

Policy Paper

South Sudan Common Humanitarian Fund

2012 Second standard allocation

28 August 2012

1. This paper outlines the allocation strategy and guidance for the allocation of a funding envelope of USD 30 million for the second standard allocation of the 2012 Common Humanitarian Fund for South Sudan.
2. The paper includes a synopsis of the prevailing humanitarian situation in South Sudan and an analysis of the status of the funding of the humanitarian response against the 2012 CAP Mid Year Review, including the role played by pooled funding mechanisms, including the Common Humanitarian Fund (CHF) and the Central Emergency Response Fund (CERF) in sustaining the humanitarian response.

Humanitarian priorities and the allocation strategy

3. As articulated in the 2012 CAP, the humanitarian response in South Sudan is organized around the five following over-arching strategic objectives:
 - Responding to emergencies as quickly as possible by conducting multi-agency needs assessments, pre-positioning pipelines, securing alternative supply routes, upgrading access routes, mapping at-risk populations and response capacity, mobilizing emergency logistics support, and synchronizing the delivery of core pipelines and monitoring for quality service delivery.
 - Reducing food insecurity by significantly improving the use of innovative delivery modalities (safety nets).
 - Maintaining front-line services such as health, nutrition, WASH, food security and emergency education in hotspot areas until other delivery, regulatory and funding mechanisms are in place.
 - Ramping up support for returnees by providing timely transport and life-saving, cost-effective services during transit by a commitment to coordinate and advocate with the Government and partners to develop a clear strategy to activate reintegration plans.
 - Strengthening protection for at-risk populations by helping to address grave human rights violations, reunify children separated from their families, release children from association with armed groups and reduce and respond to gender-based violence.
4. A funding envelope of USD 30 million is available for the second round CHF allocation. Given the limited resources available it is recommended that life-saving humanitarian activities be prioritized so as to maximize the impact of the funds.
5. The following criteria are proposed to support the prioritization of the CHF second round allocation:
 - I. Target the most vulnerable northern border states of **Unity, Upper Nile, Northern Bahr el Ghazal and Western Bahr el Ghazal as well as Jonglei, Warrap and Lakes**;
 - II. Only high priority projects (as defined at the MYR) of the 2012 South Sudan CAP in the above mentioned states are eligible for the 2012 CHF second standard allocation¹;
 - III. Projects with a significant chance of success as a result of funding already available, established capacity on the ground, and likely continued access should be prioritized,

¹ A table on the status of funding of high priority projects across clusters in the selected vulnerable states is annexed to this policy paper to provide information to clusters on their respective funding level.

- IV. Exceptions to criteria II and III will be considered by the Advisory Board at the time of the cluster defense only if underpinned by solid needs based analysis and justification;
 - V. WFP emergency food assistance will not be eligible for the allocation given the magnitude of WFP's requirements and the limited impact that CHF funds can have on food aid activities;
 - VI. Refugee programs will not be eligible for the allocation having benefitted from a total amount of USD 30 million from the combined CERF rapid response grant (USD 20 million) and CHF reserve (USD 10 million) in July 2012, unless decided otherwise by the CHF Advisory Board on the day of the cluster defence.
 - VII. Prepositioning of core pipelines and essential common services and logistics support must be prioritized by the clusters through the second standard CHF round to maintain the minimum needed for the humanitarian operation;
 - VIII. The needs of Abyei returnees in relation to life-saving humanitarian activities² will be catered through the core pipelines.
 - IX. The allocation will prioritize interventions aimed at reducing the vulnerability of communities for which funding must be secured in the coming months for immediate implementation at the start of the dry season.
6. In line with the above criteria and with the two categories used in the first round of the South Sudan CHF, the CHF Advisory Board has agreed that the second round CHF allocation will focus on:

CATEGORY A (first priority): Replenishing core pipelines and ensuring adequate logistics support. This will support the most time sensitive and underfunded emergency life saving operations, health, nutrition, water and sanitation, non food items and emergency shelter, seeds and tools and emergency education (excluding food aid) and will ensure that essential common services and logistics support are in place in priority states. The pipeline should cater for the needs of Abyei returnees.

