

Quarterly Progress Report 3 of 2009

1 July - 30 September 2009

Basic Services Fund of the Government of Southern Sudan

Government of Southern Sudan

Department for International Development (DFID), UK

Government of the Netherlands (MINBUZA)

Government of Norway (NORAD)

Canadian International Development Agency (CIDA), Canada

www.bsf-south-sudan.org



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List of abbreviations

BMB MM	BMB Mott MacDonald, BSF's management consultant (Arnhem, the Netherlands)
BSF	Basic Services Fund
CIDA	Canadian International Development Agency
CPA	Comprehensive Peace Agreement
DFID	Department for International Development UK Government
EIA	Environmental Impact Assessment
EMIS	MOEST's Education Information System
GoSS	Government of Southern Sudan
GoNU	Government of National Unity
MDG	Millennium Development Goal
MDTF-S	Multi Donor Trust Fund – Southern Sudan
MinBUZA	Netherlands Ministry of Foreign Affairs
MoEST	Ministry of Education, Science and Technology
MoFEP	Ministry of Finance, and Economic Planning
MoH	Ministry of Health
MoWRI	Ministry of Water Resources and Irrigation
NORAD	Norwegian Agency for development Cooperation
O&M	Operations and Maintenance
PHCC	Primary Health Care Centre (50,000 intended beneficiaries)
PHCU	Primary Health Care Unit (15,000 intended beneficiaries)
PTA	Parents Teachers Association
RWSSP	Rural Water Supply and Sanitation Project
SC	BSF's Steering Committee
SDG	Sudanese pounds (introduced in 2007)
UK	United Kingdom

Summary and Recommendations

Project Name	Basic Services Fund of the Government of Southern Sudan Phase 1
Launched	January 2006
Project Authority	GoSS Steering Committee chaired by Ministry of Finance
DFID contribution of which	UK £ 18,387,643
Grant component	UK £ 16,621,447
Technical Assistance component	UK £ 1,766,196
Location	Southern Sudan
Management Consultant; BMB Mott MacDonald	01 August 2006 – 31 December 2008

Project Name	Basic Services Fund of the Government of Southern Sudan Phase 2
Launched	January 2009
Project Authority	GoSS Steering Committee chaired by Ministry of Finance
DFID contribution	UK £ 9,001,450
Dutch Government contribution	UK £ 6,500,000
Norway Government contribution	UK £ 3,720,000
CIDA contribution	UK £ 4,100,000 (*)
TOTAL donors contribution	UK £ 23,321,450
Grant component	UK £ 21,309,596
Technical Assistance component	UK £ 2,011,854
Location	Southern Sudan
Management Consultant; BMB Mott MacDonald	01 January 2009 – 31 August 2010

(*) the CIDA contribution is adjusted downwards because of currency exchange rates fluctuations, the exact value of this contribution cannot be determined by the BSF secretariat due to these fluctuations.

1. A second Mid-Term Review of the BSF took place from 16-25 August 2009, the report of which is available on BSF's website. The review concluded that the fund had contributed to improved access to basic services in southern Sudan, by between 5 and 10% overall. It has piloted an efficient and speedy mechanism for commissioning and managing non-state service providers. Its M&E work is generating important lessons about all aspects of basic service provision. In these areas, most commentators suggest it stands significantly ahead of the other pooled funds.
2. The review furthermore concluded that BSF makes a useful, but largely decentralized, contribution to the capacity of the GoSS at State and County level. This capacity building has been significant in the States, especially where BSF partners worked to build a coalition with state ministries. BSF did less to build capacity centrally and failed to create a sense of ownership in the key line ministries. Despite that, it can offer a good base, probably the best available, for a more strategic program to build GoSS capacity to "plan, monitor and coordinate service delivery by non-state actors", and to improve "accountability between non-state service providers and GoSS".

According to the Mid Term Review, there is an urgent need for a more strategic, long-term approach to supporting and developing basic services, so that they can be handed over successfully and sustainably, to GOSS and the State Governments. BSF would offer a good basis in this hand over, again probably the best available, .

1. On 31 December 2008, the end of phase 1, the BSF Grants of CARITAS, MEDAIR and OXFAM-GB (all round 1) and HASS, IRC, SC-UK and World Relief (all round 2) closed down. All these grants are in Primary education and Water & Sanitation. All other Grants- in Primary Health Care in round 1 (AMREF, CCM, SC-US) and round 2 (GOAL, MERLIN, OVCI, TEARFUND, MEDAIR) received an extension into phase 2 of 18 months from 1 January 2009 to 30 June 2010 (except SC-US which opted for only a 6 months extension). The main components in this ongoing closing down process are:
 - last financial report with the list of all transactions, consisting of an internal audit by the management consultant of the grant recipients
 - external audit of the lead agent's BSF Grant
 - handing-over of assets.
2. All financial reports are cleared and all the audit reports are in, with the exception of AMREF which presented a draft. The handing-over of the unmovable assets is also completed in that all these structures are included in GoSS databases for primary schools, primary health clinics and water points (although not all these databases are operational). The handing-over of the movable assets is still in process to be completed before the end of the year. The fact is that handing-over is complicated when local government structures are absent or too incomplete(O&M budget for example) plus the fact that even in post-grant period these assets are needed to assure the sustainability of the Grant's investment.
3. Disbursement record: In phase 2 there are in total 24 grants operational. Of those 8 are for the Primary Health extensions from phase 1. Of these 24 grants, 18 run for 18 months from 1 January 2009 till 30 June 2010, 1 for 6 months (1 January – 30 June 2009), and 5 for a period of 15 months (1 April 2009 – 30 June 2010). In comparison, disbursement stands at 7.0 million GBP (33%). This percentage is 38% for the health extensions, and 31% the new projects of Phase 2. By the end of Quarter 3 of 2009 a total of nine months, or fifty percent, of the total grant period is used. The grants in round 3b at 28% of the elapsed time of the grant period. The MC intensifies the monitoring and will need to be decisive in imposing corrective measure quickly when and if necessary.
4. Almost half-way the Grant period, only 4 of the 23 schools are already completed and 10 of the 63 schools to receive services (books, furniture) are included. Although the dry season (November-April) will see a spurt in activities, the record is far behind schedule. Enrolment stands at six thousand (one third of which are girls) of the 47,000 targeted and attendance only at three thousand (rounded of which a mere 900 female).
5. None of the 5 targeted PHCC is completed, but the record stands overall at 44 percent. Twenty of the targeted 21 PHCCs to receive services (drugs, supplies, training) are now included. Two of the targeted 13 PHCUs are completed and the remaining are overall 40 % % complete. A total of 57 of the 75 targeted PHCU receive services (Salaries, Capacity Building and Training, drugs and supplies). Registered consultations stand at three hundred thousand (cumulative) but this record is still incomplete because IRD, Swiss Red Cross and World Vision did not submit these data.

6. A total of 27 out of the targeted 143 boreholes have been completed.
7. AMREF has let the fund down by very slow implementation (three years after it signed for the Grant, it still has not completed the construction of a PHCC) and very poor, at times even misleading, communication with its partners, including BSF's MC. BSF's secretariat continues to work closely with MoH and USAID (BSF's sister donor to AMREF) to impose corrective measures to assure that the population of Tali, Tindilo and Rejong Payam's of Terekeka County (Central Equatoria State) are assured of access to primary health care. AMREF will keep a reduced budget and the remaining will be transferred to the Sudanese partner NGO COMPASS, who is running a successful EPI programme in Terekeka County.
8. Inter-ethnic and –other violence in 2009 is getting far more intense and of a different nature than previous years. The number of incidences is on the increase and women and children are often deliberately targeted. At the tail end of CPA's interim period (2005-2011), a year before the national elections and in the immediate run-up to the referendum, this cannot come as unexpected. In this context, BSF's management consultant forewarned all Grant recipients in Round 3b to be realistic with their target setting. Still, some might have to accept to share their Grant to assure that targets will be met in spite of these circumstances.
Several Grant recipients were directly affected by insecurity and had to temporarily evacuate project teams. As much as possible, BSF supported grants recipients in their contingency plans. Affected programmes included in particular;
 - GOAL in Upper Nile (temporary evacuation in September from Baliet due to ethnic conflict.)
 - CCM in Warrap State (Tonj East and Tonj North) evacuated for 3 weeks due to ethnic conflict. AMA's education and watsan activities in Warrap State were affected as well.
 - World Vision; Tambura and Ezo County, Western Equatoria. Non accessibility to locations in Ezo, due to LRA threats. World Vision responds by relocating activities to safer sites.
 - IRD (Duk) and IMC (Akobo) programmes in Jonglei State have been constrained by insecurity. IRD's project team was evacuated in September from its base in Duk Payuel.
 - AVSI's programme activities in Ikotos County (eastern Equatoria) were constrained by reduced access to communities due to inter-ethnic conflict, starting from 21 October.
9. The Joint Donor Office's team now includes a Basic Services Team. BSF's Grant Manager works closely together with this team. JDO's Strategic Management Board met in Ottawa on 29 September and decided in principle to continue BSF over an Interim Period (2010-2011) and to add another (4th) Call for proposals in January 2010.
10. On 26 August, the Steering Committee held its 22nd meeting to debrief the Mid Term review. The next meeting will take place on 21 October about the implementation progress and preparations for BSF's Interim Period (2010-2011).
11. It is widely accepted that a gap in the drug supply to MoH supported PHCCs and PHCUs has to be anticipated early 2010, this in spite of concerted efforts by the MoH, World Bank and USAID for contingency planning. BSF's MC will closely monitor the situation and invite BSF's Grantees to request budget revisions, if needed, to assure adequate drugs' provision at the clinics.
12. In consultation with JDO's Strategic Management Board, DFID has decided to extend BSF into an Interim Period (2009/2010) with a 4th call of proposals initially planned to be launched in January 2010 but the MC has no details on these procedures yet.

1 Introduction

1.1 Introduction

The purpose of the Basic Services Fund of the Government of Southern Sudan (BSF) is to increase the access of the population of Southern Sudan to Basic Services in Primary Education, Primary Health, and Water & Sanitation. Main stakeholders are the beneficiaries; rural communities, with particular inclusion of vulnerable groups, e.g. women and children, IDPs and returnees etc., as well as the County, State and GoSS authorities of Ministry of Health (MoH), Ministry of Education, Science and Technology (MoEST) and Ministry of Water Resources and Irrigation (MWRI), local government, and BSF's international donors.

The approach of BSF towards the above mentioned purpose is to directly finance NGOs to deliver basic services, and to help build capacity of local communities and national NGOs for the management and maintenance of basic services. The purpose of the BSF is therefore to strengthen the capacity of GoSS to plan, monitor and co-ordinate non-state service delivery in the education, health and water and sanitation sectors.

BSF closed down its first phase, which started on the 1st of January 2006, on 31 December 2008 and commenced a second phase. The first phase, with GBP 17.7 million financed by DFID, achieved the access of about two million individuals to basic services. The second phase of BSF started on the 1st of January 2009 and is financed by DFID as lead donor, the Dutch Ministry of Foreign Affairs (MinBUZA), Norway (NORAD), and Canada (CIDA). An overview of the contributions of the different donors of phase 2 is given in the table below.

Table 1-1 Overview of the donor contributions into phase 2 of the BSF

Donor	Contribution in GBP
DFID contribution	9,001,450
Dutch Government contribution	6,500,000
Norwegian Government contribution	3,720,000
CIDA contribution	4,100,000 (*)
TOTAL donors contribution	23,321,450
Grant component	21,514,432

(*) the CIDA contribution is currently adjusted down ward due to currency exchange rate fluctuations.

1.2 Background

The BSF was launched at the first meeting of the Steering Committee (Rumbek, 28 October 2005). During that same year, DFID engaged the Nairobi based NGO "Skills for Southern Sudan", assisted by the UK-based IDL group, to organize the first selection round in which 6 NGOs received grants. DFID next put out an international tender for the management of the BSF, which was awarded to BMB Mott MacDonald (BMB MM) and was appointed on the 19th of August 2006. BMB MM then took over responsibility for all the contracts from DFID with the first round NGOs (see Annex 5). During the second half of 2006, BMB MM organized a 2nd call for proposals, which led to the selection of 8 additional BSF Grant recipients (see Annex 6) who all signed grant contracts with BMB MM in January 2007.

DFID and the Steering Committee approved extensions (both Cost and No-Cost) of the first and second round NGOs, initially until September 30th 2008, and afterwards until December 31st 2008, and an extension of the management consultant's contract until December 31st 2008. A total of _17.5 million (rounded figures) is allocated (Annex 2).

After BSF's first round grants of ± GBP 8 million in 2005/06 (6 NGOs) and its second round (2006/07) of 8 NGOs with ± GBP 9 million, DFID and the Steering Committee of the BSF (SC) authorized a 3rd round with ± GBP 17 million, including the management consultants' fee. The management consultant prepared this 3rd round during the period of September-December 2008. The SC selected 11 NGOs to start on 1st of January 2009 (round 3a, Annex 8) and selected an additional 6 NGOs to start as soon as new funds would become available. Such funds became available through additional CIDA funding (round 3b, Annex 8) through which 5 NGOs started on the 1st of May 2009. The third round is financed by DFID, as lead donor, with contributions by the governments of the Netherlands, Norway (NORAD) and Canada (CIDA).

BSF's third round has a duration of 20 months, from 1st January to 31st August 2010, when the management contract will terminate.

To ensure the sustainability of BSF's investments, the SC authorized 18 month extensions, from 1 January 2009-30 June 2010, to the BSF Grant recipients in Primary Health, under the condition of detailed plans for handing over to be included in these extensions (Annex 7). Strategic developments in Primary Health Care delivery now take place, such as the implementation of MoH's payroll reform and gradual inclusion of health staff on MoH payrolls, and the rationalisation of drugs' distribution, which provide an important impetus to the sustainability of health services. Nevertheless, across the board most health staff are still NGO supported while the lack of access of operational budgets to County Health Departments will limit their capacity to take over and independently manage health facilities.

Additional information on BSF grant recipients:

- Annex 5: Phase 1 Grant Recipient Overview - Round 1
- Annex 6: Phase 1 Grant Recipient Overview - Round 2
- Annex 7: Phase 2 Grant Recipient Overview – Ext. Primary Health
- Annex 8: Phase 2 Grant Recipient Overview – Round 3 (3A and 3B)

1.3 This report

This report is a summary of BSF's progress up to the end of the third quarter of 2009 (1 July – 30 September 2009). BSF's Technical Assistance Team prepared this report. The data on the NGO's progress are based on narrative and financial progress reports, prepared by the grant recipients, the monitoring reports by the TA, and lessons learned during peer reviewing processes. The structure of the report is based on the deliverables of BSF secretariat's Terms of Reference (BSF project memorandum). These are the same as the outputs of the logical framework (Annex 1).

2 Review of Progress and Performance (1 July – 30 September 2009)

2.1 Policy and Programme Context

Main elements of BSF’s policy- and programme context are the Comprehensive Peace Agreement (CPA), the Millennium Development Goals and GoSS’ policies and programmes for basic services (Table 2-2).

2.1.1 Comprehensive Peace Agreement (CPA)

BSF operates within the overall context of Sudan’s Comprehensive Peace Agreement (CPA) and its 6 year Interim Period between 2005 and 2011, at the end of which a democratically elected government should be in place (Table 2-1). In the National Elections Commission’s time frame for the national elections, they are planned for April 2010. The registration is planned to start in November 2009 and campaigning will start at the first of December 2009.

