

Allocation Details	
Allocation Title	<i>Life-saving assistance to ensure emergency services in Northwest Syria</i>
Allocation Type and Round	<i>SCHF second Standard Allocation</i>
Emergency Type	Conflict-related
Emergency Triggered Date (optional)	<i>Not Applicable</i>
Allocation launch Date	<i>16 December 2022 (09:00 Türkiye time)</i>
Proposal Submission Deadline	<i>31 December 2022 (23:59 Türkiye time)</i>
Section 1: Strategic Statement	
<p>Nearly 12 years of war and economic collapse have left over 15 million people in Syria in need of humanitarian aid. Some of the most critical needs are in the north-west of the country, where 4.5 million¹ people, mostly women and children, are trapped in a war zone along the border with Türkiye. The substantial increase of people in need of humanitarian assistance as a result of continued conflict, and deteriorating living conditions in northwest Syria remains a key consideration for mobilization of funds and provision of life-saving assistance for the Syria Cross-border Humanitarian Fund (SCHF).</p> <p>Building on previous allocations² and achievements the Fund, the SCHF second Standard Allocation for 2022 intends to release US\$25 million to address acute needs in underfunded and high-need sectors of northwest Syria. The vision of the Deputy Resident Humanitarian Coordinator a.i. for this allocation is to ensure access to equitable lifesaving and life-sustaining integrated services guided by existing ICCG-approved response plans for Northwest Syria (NWS). The underfunded response plans for Winterization, Widows' camps, and Cholera Response³ aim to provide lifesaving and life-sustaining humanitarian aid to the most vulnerable people and communities in NWS by improving access to basic services, through integrated single and multisectoral activities. The allocation will be focusing on the following envelopes:</p> <ul style="list-style-type: none"> • Envelope 1: Ensure access to equitable lifesaving and life-sustaining comprehensive services integrated with the existing and underfunded ICCG-approved response plans focusing on Winterization, Widows' camps, and Cholera Response (indicative amount US\$ 15,7 million) • Envelope 2: Provision of lifesaving humanitarian aid to the most vulnerable people and communities by improving access to basic services, through integrated single and multisectoral activities (indicative amount US\$9,3 million) <p>SCHF partners under this allocation will consider previous SCHF allocations coordinating with other humanitarian stakeholders seeking complementarity and synergies with other donors or other pool funding mechanisms. This allocation will aim to respond to short and medium-term needs strategically addressing anticipated needs during early response for 2023. The completion of the allocation process and programmatic implementation timeframe will depend to a UNSCR renewal. In all supported interventions SCHF partners will include interventions strategic cross-cutting elements including gender, protection, and accountability to ensure effective programming and response.</p>	
Section 2: Humanitarian Context	
<p>Syria remains a complex humanitarian and protection crisis compounded by over ten years of hostilities, protracted displacements, and prolonged consequences, including destruction of civilian infrastructure and violation of international humanitarian and human rights law. Humanitarian needs in NWS remain immense, with an estimated 4.1 million people (out of 4.5 million) in need of assistance at the end of 2022. 2.8 million people in NWS are internally displaced, of with 1.8 million are living in over 1.400 IDP sites (up from 1.7 million in summer),⁴ many of them still in tents and makeshift shelters.</p> <p>With the Security Council Resolution 2642 on cross-border aid expiring on 10 January 2023, the humanitarian community is heavily engaged in continuity planning in case of a non-renewal, including pre-positioning of key relief items. The last renewal for only six months has disrupted the humanitarian pipeline and funding mechanisms, severely hampering efforts to prepare for winter. The</p>	

¹ Northwest_Syria_Key_Figures_Factsheet_20221111 (humanitarianresponse.info)

² SA1 and RA1 SCHF 2022 Allocations

³ Syria AWD/Cholera Response Plan September 2022

⁴ OCHA NWS Factsheet November 2022

2022/23 winter season in NWS started, with cold temperatures, rain, wind, and snow expected to add an additional layer of challenges to the people of NWS. CCCM's winter weather risk analysis indicates that 838 IDP sites in NWS are now in the "bad", "very bad" and "catastrophic" risk levels. Last winter season, more than 22,800 tents were damaged, and more than 6,700 tents were destroyed due to weather incidents. One-third of IDP sites were flooded, affecting over 540,000 people.

Cholera continues to rapidly spread in NWS. Until 26 November, there were 16,389 suspected cholera cases in NWS, of which 408 were confirmed positive. 12 people died during the same time because of cholera. The ongoing COVID-19 pandemic with still a low vaccination coverage continue to pose challenges.

Almost daily hostilities continue along the frontlines in NWS. Following renewed statements and reports about a possible military operation, humanitarian partners developed a contingency plan to meet the needs of up to 568,000 people who could potentially be displaced, up to 60,000 to NWS.

Macro-economic conditions continue to worsen, evident in the currency devaluation, soaring prices, widespread losses in livelihoods, and increase in poverty. According to MSNA data for WoS, by August 2022, the average household expenses exceeded the average household income by 60 per cent, compared to 49 per cent in 2021. The increase in the income-expenditure gap has resulted in widespread utilization of increasingly desperate coping mechanisms. The reduced access to electricity and fuel shortages are having a crippling effect on the population, eroding livelihoods opportunities, and severely limiting access to essential services. 47 per cent of NWS households report livelihoods as a need, and 25 percent report needing electricity.

The water crisis affects access to sufficient and safe drinking water, irrigation, food production and power generation. Critically bad sanitation conditions and the deterioration of water quality have a direct impact on increasing public health risks, including the new rise of AWD/Cholera, malnutrition, and COVID-19.

Access to essential services, including Education, Food Security, Health, Nutrition, Protection, Shelter and NFIs, and Water, Sanitation and Hygiene services, remain limited throughout much of NWS. 57 per cent of IDP sites in NWS do not have access to primary schools and 80 per cent to secondary schools, which severely hinders their access to education. 3.1 million people in NWS are food insecure and 1 out of 4 children under-5 is stunted. Only 13 per cent of households in NWS report having all official documentation they need. According to MSNA data only 21 per cent of all camps are connected to water networks and 64 per cent of shelter set-ups do not accommodate the needs of persons with disabilities. 93 per cent of camps do not have any easy access to basic services, while 76 per cent of IDP sites do not have a camp management system in place. This disproportionately impacts women's, girls, boys' and people with disability's mobility and access to basic services, including to reproductive health and protection services.

Low funding levels continues to hamper the response. At the beginning of December, the 2022/23 HRP was at 43 per cent funded (US\$1.94 billion), which is the lowest level since several years. An Inter-Cluster Funding Gap Analysis for October to December 2022 estimates that over \$800 million are needed to respond to humanitarian needs, mainly to support Winterization, Cholera response and Widows' Camps plans.

Section 3: Allocation Priorities

3.1 Overview:

Launched by the Deputy Regional Humanitarian Coordinator (DRHC) a.i. in consultation with the SCHF Advisory Board and presented to Inter-Cluster Coordination Group (ICCG), the SCHF second Standard Allocation (SA2) intends to avail an estimated US\$ 25 million to address acute needs in underfunded and high-needs sectors in north-west Syria.

