



**World Health  
Organization**

Funding and managing  
humanitarian operations in countries: A Toolkit

**Soliciting ECHO funding support and ensuring the effective  
administrative and financial management of ECHO grants**

Guidance note



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## 1. INTRODUCTION

### 1.1 Purpose of this document

This document:

- Provides basic guidance for WHO country offices (WCOs) that manage WHO projects funded by the European Commission's Directorate-General for Humanitarian Aid and Civil Protection (ECHO).
- Focuses on **programmatic and financial** implementation, monitoring and reporting for ECHO projects.
- Sets out the key points to bear in mind when drafting ECHO project proposals, monitoring project activities, expenditures and targets, and preparing intermediate and final reports.
- Does **not** address the public health aspects of implementing and monitoring ECHO projects.
- Contains links to ECHO's web site and other sources where WCOs can obtain more detailed information.

### 1.2 Criteria for WCOs wishing to apply for ECHO funding

ECHO is one of the world's largest humanitarian donors. It also has some of the most rigorous requirements for project proposals. The submission of a WHO project proposal is the first step in a demanding process in which WHO is scrutinized at every phase. Only solid projects with attainable results (based on WHO's existing, proven capacity to deliver) should be submitted to ECHO for funding consideration.

#### Risks related to ECHO funding

ECHO reviews WHO's final project reports in detail to assess the extent to which project objectives have been attained and targeted beneficiaries have been reached. It also scrutinizes all project expenditures to ensure that funds have been spent in accordance with approved budgets. If ECHO deems that objectives have not been achieved or that funds have not been used appropriately, **it may ask WHO to refund all or part of the contribution**. Over the past few years, WHO has had to refund almost \$200,000 to ECHO. As a result, WHO has had to identify funds from other sources to cover the cost of expenditures that were rejected by ECHO as ineligible.

Given the strategic importance of WHO's relationship with ECHO, WHO must review all ECHO project proposals carefully with a view to ensuring that the Organization is able to deliver the planned results and prepare detailed reports within tight deadlines. This is essential to minimize WHO's reputational risk.

#### Criteria for applicants

In light of the above, WCOs that wish to apply for ECHO funding must:

- Confirm that they have the capacity to deliver ECHO projects on time and achieve the anticipated results set out in project proposals.
- Designate financial, logistic, technical/public health and grant management focal points to manage specific ECHO projects throughout the project cycle (from development of proposals to the submission of final reports).
- Ensure that these focal points have completed ECHO's online training modules (see [section 11.1](#) of these guidelines).
- Share project proposals with the RO and HQ at an early stage (see list of focal points in [section 11.5](#)).
- Allow sufficient time for a thorough review at RO and HQ levels.
- Confirm they will be able to liquidate project encumbrances by the deadline for submitting final reports to ECHO (three months after the end of the implementation period of ECHO projects).
- Agree to manage, monitor and report on ECHO projects in line with the present guidelines and the terms and conditions of contribution agreements<sup>1</sup> signed between WHO and ECHO.

### 1.3 Critical factors for successful projects

Following the basic rules below will increase WCOs' chances of successfully managing ECHO-funded projects:

1. **Ensure your proposal is concise (but comprehensive), clear and consistent :**
  - No more than two results (one is better!)
  - Aligned with ECHO's Humanitarian Implementation Plans
  - Well drafted

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<sup>1</sup> Agreements signed between ECHO and WHO are officially called "Indirect Management Delegation Agreements". For ease of reference, they are called "contribution agreements" throughout these guidelines.

- 2. Keep ECHO informed throughout the implementation of the project.** WCOs should remain in in close contact with ECHO focal points in the field and keep them informed of project progress, including even minor changes. In addition to remaining in regular contact with ECHO counterparts at field level, WCOs should prepare formal reports (on the PDF eSingle Form) documenting project changes and send them to HQ for submission to ECHO headquarters in Brussels (see point 5 below). For ECHO, transparency is crucial to build trust.
- 3. Track project beneficiaries.** ECHO will judge the success of projects according to whether the planned numbers of targeted beneficiaries have been reached and results have been achieved.
- Direct beneficiaries can be counted, or theoretically tracked, at the individual level (even if this is not done in practice). A direct beneficiary is defined as someone who personally benefits from the project (for example, a patient treated by a physician who is fully or partially paid under the project, or a health care worker who attends training courses under the project).
  - Indirect beneficiaries are the populations covered or potentially covered by the project. (For example, people who are in good health but who can be treated under the project if they fall ill.)
  - Beneficiary counts must be accurate and WCOs must have concrete proof to support their figures. If WCOs have no alternative to calculating beneficiaries other than by extrapolation, they should be sure that the methodology they use is sound and cannot be challenged.
  - When preparing project proposals, it is a good idea to underestimate the number of targeted beneficiaries by around 10 to 20%. Thus at the final reporting stage WCOs will be reasonably sure to reach their goals most of the time without exceeding their targets by a wide margin (which ECHO will also query).
- 4. Monitor all aspects of ECHO projects to ensure they remain on track.** WCOs should nominate focal points to monitor all aspects of project implementation, from tracking indicators to monitoring procurement and project finances and ensuring that activities are implemented according to schedule. For more information and guidance on monitoring, see [section 6.2](#) of these guidelines. Module 4 of the "[Funding and Managing Emergency Operations in Countries](#)" toolkit<sup>2</sup> on WHO's Intranet site contains useful monitoring templates.
- 5. Know when to submit reports to ECHO.** See table below.

Submitting reports to ECHO		
Type of report	Conditions	When to submit
<b>Non-essential changes</b>	Submitted whenever there are minor changes to the project (e.g., change in activity, implementing partner(s), supplies procured).	Can be submitted at any time.
<b>Modification request</b>	Submitted for: <ul style="list-style-type: none"> <li>▪ Requests to extend the implementation period of ECHO grants.</li> <li>▪ Requests for additional funding from ECHO.</li> <li>▪ Changes to: <ul style="list-style-type: none"> <li>✓ Title (ECHO will approve only in exceptional cases)</li> <li>✓ Principal objective (ECHO will approve only in exceptional cases)</li> <li>✓ Specific objective (ECHO will approve only in exceptional cases)</li> <li>✓ Indicators</li> <li>✓ Beneficiaries</li> <li>✓ Results</li> <li>✓ Area of implementation</li> <li>✓ Reporting requirements</li> </ul> </li> </ul>	Can be submitted at any time, but no later than one month before the end of implementation.
<b>Intermediate report</b>	Normally required for grants with an implementation period of more than 10 months.	No later than 3 months before the end of implementation.
<b>Final report</b>	Required for all ECHO grants. As the report is an integrated technical and financial report, all encumbrances must be cleared before the report can be submitted to ECHO.	No later than 3 months after the end of implementation.

- 6. Demonstrate results.** ECHO will scrutinize how the money has been spent, but above all, it wants to see results.

<sup>2</sup> Referred to as "the toolkit" throughout the remainder of this document.

## 1.4 RO and HQ support

WHO's regional offices (ROs) and HQ provide close support to WCOs throughout the ECHO project cycle.

**ROs** are responsible for the **public health aspects** of ECHO grants. This includes:

- Reviewing and clearing the public health content of ECHO project proposals.
- Providing public health support, advice and back-up throughout the project life-cycle (including reviewing and clearing intermediate and final technical reports).

