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Revised Emergency Appeal

Sierra Leone: Ebola Virus Disease

 International Federation
of Red Cross and Red Crescent Societies

(Revised) Appeal n° MDRSL005
Glide n° EP-2014-00039-SLE

6.3 million people to be assisted

334,013 Swiss francs DREF allocated

64.3 million Swiss Francs current Appeal budget

1.3 million Swiss Francs funding gap

Appeal launched 26 June 2014

Revision n° 7 issued 04 July 2017

Appeal ends December 2017

This revised Emergency Appeal seeks a total of **64.3 million Swiss francs** (decreased from 90.5 million Swiss francs) to enable the **International Federation of Red Cross and Red Crescent Societies (IFRC)** to support the **Sierra Leone Red Cross Society (SLRCS)** to deliver recovery assistance and support to Ebola Virus Disease (EVD) affected populations (including EVD survivors, orphans and vulnerable children, affected households, Red Cross and community volunteers). The revised operation will focus on the following sectors: health (including community-based health (CBH) and psychosocial support (PSS)); water, sanitation and hygiene (WASH); disaster risk reduction (DRR); food security and livelihoods and National Society Capacity Building (through community and institutional development strategies). The revision also reflects the completion of majority of activities with the financial support from the Government of Japan, UNDP and the Swedish Red Cross. The current funding gap is 1.3 million Swiss francs.

Details are available in the Emergency Plan of Action (EPoA) [<Click here>](#)

The disaster and the Red Cross Red Crescent response to date

March - April 2014: Ebola outbreak first detected in Guinea and National Ebola Task Force is established in Sierra Leone.

May 2014: First Ebola case is reported in Sierra Leone near the border with Guinea.

June 2014: The IFRC launches an Emergency Appeal for 880,000 Swiss francs.

July 2014: The IFRC issues a revised Appeal n° 1 for 1.36 million Swiss francs.

September and October 2014: The IFRC issues revised Appeal n° 2 for 12.85 million Swiss francs, followed by revision n° 3 for 41.1 million Swiss francs.

March and June 2015: The IFRC issues revised Appeal n° 4 for 56.8 million Swiss francs, followed by Appeal revision n° 5 for 94.0 million Swiss francs to extend the operation from emergency to recovery phase.

April 2016: The IFRC issues revised Appeal n° 6 for 90.5 million Swiss francs for recovery activities.

July 2017: The revised Appeal n°7 is issued to support for 6.3 million people for remaining seven months of the recovery phase.



Community Engagement, Kabala, Koinadugu 2014: Courtesy Patrick Massaquoi. Photo SLRCS

The operational strategy

Overall objective

To provide timely and appropriate disaster recovery assistance to affected populations in Sierra Leone through the restoration and improvement of their livelihoods, support to strengthen individual and community health systems, community resilience and access to basic services until December 2017. This program will also further strengthen the capacity of SLRCS.

Proposed strategy

The end of epidemic has been declared at an end in November 2015. Therefore there is no longer a need for safe and dignified burials and the SLRCS teams have been disbanded. The revised appeal strategy will address the following issues:

1. Restoring and strengthening the livelihoods of Ebola-affected communities;
2. Building the resilience of vulnerable communities;
3. Increasing the access of Ebola-affected communities to appropriate health services;
4. Supporting communities to respond to their psychosocial needs;
5. Strengthening SLRCS's capacity to support community-based disaster risk reduction, response and preparedness;
6. Strengthening volunteer development; and,
7. Strengthening the leadership and management of SLRCS, particularly in key areas such as finance management, logistics and procurement.

Needs assessment

The priorities have changed given that the situation has evolved considerably since the Ebola outbreak. While the National Society and the Government are more prepared for an outbreak now, there is still much work to be done. Changing needs within communities affected by Ebola and ongoing consultation with vulnerable populations have led to refocus recovery efforts on supporting a transition to routine, pre-Ebola services and increasing efforts to restore livelihoods of Ebola-affected communities, improving access to health services, and enhancing the capacity of the National Society.