CATEGORY B: Supporting front line service providers in vulnerable states as specified in paragraph 5 (I) above with large numbers of vulnerable groups, particularly IDPs, returnees, and high level of malnutrition. Within these areas projects from the following sectors will be considered: food security and livelihoods, health, nutrition, NFIs/ES, protection, emergency education and water and sanitation.

Cluster Prioritization

7. In accordance with the South Sudan CHF allocation guidelines, cluster portfolios will be prepared through internal cluster reviews. This process will involve:
 - Cluster coordinators and co-coordinators who will be asked to convene cluster consultations meetings to refine and adopt cluster specific project priorities which will have to be promptly communicated to partners to allow enough time for the drafting of the proposals. Due to the limited envelope available, clusters have the freedom to and are indeed encouraged to further redefine their cluster priorities within the parameters set out in this Policy Paper, so as to ensure that an evidence based prioritization exercise is realized. The parameters expressed in this policy paper represent the maximum scope available within which the clusters can work,
 - CAP partners who will then be asked to submit proposals based on priorities endorsed within their clusters,
 - Cluster coordinators and co-coordinators will engage with their respective cluster Peer Review Teams (PRT) to review the proposals submitted against their respective cluster specific criteria in line with priorities stipulated in the policy paper.

For Category A projects, Cluster Coordinators and Co-coordinators will be asked to consider the following criteria:

- Amount of funding already committed to these activities compared to outstanding needs;
- Ability to disburse funds allocated through previous CHF and CERF allocations.

For Category B projects, Cluster Coordinators and Co-coordinators will be asked to weigh favourably projects that:

² The CERF guidance on life saving activities is annexed to this policy paper to be used as a reference to define relevant activities.

- Are already on-going and are meeting needs.
- Target hot spot areas (Unity, Warrap, Upper Nile, Jonglei , Northern Bahr El Ghazal, Western Bahr El Ghazal, and Lakes states).
- Are in accordance with the strategic aims of the cluster.
- Are based on evidence of need as shown by assessment or proper situational analysis
- Demonstrate analysis of and response to the distinct needs and priorities of women, girls, boys and men, as appropriate.
- Demonstrate low indirect costs as a proportion of direct costs.
- Demonstrate the most 'value for money' (i.e. high utilization rates at a health clinic) relative to the project budget.
- Demonstrate they have been able to disburse the funds allocated to them by the CHF in previous allocations (to this end, the quarterly disbursement matrix maintained by UNDP for CHF allocation will be provided to clusters by the CHF Technical Secretariat prior to the PRT).

CHF Reserve

8. At its meeting on 14 August, the CHF Advisory Board recommended that a reserve of USD 4 million be maintained to enable the Humanitarian Coordinator to allocate funds in the event of unforeseen needs arising outside the CHF standard allocation (e.g. sudden onset natural disasters, disease outbreaks, conflict-induced displacement). Projects outside the South Sudan CAP 2012 will be eligible for allocation of funds from the reserve upon meeting the requirements set out in the CHF guidelines and subject to endorsement by the cluster coordinator and co-coordinator. Allocations from the CHF reserve will be approved by the Humanitarian Coordinator in consultation with the CHF Advisory Board. In reviewing applications for the CHF reserve, the Humanitarian Coordinator and the CHF Advisory Board will consider the appropriateness of proposed activities as well as the suitability of other funding mechanisms such as the CERF (Rapid Response and Under Funded Window) and the IOM Rapid response Fund available in country. This approach will help ensure a high degree of complementarity among pooled funds and support the identification of priorities for all funding streams.