**HQ** is responsible for the **financial and administrative aspects** of ECHO grants. This includes:

- Working with WCOs to finalize project proposals and budgets.
- Uploading project proposals, modification requests, intermediate and final reports and annexes in APPEL (ECHO's online system for managing project proposals submitted for funding consideration).
- Negotiating and signing ECHO-WHO contribution agreements and project amendments; requesting the creation of awards; processing award modifications.
- Supporting financial monitoring throughout the implementation period of ECHO grants.
- Liaising with ECHO headquarters in Brussels to convey information to and from WCOs (e.g., requests for complementary information) and help resolve administrative and programmatic issues.
- Supporting the preparation of intermediate and final financial reports, in close collaboration with WCOs.

### Key points section 1

- ✓ Project proposals for ECHO should be in line with the priorities set out in ECHO's financing decisions and Humanitarian Implementation Plans.
- ✓ A well-designed logical framework is key to a successful project.
- ✓ Meticulous, methodical, continuous monitoring of ECHO project activities and finances is essential to enable WHO to prepare detailed intermediate and final reports that comply with ECHO's stringent reporting requirements.
- ✓ Being able to demonstrate that the planned number of beneficiaries has been reached, and results have been achieved, is key to the success of ECHO projects.
- ✓ WCOs must keep ECHO focal points in the field informed of project progress and project changes, even minor, throughout the implementation period.
- ✓ Good management of expenditures under ECHO grants is essential. ECHO will not reimburse expenditures that are not eligible under the terms and conditions of contribution agreements signed between WHO and ECHO. (See [section 6.3](#) of these guidelines.)
- ✓ When preparing financial reports to ECHO, WHO is required to report on costs incurred per result. The Global Management System (GSM) does not have project management software that allows WHO to map expenditures against the results set out in ECHO project proposals. Therefore, WCOs will need to monitor project expenditures separately. Alternatively, WCOs may use the contribution budget facility in the GSM to map expenditures against approved budgets. See FIN.SOP.IV.051 in the eManual on the WHO Intranet site.
- ✓ ECHO project finances cannot be managed by financial staff working in isolation. For example, it is the responsibility of technical focal points to match expenditures to results. Designated technical and financial focal points should work hand in hand to manage project finances.
- ✓ WCOs should prepare modification requests for ECHO as soon as it becomes clear that projects will need to be reprogrammed. See [section 7](#) of these guidelines.
- ✓ Final reports must be submitted to ECHO three months after the end of the implementation period of projects. WCOs must ensure that all encumbrances are cleared before this deadline.
- ✓ For multi-donor projects, WHO must declare and report on expenditures incurred using other donor contributions, not just those incurred using ECHO funds.
- ✓ ECHO reviews final reports in detail to ensure that expenditures are eligible for reimbursement (i.e., fully incurred within the implementation period of ECHO projects).
- ✓ To enable ECHO to determine whether expenditures are eligible, WHO must provide information on:
  - total costs incurred per result
  - a financial statement annexed to the PDF eSingle Form, providing a breakdown consistent with the budget of the Action.
- ✓ ECHO pays 80% of its contribution in advance, and the remaining 20% upon receipt and verification of final reports. If ECHO determines that some expenditures are not eligible for reimbursement, it will deduct these amounts from the balance of 20% due to WHO.
- ✓ WCOs are liable for project expenditures that ECHO deems are non-eligible. WCOs will have to identify funds from other sources to cover these expenditures.
- ✓ It is not enough to ensure that expenditures are aligned with approved budgets. WHO must be able to demonstrate that it has attained the expected results set out in project proposals.

## 2. HOW ECHO FUNDING WORKS

### 2.1 ECHO financing decisions

- ECHO is the world's largest humanitarian donor, with an annual budget of up to one billion Euros.
- All ECHO's contributions are based on "financing decisions". Financing decisions are legal acts adopted by the European Commission in order to authorize ECHO to spend from the EU budget and grant funding to partners for humanitarian projects. **It is not possible for ECHO to donate funds or sign contribution agreements that are not covered by a financing decision of one kind or another.**
- ECHO financing decisions are based on detailed needs assessments carried out by ECHO staff in countries.
- There are five types of financing decisions:

Type of financing decision	Description	Timeframe for implementing projects
<b>Worldwide decision</b>	<ul style="list-style-type: none"> <li>▪ Adopted on a yearly basis.</li> <li>▪ Includes information on ECHO's global humanitarian priorities, overall funding envelope, specific objectives and the funding envelope for each one.</li> <li>▪ Covers all humanitarian actions the European Commission expects to fund during a given period, as explained in ECHO's Annual Strategy.</li> </ul>	Valid for 24 months.
<b>Non-emergency</b>	<ul style="list-style-type: none"> <li>▪ Addresses long-lasting crises and disaster preparedness.</li> </ul>	Normally 12-15 months. With the exception of suspensions during project implementation, projects cannot be extended beyond the duration of ECHO's financing decision.
<b>Emergency</b>	<ul style="list-style-type: none"> <li>▪ To respond to a deterioration of an existing crisis (a crisis within a crisis).</li> </ul>	6 months with no possibility of an extension
<b>Primary emergency</b>	<ul style="list-style-type: none"> <li>▪ Used for sudden outbreaks and new crises.</li> <li>▪ Project proposals must be submitted to ECHO no later than five days after the start date of the crisis.</li> </ul>	3 months with no possibility of an extension
<b>Epidemic</b>	<ul style="list-style-type: none"> <li>▪ Used for communicable disease outbreaks.</li> </ul>	Up to 12 months

### 2.2 Humanitarian Implementation Plans (HIPs)

The HIPs are:

- ECHO's **key publications (the means by which it informs partners of ECHO's humanitarian priorities and funding allocations per country or crisis).**
- Composed of two documents: the HIP itself and its technical annex.
- Derived from ECHO's Worldwide financing decisions.
- Issued annually (cover the period 1 January to 31 December each year).
- Published on DG ECHO's website at [http://ec.europa.eu/echo/funding-evaluations/funding-decisions-hips\\_en](http://ec.europa.eu/echo/funding-evaluations/funding-decisions-hips_en).
- Usually country-specific (one HIP per country)<sup>3</sup>.

**QUICK TIP:** WCOs can influence the content of HIPs by attending ECHO's in-country annual consultations and advocating for the importance of health in emergencies.

The **HIP** contains an overview of the crisis:

- Context

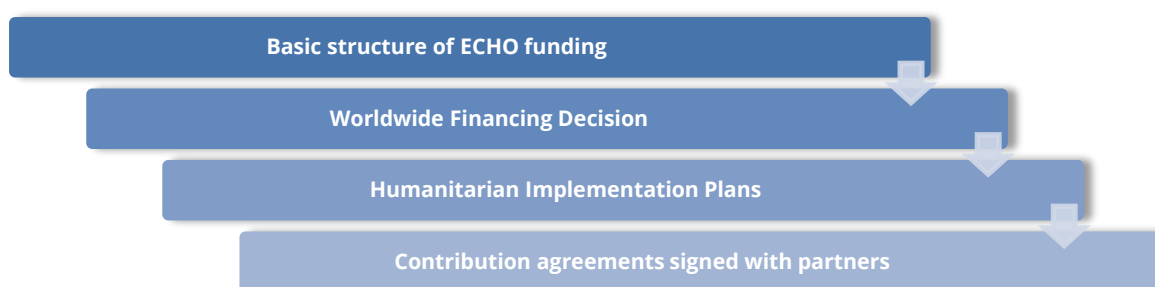
<sup>3</sup> HIPs can be regional depending on the context. Recent examples include the HIP for the Horn of Africa, or the one for Syria which includes neighbouring countries.