Upon endorsement of the DRHC a.i. and the SCHF Advisory Board, any new donor-contributions received before the end of the allocation process may be included to increase funding for qualified proposals. The two strategic envelopes include:

- **Envelope 1:** Ensure access to equitable lifesaving and life-sustaining comprehensive services integrated with the existing and underfunded ICCG-approved response plans focusing on Winterization, Widows' camps, and Cholera Response (indicative amount **US\$ 15,7 million**)
- **Envelope 2:** Provision of lifesaving humanitarian aid to the most vulnerable people and communities by improving access to basic services, through integrated single and multisectoral activities (indicative **US\$9,3 million**)

- **For both envelope 1 and 2, the use of Cash and Voucher Assistance (CVA) in the proposed response is encouraged.**

- **Annex 1 provides a comprehensive list of priorities, locations, activities and the tentative amount per envelope and cluster.**

<i>Priorities</i>	<i>Amount allocated</i>	<i>Geographic Location</i>	<i>People In Need (PIN) in northwest Syria</i>
Envelope 1: Ensure access to equitable lifesaving and life-sustaining services through existing and underfunded ICCG-approved response plans focusing on Winterization, Widows' camps, and Cholera Response	US\$ 15,7M	<i>Please refer to Annex 1 for list of prioritized locations and foreseen activities</i>	4,1 million <i>including 2.8 million people in NWS are internally displaced, of with 1.8 million living in IDP sites</i>
Envelope 2: Provision of lifesaving humanitarian aid to the most vulnerable people and communities by improving access to basic services, through integrated single and multisectoral activities	US\$ 9,3M		
Total	US\$ 25M		4,1 million

3.2 Allocation Priority Description:

Envelope 1: Ensure access to equitable lifesaving and life-sustaining comprehensive services integrated with the existing and underfunded ICCG [Winterization](#), Widows' camps and [Syria/AWD Cholera Response Plans](#).

This envelope will focus on provision of relevant and appropriate humanitarian assistance to conflict-affected communities, specifically focusing on an integrated support to the ICCG Plan through the CCCM, Education, ESNFI, ERL, Health, Protection and Wash interventions. The intended result will be achieved thorough sectorial interventions focusing on the following priorities:

- **CCCM** Winter Emergency Preparedness and Fire Response
- **Education** Winterization support to enhance access to education services
- **ERL** Livelihoods and access to services support in line with winterization and flood preparedness and response plan for NWS
Livelihoods and access to services support in line with the inter-cluster action plan for widows' camps
Livelihoods and access to services in line with Health-ERL Clusters coordination on cholera response
- **ESNFI** Winter seasonal assistance
- **Health** Support the implementation of the cholera Preparedness and Response Plan for NWS.
- **Protection** GBV: life-saving services in and around Widows Camps
Child protection: Prevention and Response services to children and mothers/ caregivers in and outside Widow camps
- **WASH** Ensure continued support to lifesaving WASH services and supplies
WASH in health facilities, CTCs, CTUs, ORPs and nutrition stabilization centres

Envelope 2: Provision of lifesaving and life-sustaining humanitarian aid to the most vulnerable people and communities in NWS by improving access to basic services, through integrated single and multisectoral activities.

This envelope will focus on provision of relevant and appropriate humanitarian assistance to conflict-affected communities, specifically focusing on Protection, Education, ESNFI, Shelter, Health and Logistics interventions allowing continued lifesaving and life-sustaining humanitarian support. The intended result will be achieved thorough sectorial interventions focusing on the following priorities:

- **Protection** General Protection: Empowering Persons with Disabilities (PWDs)
General protection: Supporting Cluster-led protection monitoring mechanisms (including rapid mechanisms/ FGDs/ evictions monitoring)
- **Education** Ensuring retention of children enrolled in school through continued support to formal education in and out of camps
- **ESNFI** Cash for Shelter Light Rehabilitation
Cash for Dignified Shelter Establishment
- **FSL** Improve the food security status of food insecure people through lifesaving and life-sustaining food assistance
- **Health** Provision of Primary healthcare services according to the revisited Essential Health Service Package EHSP.
Filling critical gaps in the secondary and specialized healthcare services
- **Logistics** Facilitate access to common logistics services identified by the humanitarian community

The Annex 1 provides a comprehensive list of priorities, locations, activities and the tentative financial endowment per envelope and cluster

Section 4: CERF and other Complementarity

A CERF grant of US\$ 25 million (22-UF-SYR-52447) has enabled humanitarian partners to provide aid to an estimated 1.7 million people. Response was prioritized to focus on the most vulnerable, including displaced people, children, female-headed households, the elderly, people with disability and those with chronic diseases in key locations across the Whole-of-Syria (WoS).

This allocation builds on previous allocations, in particular the 2022 First Standard Allocation and 2022 First Reserve Allocation through which SCHF has allocated US\$ 111,3M. This allocation also intends to promote coordinated and complementary approaches with other funding mechanisms set up as part of the contingency plan in case of non-resolution. Partners should use the funding made available by this allocation to complement and scale up ongoing capacity and projects and take into consideration ongoing discussions with other donors, current funding situation of the partner(s), the sector(s) and anticipated gaps; complement the relevant cluster coordination strategy.

Section 5: Project Selection Criteria

Given the priorities identified above, **applying organizations are highly encouraged to submit clearly written proposals that will support the envelopes/priorities as described above to achieve the strategic objectives of this allocation.**

For this allocation and for the sake of planning, projects submissions are for **initial six (6) months duration**, with a potential to extend the non-winter related projects. Particularly, projects duration may be reviewed during the technical review (Step 4 of the allocation process) in light of the forthcoming UNSC consultations on the extension of the cross-border mandate.

The following information outlines the selection criteria and key programmatic considerations that should be factored in when designing the proposal for submission to the SCHF. Further details can be found in **Annex 2: “Eligibility Parameters and Guidance to Applicants”**.

Key Principles for Effective programming:

- Promote the **centrality of protection** and ensure that a protection lens is incorporated into project design and implementation. This includes adequate considerations of gender quality and prevention, mitigation, and response to GBV.
- Promote **disability inclusion** to reduce discrimination and barriers for Persons with Disability to fully engage with and benefit from the response.
- **Strengthening Accountability to Affected People and promoting involvement of affected people** in all phases of the project cycle. Proposals must include a section that ensures accessibility of collective feedback and complaints mechanisms for affected people across gender, age, and disability groups and other diversity factors.
- Responding to Gender-Based Violence and Demonstrating that the implementing partner (and any sub-contractor) has the mechanisms in place to **prevent, detect, report, and manage incidents of Sexual Exploitation and Abuse (SEA)** including providing assistance to victims.
- Addressing gender equality through contributing to equal opportunities and equal access to assistance for all affected people, dedicating gender expertise; ensuring sound gender analysis and the systematic integration of gender in the development, with appropriate reflection on and increased visibility of the diverse circumstances of women and girls during the prioritization of needs and response.
- Proposals with sub-implementing partners must clearly demonstrate the **value-add of such partnership** including actions/activities for building of sub-IPs with an emphasis on national NGOs.

Contextualized Programming Areas:

- Promote the **use of cash and voucher assistance** (including multi-purpose cash) where feasible and appropriate.
- Demonstrate clear linkages with the **identified cluster priorities and activities**. Proposals that have included activities and/or locations outside the scope of this allocation may be considered for review if it demonstrates relevancy to the strategic priorities identified, includes needs-based evidence and have been discussed prior and agreed with cluster coordinators.
- Proposed interventions are expected to explain how the project will **support individual and communal resilience**.
- Demonstrate **access to the projects locations** and ensure timely delivery of assistance to the most vulnerable. Proposals are expected to confirm access to project locations through evidence of current implementation, MoUs or other supporting documentation.
- **Risks** including operational, security, financial, personnel management to project implementation are clearly identified, managed, and mitigated.
- **Exit strategy** and closure steps for the project and an assessment of the sustainability of the results must be explained in the proposal.
- Propose **realistic implementation duration** and represent efficient use of resources in the current context.