Humanitarian context

9. **In the first half of 2012, the humanitarian situation in South Sudan deteriorated sharply as a result of the combination of political-economic shocks, increased conflict and displacement, and worsening food insecurity.** While some of the challenges facing South Sudan were anticipated in the most likely planning scenario developed by the humanitarian community for 2012, other challenges far exceeded expectations, to the extent that in several areas (namely increased food insecurity and rising refugee numbers) some of the worst case scenarios triggers had been reached half way through the year.
10. **Political tensions over unresolved Comprehensive Peace Agreement issues between South Sudan and Sudan continued.** The new state's first year of independence was characterized by continued lack of agreement on key issues such as border demarcation, oil transit fees, and the fate of the contested area of Abyei. Heightened political tension generated high influxes of returnees and refugees. While up to 250,000 South Sudanese may return from Sudan in the short term, conditions for the safe return of about 110,000 people displaced from Abyei remain uncertain. Austerity measures resulting from the oil shut down, and rising inflation (in May 2012, annual inflation reached nearly eighty per cent, the highest recorded since independence in July 2012) has further increased hardship and vulnerability³.
11. **Continued conflict and increased food insecurity in Sudan's Southern Kordofan and Blue Nile states have led to a larger than expected refugee influx adding a further strain on the humanitarian operation.** The number of

³ GoRSS 2012-2013 budget speech, MoF&EP, June 2012

refugees arriving in South Sudan has now doubled the planning figure anticipated for 2012. As of the end of July more than 165,000 refugees had arrived from Sudan with several thousands more reported to be on the move. Although partners have stepped up emergency response, the magnitude of needs continues to outstrip the capacity of humanitarian organisations.

12. **Poor harvests, soaring food and fuel prices, conflict and displacement led to rising food insecurity and malnutrition across the country.** More than half the population—4.7 million people—is at significant risk of food insecurity this year. The number of people requiring food assistance has consequently increased from 1.2 million to 2.4 million – a doubling of planning figures. About 12 per cent of the population is severely food insecure and 37 per cent are moderately food insecure. Malnutrition has increased in six of nine surveyed states since last year with the highest affected groups being infants aged 6-24 months and P&LW, and serious or emergency rates found in five states (Jonglei, Upper Nile States, Unity, Western Bahr El Ghazal, and Northern Bahr El Ghazal). With South Sudan heavily reliant on imported food, rising prices are hitting households hard. This is particularly the case in northern states where border closures have led to price increases of up to 300 per cent for basic commodities in some areas. The national grain deficit is estimated at 473,000 metric tons, a shortfall about 60 per cent higher than the deficit of the previous year.
13. **Inter-communal violence persisted in the first half of the year, spiking in Jonglei State, and affecting up to 170,000 people, equivalent to 13 % of the state population, with many of them being displaced and many more losing their lives or livelihoods.** By the end of May, humanitarian actors recorded 165 conflict incidents with humanitarian consequences and some 165,000 people were newly uprooted from their homes since the beginning of the year.
14. **Poor infrastructure and competition for logistics assets continues to negatively impact the humanitarian response and implementation of projects to reach target populations.** Annual rains between June and November affect the majority of South Sudan’s underdeveloped road network, isolating communities in need and rendering the provision of humanitarian assistance extremely difficult, particularly in the northern states that remain accessible only by air. Rising costs of fuel and commercial cargo shipping services as well as the low availability of critical shipping assets (barges) has further contributed to increased the cost and time of delivering relief items.