- Number and profile of beneficiaries
- Analysis of humanitarian needs by sector
- ECHO's envisaged response and expected results of humanitarian aid interventions (see section 3.4 of the HIP). Section 3.4 is particularly important, since it contains detailed information on the areas of intervention that ECHO will prioritize for funding.

The **technical annex** contains financial, administrative and operational information on:

- The overall amount allocated by ECHO to the country or crisis
- The duration of the project<sup>4</sup> and the date on which costs become eligible
- The deadline for submitting proposals
- The agencies that are eligible for funding (sometimes only specific agencies or NGOs are encouraged to apply)
- ECHO's assessment criteria for proposals
- ECHO's operational priorities
- The overall principles guiding the humanitarian interventions to be implemented
- The contact details of the ECHO focal points
- Procedures for the allocation of funds
- The number of assessment rounds envisaged.

**Only proposals that are closely aligned with the priorities set out in the HIPs will be funded by ECHO**



### 2.3 ECHO in the field

- ECHO has 6 regional and 48 local offices in over 40 countries. See [ECHO's web site](#) for more information.
- Around 150 international ECHO staff (known as "Technical Assistants") work at country level. Their role is to assess humanitarian needs in countries, liaise with humanitarian partners, and monitor the implementation of ECHO-funded projects.
- WCOs that wish to apply for ECHO funding should get in touch – and remain in close contact - with ECHO Technical Assistants in countries. These Technical Assistants will guide and advise WHO staff on ECHO's country-specific priorities and objectives, and the formulation of project proposals.
- Technical Assistants play an **advisory role** in the proposal review process. They are not authorized to make funding decisions. The final decision on whether to finance projects lies with ECHO headquarters in Brussels, which relies on information from the Technical Assistants in countries. **Building relationships between WHO and ECHO staff in the field, and keeping ECHO informed at all stages of ECHO projects – from proposals through to final reports - is critical to the success of WHO projects funded by ECHO.**



<sup>4</sup> In ECHO's terminology, projects are referred to as "Actions". For ease of reference, the term "project" is used throughout the present guidelines.

### Key points section 2

- ✓ WCOs must be aware of the type and content of financing decisions issued by ECHO (this will influence the timing and content of project proposals).
- ✓ ECHO's annual Humanitarian Implementation Plans (HIPs) are usually organized by country. Depending on the context, they can also be regional (e.g., the HIP for Syria which addresses needs in Syria and surrounding countries).
- ✓ Each HIP contains essential information on humanitarian needs in the country, ECHO's response priorities, and the amount of funding that ECHO is making available.
- ✓ WCOs can influence the content of HIPs by attending ECHO's in-country annual consultations and advocating for the importance of health in emergencies. WHO's visibility and active participation at the HIP planning stage will help build close relations with ECHO and show that WHO is a serious and committed partner.
- ✓ WCOs should ensure that project proposals are closely aligned with the objectives and priorities set out in ECHO financing decisions and/or HIPs. This will greatly increase their chances of being funded.
- ✓ WCOs should maintain close contact with ECHO focal points (Technical Assistants) in the field, who can advise them on ECHO's humanitarian priorities and the formulation of ECHO project proposals.
- ✓ The final decision on whether to fund project proposals lies with ECHO headquarters in Brussels.

### 3. ECHO FINANCING MODALITIES

#### 3.1 100% vs multi-donor

ECHO has two financing modalities:

- **Multi-donor financing:** ECHO and other donors contribute to the project. Multi-donor financing is the standard option.
- **100% financing:** the project is funded solely by ECHO. ECHO will approve 100% financing for UN agencies only in rare and exceptional cases.

Note that only two donors (ECHO and one other) are required for a grant to be considered multi-donor. In the absence of other donors, WHO itself can be considered as a donor (for example, by providing office space or secretarial support for the project).

The table below sets out the main differences between the two financing modalities.

	Multi-donor financing modality	100% financing modality
<b>Criteria</b>	<ul style="list-style-type: none"> <li>▪ ECHO's contribution is not conditional on other donors' pledges but conditional on the achievement of results. (In other words, WHO must be able to deliver the anticipated results even if other donor funding does not materialize.)</li> <li>▪ ECHO's contribution is expressed as a fixed amount, not a percentage of overall costs.</li> <li>▪ WHO must treat ECHO and other donors on an equal basis.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Project is urgent, and a priority for ECHO.</li> <li>▪ No other donors are available.</li> <li>▪ Request for full financing is justified in the project proposal.</li> <li>▪ <b>Note that 100% financing is unlikely to be approved by ECHO. This option should be selected only in rare and exceptional cases.</b></li> </ul>
<b>Supplies and equipment purchased using ECHO funds</b>	<ul style="list-style-type: none"> <li>▪ WHO may decide what to do with the remaining equipment provided that it is used to the benefit of humanitarian aid.</li> <li>▪ WHO must report on the end use of the equipment in its final report to ECHO.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Supplies must be donated at the end of the project to either project beneficiaries, local implementing partners or local authorities.</li> <li>▪ If the project continues, WHO can ask ECHO for permission to use the equipment for the next phase of the project.</li> </ul>
<b>Notional approach</b>	<ul style="list-style-type: none"> <li>▪ Notional approach applies (see <a href="#">section 9.5.1</a> of these guidelines).</li> </ul>	<ul style="list-style-type: none"> <li>▪ Notional approach does not apply.</li> </ul>
<b>Publication of information on contractors and implementing partners</b>	<ul style="list-style-type: none"> <li>▪ WHO is allowed to follow its own rules for the publication of information on procurement and grants awarded, provided it ensures due observance of the requirements of proportionality, confidentiality and security.</li> </ul>	<ul style="list-style-type: none"> <li>▪ WHO must publish on an annual basis information on procurement contracts exceeding EUR 15,000 and all grants financed by the EU.</li> </ul>
<b>Final financial report</b>	<ul style="list-style-type: none"> <li>▪ WHO reports on expenditures incurred using funds from ECHO and other donors.</li> <li>▪ All expenditures, including those incurred with other donors' contributions, must be eligible. (See <a href="#">section 6.3</a> of these guidelines.)</li> </ul>	<ul style="list-style-type: none"> <li>▪ WHO reports on expenditures using ECHO funds only.</li> </ul>
<b>WCO action</b>	<ul style="list-style-type: none"> <li>▪ At the project proposal stage, send HQ a list of the other donor contributions (and their award numbers) that will be used to co-fund the project.</li> <li>▪ HQ will use this information to help the WCO prepare the multi-donor budget and the subsequent financial monitoring workbook for the project (See <a href="#">section 4.13.2</a> of these guidelines.)</li> </ul>	N/A

### Key points section 3

- ✓ Multi-donor is ECHO's standard financing modality. 100% financing is approved only in rare and exceptional cases.
- ✓ The financing modality is set out in the **contribution agreement** signed between ECHO and WHO ([see section 5](#) of these guidelines). The financing modality cannot be changed at a later stage.
- ✓ Multi-donor grants give WHO more flexibility (e.g., no need to donate equipment at the end of the project).
- ✓ Only two donors (i.e., ECHO and one other) are required for a grant to be considered multi-donor.
- ✓ WHO itself can be considered as a donor. For example, if the salary of the WHO staff member managing the project is paid by WHO, or if WHO provides office space or secretarial support, the project can be considered as a multi-donor grant. WHO must include the monetary value of its contribution in the project proposal, and report on it in its financial reports to ECHO.
- ✓ To facilitate financial monitoring, WCOs must identify the co-funders (and the corresponding award numbers) at the beginning of the project, and share this information with HQ.
- ✓ Financial reports for multi-donor grants should include all eligible expenditures from both ECHO and other donors that contributed to the project.