- Demonstrate **value for money** with optimum outcome, beneficiary reach for each dollar invested and effectiveness of the intervention.
- Promote **neutral impact on environment** with mitigation or enhancement features.

Section 6: Partners Eligibility

To ensure that funding is channelled to partners that are best positioned to deliver activities in accordance with humanitarian principles and aligns with the identified objectives under this allocation, a set of guiding principles have been endorsed by the SCHF Advisory Board for 2022 and will be considered when allocating funding.

These principles follow the scope and objectives of the SCHF and are meant to support the design phase of the proposal highlighting key elements for consideration to ensure the proposed intervention meets the needs of the affected population. Please see the SCHF Programme Manual for the guiding principles.

Further to the guiding principles, all project submission must also ensure it meets the eligibility criteria set out in **Annex 2: “Eligibility Parameters and Guidance to Applicants”**.

The Review Committees⁵ will assess the proposals in terms of the strategic relevance, technical soundness, cost-efficiency, and alignment with the allocation strategy in line with the Operational Manual and guidelines.

Proposal Submission Guidance:

- Partners can submit **Maximum One Proposal as a direct implementer** and **Maximum Two Proposals as sub-IP** and not exceeding 3 in total).
- Project Duration: Partners are requested to submit projects of **maximum 6 (six) month duration**. During allocations’ “Step 4”, all project duration will be revised to align the UNSCR timeframe. In a scenario of non-renewal OCHA will advocate for reviewed projects to be supported via other funding mechanisms.
- Proposals can be submitted **under one Envelope (Envelope 1 or 2) or both Envelopes (1 and 2)**. All proposals must indicate the envelope(s) in the title, i.e.: Envelope 1: [title] or Envelope 2[title] or Envelope 1&2 [title].
- Proposals can be either single or multisector, integrated and multisectoral approaches are recommended whenever appropriate. **OCHA HFU recommends** for high-risk partners to focus on key cluster activities where the organization has proven technical and operational experience, avoiding ill- coordinated partnerships.
- **Amount per project:** The Minimum Amounts (see Annex 3) and Maximum Amounts (see Annex 4⁶) per project are determined based on **the Partner Risk Level (NGO) and the project duration**. Before submission, partners are responsible to verify with the Operational Modalities and with OCHA HFU in case of doubts that their respective project amount in line with the respective risk level or performance level. Projects exceeding the maximum or below the minimum amounts may not be considered for funding.

Section 7: Process and Timeline

7.1 Allocation Strategy Development Process

This strategy has been developed following consultations with the Inter-Cluster Coordination Group (ICCG) and particularly with the recently developed 2022/23 Winter, Cholera response and Widows Camps plans. In addition, OCHA HFU has bilaterally engaged with clusters and the other funding mechanisms. The Allocation was developed under the strategic guidance by and received the endorsement of the DRHC a.i. and the SCHF Advisory Board. This strategy is also supported by data and information sources including the 2023 HRP, as well as cluster data and planning exercise.

7.2 Allocation Timeline

Standard Allocation Workflow	Date		
	Start Date	End Date	Responsible body
Step 1. Allocation strategy development and launch	28 November 2022	15 December 2022	ICCG, OCHA HFU DRHC, SCHF AB

⁵ Gender and age and inclusion of persons with disabilities are encouraged. As per previous allocations’ process gender parity will be a requirement while forming review committees membership.

⁶ The operational modalities set out in the Annex 4 are from [CBFP Global Guidelines December 2022](#) and supersede to the sake of this allocation the operational modalities included in the SCHF Operational Manual 2021. N.B: Contingent on EO approval of new Operational the Modalities.

Step 2. Submission of project proposals	16 December 2022	31 December 2022	Partners
Step 3. Review of projects proposals	3 January 2023	13 January 2023	Review Committees
Step 4. Final technical and financial review	16 January 2023	20 January 2023	OCHA HFU, Clusters Coordinators, Partners
Step 5. Final approval by DRHC and Grant Agreement	23 January 2023	27 January 2023	DRHC, OCHA HFU, Partners
Step 6. Disbursement	30 January 2023	8 February 2023	DRHC, OCHA HFU, CBPF Section

Section 8: HFU Contacts and Complaints

8.1 Key Contacts

- Georgios Alexandratos, OCHA HFU, Fund Manager. Email: alexandratos@un.org
- Davide Amurri OCHA HFU, Email: davide.amurri@un.org
- Muhammed Ulusoy OCHA HFU Email: muhammed.ulusoy@un.org

8.2 Complaints and Feedback Mechanism:

For complaints and feedback during any part of the allocation process, please contact schf-feedback@un.org.

Complaints and feedbacks are dealt with in a confidential manner. OCHA will compile, review, address and, when necessary, raise the issues to the DRHC, who will take a decision and recommend necessary actions. Partners that have any issue during the allocation are asked to share these issues to the extent possible BEFORE the strategic review committees if it is linked to process-related issues.

Section 9: List of Annexes

- **Annex 1:** Priorities by envelopes and cluster, activities, and locations
- **Annex 2:** Eligibility Parameters and Guidance to Applicants
- **Annex 3:** Budget preparation guidance
- **Annex 4:** New Operational Modalities⁷

⁷ The operational modalities set out in the Annex 4 are from [CBFP Global Guidelines December 2022](#) and supersede to the sake of this allocation the operational modalities included in the SCHF Operational Manual 2021. N.B: Contingent on EO approval of new Operational the Modalities.