Beneficiary selection


While the EVD operation has had a national focus due to the country-wide risk of EVD, assessments and information provided by Government health officials have highlighted the specific needs of high risk groups, which have informed the plan of action. These groups include those with greater vulnerabilities as well as opinion leaders, including EVD patients, survivors and their families, orphans and vulnerable children, youth and women's groups and associations, health workers, schools, religious and traditional healer leaders, and Red Cross volunteers. Women were disproportionately affected by the Ebola outbreak as the morbidity and mortality figures indicate. As a result, the recovery plan gives special attention to women and women's groups.

Coordination and partnerships

The IFRC Country office supports the SLRC in its operational and institutional capacity building in the Ebola response. Further technical support is available from the IFRC Country cluster and regional offices supporting the coordinated response in multiple countries following the same response strategy. The country office, with remote assistance from the regional office provides technical guidance and support including resource mobilization/grant management, logistics, finance development, reporting, communications and community engagement in order to ensure sufficient capacity for the response and preparedness operations.

Regular weekly coordination and monthly review meetings are held with SLRCS management and other in country partner National Societies to coordinate activities across sectors. The NS and IFRC teams participate in the weekly epidemic response coordination and relevant cluster meetings attended by all in-country stakeholders.

Proposed sectors of intervention (refer to EPOA for revised operational plan)¹

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|  Health |
| Outcome 1.1 Community based health: The immediate and medium term health needs of targeted communities are met through enhanced capacity in Community Based Health Programme (CBHP) and improved access to health and care. |
| Output 1.1.1 Strengthened capacity of branches, volunteers and community to implement CBH activities. |
| Activities completed <ul style="list-style-type: none"> • Review and update existing Planning, Monitoring, Evaluation and Reporting (PMER) tools for the CBHP. • Pre-test reviewed CBHP PMER tools. • Carry out baseline survey in 25 communities in five districts. • Conduct training for 20 staff (Training of Trainers-ToT) in five districts on infection prevention and control (IPC) using community based health and first aid (CBHFA) and epidemic control for volunteers (ECV). • Cascade IPC training to volunteers using CBHFA and ECV approaches for 1,250 volunteers in five districts. Activities in progress or planned <ul style="list-style-type: none"> • Cascade training on IPC for 280 volunteers in 14 branches. • Conduct training for 30 staff in one district and at HQ in Kobo toolbox. |
| Output 1.1.2 Social Mobilisation campaigns efficiently and effectively carried out in target communities. |
| Activities completed <ul style="list-style-type: none"> • Print and distribute Information, Education and Communication (IEC) on CBHFA and ECV materials to branches and communities. • Roll out CBHFA and ECV approaches in 25 communities in five branches. • Carry out health awareness campaign through house-to-house visits by community-based volunteers and other means of communication in support of the national immunization day campaigns in May, June, and July. • Monitoring and supervision visits to branches and communities. • Conduct mid-term and end-line survey to evaluate the progress and impact of activities. • Survey volunteers, communities and health facilities, water sources etc. |
| Output 1.1.3 Revitalise existing community health clubs – fathers, mothers and Youth Peer Educator clubs to help in promoting safer and healthy communities. |
| Activities completed <ul style="list-style-type: none"> • Held Annual Mothers congress (90 participants). Activities in progress or planned <ul style="list-style-type: none"> • Conduct CBH meetings with various community health groups (Mother, Fathers, etc.). • Conduct 11 chieftdom and one district level consultations and focus group discussions to sensitize on community based surveillance priority disease/events. • Volunteers conduct monthly community meetings to support CBS activities. • Conduct monitoring, evaluation and learning including regular checks to ensure the information provided is reaching target audience and is relevant. • Conduct First Aid and Disaster Management training for five branches (50 volunteers). • Organize one annual Mothers Congress (250). • Volunteers provide support to Ministry of Health and Sanitation during national immunization days (three national immunization day campaigns per year). • Hold regular collaboration meetings with District Health Management Team (DHMT). • Monthly joint field visits with DHMT. • Weekly reports are completed and shared with the Public Health Unit (PHU) Officers-in-charge. • Monitoring and supervision of supervisors and volunteers to ensure proper reporting. |
| Outcome 1.2 Psychosocial interventions have contributed to enhanced psychosocial wellbeing of targeted communities. |
| Output 1.2.1 The Psychosocial (PS) interventions with a gender and diversity perspective designed based on the post-EVD needs. |
| Activities completed <ul style="list-style-type: none"> • Develop a three year PSS Strategic Plan. • Recruit, train and supervise five master PSS trainees/supervisors. • Develop a PS baseline assessment tool and conduct a PS baseline assessment including a Psychosocial First Aid (PFA) survey targeting all the SLRCS Volunteers. • Conduct baseline qualitative assessment and sensitizations to SLRCS Volunteers. • Cascade Community Based Psychosocial Support (CBPSS) refresher trainings at branch level for all PSS volunteers. |