## 4. ECHO PROPOSALS

### 4.1 Overview

ECHO proposals are:

- Prepared on ECHO's standard proposal format, the [PDF eSingle Form](#).
- Drafted and validated by WCOs. (See [section 4.5](#) below.)
- Forwarded by WCOs to HQ for final review and submission to ECHO.
- Submitted by HQ to ECHO through ECHO's online project management system, known as [APPEL](#)<sup>5</sup>. Only HQ staff with designated user rights are allowed to upload project proposals in APPEL. See [section 11.5](#) for a list of HQ staff with uploading rights.

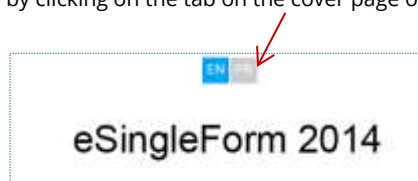
HQ is responsible for downloading the latest version of the PDF eSingle Form from APPEL and sending it to WCOs on request. HQ does not accept ECHO proposals in any other format.

### 4.2 Critical factors for successful proposals

1. Make sure that project proposals are closely aligned with the health objectives and priorities set out in ECHO financing decisions and/or HIPs. This will greatly increase their chances of being funded.
2. Consult ECHO's [Health Technical Guidelines](#) and standard logical frameworks (see sections [11.3](#) and [4.8](#) of these guidelines F9.5.1) to ensure that you are on track and your project is aligned with ECHO's guidance.
3. Keep the ECHO Technical Assistants in the field closely involved and consult them at every stage of proposal development.
4. Under-estimate the number of planned targeted beneficiaries by 10 to 20%. You will then be reasonably sure of reaching your targets.
5. Limit the number of results and indicators in ECHO proposals. This greatly facilitates subsequent implementation, monitoring and reporting.

### 4.3 The PDF eSingle Form

- Project proposals for ECHO are prepared on the PDF eSingle Form, a detailed, fully automated project proposal template.
- It is called the "Single Form" because the same form is used and updated throughout the project life-cycle, from the preparation of the proposal to the submission of the final report. This allows ECHO to compare planned and actual achievements using one single document.
- The form can be completed in either English or French. Select the desired language by clicking on the tab on the cover page of the form.



**QUICK TIP:** ECHO's online training course on the PDF eSingle Form guides applicants through the process of completing the form. The course takes about an hour to complete. Prior registration is required. All WHO staff involved in writing, implementing and reporting on ECHO grants are required to take this course.

- All sections of the form have to be completed, with the exception of section 13 (Conclusions and Comments), which is optional.
- The PDF eSingle Form is complex and requires applicants to think through every aspect of their projects in great detail. The form should be clear and concise but contain the level of detail required by ECHO.
- ECHO's [Single Form Guidelines](#) contain detailed advice and instructions for partners on how to complete proposals on the PDF eSingle Form.

<sup>5</sup> APPEL contains the complete archives of all WHO project proposals submitted to ECHO for funding consideration since 2010. This includes both accepted and rejected proposals, intermediate and final reports, and all supporting documents. WCOs cannot upload documents in APPEL but can obtain reader rights (provided they have completed ECHO's online training courses) upon request to WHO/HQ. See list of HQ focal points in [section 11.5](#).

- The form has a limited number of bytes per field. (Note that characters, spaces and formatting (e.g., bold font) all count as bytes.) Fields that exceed the allocated number of bytes cannot be validated. When the number of bytes has been exceeded, the form will display a red frame around the box. Additional text can be included as an annex to the proposal.
- The form does not allow for the creation of tables. These must be prepared separately and uploaded as annexes.
- The form requires Adobe Acrobat software (Version 9 or above). Adobe Acrobat can be installed for free via the Internet.
- The form includes a “notes” function that allows reviewers to insert comments and observations. To activate this function, click “notes” on the cover page of the form. The notes are not shown in the final version of the form that is uploaded by WHO in APPEL.

#### 4.4 Different types of PDF eSingle Form

There are three different versions of the PDF eSingle Form:

- The full PDF eSingle Form for non-emergency projects. This is the version that is used for WHO projects.
- A form adapted for projects that aim to respond to a complementary project. (Note that this option is rarely used.)
- A simplified PDF eSingle Form aimed at responding to an urgent project or small scale disaster<sup>6</sup>.

#### 4.5 Validating the PDF eSingle Form

- The PDF eSingle Form has a built-in validation function that allows WHO to ensure that all parts of the form are complete, coherent and complementary.
- APPEL automatically rejects any proposals that have not been validated. Therefore, WCOs must ensure that sections 1 to 9 of ECHO proposals are validated **before** they send them to HQ for uploading in APPEL. (HQ will work with WCOs to complete sections 10 through 13.)
- WCOs must send draft proposals to the RO and HQ for review and clearance at least one week before submission deadlines. The public health and administrative focal points in WCOs should work together to ensure that 1) PDF eSingle Forms and their annexes are complete, complementary and accurate, and 2) the technical and financial components of project proposals are aligned.
- When validating PDF eSingle forms, select the “validate and export XML” option on the last page. This page will display a list of the fields that have not been validated. WCOs should complete any blank fields in sections 1 through 9 before submitting forms to the RO and HQ.

**QUICK TIP:** The easiest and quickest way to check the form is to validate each section as it is completed. This allows users to quickly locate and rectify errors instead of having to go through the entire proposal.



#### 4.6 Problems uploading the PDF eSingle Form

ECHO’s IT support team is available during normal office working hours to help users who have difficulties uploading forms and annexes in APPEL. The team responds to requests within the hour. It can be contacted via e-mail at the following address: [ECHO-IS-SUPPORT@ec.europa.eu](mailto:ECHO-IS-SUPPORT@ec.europa.eu).

#### 4.7 Completing the proposal, section by section

<b>1. General information</b>	<b>1.2 Title of the Action</b>	The title should be general enough to avoid future amendment. (While previously the title was one of the elements that could not be changed, ECHO has recently modified its rules, and it is now possible to revise the title.)
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<sup>6</sup> Small-scale humanitarian response to disasters: affected population is less than 100,000 and ECHO’s funding per intervention is capped at € 300,000.