Annex 1: Priorities by Envelopes

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
Envelope 1					
Ensure access to equitable lifesaving and life-sustaining comprehensive services integrated with the existing and underfunded ICCG-approved response plans focusing on Winterization, Widows' camps, and Cholera Response (US\$ 15,7 million)					
CCCM	1.1. Emergency Preparedness and Fire Response	Aleppo/Afrin/ (Afrin and Raju) Aleppo/A'zaz/ (Aghtrin, Azaz and Suran) Aleppo/Al Bab/ Al Bab Aleppo/ Jarablus/ Jarablus Aleppo/ Jebel Saman/Atareb Idleb/Harim/ (Armanaz, Dana, Harim, Qourqeena and Salqin) Idleb/ Jisr-Ash-Shugur/ (Badama, Darkosh, Janudiyeh) Idleb/ Idleb/ (Idleb and Maaret Tamsrin)	<i>In camps and exclusively integrated with ESNFI activities within the winterisation response:</i> <ul style="list-style-type: none"> Establishing/Maintaining fire points in sites. Developing fire warden systems. supporting existing fire committees. Coordinating fire response measures with other clusters and local stakeholders. Providing fire response resources (including fire extinguishers and first aid kits). Refilling fire extinguishers and other fire resources. Trainings and awareness raising. 	Fires and other incidents impact IDP sites, particularly in winter. Families face loss of shelter, belongings and of life. Weather conditions increase these risks. Economic deterioration drives negative coping mechanisms, like using inappropriate fuel sources, that in turn leads to fires: 63% of shelters in sites are tents, and 85% of sites are critically overcrowded. These living conditions significantly increase the likelihood of fires. Lately, 47% of the sites affected by fires were not equipped with extinguishers.	\$ 400K
Education	1.2. Winterization support to enhance access to education services	Aleppo: Afrin, Jebel Saman, A'zaz, Jarablus Idleb: Harim, Jisr-Ash-Shugur, Idleb	<i>In and outside camps</i> <ul style="list-style-type: none"> Providing heaters and fuel for heating to learning facilities when the schools are fully / partially open. 	In line of the ICCG Winterization Plan.	\$ 800K
Early Recovery and Livelihood	1.3. Livelihoods and access to services support in line with winterization and flood preparedness and response plan for NWS	Aleppo Governorate: Afrin- Aghtrin- Al Bab, A'rima-Ar-Ra'ee-Atareb-A'zaz- Bulbul-Daret Azza-Ghandorah-Jandairis- Jarablus-Ma'btali-Mare'-Membij-Raju- Sharan-Sheikh El-Hadid- Suran -Tadaf Idleb Governorate: Ariha-Armanaz- Badama-Bennsh-Dana-Darkosh-Ehsem- Harim-Idleb-Janudiyeh-Jisr-Ash-Shugur- Kafr Nobol- Kafr Takharim- Maaret Tamsrin-Mhambal-Qourqeena- Salqin- Saraqab- Sarmin-Teftnaz	<i>In and outside camps</i> <ul style="list-style-type: none"> Cash grants and CfW support to local producers/workshops, including local community groups, critical to the uninterrupted provision of goods and services to the most vulnerable during winter (e.g., self-winterization products/ winter clothing, essential NFI, fabric face masks, winter-related services) Cash injections through CFW activities linked and not linked to basic services/infrastructures restoration/rehabilitation, including but not limited to CFW for IDP site upgrades, shelter rehabilitation or construction, school rehabilitations. As well as basic training to perform work effectively and safely. Emergency repairs of basic infrastructures, including roads, markets, related drainage, and sewage systems for uninterrupted access of humanitarian assistance, access to markets, from/to IDPs sites Flood prevention rehabilitation works of basic infrastructures, including access roads, main axis roads, roads to markets and related drainage/sewage systems 	In line with winterization and flood preparedness and response plan for NWS Integration with dignified shelter action plan from both Shelter and education partners	\$ 2M

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
	1.4. Livelihoods and access to services support in line with the inter-cluster action plan for widows' camps		<p><i>In camps (widows camps)</i></p> <ul style="list-style-type: none"> GBV-Livelihood programming, including VTE, IGAs and small grant schemes to enable the establishment of small businesses. In addition, enrolment in on-job trainings, internships, etc. In coordination with CP AoR case management services, establish referrals livelihood services/programming (e.g., trainings, IGAs, small grants) to address immediate and mid-term needs of families under severe economic and of children who are vulnerable to recruitment or have in any manner disengaged from armed groups 	In line with the inter-cluster action plan for widows' camps	
	1.5. Livelihoods and access to services in line with Health-ERL Clusters coordination on cholera response		<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Direct support to CTCs/CTUs as identified and prioritized by the Health cluster. Support includes: Electricity assistance i.e., lightening outside and around the centres Support to women and PWD friendly CTCs/CTUs, including provision of spaces for women's caretakers, ensuring PWD-friendly facilities, provision of wheelchairs, and other rehabilitations to ensure the correct functioning of CTCs/CTUs Livelihood support to individuals most affected by cholera with income support interventions, through market-based interventions and other programming such as trainings post job loss, reintegration in labour force through referrals, ad-hoc support to impacted micro-business 	In line ICCG Plan and with Health-ERL Clusters coordination on cholera response In/out camps –Could be in camps for individuals affected in their livelihoods / Out camps for CTCs/CTUs specific interventions	
ESNFI	1.6. Winter seasonal assistance	Afrin, Aghtrin, Al Bab, Ariha, A'rima, Armanaz, Atareb, A'zaz, Badama, Bennsh, Bulbul, Dana, Daret Azza, Darkosh, Ehsem, Ghandorah, Harim, Idleb, Jandairis, Janudiyeh, Jarablus, Jisr-Ash-Shugur, Kafr Takharim, Maaret Tamsrin, Ma'btali, Mare', Mhambal, Qourqeena, Raju, Salqin, Sarmin, Sharan, Sheikh El-Hadid, Suran <u>The selection shall be based on realistic updated assessments as evaluated by the selection committees</u>	<p><i>In and outside camps</i></p> <p>Provision of one-off Cash for Winter Value (150 USD per HHs) for seasonal and supplementary winter core NFIs items such as of heating fuel, stoves, winter clothing kits and winter NFI kits. The proposed activity is cash and voucher assistance (as described in the Action Plan for Dignified Shelter & Living Conditions in NW Syria). It's highly recommended to complement the response with other ongoing cash projects.</p>	Provision of seasonal and supplementary NFIs (voucher or cash) for IDPs in acute needs and host community inclusion is recommended based on needs to mitigate possible tension. Activities can be designed depending on the various circumstances of targeted beneficiaries, i.e., IDP site with tents as emergency shelter, protracted IDPs staying in damaged tents or makeshift shelter and/or the host community in damaged or inadequate shelter. For all targeting and activity design, vulnerability and eligibility criteria shall be considered. Best practices and experience should be reflected in the proposal.	\$ 4M
Health	1.7. Support the implementation of the Cholera Preparedness	Sub-districts with a high-risk scale of cholera spread as identified by the cluster and in line with the areas covered by the SCHF	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Enhance surveillance case detection, active case finding, testing, and reporting according to the cholera taskforce Case management and laboratory working groups guidelines. 	Cholera is a highly transmitted disease, especially in protracted emergency settings with poor water and sanitation infrastructure, like in NWS. The spread of the disease is associated with high morbidity and	\$ 1M