¹ Some output, outcomes and activities were added, replaced or dropped from the previous revision; details can be found in the EPOA (changes made to Health, WASH, Livelihood, Nutrition, Food security; DRR; National Society capacity building and Quality Programming)

- Provide supervision, capacity building and refresher trainings for PSS Officers.
- Conduct CBPSS and “caring for volunteer” trainings to branch managers/supervisors.
- Conduct ToT of CBPSS (supervisors, PSS officers, PSS coaches).
- Conduct stress management and coping skills training for all SLRCS volunteers.
- Give 1:1 support to SLRCS volunteers as needed.
- Conduct year end evaluation of Skills retraining and reintegration programme.
- Provide Reskilling support to all EVD SLRCS volunteers.
- Conduct Sex and Gender Based Violence (SGBV) training to PSS Officers, CAR centre Advocates.
- Conduct listening skills study to get at core belief of communities.
- Recruit and train 14 PSS coaches.
- Establish a nation-wide working group of PS focal points.
- Supply 140 kiosks with two volunteers each and educational materials.
- Community based PSS & children’s resilience ToT training.
- Training of staff and volunteers on CBPSS and children’s resilience.
- Training on SGBV and violence prevention/protection.

Output 1.2.2 Psychosocial interventions provided to survivors, families staff and volunteers and orphans and other vulnerable children.

Activities completed

- Establish CBPSS groups at branch level.
- Conduct CBPSS activities for survivors and their families, staff and volunteers, and orphans and other vulnerable children.
- Cascade two-day CBPSS training for volunteers at branch level.
- Convene an annual nation-wide PS Focal Points Meeting (for 14 branches).
- Procure and distribute an additional 1,500 survivor kits.
- CBPSS volunteer groups conducting house-to-house visits to survivors.
- Activate Child Advocacy and Rehabilitation (CAR) centre programmes to provide support for survivors, orphans, and SGBV victims.
- Establish and put in use a nation-wide referral system for specialized care (mental services, child care facilities, child protection measures).
- Monthly monitoring and supervision.
- Organise football and volleyball competition with 50% female involvement.
- Procure recreational and PS materials.
- Children, youth, families /foster families are supported with quality PS daily activities in Red Cross friendly spaces.
- Organize quarterly radio discussions in target branches.

Activities in progress

- Conduct monitoring and supervision visits to operational branches.



Water, sanitation and hygiene

Outcome 1.4 Immediate reduction in risk of waterborne and water related diseases in targeted communities.

Output 1.4.1 Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.

Activities planned

- Conduct needs assessment: define hygiene issues and assess capacity to address the problem.
- Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).
- Develop, print and distribute adapted promotional materials for sanitation and hand washing.

Activities in progress or planned

- Participate in Global Hand Washing Day.
- Train WASH committees (170 people) in Participatory Hygiene and Sanitation Transformation (PHAST).
- Train 70 teachers and 140 students in Children’s Hygiene and Sanitation Training (CHAST).
- Implement PHAST in communities.
- Implement (CHAST) in schools.
- Training of Parent Teachers’ Association on WASH.





Livelihoods; Nutrition; Food security

Outcome 1.8 Food production increased by twenty per cent in the target communities in eight districts (Kailahun, Pujehun, Tonkolili, Port Loko, Bombali, Moyamba, Kono and Western Area Rural) by 2017.

Output 1.8.1 Target families to be supported with food production selected and trained.

