unità	1		10.000,00	10.000,00	
02.06.03.	External audit							
02.07.	<b>Insurance costs</b>							
02.08	<b>Visibility and communication programmes</b>						2.500,00	24
02.09.	<b>Others to be specified in the proposal</b>							
Subtotal: direct costs							491.224,03	
EC contribution to direct costs in %							88,70%	
EC contribution to direct costs in EUR							435.692,09	
3	TITLE : Indirect costs						34.385,68	
4	TITLE : Reserve (pro memoria)						0	
Total eligible costs:							470.077,77	
Prefinancing							376.062,22	
Final payment requested							94.015,55	