Table 2-1 CPA Interim Period

9 January 2005	Year 1: 2006	Year 2: 2007	Year 3: 2008	Year 4: 2009	Year 5: 2010	Year 6: 2011
Signature CPA		Abyei Border Commission report	Census 15-30 April	Preparations national elections	Polling April 2010	Referendum

2.1.2 Millennium Development Goals

Access to Basic Services is one of the central themes of the MDGs. The MDGs have 8 goals in total, as well as 18 targets that are linked to 48 indicators. Seven of the 8 Goals concern Basic Services (for example Goal 2: achieve universal primary education). Nine of the 18 Targets concern Basic Services; for example Target 6: reduce by three quarters between 1990 and 2015 the maternal mortality rate. Of the total number of 48 Indicators, 23 concern Basic Services; for example, Indicator 30 “proportion of population with sustainable access to an improved water source, urban and rural”. All BSF Grant recipients contribute to improve Southern Sudan’s MDG status record, which remains among the lowest, if not the lowest, worldwide. Sudan’s maternal mortality stands at ± 1200/100,000. In the absence of data from Somalia, this maternal mortality rate is widely accepted as the highest worldwide.

The most relevant MDG indicators for the BSF are:

- Nr.6 net enrolment in primary education
- Nr 9 ration of girls to boys in primary education
- Nr.16 maternal mortality rate
- Nr.17 proportion of birth attended by skilled health personnel
- Nr.30 proportion of population with sustainable access to improved water sources
- Nr.31 proportion of population with sustainable access to improved sanitation
- Nr 34 proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to Basic Social services (primary education, primary health, nutrition, water & sanitation)

The Management consultant prepared a draft case study on BSF and MDGs at the request of DFID, which is currently under revision and will be published on the website in February 2010.

2.1.3 GoSS targets in Basic Services

The GoSS targets for the basic services are presented. It should be noted that only a relatively small part of these targets is budgeted (Table 2-2).

Table 2-2 GoSS 2011 Targets and Main Activities

Priority area	2011 Targets	Main Activities
Primary Health Care	<ul style="list-style-type: none"> ▪ Provide 50% with basic health services. ▪ Reduce infant and maternal mortality rates by 25%. ▪ Increase routine vaccination coverage from 30% to 90%. ▪ Increase awareness of HIV/AIDS from 5-10% to 90%. 	<ul style="list-style-type: none"> ▪ Provide basic health services to 6 million people. ▪ Reach 9 million people through vaccination campaigns. ▪ Increase stock of functioning health facilities by 10%. ▪ Train 4,000 health workers. ▪ Undertake HIV/AIDS awareness campaigns.
Basic Education	<ul style="list-style-type: none"> ▪ Increase the gross primary enrolment rate to 1,762 million children. ▪ Increase girls' enrolment to 40%. ▪ Increase primary school structures by 50%. ▪ Attain pupil-teacher ratio of 50:1 in primary education. 	<ul style="list-style-type: none"> ▪ Recruit 15,000 primary teachers and 5,700 AES instructors. ▪ Train 13,000 existing teachers. ▪ Rehabilitate / construct 500 primary schools. ▪ Provide school feeding to 200,000 pupils.
Water & Sanitation	<ul style="list-style-type: none"> ▪ Increase the proportion of rural population with access to clean water to over 40%. ▪ Provide new & rehabilitated schools and health facilities with access to safe water and sanitation. ▪ Increase awareness of hygiene amongst rural population. 	<ul style="list-style-type: none"> ▪ Construct 6,500 new boreholes. ▪ Maintain & repair 3,650 existing boreholes. ▪ Construct 4,550 latrines. ▪ Sanitation and hygiene awareness campaigns.

2.2 Progress towards Objectives

BSF's overall objective is increased and improved coverage of, and access to, primary education, primary health, drinking water, and sanitation for the population of Southern Sudan, particularly in under-served areas and including Capacity Building and Training. The main expected results are the establishment of operational primary schools, primary health clinics, drinking water points and latrines. These results are all accompanied by capacity building, such as management training of local beneficiary groups, to ensure that the access gained by two million people (phase 1) will be sustainable maintained. Further details on the hand over and sustainability of phase-1 projects are reported in a phase-1 Completion report that BMB MM on 19 October 2009 submitted to the lead donor.

Primary education (Annex 13)

Almost half-way the Phase 2 Grant period, only 4 of the 23 schools are already completed and another 8 are near completion. Ten of the 63 schools receiving services (books, furniture) are included. Although the dry season (November-April) will see a spurt in activities, the general trend is that most programmes are behind schedule. Enrolment stands at six thousand (35 % girls) of the 47,000 targeted, and attendance only at ± 3,000 of which a mere ± 900 are girls.

Primary health (Annex 14)

None of the 5 targeted PHCC to be build is already completed but the record stands overall at 44 . 20 of the targeted 21 PHCCs to receive services (drugs, supplies, training) are now included.

Two of the targeted 13 PHCU has been completed and the remaining are on average 40% completed. A total of 57 out of the 75 targeted PHCUs, receives services (Salaries, capacity building and training, drugs and supplies). Registered consultations stand at 300,000 (cumulative) but this record is still incomplete because IRD, Swiss Red Cross and World Vision have not submitted complete data yet.

Water & Sanitation (Annex 15)

A total of 27 of the targeted 143 boreholes have been completed and only one of the 115 targeted boreholes has been reported and verified as repaired.

2.3 Activities

The structure of the report is based on the deliverables of BSF secretariat's Terms of Reference (BSF project memorandum), these are the same as the outputs within the logical framework (Annex 1).

2.3.1 BSF Secretariat

The secretariat has 5 main responsibilities:

- Support and supervision of BSF Grant recipients in implementation (monitoring, coaching, advice);
- Assist in financial reporting (quality, transparency, timeliness)
- Assure timely disbursement
- Serve as secretariat for the Steering Committee;
- M&E GOSS contributions in terms of policy, staffing and salaries (policy and actual);
- Assure effective coordination with other stakeholders, donors (UN, NGO forum, NGO Health Forum, donor consultations for Primary education, Water & Sanitation and Primary Health).

The Secretariat, with its long-term TA team on location, is based in Juba. A number of senior consultants, notably BSF's project director, the project controller, and the database expert are based at BMB MM's headquarters in Arnhem, The Netherlands (Table 2-4). Phase-2's TA budget is 3047 days, of which MC used 436 workdays in this quarter and 1226 cumulative up till 30 September 2009; this is 40 % of the total and therefore still in line with the project elapsed time (9 out of 20 month or 45 %).

Table 2-3 TA days planned and actual (31 September 2009)

Position	Name	Total allocation	Q-3 2009	Spent Cumulative 30 Sep. 09	Balance
Long term					
Team Leader	Klaziena LOUWES	455.0	69.0	211.0	244.0
M&E/MIS Officer	Geerte v/d MEIJDEN	455.0	75.0	213.7	241.3
Finance Manager	Serena BOSSI	201.0	79.5	199.5	1.5
Finance Manager	Gerard FISCHER	243.0	1.0	1.0	242.0
Office Manager	Sarah Baba LASUBA	455.0	78.0	231.0	224.0
Policy Dev. /M&E Officer	Wim GROENENDIJK	410.0	78.0	170.0	240.0
To be appointed		340.0			340.0
Short term					
Commercial Manager	Dirk DOORN	20.0	6.00	12.0	8.0
Project Director	Ivo GIJSBERTS	100.0	14.0	47.0	53.0
Contract Director	Piet de WILDT	20.0		5.0	15.0
Health Specialist	Paolo OPERTI	50.0		15.0	35.0

Health Specialist	Anna VASSALL	10.0	0.3	0.3	9.7
Education Specialist	Charles GOLDSMITH	50.0		25.5	24.5
Cap. Building Specialist	Rob DENNY	50.0	6.0	6.0	44.0
Education Specialist	John SHOTTON	10.0			10.0
Project Controller	Erik HOLTUS	80.0	14.3	50.3	29.7
Drinking Water Specialist	Clarissa MULDER	18.0			18.0
Webmaster	Reinier BATTENBERG	30.0		13.0	17.0
Data Base Specialist	Wim ROMP	25.0	7.0	7.7	17.3
GIS specialist	Florent LASRY	25.0	8.0	18.0	7.0
TOTAL		3,047.0	436.1	1,226.0	1,821.0

2.3.2 BSF Steering Committee

The 21st session of the BSF Steering committee was held on the 26th of August 2009 for the annual review debriefing. The 22nd steering committee was held on the 20th of September. The next Steering Committee meeting is planned for 30 January 2010, subject to the launching of a BSF Phase 3 (4th round).

Table 2-4 Overview BSF Steering Committee meetings

No.	Date	Place	Agenda	Participants
1	28 October 2005	Rumbek	BSF and TOR SC	n.a.
2	10, 11 January 2006	Juba	capacity building of SC and selection proposals	20
3	6, 7 April 2006	Juba	Update on progress and 2nd call for proposals	20
4	6, 7 September 2006	Juba	Evaluation of BSF NGOs, procedure for 2 nd call	18
5	17 October 2006	Juba	Pre-selection 2nd call	9
6	13 December 2006	Juba	Selection of short listed proposals	
7	7 May 2007	Juba	Progress on implementation	15
8	22 August 2007	Juba	Progress on implementation	14
9	6 December 2007	Juba	Progress on implementation	14
10	10 January 2008	Juba	Briefing MTR	15
11	19 January 2008	Juba	De-briefing MTR	20
12	14 May 2008	Juba	Progress on implementation and future of BSF	
13	27 May 2008	Juba	BSF and TOR SC	15
14	15 July 2008	Juba	BSF extension	12
15	19 August 2008	Juba	Planned	
16	15 September 2008	Juba	3rd round priorities (special session on planning)	12
17	4 November 2008	Juba	3rd round concept papers pre-evaluation	14
18	10 December 2008	Juba	3rd round proposal ranking	11
19	10 March 2009	Juba	Update on closing down Phase I, starting up Phase II	16
20	13 July 2009	Juba	Update on implementation and exit strategies	20
21	26 August 2009	Juba	Annual review debriefing	
22	20 October 2009	Juba	Progress on implementation and future of BSF	25
23	30 January 2010	Juba	Special session with Donor Consultation	<i>planned</i>

2.3.3 Grant Recipients

Phase 1

An overview of the targets and achievements of Phase 1 is given in Table 2-5. The following sections give a short overview of the targets, achievements and the capacity building activities per sector, in phase 1. More detailed information is presented in Annex 9 for Primary Education, Annex 10 for the projects with a Primary Health component, Annex 11 for Water and Sanitation and in Annex 12 are overview tables present the activities of the grant recipients of phase 1 in training (capacity building). In addition, a text table (Annex 17) provides basic information per grant recipient on the targets, achievements and capacity building activities. The grant recipients of phase 1, which implemented a health extension programme, are not included in this text table, but in the text table of Annex 18.

Table 2-5 Consolidated targets and achievements in Phase 1

Sector	Target	Achievement
Primary Education		
School construction	21	18
School services	51	47
Primary Health		
PHCC construction	17	13
PHCC services	6	7
PHCU construction	30	23
PHCU services	12	20
Water and Sanitation		
Boreholes & hand pumps	239	219
Pit latrines	783	1,203

Primary Education

Of the planned 21 primary schools, the lead NGOs completed the construction of 18, after an extension of the original deadline to 31st December 2008. The target of one NGO, HASS, was reduced by one by agreement with the secretariat. Two schools remain under construction (90 % completed now), even though classes have been held under the roofs. This concerns the last 2 schools of the SC-UK consortium, implemented by SC consortium partner SC-Sweden, financed by SC-Sweden's and SC-UK's own resources. Of the targeted 51 schools to receive services only (like furniture, educational materials for pupils and teachers, teacher training, PTA training), 47 were achieved. The shortfall in this overall target is mainly due to CARITAS's over-ambitious target of 16 schools to be served (of which it achieved 13). A total of 215 members of PTA received training with 1052 training days in total. The number of persons trained averages 10 persons per school, which is in line with GoSS guidelines, but the total amount of time invested in training was too short to form and coach a successful PTA. BSF assisted in training 852 teachers (target 852) with 25,699 training days (18% female). This represents on average one month per person, although this figure averages long-term training (3 months) with short refresher courses. A total of 74 head teachers (only 2 women) received BSF financed training, with a total of 692 training days.

Primary Health

During the first phase, 13 out of the targeted 16 PHCCs were constructed. The shortfall is due to SC-US's reduced target (from 2 to 1), and AMREF and Merlin's delay in completing a PHCC. Merlin made one existing PHCC operational in July 2009, but still needs to complete an unfinished PHCC building project.

AMREF is not in a position to set a completion date of 1 PHCC. All 6 PHCCs targeted to receive services were reached. The original target of 30 PHCUs to be constructed was reduced by 2, all of which have been completed. All 12 planned PHCUs to be provided with services (mainly drugs and staff) have been served. Most training in Primary Health benefited village midwives (PTAs) and community health workers.

Water and Sanitation

BSF Grant recipients realized a total of 219 of the targeted 239 boreholes, with hand-pumps. The shortfall of 20 is due to SC-US, who realized only 4 of the original target of 20, but their budget was reduced accordingly. CARITAS realized one main gravity scheme, serving the community of Isohe. Of the targeted 783 latrines, a total of 1193 were installed and used. Medair completed 1031 (target 100), due to a good response to their promotion campaign, while AMREF achieved only 16 against the targeted 514, because of local (reportedly) socio-cultural resistance to latrine use, which should have been counteracted by appropriate promotion activities. Most of the training in Water & Sanitation was directed to School Hygiene & Sanitation clubs, community hygiene promoters, and members of the water point committees to ensure sustained Operations and Maintenance of boreholes with hand-pumps by communities.

Closing down

At the end of phase 1 on 31 December 2008, the BSF Grants of CARITAS, MEDAIR and OXFAM-GB (all round 1) and HASS, IRC, SC-UK and WORLD RELIEF (all round 2) closed down. These grants covered Primary Education and Water & Sanitation projects. All other grants- in Primary Health Care in round 1 (AMREF, CCM, SC-US) and round 2 (GOAL, MERLIN, OVCI, TEARFUND, MEDAIR) received an extension into phase 2 of 18 months, from 1 January 2009 to 30 June 2010 (except SC-US which opted for a 6 months extension only). The main components in this ongoing closing down process are:

- last financial report with the list of all transactions, consisting of an internal audit by the management consultant of the grant recipients
- external audit of the lead agent's BSF Grant
- handing-over of assets.
- BSF Grant Completion Reports

All financial reports are cleared, and all the external audit reports are in, with the exception of AMREF's Phase 1 audits. The handing-over of assets is still in process. The relevant asset categories for the Asset Management & Handing-over are:

- immovable assets, such as primary schools', PHCU and PHCC buildings and boreholes with fitted hand-pumps.
- all movable assets with individual value at time of procurement over GBP 1000 (for example a vehicle or a generator)

The post-grant ownership of the immovable assets follows GoSS policy. Boreholes with installed hand pumps basically belong to the communities, with a coordination role for government (MWRI) at County level and below (Payam).

The MC keeps an updated record of all movable assets with a procurement value of over GBP 1000, since these remain, as per contract, the property of the donor and need to be handed-over in consultation with the MC and authorized by DFID. Guiding principles of this asset management and handing-over are:

- The moveable assets remain property of DFID until handing-over is completed.
- The handing-over takes place in such a way that it maximizes the longevity of the asset and
- its service to the sustainability of the Grant's investment in Basic Services (e.g. a vehicle that is still used in the post-Grant period for O&M of primary school inspection (in the absence of a county education department).

Additional information Phase 1: Targets and Achievements:

- Annex 9: Phase 1 Summary Tables Target and Achievements – Primary Education
- Annex 10: Phase 1 Summary Tables Targets and Achievements – Primary Health
- Annex 11: Phase 1 Summary Tables Targets and Achievements – Water and Sanitation
- Annex 12: Phase 1 Summary Tables Targets and Achievements – Training
- Annex 17: Phase 1 Text Tables – Implementation Progress and Issues (excl Health Extensions)
- Annex 18: Phase 2 Text Tables – Implementation Progress and Issues (incl. Health Extensions)

Phase 2

An overview of the targets and achievements of Phase 2 is presented in Table 2-6. Round 3 is divided into two groups; the first is a group of 11 signed contracts, who started their interventions on 1st January 2009 (round 3a). The second group of 5 NGOs (round 3b) started with some delay on the 1st of May, after CIDA funding became available and the contract between DFID and CIDA was signed.