	<b>1.3 Narrative summary</b>	Provide a brief description of the planned project. ECHO will use the information in this section to prepare briefings or reports about the project. The text should be factual, concise and compelling.
	<b>1.5 Dates and duration of the Action</b>	If you have incurred expenditures before the beginning of the project, please insert the relevant date. The earliest possible eligibility date is indicated in the Technical Annex of the relevant HIP. When an earlier date is entered, a new field appears asking WHO to justify the request for an earlier start date for expenditures (e.g., to set up offices, procure urgent supplies...).
<b>2. Humanitarian organization in the area</b>	<b>2.1 Presence in the area</b>	Provide <b>succinct</b> information about WHO's presence in the country (number of years, type of work implemented, number of offices and staff, collaboration with partners...). This will allow ECHO to assess whether WHO has the in-country experience and operational capacity to implement the project activities.
	<b>2.2 Synergies with other actions</b>	This section is <b>optional</b> . Its purpose is to explain how the projects fits into the bigger picture and links to related projects. Please also describe potential synergies with other initiatives and/or major donors.
<b>3. Needs assessment and beneficiaries</b>	<b>3.1 Needs and risk analysis</b>	<p>ECHO pays close attention to this section as it considers that recent, high-quality needs assessments are vital to the success of the project. ECHO will check whether needs assessments have been done in a timely manner, the information is reliable, and WHO has identified potential risks.</p> <p>The needs assessment(s) conducted by WHO should be aligned with ECHO's own evaluation of needs outlined in the relevant HIP. WHO may provide a copy of the assessment report as an annex. However, the information provided in section 3.1 has to be sufficiently self-explanatory to stand on its own.</p> <p>WHO is required to:</p> <ol style="list-style-type: none"> <li>1) Give <b>the date</b> of its latest needs assessment (section 3.1.1).</li> <li>2) Provide information on the assessment methodology used (section 3.1.2): <ul style="list-style-type: none"> <li>✓ By whom the assessment was conducted, how and in what conditions.</li> <li>✓ Whether the assessment was joint/coordinated, and whether it was shared with other partners.</li> <li>✓ Whether the assessment used direct or indirect sources of information (primary or secondary data) and whether the information was confirmed through a field visit.</li> <li>✓ Which tools were used (e.g., the MIRA).</li> </ul> </li> <li>3) Analyse the main problems, needs and risks associated with the project (section 3.1.3): <ul style="list-style-type: none"> <li>✓ Describe the main problems and needs identified by the needs assessment, establishing cause/effect relationship.</li> <li>✓ Explain how the problem analysis is in line with ECHO's own analysis and strategy for the country.</li> <li>✓ Provide a brief gender and age analysis including an assessment of different age groups and genders; the effects of the crisis on each group; their level of access to humanitarian assistance, their specific needs and coping capacities.</li> <li>✓ Include cross-cutting issues (e.g., natural hazards, protection), especially when those issues are highlighted in the funding decision/HIP.</li> <li>✓ Explain the underlying risk factors linked to the crisis (e.g., likelihood of increase in humanitarian needs due to the disaster, conflict or disease outbreak; foreseen trends and potential negative effects/risks).</li> </ul> </li> <li>4) Outline its strategy to address the identified problems (section 3.1.4): <ul style="list-style-type: none"> <li>✓ Explain how the proposed response addresses the specific needs of the affected population and briefly explain why other strategies were not chosen.</li> <li>✓ Explain how the proposed response addresses the needs of the affected population and is coherent with the priorities defined in ECHO's funding decision/HIP.</li> </ul> </li> <li>5) Describe previous evaluations relevant to the project (section 3.1.5).</li> </ol> <p>This section is <b>optional</b>. It is an opportunity to inform ECHO about WHO's capacity to adjust its operations based on lessons learned and briefly present the results of previous evaluations/lessons learned relevant to the operation. WHO can include copies of previous evaluation reports as annexes.</p>

	<b>3.2 Beneficiaries</b>	This section is critically important, since at the final reporting stage ECHO will judge the project's success according to whether the planned number of beneficiaries has been reached. It is a good idea to <b>underestimate the targeted beneficiaries by around 10 to 20%</b> . Thus, at the final reporting stage you will be reasonably sure of reaching your goals without exceeding your targets by a wide margin (which ECHO will also query).
	<b>3.2.1 (estimated total number of direct beneficiaries targeted by the project)</b>	<p>The number of direct beneficiaries in section 3.2.1 must match the number in section 4.3.</p> <p><b>Direct beneficiaries</b> are defined as people who personally benefit from the project. For example:</p> <ul style="list-style-type: none"> <li>✓ A patient treated by a physician who is fully or partially paid under the project.</li> <li>✓ Health care workers who are trained under the project.</li> <li>✓ Children who are vaccinated under the project.</li> </ul> <p>The underlying principle to estimating beneficiary counts is that WHO must be able to explain how it arrived at its planned and final numbers of beneficiaries and show that its methodology is sound.</p> <p>By way of an example: WHO has included WASH activities in the project, including 1) distributing sterilization tablets, buckets and soap and 2) rehabilitating the water supply network in a given location.</p> <ul style="list-style-type: none"> <li>✓ For the distribution of WASH supplies, you will need to have a solid methodology to convert the number of WASH supplies distributed into people (e.g., converting the number of sterilization tablets into the number of litres of water sterilized and the number of litres required per family, and converting those numbers into people).</li> <li>✓ When rehabilitating the water supply network in a given area with an established population coverage, you can include the entire population as direct beneficiaries.</li> </ul> <p><b>Indirect beneficiaries</b> are defined as the populations who could potentially benefit from the project but do not necessarily do so. For example:</p> <ul style="list-style-type: none"> <li>✓ People who are in good health but who can be treated under the project if they fall ill.</li> <li>✓ People who are not vaccinated during mass vaccination campaigns, but who benefit from herd immunity.</li> <li>✓ People who may or may not hear health promotion messages broadcast by radio or television. (If in a subsequent survey WHO is able to identify the proportion of people who heard these health promotion messages and subsequently changed their health behaviour, it can convert that proportion to numbers, which can then be counted as direct beneficiaries.)</li> </ul>
<b>3. Needs assessments and beneficiaries</b>	<b>3.2.2 (estimated disaggregated data about direct beneficiaries)</b>	<p>ECHO recognizes that detailed disaggregation is difficult at the project proposal stage. Therefore, WHO may use global figures and reasonable estimates. The absence of data should be explained in section 3.2.6.</p> <p>The total of the first column in section 3.2.2 might not necessarily add up to 100%, as information might not be available for all age categories. However, the total of female and male should be equal to 100%.</p>
	<b>3.2.3 (groups or vulnerabilities specifically targeted)</b>	This section allows ECHO to know whether the project targets specific groups. Click on either the yes or no fields. Selecting the yes field will generate a drop down menu of different groups. You can select several but not all groups.
	<b>3.2.4 (selection criteria for beneficiaries)</b>	Briefly explain how the direct beneficiaries were targeted, identified and selected.
	<b>3.2.5 (beneficiaries' involvement in the project)</b>	Explain how and by what means beneficiaries were involved in the project design. Describe the mechanisms put in place to ensure their participation in the identification of needs and the project design, implementation and evaluation. In exceptional cases when it was not possible to involve beneficiaries, explain why.
	<b>3.2.6 (more details on beneficiaries)</b>	<p>If you are unable to give a breakdown of beneficiaries in section 3.2.2, provide a short explanation here as to why this is the case.</p> <p>This field also provides the opportunity to give additional information on the specificities of direct or potential indirect beneficiaries.</p>