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
	and Response Plan for NWS.		<ul style="list-style-type: none"> Train and deploy Rapid Response Teams in areas facing an upsurge of cases Improve community engagement and community-level intervention modalities according to the Cholera outbreak Preparedness and Response Plan (PRP) for NWS. Scale-up of targeted Risk Communication and Community Engagement activities (RCCE) 	mortality rates, necessitating comprehensive and multisectoral intervention to control the spread of the disease on the community level and reduce the burden on the health system. For this purpose, delivering prevention, life-sustaining, and lifesaving is crucial to limit the disease outbreak.	
Protection	1.8. GBV: life-saving services in and around Widows Camps	Aleppo- A'zaz- Aghtrin/Jarablus-Jarablus/A'zaz- Azaz/Al Bab- Al Bab/A'zaz- Mare'/Al Bab- Al Bab Idleb- Harim- Salqin /Jisr-Ash-Shugur-Badama/Harim- Armanaz/Harim-Qourqeena/Idleb- Bennsh/ Jisr-Ash-Shugur – Janudiyeh/Jisr-Ash-Shugur-Darkosh/Idleb- Maaret Tamsrin	<i>In camps (official and unofficial sites)</i> <ul style="list-style-type: none"> GBV specialized services including case management and PSS GBV prevention and mitigation activities Outreach services Cash assistance within GBV case management Livelihood and empowerment training and provision of small grants and income generating activities 	This will allow the provision of GBV life savings activities in and around 50 widows camps as per the Inter Cluster Action Plan that the GBV SC is coordinating on behalf of the ICCG as per the Inter-Cluster Action Plan. <u>Activities could be single cluster, while integration with ERL interventions will be prioritized</u>	\$ 3M
	1.9. Child Protection: Prevention and Response services to children and mothers/caregivers in and outside Widow camps	All locations with existing widow camps in NWS, and in line with the areas covered by the SCHF	<i>In widows and outside camps</i> <ul style="list-style-type: none"> Child Protection case management targeting boys and girls. Development of care plans children presenting CP concerns. Clear articulation with livelihoods opportunities. Clear articulation with livelihoods opportunities. Child Protection case management for children who have aged out and had to leave the camps. MHPSS for children in and out of the camps. Parenting Programmes for mothers/caregivers in the camps. SBC in the camps and in the communities where the camps are located 	Part of the ICCG Plan. Widows' camps witness high rates of mental health issues and incidence of child exploitation and neglect even once boys are forced to leave the camps. Families face separation once boys reach puberty and are at higher risk of child labour, including recruitment by armed groups. 22% of communities in NWS resort to child labour to support HHs, in widows camps the data is 58% boys and 49% of girls aged above 11. <u>Special consideration to submissions integrating ERL as part of the CP response will be prioritised</u>	
WASH	1.10. Ensure continued support to life-saving WASH services and supplies	Afrin, Al Bab, Ariha, A'zaz, Harim, Idleb, Jarablus, Jebel Saman, Jisr-Ash-Shugur	<i>In and outside camps</i> <ul style="list-style-type: none"> Expansion of water distribution networks as well as sewerage systems by connecting them to existing main pipelines Rehabilitation and maintenance of existing water systems including providing operational support Construction of high elevated water tanks within a cluster of camps Distribution of water storage tanks for daily need of water at 35-40 lt/p/d and 40-50 lt/p/d in camps with infrastructure Construction and rehabilitation of latrines Executing solid waste management (SWM)/ wastewater and faecal sludge management including covering open sewage lines in/near camps 	In line with the ICCG Syria/AWD Cholera Response Plan	\$ 4.5M

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
			<ul style="list-style-type: none"> CFW for restoration of WASH infrastructure and local production of hygiene items (e.g., soap) Hygiene promotion and awareness including control of water borne diseases (AWD/Cholera) through chlorination, provision of soap for hand washing and Risk Communication and Community Engagement (RCCE) Building skills/capacity of local artisans and council members for operations of WASH services Establishment of WASH tariff collection and accounting systems (cost recovery mechanism) in communities Integrated approach especially with Health and Education sectors on AWD/Cholera and Infection Prevention Control (IPC) Special focus to PwD inclusion in WASH services and supplies 		
	1.11. WASH in health facilities, CTCs, CTUs, ORPs and nutrition stabilization centres	Afrin, Al Bab, Ariha, A'zaz, Harim, Idleb, Jarablus, Jebel Saman, Jisr-Ash-Shugur	<ul style="list-style-type: none"> Provision of adequate WASH services and supplies at health facilities, CTCs, CTUs, ORPs and nutrition centres Connection of health facilities and nutrition centres to water and sanitation networks wherever applicable. Support to water storage capacity to meet cluster/global standards Sanitation and wastewater management including construction and rehabilitation of latrines, showers, septic tanks, and wastewater treatment systems IPC in health facilities and nutrition centres RCCE Provision of chlorine solution preparation training to staff/WASH focal points at health facilities Hygiene promotion and awareness activities 	In line with the ICCG Winterization Plan	
Envelope 2					
Provision of lifesaving humanitarian aid to the most vulnerable people and communities by improving access to basic services, through integrated single and multisectoral activities (US\$9,3 million)					
Education	2.1. Ensuring retention of children enrolled in school, through continued support to formal education in and out of camps	<ul style="list-style-type: none"> Aleppo: Jebel Saman, Azaz, Al Bab, Jarablus Afrin Idleb: Harim, Jisr-Ash-Shugur, Idleb, Ariha 	<i>In and outside camps</i> <ul style="list-style-type: none"> Exam support including national exams on district levels. Provision of minor rehabilitation including WASH facilities Establish additional classes based on the capacity of schools and needs (tents and caravans may not be supported). Provide additional operational support for learning spaces including water trucking, and utilities Recruit, train, and remunerate education personnel in line with minimum standards 	<ul style="list-style-type: none"> In January 2023, the Cluster anticipates a gap in funding halting support to 200 schools. In addition, 5,000 teachers will be without pay and there is a risk for education to be discontinued. <u>Partners to focus on continued support to schools at risk of closure and already supported by SCHF or other donors</u> Transitioning children from non-formal education (NFE) programmes, such as those run in some IDP 	\$ 1.5M

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
			<ul style="list-style-type: none"> Provide messaging on cholera prevention and access to services as per the guidelines of Risk Communication and Community Engagement task force group. Implementation of the minimum package in schools, including provision of hygiene promotion and access to child-friendly gender-friendly, Cholera prevention and response, Child Protection MHPSS for boys and girls, SEL, referral and Child Protection case management. 	<p>settlements, into the formal system would enhance resilience and sustainability.</p> <ul style="list-style-type: none"> It can be single sector, multi-sector, or integrated response Provision minimum package of WASH, CP is required Schools under this envelop can be supported for winter needs under the relevant activity in Envelope 1 	
ESNFI	2.2. Cash for Shelter Light Rehabilitation	In IDP sites and camps where the selection will be based on realistic updated assessments, including: Afrin, Aghtrin, Al Bab, Ariha, Atareb, A'zaz, Badama, Dana, Daret Azza, Idleb, Jisr-Ash-Shugur, Maaret Tamsrin, Qourqeena, Salqin, Sharan, Suran	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Light Rehabilitation through Upgrading unfinished/ uncompleted shelter units in IDP sites. 	Vulnerable HHs living in unfinished or damaged shelters. Particular attention to returnees, whether localized or not, to contribute to their resilience and reduce their dependency as well as targeting and considering special needs of marginalized and particularly vulnerable people, including people with disabilities and GBV cases as well as other emergency cases. Wherever possible, link rehabilitation with free rental for IDPs.	\$ 1M
	2.3. Cash for Dignified Shelter Establishment	Self-settled IDP sites and/or new camps based on the updated needs assessments, including: Sub-districts: Armanaz, Atareb, Azaz, Dana, Daret Azza, Darkoush, Idleb, Janudiyeh, Jarablus, Maaret Tamsrin, Qourqeena, Salqin, Suran, Al Bab	<p><i>In camps (IDP sites)</i></p> <ul style="list-style-type: none"> Delivering Cash for better dignified shelters with associated facilities where infrastructure is implemented/ could be funded through other sources in IDP sites& camps. 	Dignified Shelter is a more cost-effective use of aid funding and demonstrated value for money. One Dignified Shelter which may have a lifespan of 10 years. This short-term intervention may save money in the future while reducing expenditure on 'one-off' seasonal support to save lives over winter that has become an annual necessity owing to poor shelter conditions.	
Food Security and Livelihood	2.4. Improve the food security status of food insecure people through lifesaving and life-sustaining food assistance	<p>Aleppo: Afrin, A'zaz, Al Bab/Jebel Saman, Jarablus</p> <p>Idleb: Ariha, Harim, Jisr-Ash-Shugur,</p> <p>The subdistricts and community under the mandate of SCHF</p>	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Provide emergency response to crisis affected vulnerable people with short-term food assistance through appropriate modalities (Including CVA) Provide the food insecure people with monthly food assistance through appropriate modalities (Including CVA) Provide persons with Specific Needs (PSN) with supplementary food assistance through appropriate modalities (Including CVA) 	Lifesaving and live sustaining intervention that anticipates a large gap in funding in 2023	\$ 1,5M
Health	2.5. Provision of Primary healthcare services according to the revisited Essential	<p>Aleppo:</p> <ul style="list-style-type: none"> Afrin: Afrin, Bulbul, and Sharan sub-districts A'zaz, A'zaz sub-district. Jebel Saman: Atareb and Daret Azza sub-districts <p>Idleb:</p>	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Support the provision of primary healthcare services, including medical consultations, pharmaceutical dispensing, data management, and referral services. <p>Support integrated health-nutrition services, especially paediatrics and maternity, and outreach referral services.</p>	<p>To support ongoing critical essential health services to:</p> <ul style="list-style-type: none"> Meet current needs, including the lack of available lifesaving and life-sustaining health services Improve access to basic and specialized health services, especially for vulnerable groups in camps, IDPs, women, girls, U5 children, and PWD. 	\$ 2,5M