Analysis of the 2012 South Sudan CAP funding to date

15. **The dramatic increase of vulnerability of affected populations is evidenced by the growth of humanitarian requirements to meet the fast rising needs.** At the time of the Mid Year Review, the 2012 South Sudan presented increased requirements of \$1.55 billion (a 51% increase on the original CAP requirements of \$ 776 million). The clusters with greatest increase in requirements are: the Multi cluster (increased by 142%); the Food Security and Livelihood Cluster (increased by 109%) and the WASH cluster (increased by 30%), the Logistics cluster (increased by 25%) and the Nutrition cluster (increased by 20%).
16. **As of 23 August, the CAP is 50 % funded while significant funding disparities persist across the clusters (Table 1)**
 - **Three clusters are more than 60% funded, including the Food Security and Livelihoods (FSL) cluster that experienced the greatest increase of requirements at the MYR**
 - The NFI and emergency shelter cluster is 66% funded. The cluster’s requirements increased by 2% at the MYR.
 - The FSL cluster is 65% funded. While the food aid component is 73% funded, the livelihoods component is only 21% funded. The cluster’s requirements increased by 142 % at the MYR.
 - The Mine action cluster is 64 % funded. The cluster’s requirements increased by 4.3 % at the MYR.
 - **Two clusters have approximately 50% of their funding secured**

- The Nutrition and Logistic clusters are both 48% funded. The Nutrition and Logistic clusters’ requirements grew by 20 % at the MYR.
- **One cluster is less than 45% funded**
 - The Emergency Telecommunication cluster is 42% funded. The cluster’s requirements decreased by 17 % at the MYR.
- **Three clusters have approximately one third of their requirements secured**
 - The Health cluster is 33% funded. The cluster’s requirements increased by 8 % at MYR.
 - The Common services and coordination cluster is 30% funded with no significant change of requirements.
 - The Education cluster is 27% funded. The cluster’s requirements increased by 5 % at MYR.
- **Three clusters have one quarter or less of their requirements covered. Two of them, Wash & Multi Sector, are among those that registered the greatest increase of requirements at the MYR.**
 - The Wash cluster is 25% funded. The cluster’s requirements increased by 30% at the MYR.
 - The Protection cluster is 19% funded. The cluster’s requirements increased by 7 % at the MYR.
 - Multi sector is 14% funded. The cluster’s requirements increased by 142 % at the MYR.

17. Despite unevenness of funding across the clusters, donors have responded positively to the prioritization scheme of the CAP MYR. High priority projects are 46% funded versus 38% and 19% of medium and low priority projects respectively. While pooled funding contributed to at the most 25% of overall funding, bilateral funding contributed an average of 80% of overall funding (Table 2).

18. Pooled funding has played a vital role in supporting the seven core pipelines (Education, Food and Livelihoods, Health, NFI/ES, Nutrition, Reproductive Health, and WASH). As evidenced in Table 3 below, with the exception of the WFP food aid pipeline where the CHF has provided only 2% of overall requirements, pooled funding has provided financial support ranging for 48% to 100% of total resources available, often outweighing bilateral funding (Table 3).

Table 1: Funding of the CAP

| | Original requirements (US\$) | Revised requirements (US\$) | Total resources available (US\$) | Unmet requirements | % Covered |
|---|------------------------------|-----------------------------|----------------------------------|--------------------|------------|
| CLUSTER NOT YET SPECIFIED | 0 | 0 | 56,866,746 | -56,866,746 | 0% |
| COMMON HUMANITARIAN FUND (CHF) | 0 | 0 | 11,847,833 | -11,847,833 | 0% |
| COORDINATION AND COMMON SERVICES | 13,131,462 | 13,272,833 | 5,328,415 | 7,944,418 | 37% |
| EDUCATION | 37,781,378 | 39,815,960 | 10,597,295 | 29,218,665 | 27% |
| EMERGENCY TELECOMMUNICATIONS | 4,150,813 | 3,417,768 | 1,450,625 | 1,967,143 | 42% |
| FOOD SECURITY AND LIVELIHOODS | 193,824,974 | 405,050,403 | 264,466,212 | 140,584,191 | 65% |
| HEALTH | 101,899,772 | 109,999,619 | 36,163,369 | 73,836,250 | 33% |
| LOGISTICS | 52,764,584 | 66,037,538 | 32,134,978 | 33,902,560 | 49% |
| MINE ACTION | 49,553,108 | 51,728,217 | 33,000,569 | 18,727,648 | 64% |
| MULTI SECTOR (EMERGENCY RETURNS AND REFUGEES) | 81,061,496 | 195,892,940 | 27,499,717 | 168,393,223 | 14% |
| NFI AND EMERGENCY SHELTER | 18,759,521 | 19,130,516 | 12,566,054 | 6,564,462 | 66% |
| NUTRITION | 74,176,857 | 89,293,903 | 42,849,140 | 46,444,763 | 48% |
| PROTECTION | 62,990,940 | 67,346,979 | 12,679,090 | 54,667,889 | 19% |
| WATER, SANITATION AND HYGIENE | 73,097,600 | 95,144,139 | 27,414,284 | 67,729,855 | 29% |
| Grand Total: | 763,192,505 | 1,156,130,815 | 574,864,327 | 581,273,488 | 50% |