Activities completed

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| <ul style="list-style-type: none"> • Conduct detailed needs assessments/baseline survey to determine the actual needs of beneficiaries selected for the food production project in each of the eight districts • Conduct training for selected farm family heads in each of the eight districts in collaboration with the Ministry of Agriculture on modern farming methods (100/district) |
| Output 1.8.2 Agricultural inputs and material provided to 800 target families in 2016 and 2017. |
| Activities completed <ul style="list-style-type: none"> • Organise stakeholders' meeting on initiating project implementation. • Rapid needs assessment and targeting beneficiaries in collaboration with stakeholders. • Register beneficiaries. • Select innovative (lead) farmers. • Training innovative (lead) farmers in improved agricultural practices. • Organise 2,000 beneficiaries into 80 farmers' groups. |
| Activities ongoing <ul style="list-style-type: none"> • Procure seeds and tools for 800 farm families in the eight districts. • Distribute seeds and tools to selected farm families in 25 communities per district. • Conduct project monitoring meetings with programme staff and branch managers. |
| Outcome 1.9 Communities in the four districts severely affected by EVD restore and enhance their quality of life with the assistance of livestock provided. |
| Output 1.9.1 EVD affected target beneficiaries provided with small animals (goats). |
| Activities completed <ul style="list-style-type: none"> • Organise 2,000 beneficiaries into 80 farmers' groups. • Procure 2,000 goats for 80 farmers' groups. • Distribute 2,000 goats to 80 farmers' groups. • Monitor post-distribution utilization of goats by 80 farmers' groups. |
| Outcome 1.10 Vocational skills and knowledge of EVD survivors, orphans, teenage mothers and SLRCS volunteers engaged in the EVD response improved through training and capacity building strategies. |
| Output 1.10.2 Vocational skills training and/or productive assets to improve income sources are provided to target population. |
| Activities completed <ul style="list-style-type: none"> • Provide support to selected volunteers to enhance their business development skills. • Select and recognize the best 160 business proposals (provide seed money for establishing micro-enterprises). • Organize financial inclusiveness training for volunteers (one-day training on savings and financial inclusiveness). • Support selected volunteers to undergo practical training and develop vocational skills. • Provide support to volunteers to undertake formal education (resumption of tuition/school fees). |
|  Disaster risk reduction |
| Outcome 1.12 Community Event-Based Surveillance (CEBS) functional enabling effective early warning for epidemics and natural disasters. |
| Output 1.12.1 CEBS established in five districts and key staff and volunteers trained. |
| Activities completed <ul style="list-style-type: none"> • Conduct joint SLRCS IFRC workshop (DM and Health) to identify, define and review CEBS triggers in health and natural hazards (EVD, cholera, measles, bush fire, floods, storms). Five training spread along the appeal period covering a total of 200 participants. • Master training of SLRCS and IFRC staff in the use of Magpi for CEBS every six months, three trainings, one per year. • Recruit, train and deploy at headquarters, one national SLRCS Magpi database manager to coordinate all data collection, analysis and mapping activities of the SLRCS. • Introduce CEBS to DHMT and establish CEBS implementation teams in 5 districts (Chiefdom prioritization and timeline). • Develop data collection tools and protocols using Magpi for digital data collection and management. • Develop and print reporting guidelines (booklets) for CEBS. |
| Activities planned <ul style="list-style-type: none"> • Roll-out DRR education programmes targeting eight schools (two per district) with established clubs. |
| Output 1.12.2 SLRCS and community volunteers trained on CEBS. |
| Activities ongoing <ul style="list-style-type: none"> • Monthly district-level monitoring visits. • Quarterly headquarters monitoring visits to district. |
| Output 1.12.3: Establish and sensitise communities on early warning system. |
| Activities completed <ul style="list-style-type: none"> • Organize external early warning workshop at national level for key stakeholders. • Ensure information exchange between neighbour branches cross-border (Guinea and Liberia) through exchange visits, meetings and regular communication (phone, email, sharing good practice etc.) |