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
	Health Service Package EHSP.	<ul style="list-style-type: none"> Idleb: Idleb and Maaret Tamsrin sub-districts Harim district: Dana sub-district 		<ul style="list-style-type: none"> Support the fragile health system in NWS (service delivery) 	
	2.6. Filling critical gaps in the secondary and specialized healthcare services	<p>Aleppo:</p> <ul style="list-style-type: none"> Afrin: Afrin and Raju sub-districts A'zaz: A'zaz sub-district <p>Idleb:</p> <ul style="list-style-type: none"> Harim: Dana, Harim, and Salqin sub-district Idleb: Idleb and Maaret Tamsrin sub-district Jisr-Ash-Shugur: Jisr-Ash-Shugur sub-district 	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Trauma management and surgeries. Medical supplies and pharmaceuticals provision. CEmONC and paediatrics services. <p>Mental health services.</p>		
Logistics	2.7. Facilitate access to common logistics services identified by the humanitarian community	<ul style="list-style-type: none"> Aleppo: Jebel Saman, Al Bab, Afrin, A'zaz, Jarablus Idleb: Dana, Harem, Ariha, Jabal al Zawiya, Maaret Tamsrin, Sarmada 	Free-to-user Reyhanli Transshipment Hub Services (Rental, Security Services and Handling Services)	The Logistics Cluster provides logistical support and facilitates common services for cross-border operations from Turkey into Syria through the Bab al-Hawa border crossing point. These logistic services are of critical support to the humanitarian community, as they provide a reliable and secure transport of relief items into Syria	\$ 300K
Protection	2.8. General Protection: Empowering Persons with Disabilities (PWDs)	<p>Aleppo:</p> <ul style="list-style-type: none"> Jebel Saman – Atareb/Jebel Saman - Daret Azza/Al Bab - Al Bab/A'zaz - A'zaz/A'zaz – Suran <p>Idleb:</p> <ul style="list-style-type: none"> Idleb /Idleb – Teftnaz/Idleb - Maaret Tamsrin/Harim – Harim/Harim – Dana/ Harim – Salqin/Harim – Qourqeena/Harim - Armanaz 	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Individualized protection assistance (IPA), with a focus on PWDs at heightened risk, including older people, women, and children Case management & referral to multi-sectoral services, Psycho-social support (PSS) Cash-Based Interventions (CBI) for protection 	Persons With Disabilities are often excluded, according to MSNA 2022, resulting in limited access to humanitarian assistance, including protection services. Tailored IPA, case management & referral, PSS and CBI allow PWDs, older persons, and their households to access specific services, material assistance and referrals relevant to their needs, with robust follow-up to ensure access to assistance/services will be prioritised. <u>Integrated, multisectoral approaches are recommended</u>	\$ 2.5M
	2.9. General protection: Supporting Cluster-led protection monitoring mechanisms (including rapid	<p>Aleppo:</p> <ul style="list-style-type: none"> Jebel Saman – Atareb/Jebel Saman - Daret Azza/Al Bab - Al Bab/A'zaz - A'zaz/A'zaz – Suran/Azaz – Mare'/Azaz – Aghtrin/Afrin – Afrin/Afrin – Sharan Aleppo -Afrin – Mabtali/Afrin – Jandairis <p>Idleb:</p>	<p><i>In and outside camps</i></p> <ul style="list-style-type: none"> Continue conducting protection monitoring activities in line with PMTF standards, focusing on areas to which the Protection Cluster has limited access Provide information sharing/awareness raising on key protection considerations and available services accessible for all. 	With increased protection concerns for individuals residing in NWS, protection monitoring systematically and regularly will inform service provision by collecting, verifying, and analysing information to identify rights violations and protection risks for populations of concern to inform effective responses and having a systematic collection, verification, and analysis of identify protection risks to inform effective responses.	



Syria Cross-border Humanitarian Fund 2022 Second Standard Allocation - Strategy

Cluster	Priority	Prioritised Locations	Recommended activities	Justification	Indicative Amount
	mechanisms/FGDs/evictions monitoring)	<ul style="list-style-type: none">• Idleb – Idleb/Idleb – Teftnaz/Idleb - Maaret Tamsrin/Harim – Harim/Harim – Dana/Harim – Salqin/Harim – Qourqeena/Harim - Armanaz		Protection response monitoring will include a continuous and coordinated review of the implementation of the response to measure whether planned activities deliver the expected outputs and protection outcomes and impact, both positive and negative.	
				TOTAL	\$ 25M

Annex 2: Eligibility Parameters and Guidance to Applicants

Proposal Design

- **Access:** The applicant must confirm presence/access to the geographical target area(s) and proven operational capacity in that area and sector.
- **All annexes and guidance** to support proposal submissions (e.g., operational modalities, gender, protection mainstreaming and cash programming) have been combined into the Programme Manual - available [here](#).
- **Cash programming:** Cash programming is encouraged but limited only to partners with proven experience and to areas where there are functioning markets. The guidance from the Cash Working Group must be followed.
- **Conflict-sensitivity:** Projects need to be conflict-sensitive, notably through integrating a do-no harm approach when designing the project.
- **Amount per project:** The Minimum Amounts (see Annex 3) and Maximum Amounts (see Annex 4⁸) per project are determined based on **the Partner Risk Level (NGO) and the project duration**. Before submission, partners are responsible to verify with the Operational Modalities and with OCHA HFU in case of doubts that their respective project amount in line with the respective risk level or performance level. Projects exceeding the maximum or below the minimum amounts may not be considered for funding.
- **Project Duration:** For this allocation and for the sake of planning, projects submissions are for **initial six (6) months duration**, with a potential to extend the non-winter related projects. Particularly, projects duration may be reviewed during the technical review (Step 4 of the allocation process) in light of the forthcoming UNSC consultations on the extension of the cross-border mandate.
- **Logical Framework:** Proposals should be linked to HRP indicators and cluster objectives. The overall objective should be clear and logically linked to the outcomes and outputs. The activities should be described in full details and sequenced in a logical fashion. Standard indicators are uploaded on GMS. The purpose of the standard indicators is to have a common method to verify programmatic progress and to support the Fund's internal reporting procedures. Use of customary indicators is not encouraged, and will affect the scoring of the proposal, if used unjustifiably. Standard activities are also uploaded and should be selected, where appropriate, to support the monitoring efforts of the fund. The indicators should be verifiable and should be well aligned with the activities. The means of verification should be carefully considered to enable and facilitate Third-Party Monitoring activities.
- **Needs-based:** The needs are well identified using recent surveys and studies undertaken (data sources and updated assessment results must be attached within the submission) - and/or the reference on the sources provided. Partners are not required to conduct a separate needs assessment but must clearly provide evidence or reference to the recent assessment used. Partners should also develop their proposal building on the results and lessons learnt of previous projects.
- **Number of projects per partner: Under this allocation, partners can submit Maximum One Proposal as a direct implementer and Maximum Two Proposals as sub-IP and not exceeding 3 in total**
 - Proposals can be submitted **under one Envelope (Envelope 1 or 2) or both Envelopes (1 and 2)**.
 - All proposals must indicate the envelope(s) in the title, i.e.: Envelope 1: [title] or Envelope 2[title] or Envelope 1&2 [title].
- **Strategic relevance:** Projects should present a clear linkage to one of the strategic objectives and activities must have clear alignment with the proposed response per objective.
- **Technical soundness:** Proposals must meet the technical requirements and cluster technical guidelines to implement planned activities.