The following sections provide per sector a short overview of the targets, achievements and the capacity building activities of the grant recipients in phase 2. More detailed information is given in Annex 13 for Primary Education, Annex 10 for the projects with a Primary Health component, Annex 15 for Water and Sanitation and in Annex 16 are the overview tables given for the activities of the grant recipients of phase 2 in capacity building. Additionally, in Annex 18 a text table is presented with information per grant recipient on targets, achievements and capacity building activities. This table includes also the grant recipients of phase 1 that received a health extension in phase 2.

Table 2-6 Consolidated targets Phase 2

Sector	Target
Primary Education	
School construction	23
School services	63
Primary Health	
PHCC construction	2
PHCC services	9
PHCU construction	7
PHCU services	31
Drinking Water	
Boreholes with hand pumps	143
Rehabilitation of boreholes & hand pumps	115
Sanitation	
Pit latrines	1,467

Additional information Phase 2: Targets and Achievements:

- Annex 13: Phase 2 Summary Tables Targets and Achievements – Primary Education
- Annex 14: Phase 2 Summary Tables Targets and Achievements – Primary Health
- Annex 15: Phase 2 Summary Tables Targets and Achievements – Water and Sanitation
- Annex 16: Phase 2 Summary Tables Targets and Achievements – Training
- Annex 18: Phase 2 Text Tables – Implementation Progress and Issues (incl. Health Extensions)

2.4 Resources and Budget Used

2.4.1 Phase 1 Disbursements

Of the budget of GBP 18,387,643 of Phase 1, BSF disbursed 97%. An unused balance of GBP 435,349 remained; the transfer of this unused balance to phase 2 has been approved. The overall unallocated balance is now reduced to GBP 200,000 (rounded) because it is corrected for an over-commitment in round 3A. In Figure 2-1, an overview is given of the allocation of the phase 1 funds to the different sectors.

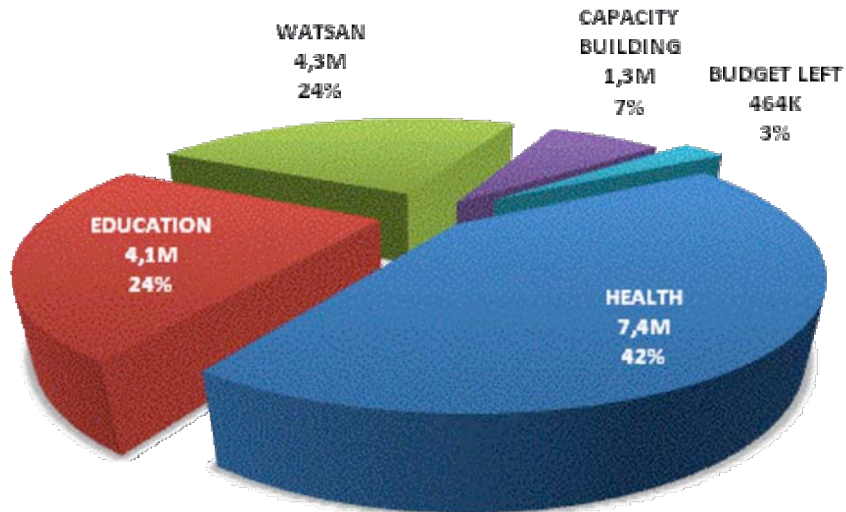


Figure 2-1 Phase 1 allocated funds to the different sectors

Additional information Phase 1: Disbursements:

- Annex 2: Disbursement Overview Phase 1

2.4.2 Phase 2 - budgets

In phase 2, like phase 1, 42 % of the total is allocated to primary health but capacity building has increased from 7% in phase 1, to 22%: See Figure 2-2 for an overview of the budgets for the different sectors.

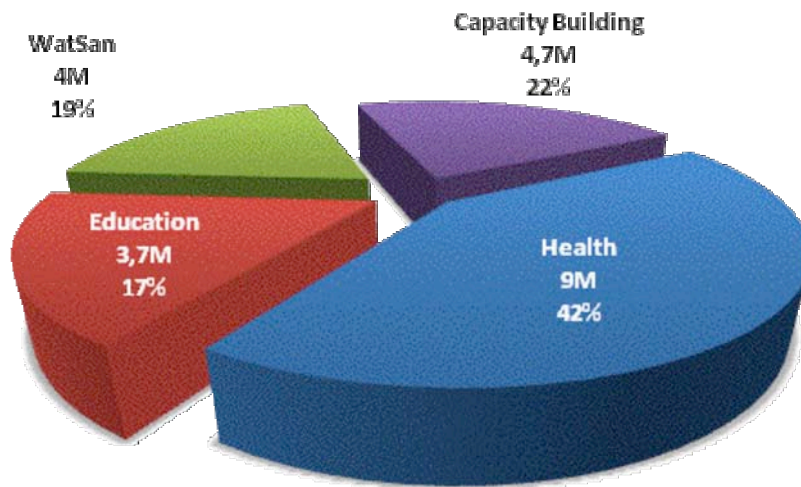


Figure 2-2 Phase 2 allocated budgets to the different sectors.

2.4.3 Phase 2 - Disbursement health extensions

The health extension grants run for a period of 18 months, from 1 January 2009 to 30 June 2010, except for SC-US who counted on alternative funding options on the longer term for the supported health facilities. after 6 months. The elapsed time of the contract of the other grant recipients with health extension is 50% (9 out of 18 months). CCM, GOAL and OVCI are on target with their expenditure (see Figure 2-3); MERLIN, TEARFUND and MEDAIR are slightly behind. MERLIN is catching up; TEARFUND's programme has been operationally on track but faced delays in reporting and accounting due to senior staff changes. MEDAIR is behind, due to the introduction of new financial accounting systems. Disbursements to AMREF have been stopped, because they have not been able to hand in the audit reports of Phase I yet.

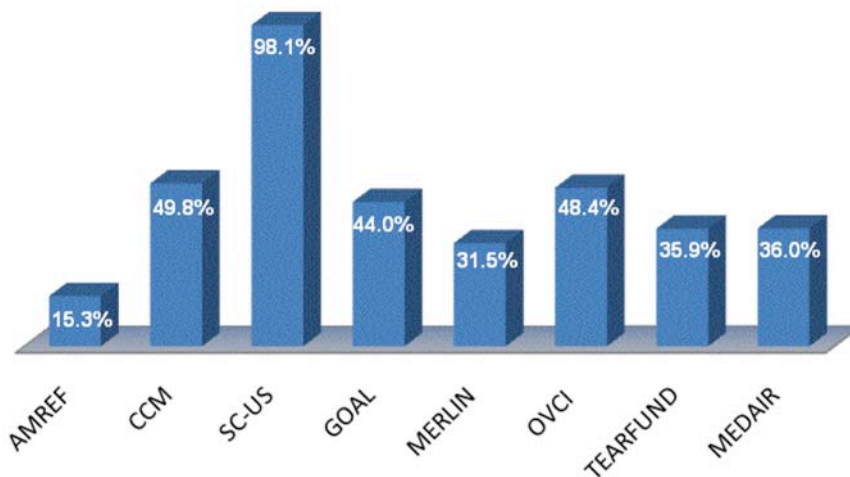


Figure 2-3 Disbursements health extensions as a percentage of the total budget of the grant recipient – 30 September 2009

2.4.4 Phase 2 - Disbursement round 3a

The grant recipients of round 3a all received an 18 months contract, starting at 1 January 2009, and are now at 50% of the elapsed time. Figure 2-4 provides an overview of their disbursement as percentage of their total budget. AMA and OXFAM NOVIB spent slightly more than 50% of their budget, as OXFAM NOVIB's school construction activities are nearly completion and AMA has purchased a drilling rig. IRD is behind in investments, due to insecurity in the area and delay in construction; the secretariat is closely monitoring this programme and discussed corrective measures. WORLD RELIEF is on target regarding the teacher training, but behind with the disbursement because of the construction that that is not yet in full swing, however progressing. AVSI and Swiss Red Cross are behind schedule with their expenditure, however they both used other funding in the first quarters. AVSI now fully started to use the BSF grant and is expected to be in line with the elapsed time soon. Swiss Red Cross will follow as soon as they will start in November to drill with BSF funding and construction in January. The Diocese of Rumbek is behind schedule, due to the fact that much less supplementary feeding in schools is needed as was anticipated, and less regular invoicing. The BSF secretariat is following up, and will present an increase of targets.

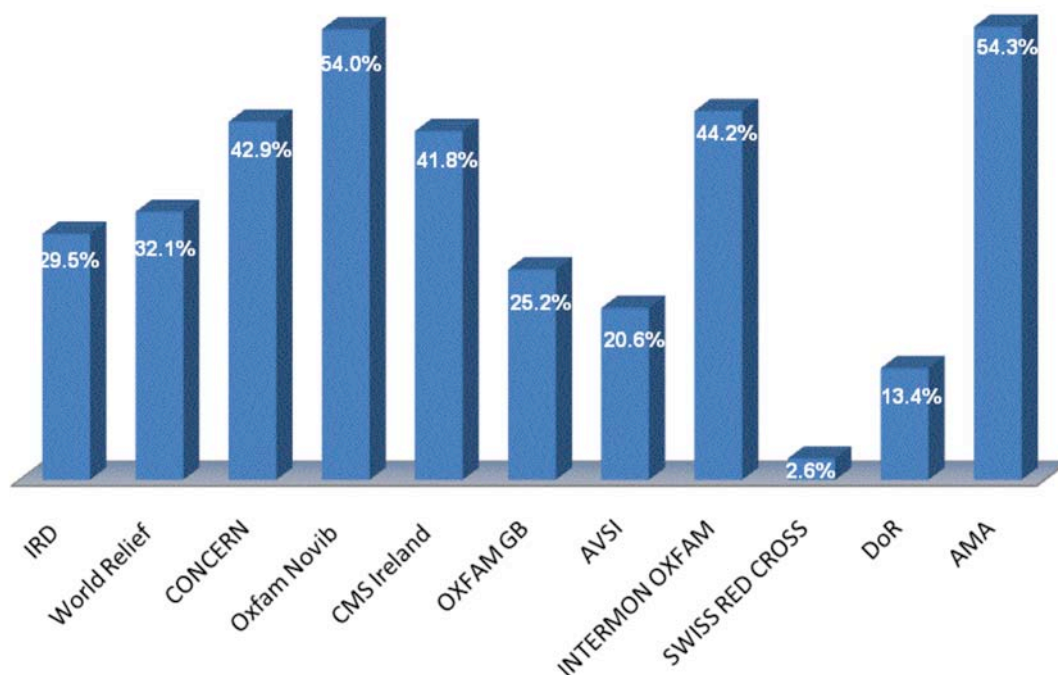


Figure 2-4 Disbursement Round 3a as a percentage of the total budget of the grant recipient – 30 September 2009

2.4.5 Phase 2 – Disbursement round 3b

The round 3b grant recipients have 15 months contracts, starting at the first of April, but the actual implementation started from the 15th of May, due to contractual delays, leaving an implementation period of only 13 _ months. The 3b grant recipients are at 28% of the contract period. Their disbursement as a percentage of their budgets is given in Figure 2-5. HARD progressed far, and the three schools that they were planning to construct are nearly completion. The start of IMC and World Vision's programmes were both affected by insecurity; World Vision counteracted this with a comprehensive contingency plan shifting activities to less-affected locations. UMCOR and MEDAIR are slightly behind in their implementation schedule, however this is due to teething problems at the start of the projects, it is envisaged that they will catch up with investments and expenditures soon.

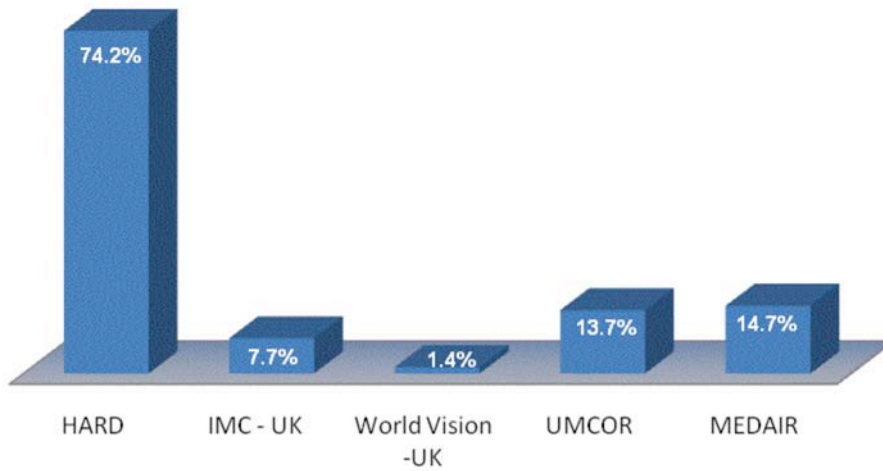


Figure 2-5 Disbursement Round 3b as a percentage of the total budget of the grant recipient – 30 September 2009

2.4.6 Phase 2 – Financial forecast

The grant recipients used 30% (6.4 million GBP) of their budget and the management agent 40% (0.8 million GBP) by the end of September 2009). The forecast for the next quarter October – December 2009, is that the grant recipients will use another 22% of their budgets and the management agent another 15%. An overview of the forecasts of the grant recipients and the management consultant is given in Figure 2-6. More information is available in Annex 4.

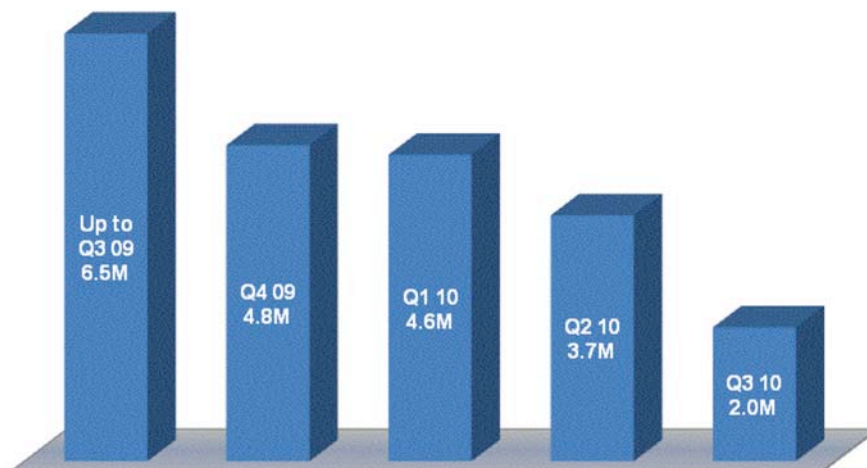


Figure 2-6 Financial forecast

Additional information Phase 2: Financial forecast and disbursements:

- Annex 3: Disbursement Overview Phase 2
- Annex 4: Financial Forecast of BSF Grant Expenditure

2.5 Assumptions and Risks

BSF operates within the overall context of Sudan's Comprehensive Peace Agreement (CPA) and its 6 year Interim Period between 9 January 2005 and 8 July 2011, when a democratically elected government should be in place. The 5th Sudan population and household census took place between 22 April and 6 May 2008, with census published now. These data already help planning processes even though the census results do not have a broad formal acceptance, and its use in planning processes may be contentious. More specific assumptions need to be made for the GoSS policies and budgets for the Basic Services, in particular those for Primary Education and Primary Health. Three main conditions on the way towards a successful exit strategy, in the case of Primary Health programmes, are:

- An operational County Health Department with adequate staff and own operational budget
- Staff salaries of core PHCC and PHCUs staff needs to be ensured.
- A regular drug supply needs to be guaranteed.