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| <p>Activities ongoing</p> <ul style="list-style-type: none"> Participate actively in the National Surveillance, Early Warning/DRR Forums. |
| <p>Outcome 1.13 Capacity of SLRCS staff and volunteers strengthened to effectively and efficiently undertake disaster preparedness, response and recovery interventions is improved.</p> |
| <p>Output 1.13.1 Established and trained disaster response teams.</p> |
| <p>Activities completed</p> <ul style="list-style-type: none"> Establish Branch Disaster Response Teams (BDRT) consisting of 20 volunteers and staff in seven targeted branches. Train 140 BDRT members in disaster preparedness and response (including contingency planning, PSS and Beneficiary Communication) Train seven District Disaster Response Teams on response to epidemics and other disasters Identify and train community-based volunteers to form 103 Community Based Response Teams (CBRTs) in First Aid, disaster preparedness and response Conduct refresher training for 30 National Disaster Response Team (NDRT) members (once a year for five days) Establish and regularly update NDRT Roster <p>Activities planned</p> <ul style="list-style-type: none"> Train volunteers for search and rescue at sea (standby teams at beaches). Conduct one specialised NDRT training for 30 participants. Training of Community Based Disaster Management committees (CDMCs) in health disaster management especially for epidemic outbreaks (with CBHP). Emergency response volunteers are recruited, trained and appropriately equipped. |
| <p>Output 1.13.2 Contingency Plans (CP) developed at district and national level.</p> |
| <p>Activities completed</p> <ul style="list-style-type: none"> Develop Contingency Plan in seven districts prone to common epidemics and disasters Train seven District Disaster Management Committees (DDMCs) in CP Conduct Simulation exercises on contingency planning (seven exercises comprising of 100 community participants) <p>Activities in progress or planned</p> <ul style="list-style-type: none"> Update National Headquarters contingency plan (especially for elections) and conduct simulation exercise. Develop contingency plans and early warning systems for epidemic outbreaks for communities. Develop contingency plans and early warning systems for flood-prone communities in three branches. Conduct simulation exercise to practice activating contingency plans in communities with participation of stakeholders (e.g. RC, local authorities). Provide DRR promotional Information Education and Communication (IEC) materials for 30 communities in three branches. |
| <p>Output 1.13.3 Emergency response materials strategically pre-positioned where they can be easily deployed in case of an emergency.</p> |
| <p>Activities in progress</p> <ul style="list-style-type: none"> Procure and preposition materials for health emergency response at Red Cross branches and National Headquarters (e.g. water buckets, chlorine, gloves, burial kits with gowns and gloves). |
| <p>Outcome 1.14 DRR interventions reduce the risk of disaster and improve community resilience in targeted communities.</p> |
| <p>Output 1.14.1 The target communities are sensitized on risks and involved in their prevention.</p> |
| <p>Activities completed</p> <ul style="list-style-type: none"> Conduct detailed needs assessment/ baseline survey to identify most at risk communities to be targeted. Procure and distribute clean up tools and material to target communities in the 7 districts. Continuously support communities to improve drainage and build containment walls in flood prone communities. Distribution of emergency response IEC materials. Carry out community sensitisation campaigns of risks. Conduct radio broadcast once monthly in seven districts. Conduct TV broadcast / Media coverage in WU. Roll-out DRR education programmes targeting 42 schools (6 per district) with established clubs. Produce IEC material and radio - TV Public Service Announcements to carry out community sensitization campaign of risks. |
| <p> National Society capacity building</p> |
| <p>Outcome 1.15 The quality and performance of National Society leadership (governance and management) improved at all levels of SLRCS structures.</p> |
| <p>Output 1.15.1 Training and meetings of the leadership held according to statutory requirement and capacity building needs.</p> |
| <p>Activities completed</p> <ul style="list-style-type: none"> Organize and hold weekly management meetings. Conduct audits for branch accounts. |