Table 2: Funding of the 2012 South Sudan CAP by priority level as of 23 August 2012

| Priority Level | CAP 2012 Requirements at MYR (US\$) | Secured funding (US\$) | Funding Level (%) | Pooled Funds allocated (US\$) | | Total Pooled Funds Allocated (US\$) | Bilateral Funding (US\$) | Pooled Funding as a % of overall secured funding | | Funding type as a % of overall secured funding | |
|-----------------------------|-------------------------------------|------------------------|-------------------|-------------------------------|-------------------|-------------------------------------|--------------------------|--|------------|--|------------|
| | | | | CERF | CHF (SA+Reserve) | | | CERF | CHF | Pooled | Bilateral |
| High | 940,360,697 | 440,978,403 | 47% | 38,748,388 | 41,542,210 | 80,290,598 | 360,687,805 | 9% | 9% | 18% | 82% |
| Medium | 117,110,734 | 45,413,925 | 39% | 1,067,774 | 9,745,840 | 10,813,614 | 34,600,311 | 2% | 21% | 24% | 76% |
| Low | 98,659,384 | 18,404,576 | 19% | 227,929 | 3,023,716 | 3,251,645 | 15,152,931 | 1% | 16% | 18% | 82% |
| Unspecified (UNICEF, UNHCR) | | 56,866,746 | | | | | 56,866,746 | 0% | 0% | 0% | 100% |
| Non-CAP CHF Reserve Alloc. | | | | | 4,192,024 | 4,192,024 | | | | | |
| Unallocated CHF& Fees | | 11,847,833 | | | | | | | | | |
| TOTAL | 1,156,130,815 | 573,511,483 | 50% | 40,044,091 | 58,503,790 | 98,547,881 | 474,963,602 | 7% | 10% | 17% | 83% |