Even though the MoH has made much progress in establishing systems, the situation in most Counties is such that these conditions are not met, so that a successful hand is not yet a realistic option. Hand over should be seen as a process, rather than a moment, with NGOs actively building the capacity of CHDs to be in a position to manage and maintain health services.

Security

Inter-ethnic violence is getting far more intense and of a different nature in 2009 than in previous years. The number of incidences is on the increase and women and children are deliberately targeted. At the tail end of CPA's interim period (2005-2011), a year before the national elections and in the immediate run-up to the referendum, this should not come as unexpected. In this context, BSF's management consultant has forewarned all Grant recipients in Round 3b to be realistic with their targets. Nevertheless, some may have to accept to share their grant to assure that targets will be met, due to these circumstances.

This increasing conflict factor highlights the need for NGOs to strengthen the resilience of local partners, such as County Health and -Education Departments, but also local NGOs, to have a stewardship and caring role of local facilities, such as clinics and schools, also where these have not been formally handed over yet, and where local departments do not have the capacity to fully manage these facilities.

2.6 Monitoring Review and Evaluation Arrangements

BSF itself has been evaluated a number of times since its start in 2006. Two evaluations or annual review (in Jan. 2008 and August 2009) were specific for BSF. The respective reports are available on BSF's website (www.bsf-south-sudan.org). Two different studies include BSF in their "pooled-funding" analyses. The main concern of the reviews is the continuing "funding gap" in basic services, which is caused primarily by the planned investment through MDTF which is not forthcoming. This is attributed mainly to the long procedures in international tendering and "no -objections". BSF's second annual review is conducted in Southern Sudan from 16-28 August 2009.

2.6.1 Monitoring by TA

During this quarter the management consultant paid monitoring visits to the grant recipients as indicated in Table 2-7.

Table 2-7 Overview of field visits in quarter 3, 2009

Date	Grant Recipient; State
28 June - 1 July	AMREF; Central Equatoria (together with Dr Felix Loro and Dr Elizabeth Benga-De; of MSH)
20 - 23 July	AMREF; Central Equatoria
13 - 15 August	Swiss Red Cross; Unity State

17 August	Diocese of Rumbek; Lakes
21 August	World Relief; Central Equatoria
21 – 24 August	Medair, Tearfund, Goal; Upper Nile
21 – 23 August	Merlin, Caritas; Eastern Equatoria
24 August	OVCI; Central Equatoria
28 -31 August	Intermon Oxfam; Western Bahr El Ghazal
27 August, 4 September	HARD; Western Bahr El Ghazal
1 - 7 September	Save US; Upper Nile
7 -10 October	Merlin and AVSI; Eastern Equatoria
13 - 17 October	World Vision; Western Equatoria

Data collection in Basic Services focuses on the MDG in particular to assist the responsible partners (GOSS, UN and World Bank) to obtain updated records. After all the MDG indicators have been agreed upon by all concerned stakeholders and for Basic Services the most relevant MDG indicators are:

- Nr.6 net enrolment in primary education
- Nr.16 maternal mortality rate
- Nr.17 proportion of birth attended by skilled health personnel
- Nr.30 proportion of population with sustainable access to improved water sources
- Nr.31 proportion of population with sustainable access to improved sanitation

The management consultant does both financial and physical monitoring; the most important tools in the monitoring process are:

- regular financial invoices (most monthly, budget revisions and contract extensions);
- regular field visits to the sites of the intervention and to programme offices
- frequent interaction by email and meetings at the secretariat in Juba,
- coordination forums

3 Work plan Quarter 4 of 2009 (1 October – 31 December 2009)

All documentation for the Grants that are closed down by CARITAS, MEDAIR and OXFAM-GB and SC-US (round 1) and HASS, IRC, SC-UK and WORLD RELIEF (round 2) is scheduled to be completed in this quarter (the closing down file includes the Completion Report, the external audit report, the last Financial Report, the asset list with the handing-over.)

Due to increased insecurity risks to programme implementation, the MC will intensify consultation with Grant recipients. The aim is in the first place to be well informed. Secondly it will still allow for time to take timely measures for corrective measures (to assure the targets). For example, IRD is getting very far behind and unless they take measures, the targets will not be reached by June 2010.

The corrective measures with AMREF continue to take up a disproportional amount of time from the MC, mainly due to an uncooperative stance by AMREF's senior management. A repeated request from the MC to appoint a crisis manager has so far gone unheeded, although there is now in principle agreement to reduce AMREF's grant and transfer the remainder to COMPASS (the national NGO that has been active in Primary Health in Terekeka County) with a number of vital programme activities to be carried out by COMPASS..

The management consultant plans a mission in Capacity Building to take place in November 2009. A second mission in Primary Health will also take place, to follow-up the second Health Peer Review. Another mission for a Water and Sanitation consultant is planned, to follow up on the previous Drinking Water "lessons learned" mission in February 2009, and to analyse the drilling reports of the grant recipients. Furthermore, the management consultant will organise a Geographical Mapping and Data Sharing Workshop, in consultation with the Ministries of Health, Water Resources and Irrigation and Education, in November 2009.

The 3rd GOSS Health Assembly, originally planned for November 2009, has been postponed till January 2010. The World Bank plans a workshop on contracting procedures for public health services, which will take place in October and in which the secretariat plans to participate.

BSF ACCOUNTABLE BSF ACCOUNTABLE GRANT CONTRACTS
BASIC SERVICES FUND BASIC SERVICES FUND FOR SOUTHERN SUDAN
(DFID Accountable Grant; (DFID Accountable Grant MIS Code 060 540 002)

Lead agency (1)	Contract no. (2)	Duration		Initial contract amount (GBP) (8)	Disbursed by DFID		Contract amount with BMB (GBP) (11) = (8-9)	Addendum 1 (GBP) (12)	Addendum 2 (GBP)	New contract amount with BMB (GBP) (13)=(11+12)	Disbursed by BMB							
		From (6)	to (7)		(GBP) (9)	% (10) = (9/8)					Disbursement no. 1		Disbursement no. 2		Disbursement no. 3		Disbursement no. 4	
											Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)
AMREF	510004.020	2/1/06	12/31/08	1,565,924.00	303,248.00	19.4%	1,262,676.00			1,262,676.00	24/04/2007	82,979.00	22/05/2007	85,703.00	31/07/2007	60,000.00	16/08/2007	23,304.00
Caritas Switzerland	510004.010	2/1/06	1/1/09	1,731,959.00	216,495.00	12.5%	1,515,464.00	362,000.00		1,877,464.00	29/03/2007	338,857.00	16/08/2007	121,793.00	18/12/2007	210,753.00	11/12/2007	150,752.00
COLLABORAZIONE MEDICA - C. C. M.	510004.019	2/1/06	12/31/08	857,922.00	321,089.00	37.4%	551,777.00	209,020.00	20,000.00	780,797.00	29/03/2007	77,432.70	07/06/2007	10,318.30	05/07/2007	117,215.00	31/07/2007	40,000.00
Medair	510004.012	2/1/06	1/31/08	586,287.00	41,679.00	7.1%	544,608.00			544,608.00	29/03/2007	52,121.00	21/06/2007	344,102.00	03.09.2007	96,451.00	11/12/2007	22,846.00
Oxfam GB	510004.013	4/1/06	12/31/08	1,674,392.00	241,853.00	14.4%	1,432,539.00	138,598.00	150,000.00	1,721,137.00	09/03/2007	72,593.00	29/03/2007	146,377.00	16/08/2007	121,108.00	18/12/2007	320,197.00
Save the Children Federation, Inc - USA	510004.011	5/1/06	12/31/08	1,581,642.00			1,581,642.00		-197,114.00	1,384,528.00	29/03/2007	210,949.00	07-05-2007	18,283.00	22/05/2007	58,232.00	28/06/2007	144,573.00
Sub total 1 - First Round				7,998,126.00	1,124,364.00	14.1%	6,888,706.00	709,618.00	-27,114.00	7,571,210.00		834,931.70		726,576.30		663,759.00		701,672.00
GOAL	510004.021	2/9/35	12/31/08	886,129.00			886,129.00	82,800.00		968,929.00	28/06/2007	27,052.00	03.09.2007	31,706.00	18.10.2007	68,817.00	18/12/2007	120,507.00
Assistance for South Sudan (HASS)	510004.022	1/1/07	12/31/08	1,003,481.00			1,003,481.00	150,575.00		1,154,056.00	24/04/2007	72,517.00	07/06/2007	103,774.00	31/07/2007	60,000.00	03.09.2007	102,570.00
International Rescue Committee (IRC)	510004.023	4/1/07	12/31/08	591,245.00			591,245.00	138,525.00		729,770.00	03.09.2007	26,306.00	18/12/2007	29,799.00	11/12/2007	19,697.00	07/02/2008	8,514.00
MERLIN	510004.016	1/1/07	12/31/08	973,890.00			973,890.00	69,946.00	85,000.00	1,128,836.00	24/04/2007	1,696.00	07-05-2007	9,330.00	28/06/2007	23,284.00	16/08/2007	30,690.00
OVCI la Nostra Famiglia	510004.017	1/1/07	12/31/08	376,205.00			376,205.00	79,612.00		455,817.00	07-05-2007	66,821.00	07/06/2007	2,266.00	28/06/2007	33,022.00	31/07/2007	20,000.00
Save The Children - UK	510004.014	1/1/07	2/28/09	1,755,820.00			1,755,820.00		-42,763.00	1,713,057.00	21/06/2007	110,761.00	18.10.2007	47,433.00	11/12/2007	128,482.00	07/02/2008	51,552.00
TEARFUND	510004.018	1/1/07	12/31/08	1,763,105.00			1,763,105.00	665,591.00		2,428,696.00	28-06.2007	242,902.00	18.10.2007	361,273.00	11/12/2007	218,231.00	03/04/2008	230,481.00
World Relief	510004.015	2/1/07	12/31/08	245,325.00			245,325.00	61,248.00	59,825.00	366,398.00	07-05-2007	8,818.00	22/05/2007	7,992.00	28/06/2007	8,330.00	16/08/2007	19,006.00
		Sub total 2 - Sec. Rnd		7,595,200.00			7,595,200.00	1,248,297.00	102,062.00	8,945,559.00		556,873.00		593,573.00		559,863.00		583,320.00
		Total (1 + 2)		15,593,326.00			14,483,906.00			16,516,769.00		1,391,804.70		1,320,149.30		1,223,622.00		1,284,992.00
		Budget Available					16,621,447.00											
		Surplus					2,137,541.00			104,678.00								

n.p.y. = not yet paid

338,228.00

BSF ACCOUNTABLE GRANT CONTRACTS
BASIC SERVICES FUND FOR SOUTHERN SUDAN
(DFID Accountable Grant MIS Code 060 540 002)

Lead agency (1)	Contract no. (2)	Disbursed by BMB																	
		Disbursement no. 5		Disbursement no. 6		Disbursement no. 7		Disbursement no. 8		Disbursement no. 9		Disbursement no. 10		Disbursement no. 11		Disbursement no. 12		Disbursement no. 13	
		Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)
AMREF	510004.020	01.11.2007	58,537.00	11/12/2007	142,822.00	19/03/2008	174,672.00	22/04/2008	44,020.00	26.06.2008	112,908.00	Settlem. adv. GBP 60,000 + 22-01-2009	333,490.00	07/05/2009	137,795.00	n.p.y.	6,446.00		
Caritas Switzerland	510004.010	06/03/2008	188,385.00	22/04/2008	23,159.00	12/06/2008	75,467.00	17/07/2008	75,848.00	26/08/2008	219,004.00	02/10/2008	67,430.00	02-12-2008	198,889.00	22/01/2009	52,819.00	30/06/2009	93,696.00
COLLABORAZIONE MEDICA - C. C. M.	510004.019	16/08/2007	24,008.00	01/11/2007	62,996.00	11/12/2007	14,485.00	07/02/2008	17,940.00	21/02/2008	50,264.00	06/03/2008	28,918.00	03/04/2008	26,668.00	22/04/2008	58,723.00	26/06/2008	20,094.00
Medair	510004.012																		
Oxfam GB	510004.013	11/12/2007	289,916.00	03/04/2008	161,066.00	24/07/2008	303,453.00	02/04/2009	119,575.00	07/05/2009	137,094.00	n.p.y.	30,401.00	n.p.y.	7,812.00				
Save the Children Federation, Inc - USA	510004.011	16/08/2007	9,469.00	03/09/2007	32,594.00	01.11.2007	109,045.00	18/12/2007	33,383.00	21/02/2008	34,027.00	06/03/2008	18,841.00	22/04/2008	16,670.00	03/07/2008	42,790.00	30/12/2008	261,136.00
Sub total 1 - First Round			570,315.00		422,637.00		677,122.00		290,766.00		553,297.00		479,080.00		387,834.00		160,778.00		374,926.00
GOAL	510004.021	03/04/2008	265,480.00	17/07/2008	238,856.00	26/08/2008	7,489.00	02/10/2008	47,602.00	22/01/2009	85,391.00	07/05/2009	51,889.00						
Assistance for South Sudan (HASS)	510004.022	18.10.2007	154,674.00	01/11/2007	79,242.00	07/02/2008	29,213.00	06/03/2008	114,978.00	03/04/2008	21,404.00	22/04/2008	26,230.00	12/06/2008	112,335.00	24/07/2008	64,844.00	02/10/2008	182,531.00
International Rescue Committee (IRC)	510004.023	21/02/2008	36,484.00	03/04/2008	64,791.00	12/06/2008	86,848.00	24/07/2008	24,213.00	26/08/2008	21,649.00	02/10/2008	121,453.00	30/12/2008	104,124.00	22/01/2009	20,247.00	n.p.y	118,125.00
MERLIN	510004.016	03/09/2007	25,328.00	01/11/2007	83,787.00	18/12/2007	35,696.00	11/12/2007	97,416.00	07/02/2008	31,831.00	21/02/2008	34,969.00	06/03/2008	16,528.00	22/04/2008	45,645.00	12/06/2008	22,737.00
OVC I a Nostra Famiglia	510004.017	03/09/2007	50,140.00	01/11/2007	9,646.00	18/12/2007	18,495.00	07/02/2008	21,638.00	22/04/2008	23,232.00	10/07/2008	48,648.00	26/08/2008	21,933.00	02/10/2008	32,377.00	30/12/2008	42,005.00
Save The Children - UK	510004.014	27/03/2008	330,075.00	12/06/2008	208,078.00	17/07/2008	95,940.00	26/08/2008	209,033.00	30/12/2008	277,689.00	22/01/2009	225,868.00	n.p.y	9,228.00				
TEARFUND	510004.018	02/10/2008	297,545.00	02-12-2008	501,939.00	07/05/2009	345,861.00	n.p.y	49,844.00										
World Relief	510004.015	18.10.2007	9,800.00	01/11/2007	10,692.00	18/12/2007	9,056.00	11/12/2007	25,283.00	07/02/2008	13,550.00	22/04/2008	34,947.00	12/06/2008	12,056.00	24/07/2008	18,653.00	02/10/2008	23,725.00
			1,169,526.00		1,197,031.00		628,598.00		590,007.00		474,746.00		544,004.00		276,204.00		181,766.00		389,123.00
			1,739,841.00		1,619,668.00		1,305,720.00		880,773.00		1,028,043.00		1,023,084.00		664,038.00		342,544.00		764,049.00

BSF ACCOUNTABLE GRANT CONTRACTS - PHASE-2

BASIC SERVICES FUND FOR SOUTHERN SUDAN
(DFID Accountable Grant MIS Code 060 540 002)