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| <ul style="list-style-type: none"> Organize Branch Development and Fundraising Planning Workshop. Organise Branch Governance Experience Sharing Meeting. Branch Monitoring Visits. Update volunteer guidelines. Review duty and care protocols for volunteers with reference to lessons learnt from the EBD response. Organize bi-annual general assembly. Organize election of the Governing Board Executives. <p>Activities ongoing</p> <ul style="list-style-type: none"> Organize and hold eight meetings for 18 board and senior management staff. Facilitate leadership training in collaboration with the Africa Governance Group. Support Quarterly Branch Executive Statutory Meetings Leadership training for youth. |
| Outcome 1.16 Mass base of the National Society i.e. membership increased and used as the major venue to reach the grassroots population. |
| Output 1.16.1 Membership recruitment drive enhanced at all levels of the society. |
| <p>Activities completed</p> <ul style="list-style-type: none"> Reactivate operation 10,500 monthly to expand pool of fee paying Red Cross members. Establish and maintain volunteer / membership database system. Organize election of Branch Executives. Organize volunteer youth camp. Organize National Youth Executive Meeting. Organize election of Branch Youth Executives. <p>Activities planned</p> <ul style="list-style-type: none"> Conduct monthly regular awareness campaigns on RC principles and values. |
| Output 1.16.2 Membership and volunteer recognition mechanism in place. |
| <p>Activities completed</p> <ul style="list-style-type: none"> Develop a rewarding and recognition mechanism and system at all level of SLRCS structures. Organise annual membership events to recognise members (World Red Cross Day). Organise Veteran Red Crossers Meeting. <p>Activities planned</p> <ul style="list-style-type: none"> A national workshop to discuss volunteerism in Sierra Leone is organised and hosted by the RC. MoUs are signed with relevant ministries concerning SLRCS programmes. |
| Outcome 1.17 The resource base of the National Society widened with more resources mobilized. |
| Output 1.17.1 Viable income generating activities for the National Society established. |
| <p>Activities completed</p> <ul style="list-style-type: none"> Construction/Rehabilitation of Guest Houses 2016 – 2017. <p>Activities in progress</p> <ul style="list-style-type: none"> Construction of two Warehouses |
| Output 1.17.2 New and existing partnerships strengthened. |
| <p>Activities completed</p> <ul style="list-style-type: none"> Develop and establish new partnerships within country. Establish Project Development Committee at HQ. Participate in exchange visit for knowledge sharing. Convene Annual Partnership Meeting. Participate in Skill share workshop. Participate in Movement & Partnership forums. Assess National Society capacity using Organizational Capacity Assessment and Certification (OCAC) tool. <p>Activities ongoing or planned</p> <ul style="list-style-type: none"> SLRCS is supported to develop business plans for resource mobilisation activities. Support is provided to NS to plan and manage its partnership meeting. |
| Outcome 1.18 Financial accountability strengthened by a new financial system integrated into the National Society. |
| Output 1.18.1. Financial management system strengthened. |
| <p>Activities completed</p> <ul style="list-style-type: none"> Revise National Society financial manual by July 2016. Develop an Internal Audit Policy. Establish standard procurement Manual and procedures by August 2016. Conduct a Financial Management Training. Conduct quarterly Internal Audit and Control. External Audit. <p>Activities ongoing and planned</p> <ul style="list-style-type: none"> Conduct a Risk Management Workshop for senior management staff at headquarters. Develop and roll out an Anti-fraud policy. Finance management capacity assessment is undertaken. |

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| <ul style="list-style-type: none"> Finance management development plan of action is developed and implemented. |
| Output 1.18.2 Logistics structures built and procedures strengthened. |
| Activities completed <ul style="list-style-type: none"> Review and print Logistics Manual. Develop logistics quality control tools. Provide insurance policy for SLRCS assets. Renovate and equip SLRCS offices. Rent additional office space. Activities ongoing and planned <ul style="list-style-type: none"> IFRC strengthens the logistics capacity of the National Society through training and support. Three SLRCS warehouses are constructed in Waterloo, Bo and Makeni. All IFRC emergency stocks are transferred to SLRCS. |

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| Outcome 1.19 PMER and beneficiary communication systems, structures, tools and methodologies are strengthened in the National Society. |
| Output 1.19.1 PMER capacity improved at all levels of the organization. |
| Activities completed <ul style="list-style-type: none"> Dissemination of PMER guidelines and manuals. Develop reporting system for tracking 'reports due' and evaluations. Conduct PMER training. Organise quarterly planning & review workshop. |