Table 3: Funding of the core pipelines as of 23 August 2012

| Cluster | Agency | Project Title | Project Code | Original Requirements US\$ | Revised at MYR Requirements (US\$) | FTS Published Funding (US\$) | Funding Level (%) | Pooled funding (US\$) | Funding type as a % of overall secured funding | |
|--------------|--------|--|-------------------|----------------------------|------------------------------------|------------------------------|-------------------|-----------------------|--|------------|
| | | | | | | | | | Pooled | Bilateral |
| EDU | UNICEF | Providing coordinated and timely lifesaving education for emergency-affected girls and boys through an efficient emergency education core pipeline, establishing protective learning spaces and delivery of emergency life skills and psychosocial support | SSD-12/E/46093 | 16,258,064 | 18,874,800 | 6,226,921 | 33% | 3,406,307 | 55% | 45% |
| FSL | FAO | Enhancing food security of returnees, IDPs and vulnerable host communities through provision of production inputs, technologies and services | SSD-12/A/46142 | 15,542,000 | 10,000,000 | 5,503,544 | 55% | 5,003,544 | 91% | 9% |
| FSL | WFP | Food assistance to vulnerable populations affected by conflict and natural disasters | SSD-12/A/46147 | 114,596,068 | 313,260,995 | 244,918,465 | 78% | 4,397,966 | 2% | 98% |
| H | UNFPA | Implementing the Minimum Initial Service Package (MISP) for Reproductive Health in Emergencies | SSD-12/H/46211 | 1,010,000 | 1,010,000 | 678,029 | 67% | 678,029 | 100% | 0% |
| H | UNICEF | Vaccine Preventable Disease Control through Routine and Supplementary Immunization Interventions | SSD-12/H/46251 | 7,845,000 | 12,964,841 | 4,977,707 | 38% | 2,174,672 | 44% | 56% |
| H | WHO | Enhancing Surgical and Mass Casualty management Capacities of Hospitals in South Sudan. | SSD-12/H/46378 | 865,095 | 865,095 | 399,966 | 46% | 399,966 | 100% | 0% |
| NFI | IOM | Provision of Emergency NFIs and ES materials to IDPs, returnees, and Host community members | SSD-12/S-NF/46154 | 6,075,000 | 6,075,000 | 3,489,698 | 57% | 3,489,698 | 100% | 0% |
| NUT | UNICEF | Support to the Nutrition Pipeline for Emergency Therapeutic Responses in South Sudan | SSD-12/H/46186 | 8,882,000 | 17,090,040 | 7,552,212 | 44% | 4,667,080 | 62% | 38% |
| WASH | UNICEF | Emergency WASH Preparedness, Response and Coordination in South Sudan | SSD-12/WS/46469 | 9,989,100 | 21,929,200 | 8,578,329 | 39% | 4,816,615 | 56% | 44% |
| TOTAL | | | | 181,062,327 | 402,069,971 | 282,324,871 | 70% | 29,033,877 | 10% | 90% |

Role of Cluster Coordinators and Co-coordinators

- Cluster coordinators and co-coordinators (and PRT) will rate projects for technical merit and relevance in addressing the most urgent humanitarian needs in accordance with cluster priorities and previous performance of the implementing agency.
- An OCHA focal point will represent the CHF Technical Secretariat in the PRT meetings.
- Cluster coordinators and co-coordinators will prepare a presentation to defend the cluster's programmatic strategy and proposal portfolio in front of the CHF Advisory Board.
- During the defence, Cluster coordinators and co-coordinators will ensure that the portfolio is "blind," hiding the identity of the requesting organization. Cluster coordinators and co-coordinators are required to demonstrate that their programmatic strategy is evidence-based. They are also required to support their allocation proposals with clear and concise documentation on the ranking and decision making process to demonstrate that a transparent, inclusive and objective process was followed.
- If dissatisfied with a particular presentation, the HC or CHF Advisory Board may request the concerned Cluster coordinator /co-coordinator to make a second presentation.
- Based on the presentations and in line with the policy paper, the HC, in consultation with the CHF Advisory Board, will make recommendations for funding to each cluster.
- The HC will then debrief each Cluster coordinator and co-coordinator on the outcome of the defences informing how much is allocated to the cluster, and issues to address before project allocations are approved.

Advice to Clusters:

19. Only high priority projects (as of the MYR) 2012 CAP are eligible. If during the PRT a medium or low priority project is judged to have reached the criteria to be reclassified as high priority, specific mention should be made of this shift to the CHF Advisory Board during the cluster defence and clear justification should be provided to the CHF Advisory Board.
20. Clusters should agree on cluster specific timelines, prioritization criteria, and the criteria which will be used after the cluster envelope has been decided by Advisory Board. The Cluster will be asked to explain these criteria in their defence to the Advisory Board.
21. Clusters should seek to ensure that projects recommended for CHF support include an analysis of the specific needs and priorities of women, girls, boys and men and that all activities are informed by this analysis. This requirement does not apply to 'gender-neutral' projects such as logistics and emergency telecommunications projects. The GenCap Adviser at OCHA is available to support Clusters in this regard.
22. Clusters should seek to ensure that projects recommended for CHF support have sufficient funds (through CHF and other donors) to implement priority activities. Clusters should avoid allocating small amounts to many projects focusing instead on selected priority projects to ensure these are implemented.
23. Clusters should also consider:
 - The capacity of applicants to implement a particular project including past performance, the potential rate of implementation and the absorptive capacity at field level;
 - Current funding status of proposed projects to avoid allocating funds to already fully or well-funded projects or projects that have the potential to receive funding through other channels.
24. Clusters will need to consider the 'value for money' of a project in terms of low indirect costs as a proportion of direct relief costs. The CHF Technical Secretariat will provide the updated guidelines on the calculation of Direct and Indirect costs. To help the reviewers make a proper analysis of cost effectiveness, it will be important that:
 - The budget forms present a detailed budget breakdown including the total cost of the project and other contributions (including in kind contributions);