Targeted Population

- **Targeted Population:** Beneficiaries should be clearly described and broken-down per community, type, gender, disability, and age with a clear focus on vulnerability i.e., young and elderly with clear justification on the number provided. Double counting of beneficiaries should be avoided. Beneficiaries must be identified based on the vulnerability and without

⁸ The operational modalities set out in the Annex 4 are from [CBFP Global Guidelines December 2022](#) and supersede to the sake of this allocation the operational modalities included in the SCHF Operational Manual 2021. N.B: Contingent on EO approval of new Operational the Modalities.

interference of local authorities or armed actors. Beneficiaries should also be involved in the design and implementation of the project.

- **People with disabilities:** Projects must target people with disability and proposals should demonstrate disability mainstreaming to avoid segregation; clearly explaining how people with diverse disabilities will be included amongst the targeted beneficiaries and how services will be inclusive for all people including persons with disabilities and older persons.

Monitoring and Risk Management

- **Monitoring:** A realistic monitoring and reporting strategy must be developed in the proposal. The SCHF encourages the use of participatory approaches, involving affected communities in needs assessment, implementation, monitoring, and evaluation (see also AAP).
- **Risk management:** Assumptions and risks related to the project must be comprehensively and clearly spelled out, along with a clear risk management strategy. In case the original targeted geographical area is no longer accessible, the project should present an alternative plan in line with the allocation strategy. Risk management should clearly consider the contingency planning in case of UNSCR non-renewal.
- Partners submission shall clearly outline a contingency and business continuity plan in the event of non-renewal
- **Partners shall be aware and are responsible for obtaining the necessary disbursements to complete or phase out the projects in case a new UNSCR is foreseen before the end of the approved projects under this allocation, so to mitigate any risks and gaps connected to such an event**
- **Exit strategy** shall clearly highlight the handover plan and responsibility, accountability mechanism, and risk management of the stock, monitoring for the prepositioned items not distributed at the end of the project.

Integration and Complementarity

- **Complementarity with other partners:** The SCHF will stress on partners showing complementarity with other organizations working in similar target areas (with SCHF or other funding) to avoid overlaps and ensure added value synergies and improve cost effectiveness. During the strategic and technical review, partners may be required to modify their proposals accordingly.
- **Complementarity with other funding:** Additional/complementary source of funding must be reported on the project cover page and taken into consideration in the design of the proposal
- **Partner should clearly demonstrate their contribution (financial/in-kind) with specific and verifiable information**
- **The partner shall declare of funding received or application submitted to the other Pool fund mechanism, and describe how the proposals are complementing, integrating and avoiding duplication. Failure to do so may lead to non-consideration for funding.**
- **Integrated Response:** Partners are strongly encouraged to contribute to and demonstrate how their proposal will support the strategy identified in this **allocation** and demonstrate how their intervention is in line with the priority(ies) . The project should include the exact budget distribution among the clusters on the cover page. The budget should clearly identify the costs per cluster. During the strategic and technical review, partners may be required to modify their proposals accordingly.

Partnerships via Project Implementation

- **Partnerships:** Partnerships with organizations that have not been assessed by the SCHF are encouraged when they can support scaling-up and improving the quality of the response.
- **Sub-Implementing Partners:** In line with the SCHF's continued commitment to promoting localization and the Grand Bargain's localization workstream, the DRHC and AB have endorsed the use of sub implementing partners approach (sub-IP), whereby funds are allocated to multiple humanitarian actors through a single lead organization working in equal partnership with all members. The objectives of this approach are: (1) to channel funds to and build operational and institutional capacities of national NGOs; (2) to enhance the efficiency of allocation processes and ensure timely disbursement of funds to prioritized projects; and (3) to enhance coordination between partners and the response. While partnerships are the preferred modality for this allocation, the signatory-lead and sub-IP organizations must ensure that the partnership function effectively as more than an administrative entity to bring operational value and truly draw on the benefits of the modality described above
- **Eligibility criteria and guidance for such partnerships are as follows:**
 - Projects including the utilization of sub-IP modality must include actions/activities for capacity building of sub-IPs with an emphasis on NNGOs in the proposal logframe and budget.

- Lead partners should clearly explain the reasons why sub-IPs are selected and whether a capacity assessment has been conducted in case of sub-IP not being an SCHF eligible partner. **If the proposed sub-implementing partner is a SCHF partner, please clarify the reason they are not directly applying for the fund and the added value of the partnership**
- SCHF partners who have been assessed as “low” and “medium” risk can submit proposals utilizing the sub-granting modality. For “high” risk level partners submitting individual proposals, it is recommended to mention all cases of coordination and project integration, with other local actors through the submitted project summary.
- Partnerships or multi-partner projects must include budget categories for dedicated resources and management for the partnership to function.
- **Leading/signatory partners are encouraged to share a proportion of the 7 per cent Program Support Costs (PSC) in agreement with sub-IP** (on this regard see [IASC Guidance on the Provision of Overheads to Local and National Partners](#))
- In accordance with article 5 of the SCHF Grant Agreement, the signatory lead Organization “shall be fully responsible for all work and services performed by these operational partners and for all acts and omissions committed by them or their employees.”

Effective Programming: AAP, Gender, Inclusion and PSEA Considerations

- **Accountability to the affected population:** Projects must include a section that outlines how quality and accountability to affected population aspects are mainstreamed through the project. In particular, projects are requested to demonstrate how relevant humanitarian standards (such as the [Core Humanitarian Standards](#) and the [Humanitarian Standards Partnership](#)) are applied and that complaint and feedback mechanisms are in place so that affected populations (women, girls, boys, men, including the most marginalized and at-risk people among affected communities) are able to provide feedback on their own priorities and concerns around the project, and that these priorities and concerns are considered and addressed in a meaningful way.
- **Gender:** projects must ensure that gender is integrated throughout all the phases of the project cycle from the project assessment to the final review of the results achieved. The use of the Gender and Age marker tool is compulsory.
- **Protection against Sexual Exploitation and Assault (PSEA):** In line with the requirement in the grant agreement, partners must ensure the relevant mechanisms are in place to detect PSEA cases both internally and externally. In line with the requirement in the grant agreement, partners must have complaint and feedback mechanisms, with plans in place to identify, prevent and mitigate SEA risks in ongoing activities.