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| Outcome 1.21 Improved human resource management system contributes to a sustainable and favourable work environment. |
| Output 1.21.1 The human resource recruitment and motivation system strengthened. |
| Activities completed <ul style="list-style-type: none"> Update Human Resource (HR) policy. Conduct staff satisfaction survey. Organise quarterly orientation sessions for staff. Organize stress management sessions. Conduct fraud and corruption training. Conduct training on general logistics procedures and practices. Activities ongoing or planned <ul style="list-style-type: none"> Disseminate policy documents: HR, Staff Handbook, Code of Conduct and Performance Appraisal. Establish and implement insurance policies. Conduct refresher training on record management. Conduct HR Monitoring visits. |
| Outcome 1.22 SLRCS' programmatic and operation objectives are supported. |
| Output 1.22.1 IFRC provides financial and technical support to SLRCS programmes and promotes good practice. |
| Activities ongoing or planned <ul style="list-style-type: none"> Technical support is provided by IFRC to SLRCS in key technical areas including FSL and PSS. IFRC provides funding for recovery activities based on agreed programme budgets. Reviews of IFRC supported programmes indicate adherence to good practice. |

In addition to the sectors above, the operation will be underpinned by a commitment to quality programming that involves:

- Continuous and detailed assessments and analysis to inform the design and ongoing implementation of the programme
- Ongoing process of adjustment based on these assessments
- The establishment of mechanisms to facilitate two-way communication with, and ensure transparency and accountability to, crisis-affected people
- Management and delivery of the programme will be informed by appropriate monitoring and evaluation.

The detail plan of action under quality programming is as follows:

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| Quality programming |
| Outcome 1.23: Enhanced Capacity of SLRCS Programme team to monitor, evaluate and report on programme implementation in a timely fashion. |
| Output 1.231: SLRCS programme delivery at branch level strengthened. |
| Activities ongoing <ul style="list-style-type: none"> Joint SLRCS programmes/PMER/finance monitoring to branches. |

- Supportive supervision by SLRCS HQ (programmes and finance) to branches.
- Data quality verification visits to branches by PMER unit.

Output 1.25.2: Learning and adopting quality standards tools in SLRCS programmes increased.

Activities completed

- Monthly/quarterly programme review meetings.
- Community feedback meetings on programmes.

Activities planned

- Joint mid-term and end-term evaluations exercises.
- Lessons learned workshop.



Budget

See attached IFRC Secretariat budget (Annex 1) for details.

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives.
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and **peace**.