- Personnel costs indicate responsibility/title, duty station in south Sudan, unit cost, quantity, duration, and percentage dedicated to the specific project;
 - Transportation and operational costs directly charged to project area and to head office are clear;
 - (Potential) higher operational costs due to inaccessibility, and insecurity among others are taken into account.
25. The minimum allocation to a single project is recommended at USD 200,000 for UN agencies and INGOs, and at USD 50,000 for NNGOs. Under special circumstances smaller project allocations will be considered for critical activities if:
- The entire project budget is below USD 200,000;
 - The amount will fully cover a funding gap for the total project budget; or
 - The amount will fund vital life-saving activities that will cease in less than 30 days or is a gap-filler for three months of activities until another donor is identified.
26. Pass-through arrangements, where organizations pass on funding to their implementing partner organization without providing any meaningful guidance, coordination, technical advice, monitoring and evaluation capacities or any other function of additional value will not be accepted.
27. Submitted proposals should include at least three indicators from the Standard Project Output Indicators which will be provided by the CHF technical Secretariat and provide a quantitative target. (Form 3 of CHF Templates).
28. Implementation of a CHF recipient project shall not exceed twelve (12) months⁴ from the effective CHF allocation date or in case of pre-financed projects, from the date of the first invoice related to CHF activities after project allocation approval and before disbursement. The joint OCHA-UNDP Technical Secretariat (TS), in consultation with the HC, will announce the effective CHF allocation date after taking into consideration the period between HC's allocation approval letter and disbursement of the first instalment of allocated funds. Project pre-financing will be limited to only the costs incurred in the interim period between the HC's approval and the actual cash disbursement to the recipient project.
29. NGO partners who have not been allocated funds from the previous South Sudan CHF will need to be assessed by UNDP for their capacity before the contract is prepared. Capacity assessment requirements will be shared with concerned partners.
30. **NNGOs applying for funding through the second standard allocation will present their budgets in USD** and will receive the allocation in hard currency⁵ (exceptional measure for the second round allocation to be taken due to the current economic situation for direct CHF disbursements through UNDP).
31. The process will be supported by the joint OCHA and UNDP Technical Secretariat based in OCHA South Sudan. Technical Secretariat focal points: OCHA: Federica D'Andreagiovanni, dandreagiovannif@un.org, +211 922406061; Thomas Nyambane, nyambanet@un.org, +211 922406071; Meron Berhane, berhanem@un.org, +211 922 406080, Rashid Mogga, Rashid.Mogga@undp.org, +2110926743259.

Important deadlines

32. NGO Submission Deadline: NGOs awarded an allocation will have to submit signed Project Partnership Agreement (PPA) documents (project proposal, budget and banking details) within two weeks following the first contact from UNDP.

⁴ Although 2012 CAP projects are up to December 2012, CHF allocations can be provided for up to twelve months.

⁵ UNDP statement of intent and communication to OCHA (15/8/2012).

33. UN Acknowledgement Deadline: UN agencies awarded an allocation will have to submit a CHF acceptance letter within two weeks of receipt of the allocation letter.

Complaints Mechanism

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