ANNEX 3 of QPR 3 of 2009

Lead agency (1)	Contract no. (2)	Duration		Contract amount (GBP) (8)										
		From (6)	to (7)		Disbursement no. 1		Disbursement no. 2		Disbursement no. 3		Disbursement no. 4		Disbursement no. 5	
					Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)
AMREF	BSF II - 01	1/1/09	6/30/10	894,517	30/06/2009	25,414.00	07/08/2009	33,686.00	08/09/2009	58,335.00	n.p.y	19,811.00		
CCM	BSF II - 02	1/1/09	6/30/10	931,018	28/04/2009	26,966.00	28/04/2009	16,066.00	30/06/2009	45,499.00	30/06/2009	159,844.00	14/07/2009	52,100.00
SC-US	BSF II - 03	1/1/09	6/30/09	162,154	30/06/2009	34,123.00	n.p.y	124,895.00						
GOAL	BSF II - 04	1/1/09	6/30/10	987,885	30/06/2009	194,878.00	07/08/2009	59,763.00	08/09/2009	48,175.00	27/10/2009	91,352.00	n.p.y	40,953.00
MERLIN	BSF II - 05	1/1/09	6/30/10	866,364	07/08/2009	76,749.00	27/10/2009	196,346.00						
OVC	BSF II - 06	1/1/09	6/30/10	198,210	30/06/2009	31,894.00	14/07/2009	16,563.00	07/08/2009	6,404.00	08/09/2009	5,411.00	15/10/2009	10,884.00
TEARFUND	BSF II - 07	1/1/09	6/30/10	904,427	08/09/2009	189,160.00	27/10/2009	90,799.00	n.p.y	45,100.00				
MEDAIR	BSF II - 08	1/1/09	6/30/10	988,406	27/08/2009	144,995.00	27/08/2009	1,740.00	08/09/2009	145,831.00	27/10/2009	63,113.00		
Sub total 1 - Extensions (8)				5,932,981		724,179.00		539,858.00		349,344.00		339,531.00		103,937.00
IRD	BSF II - 09	1/1/09	6/30/10	1,498,868	30/06/2009	97,116.00	07/08/2009	156,630.00	08/09/2009	30,255.00	27/10/2009	158,211.00		
World Relief	BSF II - 10	1/1/09	6/30/10	1,492,808	28/04/2009	24,046.00	30/06/2009	72,863.00	30/06/2009	96,549.00	07/08/2009	43,524.00	08/09/2009	92,541.00
CONCERN	BSF II - 11	1/1/09	6/30/10	828,834	28/04/2009	19,236.00	28/04/2009	36,093.00	30/06/2009	68,263.00	07/08/2009	106,585.00	08/09/2009	40,673.00
Oxfam Novib	BSF II - 12	1/1/09	6/30/10	1,018,892	28/04/2009	5,704.00	30/06/2009	154,144.00	14/07/2009	136,075.00	07/08/2009	115,957.00	08/09/2009	38,423.00
CMS Ireland	BSF II - 13	1/1/09	6/30/10	833,045	28/04/2009	38,059.00	28/04/2009	45,579.00	30/06/2009	22,947.00	30/06/2009	27,867.00	07/08/2009	54,579.00
OXFAM GB	BSF II - 14	1/1/09	6/30/10	1,454,853	30/06/2009	123,526.00	08/09/2009	151,136.00	27/10/2009	92,434.00				
AVSI	BSF II - 15	1/1/09	6/30/10	967,720	30/06/2009	15,247.00	14/07/2009	14,170.00	14/07/2009	15,314.00	08/09/2009	24,706.00	15/10/2009	46,676.00
INTERMON OXFAM	BSF II - 16	1/1/09	6/30/10	1,273,349	30/06/2009	100,663.00	14/07/2009	68,595.00	07/08/2009	147,487.00	08/09/2009	246,302.00		
SWISS RED CROSS	BSF II - 17	1/1/09	6/30/10	539,441	14/07/2009	2,157.00	27/10/2009	11,618.00						
DOR	BSF II - 18	1/1/09	6/30/10	574,699	28/04/2009	1,152.00	28/04/2009	4,535.00	30/06/2009	34,543.00	14/07/2009	3,171.00	08/09/2009	19,082.00
AMA	BSF II - 19	1/1/09	6/30/10	1,237,525	28/04/2009	192,981.00	30/06/2009	142,387.00	07/08/2009	180,287.00	08/09/2009	35,941.00	15/10/2009	65,681.00
HARD	BSF II - 20	4/1/09	6/30/10	547,503	30/06/2009	91,103.00	09/07/2009	31,038.00	07/08/2009	150,789.00	08/09/2009	15,879.00	15/10/2009	13,969.00
IMC - UK	BSF II - 21	4/1/09	6/30/10	1,155,000	07/08/2009	6,352.00	08/09/2009	22,530.00	15/10/2009	59,782.00				
World Vision -UK	BSF II - 22	4/1/09	6/30/10	825,174	07/08/2009	2,625.00	08/09/2009	7,043.00	15/10/2009	1,797.00				
UMCOR	BSF II - 23	5/1/09	6/30/10	315,719	08/09/2009	9,874.00	27/10/2009	33,512.00						
MEDAIR	BSF II - 24	6/1/09	6/30/10	1,059,174	08/09/2009	133,049.00	27/10/2009	22,593.00						
Sub total 2 - New Projects				15,622,604		862,890.00		974,466.00		1,036,522.00		778,143.00		371,624.00
Total (1 + 2)				21,555,585		1,587,069.00		1,514,324.00		1,385,866.00		1,117,674.00		475,561.00
Budget Available				21,554,792										
Deficit				-793.00										

= original received

BSF ACCOUNTABLE GRANT CONTRACTS
BASIC SERVICES FUND FOR SOUTHERN SUDAN
(DFID Accountable Grant MIS Code 060 5 (DFID Accountable Grant MIS Code 060 540 002))

Lead agency (1)	Contract no. (2)	Disbursed								Disbursed		Remaining Balance (GBP) (13) = (10-11)
		Disbursement no. 6		Disbursement no. 7		Disbursement no. 8		Disbursement no. 9		(GBP)	%	
		Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	(11)	(12) = (11/10)	
AMREF	BSF II - 01									137,246.00	15.3%	757,271.00
CCM	BSF II - 02	07/08/2009	33,229.00	08/09/2009	38,445.00	15/10/2009	32,700.00	n.p.y	58,343.00	463,192.00	49.8%	467,826.00
SC-US	BSF II - 03									159,018.00	98.1%	3,136.00
GOAL	BSF II - 04									435,121.00	44.0%	552,764.00
MERLIN	BSF II - 05									273,095.00	31.5%	593,269.00
OVC	BSF II - 06	n.p.y	24,778.00							95,934.00	48.4%	102,276.00
TEARFUND	BSF II - 07									325,059.00	35.9%	579,368.00
MEDAIR	BSF II - 08									355,679.00	36.0%	632,727.00
Sub total 1 - Extensions (8)			58,007.00		38,445.00		32,700.00		58,343.00	2,244,344.00	37.8%	3,688,637.00
IRD	BSF II - 09									442,212.00	29.5%	1,056,656.00
World Relief	BSF II - 10	15/10/2009	96,965.00	n.p.y	53,218.00					479,706.00	32.1%	1,013,102.00
CONCERN	BSF II - 11	27/10/2009	39,580.00	n.p.y	45,496.00					355,926.00	42.9%	472,908.00
Oxfam Novib	BSF II - 12	27/10/2009	100,046.00							550,349.00	54.0%	468,543.00
CMS Ireland	BSF II - 13	08/09/2009	43,174.00	15/10/2009	55,155.00	n.p.y	60,945.00			348,305.00	41.8%	484,740.00
OXFAM GB	BSF II - 14									367,096.00	25.2%	1,087,757.00
AVSI	BSF II - 15	n.p.y	83,349.00							199,462.00	20.6%	768,258.00
INTERMON OXFAM	BSF II - 16									563,047.00	44.2%	710,302.00
SWISS RED CROSS	BSF II - 17									13,775.00	2.6%	525,666.00
DoR	BSF II - 18	15/10/2009	14,029.00	n.p.y	461.00					76,973.00	13.4%	497,726.00
AMA	BSF II - 19	n.p.y	54,898.00							672,175.00	54.3%	565,350.00
HARD	BSF II - 20	n.p.y	103,339.00							406,117.00	74.2%	141,386.00
IMC - UK	BSF II - 21									88,664.00	7.7%	1,066,336.00
World Vision -UK	BSF II - 22									11,465.00	1.4%	813,709.00
UMCOR	BSF II - 23									43,386.00	13.7%	272,333.00
MEDAIR	BSF II - 24									155,642.00	14.7%	903,532.00
			535,380.00		154,330.00		60,945.00			4,774,300.00	30.6%	10,848,304.00
			593,387.00		192,775.00		93,645.00		58,343.00	7,018,644.00	32.6%	14,536,941.00

Annex 1 Logical Framework

Project Name							
Basic Services Fund Southern Sudan – Phase 2, 1 January 2009 – 31 August 2010							
GOAL	Indicator	Baseline	Milestone 1	Milestone 2	Target (Aug. 2010)	Assumptions	
Poverty in Southern Sudan reduced	People living on less than a dollar a day	More than 90% of people in Southern Sudan live on less than a dollar a day (2000)			PRSP target ???	CPA holds and security levels are acceptable to implement projects	
		Source					
		GOSS statistics and PRSP updates					

List of Acronyms:

BSF	Basic Services Fund
BPHS	Basic Package of Health Services
CPA	Comprehensive Peace Agreement
DFID	Department for International Development
EMIS	Education Management Information System
GOSS	Government of South Sudan
HMIS	Health Management Information System
MDG	Millennium Development Goals
MDF	Multi Donor Trust Fund
MoEST	Ministry of Education, Science and Technology
MoH	Ministry of Health
MWRI	Ministry of Water Resources and Irrigation
NGO	Non Governmental Organisation
PHCC	Primary Health Care Centres
PHCU	Primary Health Care Units
PTA	Parent Teacher Associations
SC	Steering Committee
UNDP	United Nations Development Programme
WB	World Bank

PURPOSE	Indicator	Baseline	Milestone 1	Milestone 2	Targets (Aug. 2010)	Assumptions	
Communities in project areas have sustained access to primary education, primary health care and water and sanitation	Sustainable access to primary education	Gross primary enrolment rate : 23% (2003) Number of primary school structures: 1,600 (2003) Ratio of girls to boys in primary education: 36% (2000)			Increase the gross primary enrolment rate to 52% (1.762 m children) Increase primary school structures to at least 3,646 Increase girls enrolment to 40%	Government policies of basic services delivery budgeted and implemented as per target MDTF basic services projects are implemented according to target	
	Source						
	UNDP Sudan Millennium Development Goals – Interim Unified Report, Dec. 2004 GOSS Budget Sector Working Group – Education 2008 EMIS (Education Monitoring Information System), MoEST						
	Indicator	Baseline	Milestone 1	Milestone 2	Targets (Aug. 2010)		
Sustainable access to primary health	Population with access to primary health services: 25% (2000) Under-five mortality rate (per 1,000 live births): 250 (2001) Maternal mortality rate (per 100,000 live births): 1,700 (2000)			Provide 50% of the population with primary health services Reduce child and maternal mortality rates by 25%			
Source							
UNDP Sudan Millennium Development Goals – Interim Unified Report, Dec. 2004 GOSS Budget Sector Working Group – Health 2008 HMIS (Health Management Information System), MoH							
Indicator	Baseline	Milestone 1	Milestone 2	Targets (Aug. 2010)			
Sustainable access to safe drinking water and improved sanitation	Use of safe water source: 20% (2000) Access to improved sanitation: 15% (2000)			Increase proportion of rural population with access to safe water to over 40%; Provide primary schools and health facilities with access to safe water and sanitation			
Source							
UNDP Sudan Millennium Development Goals – Interim Unified Report, Dec. 2004 GOSS Budget Sector Working Group – Water and Sanitation 2008 WES (Water, Environment and Sanitation) database, MWRI							
INPUTS (£)	DFID in BSF (£)	GOSS/MDTF (\$m)	Others in BSF (£)	Total BSF (£)	DFID share in BSF (%)		
	9,000,000	education: 27.9 health: 58.7 water/sanitation: 24.9 total basic services: 111.5	14,321,450	23,321,450	38.59%		

OUTPUT 1	Indicator	Baseline	Milestone 1	Milestone 2	Targets (Aug. 2010)	Assumptions
Primary education facilities built and services maintained and operational in a sustainable way	Schools and classrooms constructed and/or rehabilitated	RALS (Rapid Assessment of Learning Spaces)			22 schools and 172 classrooms constructed	GOSS policies for free primary education budgeted and implemented as per targets
	Trained teachers				2,019 teachers trained	
	Trained PTA members				3,112 PTA members trained	
	MoU between NGOs and State/Country MoEST on handover of facilities				22 MoUs signed; 396 Payam and county education officers trained	
	Key GOSS decision makers aware of lessons learned from BSF education work				Quarterly SC meetings; Joint field inspections with State MoEST; Minimum of 1 lessons learned workshop	
Impact weighting 40%		Source				Risk Rating
		NGO Quarterly progress reports; BSF Management information system Peer reviews with State MoEST officials				High
INPUTS (£)	DFID (£)	Government	Others (£)	Total (£)	DFID Share (%)	
		GOSS budget for primary education		5,828,947		

OUTPUT 2	Indicator	Baseline	Milestone 1	Milestone 2	Targets (Aug. 2010)	Assumptions
Primary health facilities built and services maintained and operational in a sustainable way	Health facilities constructed and/or rehabilitated	MoH BPHS (Basic Package of Health Services) State Baseline			18 PHCCs constructed and/or rehabilitated; 52 PHCUs constructed and/or rehabilitated	GOSS policies for free primary health budgeted and implemented as per targets
	Health facilities provided with services (staff, drugs)				32 PHCCs provided with services (18 + 14 with services only); 94 PHCUs provided with services (52 + 42 with services only)	
	Trained health personnel and community health volunteers				417 health personnel trained; 783 community health volunteers trained	
	Trained village health committee members				345 village health committee members trained	
	MoU between NGOs and State/Country MoH on handover of facilities				70 MoUs signed (18 + 52)	
	Key GOSS decision makers aware of lessons learned from BSF health work				Quarterly SC meetings; Joint field inspections with State MoH; Minimum of 1 lessons learned workshop	
		Source				
Impact weighting 40%	NGO Quarterly progress reports; BSF Management information system Peer reviews with State MoH officials					High
INPUTS (£)	DFID (£)	Government	Others (£)	Total (£)	DFID Share (%)	
		GOSS budget for primary health		11,371,384		

OUTPUT 3	Indicator	Baseline	Milestone 1	Milestone 2	Target (Aug. 2010)	Assumptions
Drinking water and sanitation facilities, constructed, maintained and operational in a sustainable way	Boreholes with hand pumps constructed and/or rehabilitated	WES (Water, Environment and Sanitation) database			139 boreholes with hand pumps constructed; 127 boreholes with hand pumps rehabilitated	Spare parts and tools for hand pumps are available locally across Southern Sudan
	Alternative water sources constructed				15 alternative water sources constructed	
	Pit latrines constructed				1,245 pit latrines constructed	
	Trained village water committee members				1,263 village health committee members trained; 151 pump mechanics trained	
	Key GOSS decision makers aware of lessons learned from BSF water and sanitation work				Quarterly SC meetings; Joint field inspections with State MWRI; Minimum of 1 lessons learned workshop	
		Source				
	NGO Quarterly progress reports; BSF Management information system Peer reviews with State MWRI officials					High
Impact weighting 20%						
INPUTS (£)	DFID (£)	Government	Others (£)	Total (£)	DFID Share (%)	
		GOSS budget for rural water supply		4,355,255		

(1)	(2)	From (6)	to (7)	(8)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)	Date	Amount (GBP)
	24											
Sub total 2 - New Projects				15,622,604		862,890.00		974,466.00		1,036,522.00		778,143.00
Total (1 + 2)				21,555,585		1,587,069.00		1,514,324.00		1,385,866.00		1,117,674.00
Budget Available				21,554,792								
Deficit				-793.00								

= original received

Annex 4 Financial Forecast of BSF Grant Expenditure

Financial forecast in GBP

	Budget	Claimed up to September 2009	Q4 09	Q1 10	Q2 10	Q3 10	Total
Subtotal NGOs	21,555,583	6,447,764	4,762,275	4,618,674	3,703,071	2,020,664	21,552,449
BMB Mott MacDonald	2,011,854	798,625	300,000	300,000	300,000	313,229	2,011,854
Total	23,567,437	7,246,389	5,062,275	4,918,674	4,003,071	2,333,893	23,564,303

Note: The budget is slightly larger than the Total forecasted because Save the Children USA have not used their full budget (contract finished).