4. Logic of the intervention <sup>7</sup>	All sections	<b>This is the single most important part of the Single Form.</b> Once completed, it automatically generates a logical framework that provides a concise overview of the project. ECHO uses this overview to assess the quality of the proposed project. <b>See section 4.8 below for detailed guidance on preparing the logic of the intervention.</b>
5. Quality markers	5.1 Gender and age	WHO is required to self-score whether the project is gender- and age-sensitive. <b>Note that some proposals are rejected based on inadequate gender marker ratings. Do not ignore this section!</b> For guidance on ECHO's gender marker, consult the <a href="#">gender-age marker toolkit</a> developed by ECHO.
	5.2 Resilience	For guidance on resilience, see ECHO's <a href="#">resilience</a> guidelines.
6. Implementation	All sections	Section 6 explains how human resources, supplies and equipment and implementing partners will be used to implement the project.
	6.1 Human resources and management capacities	Explain briefly how WHO's human resources will be mobilized to ensure an effective and efficient implementation of the project (e.g., staffing levels and organizational/management structure at project locations and in the regional office and headquarters).  If the proposal will be managed remotely, describe the structures in place for remote management. See section <a href="#">4.11</a> of these guidelines for more information on remote management.
	6.3 Equipment and goods	Provide information on the supplies (including medicines and medical supplies) and equipment to be used to implement the project. Attach a detailed list of equipment and supplies.  WHO must inform ECHO in this section if it intends to use ECHO funds to replenish national stocks of goods procured using other funding. <b>ECHO's agreement to cover the replenishment of stocks must be secured in advance.</b> Before entering this information in the proposal, be sure to consult the ECHO focal point in the field to ascertain ECHO's position as to whether it will cover replenishment costs.  <b>NB ECHO has imposed temporary procurement restrictions on WHO until such time as the Organization passes ECHO's procurement requirements.</b> These temporary measures entered into force for all new ECHO-funded projects implemented as of 1 April 2015. As a result of these procurement restrictions, WCOs are required to submit detailed information on planned procurement of goods and services during the project, and indicate the transaction value of all sub-contracts and orders for supplies. See sections <a href="#">4.9</a> and <a href="#">5.3</a> of these guidelines.
	6.5 Work plan	It is mandatory to attach a work plan. The plan can be in the form of a simple Gantt chart. It should be inserted as an annex in section 6.5 of the PDF eSingle form.
	6.6 Specific security constraints	Include information here only when relevant, i.e. when security is a key element for the success of the project. Provide an assessment of the security constraints linked to the project. ECHO's security requirements, if any, are set out in the Technical Annex of the HIP.
6.7 Implementing partners	Include full details on whether the WCO intends to work with implementing partners. If the answer is no, go directly to section 7. If the answer is yes, you will need to provide information on:  Added value (section 6.7.2). Explain how working with implementing partners will contribute to the achievement of the project.  Coordination, supervision and controls (section 6.7.4). Explain the overall coordination, supervision and control mechanisms put in place and describe how you intend to screen the risks of fraud and the measures taken to minimize corruption.  If possible and available at this stage, include (in annex) a table showing the full list of implementing partners, their geographical areas of intervention, the activities to be sub-contracted by WHO, and the approximate amount of each sub-contract to be issued. Bear in mind that all changes to the list of implementing partners during project implementation	

<sup>7</sup> This chapter is the most important part of the Single Form. The information provided will be used to assess the quality of the logic of intervention, in particular the links between the previously identified needs, the principal, the specific objectives, the results to be achieved, the activities, the pre/conditions, the risks, the assumptions and the costs.

		<p>(additions, deletions or other changes) will have to be communicated to ECHO.</p> <p><b>NB The prior clearance of the regional Contract Review Committee (CRC) will be required for any NGOs to which WHO intends to issue sub-contracts in excess of the ceiling for regional CRC clearance. The standard amount over which regional CRC clearance is required is \$200,000, but amounts vary between regions. WCOs should contact their RO to ascertain the applicable CRC ceiling for their region.</b></p> <p><b>NGOs should not be named in the PDF eSingle Form unless and until regional CRC clearance has been obtained. See <a href="#">sections 4.10</a> and <a href="#">5.3</a> of these guidelines.</b></p>
7. Coordination	All sections	The purpose of this section is to demonstrate that WHO's coordination efforts are sufficiently developed to contribute to the success and impact of the project. This is important to guarantee that humanitarian activities are not duplicated and key information is shared with other important stakeholders. Explain coordination with other humanitarian actors, national and local authorities, and development actors/programmes.
8. Monitoring and evaluation	8.1 Monitoring of the Action	Explain the procedures established to ensure the project is closely monitored. Describe the monitoring mechanisms related to activities, results and specific objectives and how they are linked to the project's indicators and sources of verification. If some of all of the project will be implemented through remote management, explain how WHO has adapted its monitoring arrangements.
	8.2 Internal evaluation	None of the boxes should be ticked unless the WCO has discussed and agreed with ECHO in advance that an internal or external evaluation of the project's results will be conducted.
9. Visibility, communication and information	All sections	<p>Visibility for the EU as a donor is a contractual obligation for WHO. Failure to comply may result in the application of a penalty by ECHO at the contract liquidation stage. Visibility activities are mandatory unless WHO can show that they may jeopardize the safety of project staff, implementing partners, or project beneficiaries. (In these cases, WHO must request a derogation to ECHO's visibility requirements in section 11 of the Single Form.)</p> <p>There are two types of visibility: standard and above standard. For more information on how to complete section 9 of the PDF eSingle Form, see section <a href="#">4.12</a> of these guidelines.</p>
10. Financial overview of the project	All sections.	See section <a href="#">4.13</a> of this document for a detailed overview of how to prepare multi-donor budgets for ECHO proposals.
11. Derogation	Requests for specific derogation	To be completed only in instances where WHO wishes to derogate from a rule applicable to the agreement, e.g., it wishes to waive ECHO's visibility requirements for security reasons.
12. Administrative information	Administrative information	To be completed by HQ.
13. Conclusions and humanitarian organization's comments	Conclusions and humanitarian organization's comments	This section is <b>optional</b> .

#### 4.8 Logic of the intervention (and logical framework)

- Is contained in section 4 of the PDF eSingle Form.
- Provides a concise overview of the project (results, beneficiaries, activities, indicators).
- Is the core of the project proposal and the key to its success. A well written logical framework should serve as a stand-alone document that allows the reader to understand the objectives and means of implementation of the project, and how its progress toward results will be measured.
- Should ideally include no more than two results (to facilitate implementation and subsequent reporting).
- Should not be too ambitious in scope (aim for targeted activities rather than broad programmes).
- Should contain at least one of ECHO's key outcome indicators (KOIs) per specific objective. The complete list of KOIs can be found in ECHO's Single Form guidelines of June 2016 (see section [11.3](#) of these guidelines).
- Should contain at least one of ECHO's key result indicators (KRIs) per sector and per result. ECHO has introduced KRIs for the five sectors that account for 80% of ECHO funding: food, nutrition, health, WASH and

shelter. The purpose of the KRIs is to facilitate quality assurance and allow ECHO to aggregate and analyse data on the results of the projects that it funds. The complete list of KRIs for the health sector can be found in ECHO's Single Form guidelines of June 2016 (see section [11.3](#) of this document).

Once all mandatory fields in section 4 have been completed, the PDF eSingle Form will automatically generate the project's **logical framework** (logframe).

For additional guidance on completing the logic of the intervention, see the following documents:

- ECHO [ECHO's Health Technical Guidelines](#)
- ECHO's standard logical frameworks (logframes). To access the logframes, download them from <http://ec.europa.eu/echo/files/policies/sectoral/HealthGuide2014.zip>, transfer to a USB memory stick, and click the folder entitled «start.htm».