Other Eligibility Criteria

- **Adherence to humanitarian principles:** support a principled humanitarian response to the vulnerable displaced people and host communities.
- **Cluster membership:** Active cluster membership should be confirmed by the respective Cluster Coordinator. Active membership includes at a minimum the following: must be an active member of the cluster as defined by the relevant clusters and endorsed by the ICCG. For multi-sectoral projects, active cluster membership should be confirmed by all relevant clusters to ensure eligibility. If one or more clusters cannot confirm active membership, this/these cluster/s will not be considered as eligible and should be removed from the proposal. The proposal can only be recommended if the proposal is strategically relevant and technically sound without the clusters submitted but rejected due to no cluster membership.
- **Overdue reports:** Partners with overdue financial and narrative reports, pending refund payments to OCHA, and any project audit reports received but not signed and returned to auditors/HFU might not be considered for this allocation.
- **Past performance:** OCHA HFU will consider partners’ previous performance during project recommendations and based on this, may recommend not going forward with a submitted intervention or a reduction of the scope of the project.
- **Staff welfare:** In line with the organizations due diligence and risk management responsibilities, it is the organizations’ responsibility to ensure there are provisions for staff welfare within their Human Resources policy.
- **Cost efficiency:** partner should demonstrate and ensure the principles of economy, efficiency, effectiveness, transparency, and accountability are adhered to. This means that project inputs and financial requirements:
 - Should be commensurate with planned activities and expected outputs.
 - That the budget is a correct, fair, and reasonable reflection of the project’s rationale and logical framework
 - Ensure the estimated project costs are reasonable in the context and history, such that resources are used in the most efficient and transparent way.

- **Value for money:** Projects must demonstrate 'value for money' (e.g., optimum outcome and beneficiary reach for each dollar invested and effectiveness of the intervention). Budget proposals must reflect the correct and fair budget breakdown of the planned costs and clearly outline units, quantities, and percentages. **Partners should avoid including only lump sum amounts and use the automated Bill of Quantities (BoQs) on GMS).** Project costs should be comparable to the technical difficulty and complexity of the proposed activities and the organizational readiness and capacity to implement in the targeted areas. Considering SA2 is also focusing on underserved areas and frontline communities, and where clearly justified, OCHA HFU may avail funding to organizations for start-up and/or administrative costs to ensure interventions can be implemented.
- The DRHC a.i. reserves the right to reject funding recommendation based on the following:
 - The organization partner's performance and compliance with the SCHF, including recent audit findings and spot check reports;
 - Limited absorption and implementation capacity of the applicant;
 - Disproportionate or unjustified budget costs in relation to the proposed project strategy; and
 - Absence of secured access to the targeted implementation area.

Annex 3: Budget Preparation Guidance

- Projects funded through standard allocations shall be planned and implemented within three months of project start date.
- Projects funded through this allocation must ensure requesting subsequent disbursements within the timeframe of UNSCR mandate, to avoid risking disbursements. Partners are responsible to notify HFU as soon as the first disbursement 70% burn rate is achieved for release of subsequent disbursements.
- The budget shall be in line with the SCHF Operational Modalities (depends on Partner Risk Level and project duration, please see clause 5.2.3 Operational Modality Table in the SCHF Operational Manual).
- Budget should be developed based on the principle of reasonableness and allowability per SCHF guidelines and the minimum budget allocation is no less than \$150,000.
- The proposed budgets should demonstrate cost-effectiveness and efficiency, and proper budget narratives, breakdowns, and BoQs shall be provided.
- Information on co-funding shall be explicitly mentioned/explained in the budget narrative (e.g., staffing, operational cost, and program activities etc.).
- Direct and Support/operations costs should be marked correctly and proposed in the relevant section of the budget.
- Staffing cost should accompany implementing partner salary and benefits details, moreover proper budget narrative shall be provided to explain base salary and associated benefits.
- Separate line for every staff member/position with different functional titles, clear description of the role along with salary and benefits.
- Salaries must be aligned with organization salary grades, indicate salaries are net or gross and what costs are included in unit cost (e.g., SGK, insurance, tax).
- The budget shall be prepared according to the maximum limit partner is authorized.
- Please read the SCHF handbook, Article 6.2 'Eligible and Ineligible costs.
- Partner shall identify the finance focal point in GMS on the cover page.

Annex 4: Revised Operational Modalities

As per CBPF Global Guidelines, December 2022, this updates and supersedes the Operational Modalities included SCHF OM 2021 concerning duration, project value, disbursement, reporting and monitoring.

Operational Modalities for NGO and RC/RC partners

Risk Level	Project duration (months) ⁹	Project value (K USD)	Maximum amount per project (K USD)	Disbursements (in % of total)	Financial reporting			Narrative reporting		Monitoring		Audit
					Interim Financial Report ¹⁰	31-Jan ¹¹	Final Report	Progress Report	Final Report	Project monitoring	Financial spot-check	
NGOs												
High	<6 months	≤ 250	-	60-40	Yes	Yes	Yes	1 mid	Yes	1	1	As per plan
		> 250	500	50-50	Yes	Yes	Yes	1 mid	Yes	1	1	
	6 (included) - 12 months	≤ 400 ^{12*}	-	50-50	Yes	Yes	Yes	1 mid	Yes	1	1	
		> 400	800 ¹³	40-40-20	Yes	Yes	Yes	2	Yes	1	1	
	12 months (included) - 24	≤ 400	-	40-40-20	Yes	Yes	Yes	2	Yes	1	1	
		> 400	1,000	40-30-30	Yes	Yes	Yes	2	Yes	2	2	
Medium	<6 months	≤ 250	-	100	-	Yes	Yes	-	Yes	-	-	
		> 250	700	80-20	Yes	Yes	Yes	1 mid	Yes	1	-	
	6 (included) - 12 months	≤ 400	-	100	-	Yes	Yes	1 mid	Yes	1	-	
		> 400	1,500 ¹⁴	80-20	Yes	Yes	Yes	1 mid	Yes	2 ¹⁵	1	
	12 months (included) - 24 months	≤ 400	-	80-20	Yes	Yes	Yes	1 mid	Yes	1	1	
		> 400	1,500	60-40	Yes	Yes	Yes	1 mid	Yes	1	1	
Low	< 12 months	≤ 900	-	100	-	Yes	Yes	-	Yes	-	-	
		> 900	-	80-20	Yes	Yes	Yes	-	Yes	-	-	
	12 months (included) - 24	≤ 900	-	100	-	Yes	Yes	1 mid	Yes	-	-	
		> 900	-	80-20	Yes	Yes	Yes	1 mid	Yes	1	1	
	months	≤ 900	-	100	-	Yes	Yes	Yes	Yes	-	-	
		> 900	-	80-20	Yes	Yes	Yes	Yes	Yes	-	-	

⁹ Maximum project duration is 24 months. Cost and No-Cost Extensions may not extend the duration of a project beyond 24 months. If following a Cost or No-Cost Extension additional monitoring and reporting is required in line with the Operational Modalities, the corresponding changes will be made in the GMS to ensure oversight activities are conducted.

¹⁰ Required for or additional disbursements.

¹¹ Calendar year reporting.

¹² New partners eligible to receive funding for the first time and assessed as high risk can apply for only one project, for a maximum of 12 months. After the Final Financial and Narrative Reports for the first project are submitted and approved by OCHA, and provided no red flags have been identified, additional project proposals can be submitted, and the regular Operational Modalities apply.

¹³ Pending EO Approval. 2022 CBPF Global Guideline limit is 700K.

¹⁴ Pending EO Approval. 2022 CBPF Global Guideline limit is 1500K.

¹⁵ Pending EO Approval. 2022 CBPF Global Guideline requirement is 1 project monitoring.