Financial forecast in percentages of the total budget

	Budget	Claimed up to September 2009	Q4 09	Q1 10	Q2 10	Q3 10	Total
Subtotal NGOs	100.0%	29.9%	22.1%	21.4%	17.2%	9.4%	100.0%
BMB Mott MacDonald	100.0%	39.7%	14.9%	14.9%	14.9%	15.6%	100.0%
Total	100.0%	30.7%	21.5%	20.9%	17.0%	9.9%	100.0%

Note: The budget is slightly larger than the total forecasted because Save the Children USA have not used their full budget (contract finished).

Annex 5 Phase 1 Grant Recipient Overview - Round 1

Lead Agents with BSF Grants – Phase 1, Round 1

	Lead agency	Consortium members	From	To	Month	Budget GBP
1.1	AMREF	AquaFund, Accomplish	01.02.06	31.12.08	35	1,565,924
1.2	CARITAS	AVSI, Diocese of Torit	01.02.06	31.12.08	35	2,093,959
1.3	CCM	-	01.02.06	31.12.08	35	1,086,942
1.4	MEDAIR	-	01.02.06	31.01.08	27	586,287
1.5	OXFAM	-	01.04.06	31.12.08	33	1,962,990
1.6	SC-US	Gardos, NIP, MRDO	01.05.06	31.12.08	32	1,384,528
Totals						8,680,630

Beneficiaries – Phase 1, Round 1

	NGO	Primary Education	Primary Health	Drinking Water	Sanitation	Total	State	County
1.1	AMREF		161,533	19,420	160	181,013	Central Equatoria	Terekeka
1.2	CARITAS	948	218,269	16,196	780	235,245	Eastern Equatoria.	Torit, Budi, Magwi, Ikwotos, Kapoeta
1.3	CCM		229,677			229,677	Warrap	Tonj East, Tonj North
1.4	MEDAIR			13,350		13,350	Northern Bahr-El-Ghazal, Upper Nile, Jonglei	Aweil Centre, Renk, Khorflus, Ayod
1.5	OXFAM GB			95,378	370	95,378	Eastern Equatoria, Jonglei, Upper Nile and Unity	Torit, Akobo, Maban, Luakpiny, Maiwut, Mayendit, Leer
1.6	SC-US		188,046	1,450	400	191,850	Upper Nile	Mabaan, Maiwut, Longuchuk
Totals		948	797,525	145,794	1,710	1,167,274		

Annex 6 Phase 1 Grant Recipient Overview - Round 2

Lead Agents with BSF Grants – Phase 1, Round 2

	Lead agency	Consortium members	From	To	Month	Budget GBP
2.1	GOAL	SAFORD, SDA	01.02.07	31.12.08	23	968,929
2.2	HASS	N.A.	01.01.07	31.12.08	24	1,154,056
2.3	IRC	UGWA	01.04.07	31.12.08	21	729,770
2.4	MERLIN	AVSI, CHIWESE	01.01.07	31.12.08	24	1,128,836
2.5	OVC	Juba Catholic Archdiocese	01.01.07	31.12.08	24	455,817
2.6	SC-UK	SC-US, SC-Sweden	01.01.07	31.12.08	24	1,713,057
2.7	TEARFUND	MEDAIR	01.01.07	31.12.08	24	2,428,696
2.8	WORLD RELIEF	ECS	01.02.07	31.12.08	23	366,398
	Totals					8,843,497

Beneficiaries – Phase 1, Round 2

	Lead agency	Primary Education	Primary Health	Water and Sanitation	Total	State	County
2.1	GOAL		100,691		100,691	Upper Nile	Baliet, Ulang
2.2	HASS	2,240			2,240	Central Equatoria	Terekeka, Lainya, Kajo-keji
2.3	IRC			23,324	23,324	Northern BEG	Aweil North, Aweil West
2.4	MERLIN		133,916		133,916	Eastern Equatoria	Torit, Lopa (Lafon)
2.5	OVC		300,000		300,000	Central Equatoria	Juba
2.6	SC-UK	40,000			40,000	Warrap, Western BEG, Jonglei, Western Equatoria	Gogrial West, Abyei, Wau and Jur River, Twic East, Mvolo
2.7a	TEARFUND		201,011		267,841	Upper Nile	Malakal, Fashoda, Manyo
2.7b	Medair		79,500			Upper Nile	Melut
2.8	World Relief	20,000			20,000	Lakes, Central and West Equatoria, Jonglei, Warrap	Rumbek, Wulu, Juba, Terekeka, Lainya, Ibba, Ezo, Pochalla, Renk, Gogrial East
	Totals	62,240	802,448	23,324	888,012		

Annex 7 Phase 2 Grant Recipient Overview – Ext. Primary Health

Lead Agents with BSF Grants – Phase 2, Health Extensions

	Lead agency	Consortium members	From	To	Month	Budget GBP
Extension of Round 1						
1.1	AMREF	Accomplish, Compass	01.01.09	30.06.10	18	894,517
1.3	CCM	-	01.01.09	30.06.10	18	931,018
1.6	SC-US	NIP, MRDO	01.01.09	30.06.09	06	162,154
Extension of Round 2						
2.1	GOAL	-	01.01.09	30.06.10	18	987,885
2.4	MERLIN	-	01.01.09	30.06.10	18	866,364
2.5	OVC	-	01.01.09	30.06.10	18	198,210
2.7a	TEARFUND	-	01.01.09	30.06.10	18	904,427
2.7b	MEDAIR	-	01.01.09	30.06.10	18	988,406
Totals						5,932,981

Target beneficiaries – Phase 2, Health Extensions

	Lead agency	Primary Health	State	County
Extension of Round 1				
1.1	AMREF	161,533	Central Equatoria	Terekeka
1.3	CCM	229,677	Warrap	Tonj East, Tonj North
1.6	SC-US	188,046	Upper Nile	Maiwut, Mabaan, Longuchuk
Extension of Round 2				
2.1	GOAL	100,691	Upper Nile	Baliet, Ulang
2.4	MERLIN	133,916	Eastern Equatoria	Torit, Lopa (Lafon)
2.5	OVC	300,000	Central Equatoria	Juba
2.7a	TEARFUND	201,011	Upper Nile	Malakal, Fashoda, Manyo
2.7b	MEDAIR	79,500	Upper Nile	Melut
Totals		1,394,374		

Annex 8 Phase 2 Grant Recipient Overview – Round 3 (3A and 3B)

Lead Agents with BSF Grants – Phase 2, Round 3A and 3B

	Lead agency	Consortium members	From	To	Month	Budget GBP
3a.01	AMA	-	01.01.09	30.06.10	18	1,237,525
3a.02	AVSI	DoT	01.01.09	30.06.10	18	967,720
3a.03	CMS Ireland	ECS	01.01.09	30.06.10	18	833,045
3a.04	CONCERN Worldwide	-	01.01.09	30.06.10	18	828,834
3a.05	DIOCESE OF RUMBEK	-	01.01.09	30.06.10	18	574,699
3a.06	INTERMON OXFAM	-	01.01.09	30.06.10	18	1,273,349
3a.07	IRD	JDSF, UNYMP, DA, UNWWA	01.01.09	30.06.10	18	1,498,868
3a.08	OXFAM GB	-	01.01.09	30.06.10	18	1,454,853
3a.09	OXFAM NOVIB	MRDA, NSWF	01.01.09	30.06.10	18	1,018,892
3a.10	SWISS RED CROSS	Sudanese Red Crescent Society	01.01.09	30.06.10	18	539,441
3a.11	WORLD RELIEF	ECS	01.01.09	30.06.10	18	1,492,808
Totals 3A						11,720,034
3b.01	HARD	-	01.04.09	30.06.10	15	547,503
3b.02	IMC	NHDF, PRDA	01.04.09	30.6.10	15	1,155,000
3b.03	Medair	Malaria Consortium, FYF	01.04.09	30.6.10	15	1,059,174
3b.04	WORLD VISION	Diocese of Tambura & Yambio	01.04.09	30.6.10	15	825,174
3b.05	UMCOR	-	01.04.09	30.6.10	15	315,719
Totals3B						3,902,570
TOTAL 3A and 3B						15,622,604

Target beneficiaries – Phase 2, Round 3A and 3B

	Lead agency	Primary Education	Primary Health	Water and Sanitation	Total	State	County
3a.01	AMA	1,200	-	24,120	25,320	Warrap	Twic, Gogrial East
3a.02	AVSI	3,600	125,000	5,030	133,630	Eastern Equatoria	Ikotos
3a.03	CMS Ireland	800	80,000	4,550	85,350	Central Equatoria	Yei, Morobo, Lainya
3a.04	CONCERN Worldwide	-	125,000	-	125,000	Northern Bahr el Ghazal	North and West Aweil
3a.05	DIOCESE OF RUMBEK	800	-	-	800	Northern Bahr el Ghazal, Warrap, Lakes	Aweil East, Aweil West, Tonj North, Rumbek Centre, Yiroi West
3a.06	INTERMON OXFAM	-	-	24,800	24,800	Western Bahr el Ghazal	Raga
3a.07	IRD	11,200	210,000	7,900	229,100	Jonglei	Duk
3a.08	OXFAM GB	-	-	29,700	29,700	Upper Nile	Mabaan, Longuchuk
3a.09	OXFAM NOVIB	10,400	-	120	10,520	Western Equatoria	East and West Mundri
3a.10	SWISS RED CROSS	-	65,000	10,445	75,445	Unity	Mayendit
3a.11	WORLD RELIEF	600	-	60	660	7 states	
	Totals 3A	28,600	605,000	106,725	740,325		
3b.01	HARD	900	-	1,500	2,400	Western Bahr el Ghazal	Jur River, Wau,
3b.02	IMC UK	-	265,000	16,260	281,260	Jonglei	Akobo
3b.03	MEDAIR	-	180,000	12,500	192,500	Upper Nile	Manyo
3b.04	UMCOR	500	-	20,000	20,500	Northern Bahr el Ghazal	Aweil South
3b.05	WORLD VISION UK	4,400	530,000	10,060	544,460	Western Equatoria	Ezo, Tambura
	Totals3B	5,800	975,000	60,320	1,041,120		
	TOTAL 3A and 3B	34,400	1,580,000	167,045	1,781,445		

Annex 9 Phase 1 Summary Tables Target and Achievements – Primary Education

	Lead Agency	Primary school interventions								Students			
		Construction		Services only		Class rooms		Office blocks		Girls		Boys	
		Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual	Target	Actual	Target	Actual
Round 1													
1.2	CARITAS	4	4	16	13	32	8	4	1	700	477	700	471
Round 2													
2.2	HASS	8 ¹	7	0	0	56	56	7	7	1,120	1,120	1,120	1,120
2.6	SC-UK	9 ²	7	35	34	64	36	8	6	1,220	6,267	1,220	13,945 ³
Total		21	18	51	47	152	100	19	14	3,040	7,864	3,040	15,536

¹ The target has been reduced to 7, in an early stage of the implementation, in consultation with the secretariat.

² 2 schools were still under construction, and were not yet confirmed as completed (expected before end of 2009).

³ 2 out of the 3 schools that are not yet completed are however already in use, as the roofs are in place.

Annex 10 Phase 1 Summary Tables Targets and Achievements – Primary Health

	Lead Agency	PHCC Interventions				PHCU Interventions				Beneficiaries *		Total consultations in Phase 1
		Construction & Services		Services Only		Construction & Services		Services Only		Target	Actual	
		Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual			
Round 1												
1.1	AMREF	2 ¹	1	0	0	8 ⁸	2	0	7 ^{1,2}	220,000	161,533	69,639
1.2	CARITAS ³	1	1	6	6	0	0	0	0	50,000	-	0
1.3	CCM	2 ⁴	1	0	0	3	3	4	4	205,000	229,677	333,262
1.6	SC-US	1	1	0	0	7 ⁵	6	0	0	155,000	188,046	91,756
Round 2												
2.1	GOAL	2	2	0	0	3	3 ⁶	1	1	110,000	100,691	54,009
2.4	MERLIN	2	0	0	1 ⁷	2	2	0	1 ⁸	80,000	133,916	30,660
2.5	OVC	4	4	0	0	0	0	0	0	200,000	300,000	81,069
2.7	TEAR FUND	4	3	0	1	7	8	7	7	410,000	201,011	123,563
	Total	18	13	6	8	30	24	12	20	1,430,000	1,314,874	783,958

¹ 1 PHCC is still under construction, but delivers currently PHCU services only.

² The Proposal/contract states 8 PHCU to be constructed or rehabilitated. In practice, 2 new PHCUs built and 6 existing buildings rehabilitated with minor changes only.

³ Caritas handed one constructed PHCC over to Merlin. See comment 7.

⁴ 1 PHCC is still under construction during the health extension (Phase II).

⁵ Target was reduced to 6 PHCUs in agreement with BSF secretariat.

⁶ 1 of the previously 5 PHCU managed by GOAL (target 4) was handed over to World Vision in April 2009, in agreement with State Ministry of Health and BSF secretariat.

⁷ Caritas transferred the, under BSF funding, constructed PHCC to Merlin, as agreed with the BSF secretariat. The PHCC construction of Merlin was therefore reduced to 1. One PHCC of Merlin is still under construction and currently functions as PHCU (⁸).

⁸ See comment 7

* Target is calculated based on the in the BPHS mentioned catchment population of 15,000 beneficiaries per PHCU and 50,000 per PHCC. Actual is based on the county population figures. The total number of consultations in Phase 1 is the sum of the number of first consultations (in and out patients) during every quarter.

Annex 11 Phase 1 Summary Tables Targets and Achievements – Water and Sanitation

Drinking Water

	Lead Agency	Planned borehole with hand pump	Actual borehole with hand pump	Planned gravity scheme	Actual gravity scheme	Target users	Actual users
Round 1							
1.1	AMREF	30	28	0	0	13,500	19,420
1.2	CARITAS	20	18	1	1	15,500	16,196
1.4	MEDAIR	15	15	0	0	7,050	13,350
1.5	OXFAM GB	100	97 ¹	0	0	47,500	95,378
1.6	SC-US	20 ²	4	0	0	27,000	1,450
Round 2							
2.2	HASS	0	4	0	0	0	1220
2.3	IRC	44	44	0	0	22,000	23,324
2.4	MERLIN	10	10	0	0	5,000	6,156
	Total	239	220	1	1	137,550	176,494

¹ 24 out of the 97 boreholes were of inadequate quality. OXFAM-GB rectified this problem and supplied an alternative water scheme to the affected communities.

² SC-US had no capacity to drill 20 boreholes, their budget was therefore reduced and the available money has been reallocated.

Sanitation

	Lead Agency	Latrines		Users	
		Target	Actual	Target	Actual
1.1	AMREF	514 ¹	16	5,140	160
1.2	CARITAS	82	78	820	780
1.4	MEDAIR	100 ²	1,032	1,000	10,320
1.5	OXFAM GB	37	37	370	370
1.6	SC-US	50	40	300	400
	Total	783	1,203	7,630	12,030

¹ Latrine slabs (“sanplats”) were made and are available, but have not been used by the community; reportedly due to lack of cultural acceptance and awareness.

² The awareness raising campaign was so successful that the decision was made, in consultation with the management consultant, to provide more slabs.