Sierra Leone: Ebola Emergency Appeal

| Budget Group | Response | Recovery | GSL001 | Bilateral Response | Appeal Budget CHF | |
|------------------------------------------------------|----------------------------------------|-------------------|----------------|--------------------|-------------------|-------------------|
| 500 | Shelter - Relief | 211,800 | 0 | 0 | 211,800 | |
| 501 | Shelter - Transitional | 47,140 | 0 | 0 | 47,140 | |
| 502 | Construction - Housing | 0 | 0 | 0 | 0 | |
| 503 | Construction - Facilities | 175,000 | 0 | 0 | 175,000 | |
| 505 | Construction - Materials | 354,213 | 0 | 0 | 354,213 | |
| 510 | Clothing & Textiles | 560,700 | 0 | 0 | 560,700 | |
| 520 | Food | 326,224 | 0 | 0 | 326,224 | |
| 523 | Seeds & Plants | 0 | 305,687 | 0 | 305,687 | |
| 530 | Water, Sanitation & Hygiene | 2,353,974 | 30,345 | 17,196 | 2,401,515 | |
| 540 | Medical & First Aid | 4,734,351 | 4,480 | 437,917 | 5,176,748 | |
| 550 | Teaching Materials | 281,245 | 281,620 | 0 | 562,865 | |
| 560 | Utensils & Tools | 111,813 | 0 | 0 | 111,813 | |
| 570 | Other Supplies & Services | 364,520 | 0 | 0 | 364,520 | |
| 571 | Emergency Response Units | 0 | 0 | 2,424,000 | 2,424,000 | |
| 578 | Cash Disbursements | 5,850 | 0 | 0 | 5,850 | |
| Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES | | 9,526,830 | 622,132 | 455,113 | 2,424,000 | 13,028,076 |
| 580 | Land & Buildings | 0 | 0 | 0 | 0 | |
| 581 | Vehicles Purchase | 652,400 | 0 | 0 | 652,400 | |
| 582 | Computer & Telecom Equipment | 334,482 | 0 | 0 | 334,482 | |
| 584 | Office/Household Furniture & Equipment | 259,930 | 0 | 0 | 259,930 | |
| 587 | Medical Equipment | 0 | 0 | 0 | 0 | |
| 589 | Other Machinery & Equipment | 25,000 | 0 | 0 | 25,000 | |
| Total LAND, VEHICLES AND EQUIPMENT | | 1,271,812 | 0 | 0 | 0 | 1,271,812 |
| 590 | Storage, Warehousing | 1,614,880 | 0 | 15 | 1,614,895 | |
| 592 | Distribution & Monitoring | 2,899,611 | 0 | 173,218 | 3,072,829 | |
| 593 | Transport & Vehicle Costs | 6,647,263 | 0 | 0 | 6,647,263 | |
| 594 | Logistics Services | 573,000 | 0 | 44,272 | 617,272 | |
| Total LOGISTICS, TRANSPORT AND STORAGE | | 11,734,754 | 0 | 217,505 | 0 | 11,952,259 |
| 600 | International Staff | 7,216,418 | 72,000 | 32,337 | 7,320,755 | |
| 661 | National Staff | 228,000 | 0 | 0 | 228,000 | |
| 662 | National Society Staff | 6,973,670 | 23,000 | 0 | 6,996,670 | |
| 667 | Volunteers | 9,320,498 | 10,070 | 0 | 9,330,568 | |
| Total PERSONNEL | | 23,738,586 | 105,070 | 32,337 | 0 | 23,875,993 |
| 670 | Consultants | 323,171 | 0 | 9,000 | 332,171 | |
| 750 | Professional Fees | 311,000 | 0 | 0 | 311,000 | |
| Total CONSULTANTS & PROFESSIONAL FEES | | 634,171 | 0 | 9,000 | 0 | 643,171 |
| 680 | Workshops & Training | 2,817,949 | 117,198 | 0 | 2,935,147 | |
| Total WORKSHOP & TRAINING | | 2,817,949 | 117,198 | 0 | 0 | 2,935,147 |
| 700 | Travel | 1,075,812 | 0 | 18,468 | 1,094,280 | |
| 710 | Information & Public Relations | 1,315,404 | 0 | 0 | 1,315,404 | |
| 730 | Office Costs | 2,062,267 | 0 | 0 | 2,062,267 | |

| | | | | | | |
|-----------------------------------|-----------------------------------------------|-------------------|----------------|----------------|------------------|-------------------|
| 740 | Communications | 1,060,032 | 0 | 267 | 0 | 1,060,299 |
| 760 | Financial Charges | 100,000 | 0 | 198 | 0 | 100,198 |
| 790 | Other General Expenses | 83,722 | 0 | 2,840 | 0 | 86,562 |
| 798 | Depreciation | 645,419 | 0 | 0 | 0 | 645,419 |
| 799 | Shared Support Services | 60,311 | 0 | 0 | 0 | 60,311 |
| Total GENERAL EXPENDITURES | | 6,402,967 | 0 | 21,772 | 0 | 6,424,739 |
| 830 | Partner National Societies | 0 | | | | 0 |
| 831 | Other Partners (NGOs, UN, other) | 59,388 | | | | 59,388 |
| Total TRANSFER TO PARTNERS | | 59,388 | 0 | 0 | 0 | 59,388 |
| 599 | Programme and Supplementary Services Recovery | 3,652,120 | 54,886 | 47,822 | | 3,754,828 |
| Total INDIRECT COSTS | | 3,652,120 | 54,886 | 47,822 | 0 | 3,754,828 |
| 597/8 | Pledge Earmarking & Reporting Fees | 435,147 | 0 | 7,557 | 0 | 442,704 |
| TOTAL BUDGET | | 60,273,723 | 899,286 | 791,107 | 2,424,000 | 64,388,116 |
| Available Resources | | | | | | |
| | Multilateral Contributions | 59,498,770 | 398,392 | 791,107 | | 60,688,269 |
| | Bilateral Contributions | | | | 2,424,000 | 2,424,000 |
| TOTAL AVAILABLE RESOURCES | | 59,498,770 | 398,392 | 791,107 | 2,424,000 | 63,112,269 |
| NET EMERGENCY APPEAL NEEDS | | 774,953 | 500,894 | 0 | 0 | 1,275,847 |