Completing section 4 and generating the logframe		
4.1 Principal objective		<ul style="list-style-type: none"> <li>▪ Only one principal objective.</li> <li>▪ Explains the longer-term benefits to beneficiaries.</li> <li>▪ The principal objective will not be achieved by the project alone.</li> <li>▪ Should be broadly in line with one of the specific objectives of the relevant DG ECHO Financing Decision.</li> <li>▪ Must be in line with the relevant HIP.</li> </ul>
4.2 Specific objective		<ul style="list-style-type: none"> <li>▪ Only one specific objective per project.</li> <li>▪ Should not simply be a combination of the results, but should go one step beyond the results and describe the change to the target groups' lives thanks to the services/products produced by the results.</li> <li>▪ Addresses the core problems (or one part of them) identified in the needs assessment.</li> <li>▪ Should be defined in terms of direct benefits for the target groups.</li> <li>▪ Can be modified only exceptionally. (Wording should be flexible enough to allow for future adjustments or minor changes in the project. Avoid using information that might change, e.g., the exact project location.)</li> </ul>
	4.2.1	Briefly describe the specific objective. This is the language that will appear in the logframe.
	4.2.2	More detailed description of the specific objective. This section is optional.
	4.2.3 Indicators	<ul style="list-style-type: none"> <li>▪ Indicators at specific objective level measure the main outcomes of the project, i.e., the benefits to beneficiaries of the project's products and services. The delivery of a service or product is an output, and therefore cannot be used as an indicator for the specific objective.</li> <li>▪ Select one or more of ECHO's Key Outcome Indicators (KOIs). <b>At least one KOI is mandatory for health projects.</b> KOIs can be used in conjunction with custom indicators.</li> <li>▪ Custom indicators should be <b>SMART</b>:               <ul style="list-style-type: none"> <li>✓ Specific (describe an observable action, behaviour or achievement)</li> <li>✓ Measurable (a reliable system is in place to measure progress towards the achievement of the objective)</li> <li>✓ Achievable (can be reached/achieved within the framework of the project)</li> <li>✓ Relevant (is important/relevant for the achievement of the objective)</li> <li>✓ Time-bound (can be measured within the framework of the project).</li> </ul> </li> <li>▪ Maximum of 10 indicators per specific objective. Keep the number to a minimum to facilitate monitoring. Make sure that you will be able to provide reliable data on each indicator.</li> <li>▪ Baseline and target values are required for each indicator.</li> <li>▪ A source of verification is required for each indicator. Specify:               <ul style="list-style-type: none"> <li>✓ The format in which the information should be made available (progress report, statistics, etc.)</li> <li>✓ The source responsible for providing the information (e.g. local partner, monitors, etc.)</li> <li>✓ How regularly it should be provided (annually, quarterly, monthly)</li> <li>✓ The sources of information that exist</li> <li>✓ The methods used to obtain the information</li> </ul> </li> </ul>
4.3 Results	All sections	<ul style="list-style-type: none"> <li>▪ The 'products and services' provided by the project, or the output envisaged to achieve the Specific Objective.</li> </ul>

	<ul style="list-style-type: none"> <li>▪ Ideally, the proposal should include a maximum of two results. One result is better!</li> <li>▪ Begin by adding the description of the result in the first cell.</li> <li>▪ Each result comprises five tabs: 1) sector/amount; 2) beneficiaries; 3) transfer modalities; 4) indicators; 5) activities.</li> <li>▪ <b>Sector/amount.</b> Indicate the sector and sub-sector. For sub-sectors that are marked by "KRI" at the end, the corresponding KRI (key results indicator) for that sub-sector will automatically appear in the drop down menu in the indicator tab (see below).</li> <li>▪ Enter the estimated total amount of the result under the sector/amount tab. This sum does not include indirect costs (i.e., programme support costs). The sum of the € amounts by result should match the total budget in the budget worksheet and in section 10.1 of the PDF eSingle Form.</li> <li>▪ <b>Beneficiaries.</b> Provide information on the estimated total number of direct beneficiaries targeted by each result. Bear in mind that you will have to report on the number of actual vs. planned beneficiaries in the final report. Choose either "households" or "individuals", but not both. When selecting the households option, the system automatically calculates the number of individuals.</li> <li>▪ <b>Transfer modalities.</b> Not normally applicable to WHO projects: select "no transfer envisaged". If the project <b>does</b> foresee transfer modalities, please provide detailed information on cash, vouchers and in-kind transfers. <ul style="list-style-type: none"> <li>○ Cash transfers are defined as the provision of money to individuals, households or communities to be used at their own discretion.</li> <li>○ Vouchers are used to provide access to pre-defined commodities or services.</li> <li>○ In-kind transfers are the direct provision of commodities to beneficiaries.</li> </ul> </li> <li>▪ <b>Indicators.</b> The form includes both KRIs and custom indicators. Once a sub-sector has been selected under the "sector/amount" tab, the corresponding KRI appears automatically in the indicator tab. The only way to add or remove a KRI is to select or remove the corresponding sub-sector.</li> <li>▪ The form allows a maximum of 10 indicators by result.</li> <li>▪ Baseline and target values are required for each indicator. When baseline values are not known, provide a justification in the section "Possible comments".</li> <li>▪ A source of verification is required for each indicator. Specify: <ul style="list-style-type: none"> <li>✓ The format in which the information should be made available (progress report, statistics, etc.)</li> <li>✓ The source responsible for providing the information (e.g. local partners)</li> <li>✓ How regularly it should be provided (annually, quarterly, monthly)</li> <li>✓ The sources of information that exist</li> <li>✓ The methods used to obtain the information</li> </ul> </li> </ul> <p><b>Activities.</b> Add as many activities as necessary, and complete both the short and long description fields. Only the short description for each activity will be displayed in the logframe that is automatically generated.</p>
4.4 Pre-conditions	<ul style="list-style-type: none"> <li>▪ The conditions outside WHO's direct control that have to be met for the implementation of the planned activities. (Unless these conditions remain stable, the further execution and implementation of the project may become impossible, and could entail its termination or suspension.)</li> <li>▪ Pre-conditions need to be met before the activities can be initiated and resources committed. Some samples of pre-conditions include: <ul style="list-style-type: none"> <li>✓ security situation allows for continued operations</li> <li>✓ sufficient funding is available to allow implementation as planned</li> <li>✓ government grants necessary approvals and facilitations to reach populations in need.</li> </ul> </li> </ul> <p>The information on pre-conditions will be automatically included in the logframe.</p>
4.5 Assumptions and risks	<ul style="list-style-type: none"> <li>▪ Assumptions = the expected positive external factors based upon which the project has been planned but over which WHO has no direct control (e.g., peaceful working environment).</li> <li>▪ Risks = the foreseeable potential situations that might affect implementation of the project without excluding its further implementation but requiring specific measures aimed at reducing such risks.</li> <li>▪ Include realistic risks that are important and can be mitigated (e.g., conflict spreads to new locations, reducing WHO's ability to deliver supplies &amp; services). Identifying risks at the project</li> </ul>

		<p>proposal stage makes it easier to request subsequent project modifications if necessary.</p> <ul style="list-style-type: none"> <li>▪ Assumptions and risks have to be monitored during project implementation.</li> <li>▪ The assumptions and risks are included in the logframe that is automatically generated once section 4 of the PDF eSingle Form has been completed.</li> </ul>
4.6	Contingency measures	In case some of the assumptions or risks materialize, explain some of the measures taken to mitigate their effects on the implementation of the project.
4.7	Additional information	This section is <b>optional</b> . It should not repeat information already provided in other sections.

#### 4.9 Supplies and equipment

In 2014, ECHO assessed WHO's administrative and financial procedures to determine whether the Organization met ECHO's requirements for partners. WHO failed the procurement pillar of ECHO's assessment, but is putting in place the remedial measures requested by ECHO. In the meantime, ECHO has imposed temporary procurement restrictions on WHO. These temporary measures entered into force for all new ECHO-funded projects implemented as of 1 April 2015. They affect the procurement of both goods and services. In summary:

ECHO PROCUREMENT RESTRICTIONS		
Goods: Non-medical products	Transaction value <€60,000	WHO's normal procurement rules apply.
	Transaction value >€60,000	<p>An invitation to bid should be posted on the UN Global Market Place web site</p> <p><b>OR</b></p> <p>WHO may use a valid long-term agreement (LTA) from another UN agency that has been positively assessed by the EC</p>
Goods: medical and pharmaceutical products	Transaction value <€60,000	WHO's normal procurement rules apply.
	Transaction value >€60,000	<p>WHO must procure medical supplies that meet internationally recognized quality standards and may make use of existing LTAs in this regard:</p> <ol style="list-style-type: none"> <li>1. WHO may use its own LTAs or piggy-back on another UN agency's.</li> <li>2. Alternatively, WHO must place an invitation to bid on the UN Global Market Place web site. The invitation to bid must refer to internationally recognized quality standards and seek confirmation of the same from the supplier.</li> </ol>
<b>Services: see table on following page.</b>		

These guidelines will be updated as and when more information on temporary procurement arrangements under ECHO grants becomes available. In the meantime, WCOs should contact the procurement unit in the regional office for advice and support when procuring either goods or services under ECHO grants.