Annex 12 Phase 1 Summary Tables Targets and Achievements – Training

	Target	Total	Participants	Training days [(participants * days of training)]	
			Female	Total	Female
Primary Education					
PTA	222	215	39	1,052	184
Community leaders	180	180	42	2,160	504
Head teachers	80	74	2	692	36
Teachers	852	1,095	170	25,699	4,771
State Gov Civil Servants	173	173	24	689	101
NGO Staff	15	15	0	30	0
Primary Health					
Clinical Officers	241	237	83	719	237
Lab technicians	108	107	54	646	331
Midwives/ TBA	494	491	472	3,172	3,098
Nurses	95	95	40	420	169
Nutrition Assistants/ extension workers	147	147	118	3,331	1,919
Community health workers	460	459	241	3,002	1,602
Pharmacy technicians	60	60	20	400	118
PHC staff	65	65	19	309	55
Promoters/ Community mobilisers	521	517	131	2,069	552
Village health committees	202	202	45	938	232
EPI teams	90	91	18	882	171
HIV/ AIDS	62	62	25	102	33
Community mobilization	1,368	1,368	745	2,077	1,017
Hygiene and sanitation	573	573	372	2,055	1,309
Prevention Malaria	56	56	26	81	26
State Gov Civil Servants	389	79	27	665	147

	Target	Total	Participants	Training days [(participants * days of training)]	
			Female	Total	Female
NGO Staff	213	213	56	2,920	1,022
Leaders Awareness Training	40	40	14	211	45
Drinking Water					
Community leaders	355	355	63	1,177	226
Hygiene and sanitation	44	44	8	110	19
Water committee members	769	769	384	3,164	1,672
Public Basic Hygiene and Sanitation	353	353	230	1,155	802
Pump mechanics	162	161	49	1,655	509
School Hygiene and Sanitation Clubs	554	554	254	3,658	1,576
Village Health Motivators	310	310	217	1,385	962
Water Quality	87	87	29	208	58
State Gov Civil Servants	64	64	6	128	12
NGO Staff	110	110	21	260	68

Annex 13 Phase 2 Summary Tables Targets and Achievements – Primary Education

ID	Lead agency	School - construction and services				School – services ¹		Beneficiaries				
		Target Schools	Progress Classrooms	Completed [%]	Completed	Target	Actual	Target	Enrolment Total Girls		Attendance Total Girls	
Round 3a												
3a.01	AMA	3	24	70	2	-	-	1,200	726	52	726	52
3a.02	AVSI	-	-	-	-	9	9	3,600	333	104	1,263	427
3a.03	CMS Ireland	2	16	25	0	-	-	800	1,244	430	0	0
3a.05	DIOCESE OF RUMBEK	1	8	100	1 ²	1	1	800	1,188	456	0	0
3a.07	IRD	3 ³	12 ⁴	25	0	23		9,800	0	0	0	0
3a.09	OXFAM NOVIB	6	48	80	1	20		10,400	2,294	1,022	685	301
3a.11	WORLD RELIEF	3	12 ⁵	55	0	-	-	600	0	0	0	0
Round 3b												
3b.01	HARD	3	18	85	0	-	-	900	0	0	0	0
3b.04	UMCOR	1	3	50	0	-	-	15,150 ⁶	0	0	0	0
3b.05	WORLD VISION UK	1	8	15	0	10		4,400	253	91	225	75
Total		23	149		4	63	10	47,650	6,038	2,155	2,899	855

Assumption 1: all schools 8 classrooms and office (according to GoSS standards)

Assumption 2: 50 beneficiaries per classroom

Assumption 3: 8*50 beneficiaries per school that receives services

¹ Kind of services to be provided differ and can range from delivery of school books, new furniture to school management and training of teachers

² The Diocese of Rumbek constructed first a multipurpose hall that could serve as two classrooms, according to them. However, this is not an acceptable alternative so in consultation with the BSF secretariat, the Diocese of Rumbek is in contact with BSF regarding this issue and will ensure implementation according to plan (contract).

³ Target adjusted to 3 instead of 5. Three is according to the original submitted proposal.

⁴ Adding three classrooms and an office to 3 schools.

⁵ Adding 4 classrooms to 3 schools.

⁶ Adding 3 classrooms to 1 school and providing scholastic materials and comfort kits to 15,000 pupils

Annex 14 Phase 2 Summary Tables Targets and Achievements – Primary Health

ID	Lead agency	PHCC - construction and services			PHCC - services		PHCU - construction and services			PHCU - services		Beneficiaries			
		Target	Progress [%]	Completed	Target	Actual	Target	Progress [%]	Completed	Target	Actual	Population Target	Population Actual	Population Total Q2	Consultations Total Σ
1.1	AMREF	1	35	0	1	1	-	-	-	8	9	133,000	140,396	6,013	12,013
1.3	CCM	1	85	0	1	1	-	-	-	7	7	310,000	367,936	49,766	74,299
1.6	SC-US	-	-	-	1	1	-	-	-	9	9	220,000	187,866	10,296	18,722
2.1	GOAL	-	-	-	2	2	-	-	-	4	4	160,000	133,054	9,608	18,766
2.4	MERLIN	1	15	0	1	1	-	-	-	2	2	95,000	205,901	6,013	13,388
2.5	OVC	-	-	-	4	4	-	-	-	-	-	200,000	372,413	25,747	51,499
2.7a	TEARFUND	-	-	-	3	3	-	-	-	9	9	250,000	201,011	23,399	46,799
2.7b	MEDAIR	-	-	-	1	1	-	-	-	5	5	125,000	49,242	9,849	19,622
3a.02	AVSI	-	-	-	1	1	-	-	-	5	4	125,000	84,649	6,649	13,111
3a.03	CMS Ireland	1	85	0	-	-	2	100	2	-	-	68,000	394,361	3,090	5,666
3a.04	CONCERN worldwide	-	-	-	1	1	2	68	0	5	5	166,299	295,344	12,622	22,622
3a.07	IRD	-	-	-	1	1	4	14	0	-	-	95,000	65,588	0	0
3a.10	SWISS RED CROSS	1	0	0	-	-	1	0	0	-	-	65,000	53,783	0	0
3b.02	IMC UK	-	-	-	2	1	-	-	-	11	3	69,316	136,210	5,061	7,333
3b.03	MEDAIR	-	-	-	2	2	2	15	0	-	-	130,000	38,010	18	18
3b.05	WORLD VISION UK	-	-	-	-	-	2	0	0	10	0	180,000	136,226	0	0
Grand Total		5	44.4	0	21	20	13	39.4	2	75	57	2,391,615	2,861,990	168,131	303,844

Annex 15 Phase 2 Summary Tables Targets and Achievements – Water and Sanitation

Lead agency	BH with hand-pump		Rehabilitated BH with hand-pump		Gravity scheme/ other water source		Beneficiaries	
	Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual ¹
3a.01 AMA	48	17	-	-	-	-	24,000	8,500
3a.02 AVSI	-	-	-	8	5	0	2,500	4,000
3a.03 CMS Ireland	9	3	-	-	-	-	4,500	1,500
3a.06 INTERMON OXFAM	15	0	30	8	1	0	23,000	4,000
3a.07 IRD	-	-	15	0	-	-	7,500	0
3a.08 OXFAM GB	35	15	20	6	4	0	29,500	10,500
3a.10 SWISS RED CROSS	19	3	-	-	-	-	9,500	1,500
3b.01 HARD	3	0	-	-	-	-	1,500	0
3b.02 IMC	-	-	20	0	-	-	16,000	0
3b.03 MEDAIR	5	0	15	0	5	0	12,500	0
3b.04 UMCOR	4	0	-	-	-	-	2000	0
3b.05 WORLD VISION	5	0	15	0	-	-	10,000	0
TOTAL	143	40	115	22	15	0	142,500	30,000

	Lead agency	Pit latrines		Beneficiaries	
		Planned	Actual	Planned	Actual
3a.01	AMA	24	0	120	0
3a.02	AVSI	506	?	2,530	0
3a.03	CMS Ireland	10	0	50	0
3a.06	INTERMON OXFAM	360	2	1,800	200
3a.07	IRD	80	0	400	0
3a.08	OXFAM GB	40	44	200	220
3a.09	OXFAM NOVIB	24	0	120	0
3a.10	SWISS RED CROSS	189	0	945	0
3a.11	WORLD RELIEF	12	0	60	0
3b.02	IMC	60	0	300	0
3b.04	UMCOR	150	0	750	0
3b.05	WORLD VISION UK	12	0	60	0
	Total	1,467	46	7,335	420

Annex 16 Phase 2 Summary Tables Targets and Achievements – Training

ID	Lead Agency	Target	Participants			Progress		Training days				Progress %	
			Total Q3	Female Q3	Total Σ	Female Σ	%	Target	Total Q3	Female Q3	Total Σ		Female Σ
1.1	AMREF							<i>No information received</i>					
1.3	CCM	180	20	0	104	1	58	900	140	0	602	7	6
1.6	SC-US	330	-	-	42	0	13	1,650	-	-	224	0	1
2.1	GOAL	500	145	57	181	155	36	2,500	477	355	812	519	3
2.4	MERLIN							<i>No information received</i>					
2.5	OVC	1100	113	78	394	316	36	5,500	665	462	2129	1576	3
2.7a	TEARFUND	1750	91	20	691	316	39	8,750	718	559	4204	2189	4
2.7b	MEDAIR	990	389	153	962	399	97	4,950	2062	1564	3835	1379	7
3a.01	AMA	829	30	12	359	91	43	5,500	120	48	1420	364	2
3a.02	AVSI	1435	290	134	812	399	57	8,114	290	134	1535	472	1
3a.03	CMS IRELAND	74	60	24	84	33	8,400	370	501	204	743	376	20
3a.04	CONCERN WORLDWIDE	295	61	7	184	68	62	735	285	35	855	338	11
3a.05	DIOCESE OF RUMBEK	37	184	180	420	416	1,135	158	1196	1192	2167	2163	1,37
3a.06	INTERMON OXFAM	3138	3	0	783	525	25	39,864	9	0	5439	2890	1
3a.07	IRD	152	0	0	92	9	61	1,806	0	0	1336	132	7
3a.08	OXFAM GB	91	233	112	8983	5444	9,871	6000	1211	618	12808	6601	21
3a.09	OXFAM NOVIB	203	133	51	177	69	87	8794	846	315	1066	405	1
3a.10	SWISS RED CROSS	1222	90	29	90	29	7	1,690	270	87	270	87	1
3b.01	HARD	29	0	0	0	0	0	135	0	0	0	0	
3b.02	IMC UK	127	0	0	131	64	103	820	0	0	133	59	1
3b.03	MEDAIR		32	29	257	92	#DIV/0!		192	174	550	344	#DIV/0!
3b.04	UMCOR	52	245	63	245	63	471	395	380	98	380	98	12
3b.05	WORLD VISION UK	580	40	15	40	15	7	290	400	150	400	150	19
	Grand Total	13114			15031	8504	179	98,921	12842	12752	40908	20149	2

Annex 17 Phase 1 Text Tables – Implementation Progress and Issues (excl Health Extensions)

	Lead Agency & Consortium	State & Sector	Status 31-09-09	Training
ROUND 1				
1.2	Caritas (AVSI, Diocese of Torit)	Eastern Equatoria Primary Education Primary Health Water & Sanitation	<ul style="list-style-type: none"> ▪ 4 primary schools constructed / furnished. ▪ One PHCC building (Kudo PHCC) constructed and handed over to Merlin for PHCC project implementation in September 2008, by agreement with MOH EES and Diocese of Torit. ▪ 6 PHCCs received regular supervision, drugs, materials etc. ▪ 18 boreholes completed (out of targeted 20). 	<ul style="list-style-type: none"> ▪ Community health promoters trained in community-based hygiene and sanitation. (PHAST/CHAST) ▪ School management committees and PTAs trained of 4 schools ▪ 114 teachers completed fast-track training ▪ Capacity building of two CBOs (SARRA and LOVADI) ▪ Institutional capacity support of MoEST-EES
1.4	MEDAIR	Northern BEG, Upper Nile and Jonglei Water & Sanitation	<ul style="list-style-type: none"> ▪ 15 targeted boreholes completed, but some have low yield and/or high salinity rates. ▪ 1032 household latrines built, supported with latrine slabs' construction, as against the target of 25. 	<ul style="list-style-type: none"> ▪ All 15 committees trained, including 20 women, for 5 days ▪ All 8 pump mechanics trained for 10 days ▪ All 38 hygiene-promoters trained in all 4 locations ▪ Hygiene supervisor trained ▪ 1 local coordinator trained
1.5	OXFAM GB – Phase I	Upper Nile and Unity Water & Sanitation	<ul style="list-style-type: none"> ▪ 97 of the targeted 100 boreholes completed ▪ 24 (against a target of 20) boreholes rehabilitated ▪ All targeted 37 latrines completed ▪ Out of the 97 drilled boreholes, 24 had problems with water quality. Actions taken and communities are now linked to alternative water supply scheme. As the test results did not pose health risks, the boreholes remained accessible for other purposes (brick making, etc). 	<ul style="list-style-type: none"> ▪ All targeted 100 sanitation motivators trained ▪ All targeted 100 management committees trained ▪ All 4 school hygiene and sanitation clubs started ▪ All targeted 70 pump mechanics trained

	Lead Agency & Consortium	State & Sector	Status 31-09-09	Training
ROUND 2				
2.2	HASS	Central Equatoria Primary Education	<ul style="list-style-type: none"> ▪ 7 Basic Schools; each consisting of 8 classrooms, school office block, 10 latrine stands (for girls, boys, teachers) constructed. ▪ Basic school furniture provided to 280 pupils per school, teachers/office furniture still to be provided. ▪ Boreholes (water supply) provided at 4 out of 7 schools. In two of these remaining school the water supply is a big constraint and needs a solution. 	<ul style="list-style-type: none"> ▪ Basic training of PTAs has been carried out in 4 out of 7 schools, but still needs to be carried out in 3 schools.
2.3	IRC (UGWA)	Northern Bahr el Ghazal Water & Sanitation	<ul style="list-style-type: none"> ▪ 44 targeted boreholes completed (target was 35) ▪ 19 boreholes rehabilitated 	<ul style="list-style-type: none"> ▪ Of the targeted 54 Water point committees, 5 received training. ▪ Of the targeted 54 pump mechanics, 5 received training.
2.6	SC-UK (SC-US, SC-Sweden)	Western Bahr el Ghazal, Jonglei and Western Equatoria. Primary Education	<ul style="list-style-type: none"> ▪ Construction of 1 school (Konybeck; Bor South) finally completed this period and handed over to MoEST. ▪ Primary schools in Paliu (90 %) and Akueideng (90%) in Bor south County both nearly complete. Expected to complete and handed over in Nov. 2009. 	<ul style="list-style-type: none"> ▪ 372 teachers trained ▪ 35 Head Teachers trained. ▪ 51 Arabic-pattern teachers trained in English Language. ▪ PTAs in 21 schools trained (against target of 43)

Annex 18 Phase 2 Text Tables – Implementation Progress and Issues (incl. Health Extensions)

	Lead Agency & Consortium	State & Sector	Status 30-09-09	Training
ROUND 1				
1.1	AMREF (AQUAFUND, ACCOMPLISH, COMPASS)	Central Equatoria Primary Health Water & Sanitation	<ul style="list-style-type: none"> ▪ Serious implementation problems with delayed achievement of targets and concern about clinical standards. The BSF secretariat closely follows this up with the Ministry of Health. ▪ Health services provided in 9 PHCUs and 1 PHCC in 2 out of 3 targeted Payam's, with basic salaries' payment, drugs' deliveries, PHC supervision. ▪ One of 2 targeted PHCCs is completed, the other one at stand still at windows' level (35 %). 6 existing PHCUs rehabilitated and 2 new built. No latrines at 2 PHCUs and no water at 1 PHCU. ▪ EPI delivery in two Payam's (by COMPASS). ▪ 18 boreholes (out of targeted 20) drilled / installed and 10 targeted boreholes rehabilitated, but with inadequate maintenance ▪ 16 out of 500 targeted, household latrines installed. 	<ul style="list-style-type: none"> ▪ 16 CHWs have been trained during 2008, but are not yet graduated / employed. ▪ Short (2-3 days) refresher courses of CHWs and of TBAs (about 3 times/year).
1.3	CCM	Warrap State Primary Health	<ul style="list-style-type: none"> ▪ 2 new PHCUs built as per target, based on design to upgrade to PHCC in future, and one extensive rehabilitation (Akop PHCC) completed. ▪ All 3 PHCCs and 6 PHCUs supported with intensive PHC supervision, basic drugs' delivery, salary payments, EPI-system management etc. ▪ The CCM team evacuated for 3 weeks in Sept. due 	<ul style="list-style-type: none"> ▪ All 19 CHWs, 15 TBAs etc. regularly trained through once-quarterly in-service courses. ▪ In-service training of laboratory assistant and other key PHCC staff.

Lead Agency & Consortium	State & Sector	Status 30-09-09	Training	
		<p>to tribal clashes. Ananatak and Rualbet PHCUs were looted. Services at Rualbet are now provided from a tukul.</p> <ul style="list-style-type: none"> Ananatak PHCU is occupied by army since Sept; BSF secretariat follows this up with the MoH. 		
1.6	SC-US (NIP, MRDO) Upper Nile Primary Health, Water & Sanitation	<ul style="list-style-type: none"> One of the 2 targeted PHCC completed, one under construction, and now functioning as PHCU. 5 PHCUs constructed, with support to health services in 8 (target 6), through 2 local NGOs. 4 out 20 boreholes completed; funds for remaining subtracted from SC-US's BSF Grant in 2008. Project closed by end of June, with a handing over process to County Health Departments going on. 	<ul style="list-style-type: none"> All 24 targeted health trainers have received on-the-job training All 22 CHD staff trained (10 on supervision) 24 primary health staff trained in preventive health practice. NIP & MRDO staff trained in admin./finance. 	
ROUND 2				
2.1	GOAL (SAFORD, SDA) Upper Nile Primary Health	<ul style="list-style-type: none"> The construction and rehabilitation of 2 targeted PHCCs (Baliet and Ulang) and 4 PHCUs completed with comprehensive delivery to intervention zones in 2 Counties. All health staff integrated in MoH payroll in 2009. Top up incentives of MoH salaries to staff, drugs and material supplies etc. Temporary evacuation in Sept. (tribal conflicts) 	<ul style="list-style-type: none"> 25 CHWs did 9 month training course at Baliet CHW training centre in 2008, new course with 16 CHWS in 2009. All SMOH staff seconded to GOAL supported facilities received refresher training courses. 6 facility management Committees, as per target, established and trained. 	
2.4	MERLIN (AVSI) Eastern Equatoria Primary Health	<ul style="list-style-type: none"> As per target 2 PHCUs constructed and functional. 1 PHCC (Lafon) under construction (stand still at foundation level); now operating as a PHCU. 1 PHCC (Kudo) taken on in Sept. 2008 for clinical support, made operational in July 2009. Drugs' supply, EPI service delivery support etc. 	<p>Trained as per target;</p> <ul style="list-style-type: none"> 3 Health Committees, 2 Clinical Officers, nurses, 2 midwives, 24 MCHWs, 4 CHWs with in-service training (short courses). 2 CHWs in training. 	
2.5	OVCI (Catholic Diocese of Juba)	Central Equatoria	<ul style="list-style-type: none"> As per target, 3 PHCCs build and operational, with an additional 1 PHCC rehabilitated, located in high-density suburbs of Juba. 	<ul style="list-style-type: none"> Midwives and nurses trained (of several Juba facilities) 4 Clinical officers on ultrasound diagnostics

Lead Agency & Consortium		State & Sector	Status 30-09-09	Training
		Primary Health	<ul style="list-style-type: none"> 3 of the 4 PHCC's handed over and directly managed by the State Ministry of Health. Support with integrated PHC supervision, drugs' and materials, supplementing MoH support. 	<ul style="list-style-type: none"> Nutritionists and EPI vaccinators trained Ongoing mentoring of PHCC managers
2.7a	TEARFUND	Upper Nile	<ul style="list-style-type: none"> 3 PHCCs and 6 PHCUs build and rehabilitation of 3 other PHCUs (with community participation). Full package of PHC delivery in 3 PHCCs and 9 PHCUs, according to BPHS service elements. VCT and PMTCT service at Kodok, with integrated HIV/AIDS awareness program. 	<ul style="list-style-type: none"> Carry out training of 9 <u>female</u> CHWs in 2009 (of which 1 dropped out due to pregnancy). Mentoring of CMoH of Kodok County and various capacity support. Ingoing training of 9 Boma Health Committees
2.7b	MEDAIR	Upper Nile	<ul style="list-style-type: none"> 1 PHCC and 6 PHCUs build and operational, providing all main BPHS service elements. Integrated facility-based nutrition rehabilitation. Integrated TB-control program, based at Melut PHCC with outreach programme. Integrated HIV/AIDS control program with VCT. 	<ul style="list-style-type: none"> Ongoing training (3 years) of 2 Clinical Officers and 1 Laboratory Technician. Training of 7 Boma Health Committees. Capacity building programme of Melut County Health Team.
ROUND 3a				
3a.01	AMA	Warrap Primary Education Water & Sanitation	<ul style="list-style-type: none"> 2 out of 3 targeted schools are completed. Handing over has been scheduled in November, delayed due to insecurity. 1 school under construction (15%) 17 out of the targeted 48 boreholes drilled. Second drill will be used in order to meet target in time. 	<ul style="list-style-type: none"> 4 out of 7 targeted pump mechanics are in training (4 weeks training). HIV/AIDS workshop conducted 2 PTAs trained and established 12 WUA formed and trained.
3a.02	AVSI (Diocese of Torit)	Eastern Equatoria P. Health, P. Education Watsan	<ul style="list-style-type: none"> 5 PHCU (target 4) and PHCC services are ongoing. Services provided to all health units (EPI, in-service training, drugs, payment of salary/ incentives) Sensitization for latrine construction ongoing. 8 boreholes rehabilitated 	<ul style="list-style-type: none"> On the job training of health staff (63 health workers/ PHC staff) 706 people reached in 18 hygiene and sanitation awareness activities. 43 teachers trained on subject workshop
3a.03	CMS Ireland (ECS)	Central Equatoria	<ul style="list-style-type: none"> Construction of PHCC at Lainya in progress (85 %). (BSF is part-funding). Health services with a mobile clinic in 5 rural villages 	<ul style="list-style-type: none"> 10 (out of 12) targeted students receiving health assistant training (9 months) in Kampala to graduate in Nov. 09).

Lead Agency & Consortium		State & Sector	Status 30-09-09	Training
		Primary Education Primary Health Water & Sanitation	<p>has been started from the 5th of October.</p> <ul style="list-style-type: none"> Mobile outreach to Lainya IDP camps with motorbikes is ongoing. 4 out of the 9 targeted boreholes drilled. Construction of the 2 targeted schools started and is respectively on 5 and 50%. A third school is planned to be build (above target). 	<ul style="list-style-type: none"> 2 (out of 2 targeted) trainee teachers are in full-time course at Yei Teachers training college (18 months pre-service training,). 40 teachers received 40 days of teacher training, as per target. Community training on Water and Sanitation completed.
3a.04	CONCERN Worldwide	Northern Bahr el Ghazal Primary Health	<ul style="list-style-type: none"> 1 (as per target) PHCC in service. All targeted PHCUs in service 1 out of the 2 targeted PHCUs to be constructed is completed and handed over the CHD. The other PHCU is at 85%, but providing services using a semi-temporarily structure (incentive of 57 MoH staff, salaries, drug supply, etc). 1 PHCU planned to be rehabilitated in 2010 Integrated facility-based nutritional services for adults and children EPI services and ANC provided at 6 facilities. 	<ul style="list-style-type: none"> 56 health & extension workers received refresher trainings 68 TBAs received refresher course 27 teachers trained on health education methodology 22 community leaders trained on community conversations 2 health workers completed 18 months midwifery training 1 health worker on lab technician course (18 months)
3a.05	DIOCESE OF RUMBEK	Northern Bahr el Ghazal, Warrap, Lakes Primary Education	<ul style="list-style-type: none"> Reconstruction of 7 out of the 16 classrooms and 2 offices at Rumbek Comboni school completed. Supplementary school feeding programme ongoing. At Marial Baai, Comboni school, a multi-purpose hall was built, instead of a 2 classroom block. BSF secretariat is in contact with DoR, to ensure delivery of standard classrooms as per target. Girls' counselling and -mentoring ongoing for on average 70 girls. 102 adults enrolled in ALP. 12 ALP teachers paid. 	<ul style="list-style-type: none"> 10 PTA members trained (out of target of 30). More training planned.
3a.06	INTERMON OXFAM	Western Bahr el Ghazal	<ul style="list-style-type: none"> Target of 15 new boreholes: Activity to quarter 4 Geo Physics survey is scheduled to start in November and drilling shortly thereafter. 	<ul style="list-style-type: none"> VTP training 8 week (3 hours per week) ongoing in villages. 258 (out of the targeted 800) recruited trainees so far of which 133

Lead Agency & Consortium		State & Sector	Status 30-09-09	Training
		Water & Sanitation	<p>8 boreholes (out of 30 targeted) have been rehabilitated.</p> <ul style="list-style-type: none"> ▪ 2 latrines' units at Raga Hospital completed. 16 blocks (of each 4 stances) are under construction. ▪ Water Quality testing ongoing in all locations at household level as well as at water points. ▪ 1,483 of the planned 3,500 NFIs distributed. ▪ Clean up campaigns in 10 villages conducted. 	<p>graduated,</p> <ul style="list-style-type: none"> ▪ 80 women trained and women groups formed. ▪ 12 teachers trained in school hygiene promotion. ▪ 16 (out of targeted 18) pump mechanics trained. ▪ 9 (out of the 15 targeted) WASH committees trained. Another 3 established.
3a.07	IRD (JDSF, UNYMPDA, UNWWA)	Jonglei Primary Education Primary Health Water & Sanitation	<ul style="list-style-type: none"> ▪ 1 of 3 targeted schools is under construction (80%). 2 other schools planned to start in November (delayed due to insecurity and transport problems) ▪ 1 out of 4 targeted PHCUs under construction (80%) ▪ Demonstration gardens established at 8 schools and 3 PHCUs. ▪ EPI outreach through the Lost Boys clinic ongoing. ▪ Boreholes for rehabilitation identified. ▪ Latrines built at 2 schools. ▪ Team evacuate two weeks in Sept. due to conflicts. 	<ul style="list-style-type: none"> ▪ 40 teachers trained with one month training. ▪ 28 CHWs trained (4 days). ▪ HIV/AIDS program manager enrolled in VCT training. ▪ 16 ALP teachers trained, 8 centres opened, 552 adults enrolled
3a.08	OXFAM GB – Phase II	Upper Nile Water & Sanitation	<ul style="list-style-type: none"> ▪ 15 out of 35 boreholes drilled and installed; 1 unsuccessful borehole. Activity delayed by weather. ▪ 6 out of the 20 boreholes rehabilitated ▪ 1 of the 4 alternative water sources near completion. ▪ 1 out of the 10 school latrines constructed. ▪ Extensive water quality testing at borehole and household (350 samples this quarter). ▪ 2 Payam-based hygiene structures established, carrying out village level sanitation action. ▪ 327 household latrines built 	<ul style="list-style-type: none"> ▪ 45 Water Point Management Committee members and 20 pump mechanics trained ▪ 3 school health clubs formed and trained; 16 boys and 20 girls. ▪ 10 community members identified for on-job training as RWD are not in place.
3a.09	OXFAM NOVIB (MRDA, NSWV)	Western Equatoria Primary	<ul style="list-style-type: none"> ▪ All 6 targeted schools are under construction. All schools are near completion (85 to 99%). ▪ 316 girls received comfort kits 	<ul style="list-style-type: none"> ▪ 7 out of the 6 targeted PTA's trained. ▪ 24 trainers were trained on hygiene awareness and HIV/ AIDS

Lead Agency & Consortium		State & Sector	Status 30-09-09	Training
		Education Water & Sanitation	<ul style="list-style-type: none"> 1 school received furniture; other furniture is still being made. 	<ul style="list-style-type: none"> 17 (target 14) ALS teachers trained. 18 CED supervisors trained. 218 adults (majority women) enrolled at 2 Adult Education Centres.
3a.10	SWISS RED CROSS (SRCS)	Unity Primary Health Water & Sanitation	<ul style="list-style-type: none"> 4 out of 19 boreholes drilled. Others planned next dry season. Pilot construction pit latrines not successful and therefore start with new pilot designs. SRC will engage a technical supervisor for the construction of the two BSF health facilities. 	<ul style="list-style-type: none"> 90 water committee members trained.
3a.11	WORLD RELIEF (ECS) – Phase II	7 states Primary Education	<ul style="list-style-type: none"> Construction at 3 out of the 3 schools started and is at currently at 70, 50 and 15%. Insecurity has been limiting access to both Yirol and Ezo sites. 5 community mobilisation campaigns on HIV/AIDS. 	<ul style="list-style-type: none"> 430 school teachers received training (fast track in-service course). 62 teachers trained at subject workshops 78 head teachers and 37 CED staff received management training. 200 teachers on average visited the resource centre in Juba per quarter. 6 REACH clubs formed and ongoing HIV/AIDS integrated in teacher training.
ROUND 3b				
3b.1	HARD	Western BEG P. Education Watsan	<ul style="list-style-type: none"> Construction of 3 Primary schools in progress, two in finishing stages (90%), one at roof level (50 %). Contracts prepared to drill 3 boreholes at schools. 	<ul style="list-style-type: none"> Training PTAs of 3 supported schools. Training of 12 education officers in school monitoring (inspection)
3b.2	WORLD VISION (Diocese of Tambura and Ezo)	Western Equatoria Health Education Watsan	<ul style="list-style-type: none"> Start of integrated service delivery to 10 PHCUs per 30-6-2009, 3 in Tambura, 7 in Ezo; Ezo has access problems due to insecurity. Building of Yangiri school (foundation completed). Assessments of borehole drilling / rehabilitation. 	<ul style="list-style-type: none"> Training of health committee members in facility management.

	Lead Agency & Consortium	State & Sector	Status 30-09-09	Training
3b.3	IMC Worldwide (NHDF and PRDA)	Jonglei Health Watsan	<ul style="list-style-type: none"> ▪ Integrated service delivery to 10 PHCUs in Akobo and Walgak areas (Akobo County) ▪ Support Walgak PHCC. ▪ Preparations of water source protection (maintenance of boreholes) and household latrine constructions. 	<ul style="list-style-type: none"> ▪ Training of water users' committees. ▪ Training of health facility staff in treatment protocols of main diseases.
3b.4	MEDAIR (Malaria Consortium and Fashoda Youth Forum)	Upper Nile Health	<ul style="list-style-type: none"> ▪ Rehabilitation of 2 PHCCs (Wadekona, Kaka) in progress. ▪ 2 PHCUs under construction (80 % and 30 %) ▪ Comprehensive service delivery to 2 PHCCs and 2 PHCUs since 1 May 2009. ▪ Capacity building programme (particularly in HMIS) of Upper Nile SMOH started by Malaria Consortium. 	<ul style="list-style-type: none"> ▪ Training of hygiene promoters in Wadekona from County (by Fashoda Youth Forum). ▪ Capacity building programme with mentoring etc. and short courses of Manyo CHD.
3b.5	UMCOR	Northern Bahr el Ghazal Education	<ul style="list-style-type: none"> ▪ Building of 1 Primary school extension. ▪ Deliver educational materials to 15,000 pupils (Aweil South County wide) ▪ Girls' education programme (10 schools) through counseling, comfort kits etc. 	<ul style="list-style-type: none"> ▪ Training of PTA (12 members). ▪ Training of 12 hygiene promoters