WCOs should also note the following:

- Goods and supplies purchased for use of the project must be delivered within the implementation period AND used/distributed to beneficiaries within the implementation period in order to be eligible. (ECHO will make an exception to this rule in some cases; see section 9.3 of these guidelines.)
- ECHO funds should not be used to replenish national stockpiles that may have been used during project implementation unless WCOs have first obtained ECHO's specific prior consent. ECHO may not agree to cover the costs of replenishing these stockpiles, especially if, for example, the vaccines used do not comply with ECHO's quality assessment criteria.

## CLEARANCE REQUIREMENTS FOR ENTITIES SUB-CONTRACTED BY WHO UNDER PROJECTS FUNDED BY ECHO

Type of entity sub-contracted	Amount of contract	ECHO requirements	WHO requirements		
			Details	Deadline for obtaining clearance	Due diligence
NGO implementing partners/ other not-for-profit entities	Up to \$25,000	No special requirements; ECHO considers these contracts as grants. WHO follows its own procurement rules.	Under the WR's emergency delegation of authority, prior CRC approval of sole supplier is not required. Adjudication report is required. It must be signed by an authorized official and uploaded in the GSM. See WHO <a href="#">eManual VI.2.3</a> .	Adjudication report must be prepared before agreements are signed and uploaded in the GSM	Prior clearance of the Partnerships and Non-State Actors unit at headquarters (PNA/HQ) is required for all NGOs and not-for-profit entities sub-contracted by WHO.
	Between \$25,000 and \$100,000		Under the WR's emergency delegation of authority*, bidding requirements are waived. See <a href="#">emergency SOP 4.2</a> . Adjudication report still required and should be signed by an authorized official and uploaded in the GSM.	As above.	
	Between \$100,000 and \$200,000**		Competitive bidding required. Detailed adjudication report required. It must be signed by an authorized official and uploaded in the GSM. See WHO <a href="#">eManual VI.2.3</a> .	As above.	
	\$200,000 and above**		Prior clearance of the regional Contract Review Committee required.	When NGOs are named as implementing partners in WHO proposals submitted to ECHO, regional CRC clearance must be obtained <b>before proposals are submitted</b> .	
Commercial/ for profit entities	Up to \$25,000	No special requirements; WHO follow its normal selection procedures.	Under the WR's emergency delegation of authority, prior CRC approval of sole supplier is not required. Adjudication report is required. It must be signed by an authorized official and uploaded in the GSM. See WHO <a href="#">eManual VI.2.3</a> .	Before agreements are signed and uploaded in the GSM.	N/A
	Between \$25,000 and \$100,000	No special requirements for contracts between \$25,000 and <b>EUR</b> 60,000. For contracts of EUR 60,000 and over, see below.	Under the WR's emergency delegation of authority*, bidding requirements are waived. See <a href="#">emergency SOP 4.2</a> . Adjudication report still required and should be signed by an authorized official and uploaded in the GSM.	As above.	
	<b>EUR 60,000 and above</b>	WHO must follow a competitive selection process. This may include the publication of a request for proposals on the UN Global Marketplace web site.			
	Between \$100,000 and \$200,000**	As above.	WHO must follow a competitive selection process. Adjudication report documenting the process must be signed by an authorized official and uploaded in the GSM.	Before agreements are signed and uploaded in the GSM.	
	Over \$200,000**	As above.	WHO must follow a competitive selection process. The prior clearance of the regional Contract Review Committee is required.	When commercial/for profit entities are named as sub-contractors in WHO proposals submitted to ECHO, regional CRC clearance must be obtained <b>before proposals are submitted</b> .	

\*Under the WR's emergency delegation of authority, WCOs may procure urgently needed goods and services for up to \$100,000 and waive bidding requirements as set forth under WHO eManual VI.2.3.

\*\*The ceiling for regional CRC clearance may be lower depending on the region.

## 4.10 Working with NGO implementing partners

### 4.10.1 Screening (“due diligence”) process for NGOs

WHO conducts due diligence on all non-state actors, including NGOs, with which it engages. The primary purpose of due diligence is to rule out non-state actors’ links with arms and tobacco industries (and Nestlé).

The due diligence process is particularly important for WHO’s emergency programme, which relies heavily on NGO implementing partners to deliver essential health care services in conflict areas. Many of these NGOs have a longstanding presence in target areas. Their knowledge of local languages and culture makes them indispensable partners for helping communities respond to and recover from acute crises. When UN security restrictions prevent WHO from operating in dangerous areas (e.g., Somalia), national and international NGOs are often the only agencies able to enter these areas. Without them, WHO could not carry out its humanitarian mission.

WCOs that intend to sub-contract NGOs as potential implementing partners under ECHO grants should:

- Request the Partnerships and Non-State Actors unit at headquarters (PSA/HQ)<sup>8</sup> to conduct due diligence on the NGO(s).
- With their request, submit the following information for each NGO:
  - ✓ Full name, and web site address
  - ✓ Mission statement and/or charter
  - ✓ List of partners
  - ✓ Latest financial statements showing funding sources
  - ✓ Proof of registration of NGO in country
  - ✓ A brief description of the activities to be implemented by the NGO.

PNA/HQ will complete its due diligence process within a maximum of two weeks.

### 4.10.2 Contract Review Committee clearance

WCOs that intend to award sub-contracts in excess of US\$200,000 (or such lower amount as may apply in the relevant region) to NGO implementing partners under ECHO grants must obtain the prior clearance of the regional Contract Review Committee (CRC). WCOs should refrain from naming any NGO in the PDF eSingle Form proposal unless the NGO has been cleared in advance by the regional CRC. WCOs should either:

1. conduct a competitive bidding process and submit the results to the regional CRC for review and approval
- OR**
2. request regional CRC approval of a waiver of WHO’s competitive bidding requirements, providing full justification (for example, in situations where there are no or very few other NGOs working in highly dangerous locations).

### 4.10.3 Standard agreement template

WHO’s Legal department has prepared a [standard agreement](#) to be signed by WHO and NGO implementing partners that are sub-contracted under ECHO grants. WCOs should share this template with potential NGO partners at an early stage, to 1) ensure they agree with the terms and conditions therein and 2) avoid delays countersigning agreements at the implementation stage. Please note the documents to be annexed to the agreement (listed on page 11 of the agreement template).

## 4.11 Remote management

In conflict-affected countries with areas that are off limits to UN agencies, WHO may outsource its emergency activities in these locations to national and/or international NGOs, and manage and monitor their work remotely. Humanitarian needs are often greater in areas that are more difficult to access. However, the outsourcing of aid delivery risks compromising the quality of WHO’s work. Moreover, it means that aid workers in these areas face risks that the UN regards as too great for its

<sup>8</sup> WCOs should send their requests by e-mail to Taina Nakari ([nakarit@who.int](mailto:nakarit@who.int)) and Loubna Al Atlassi ([alatlassi@who.int](mailto:alatlassi@who.int)).

own staff. ECHO will fund WHO projects implemented through remote management<sup>9</sup> only if WHO can provide assurances that specific conditions are met. WHO must provide replies to the seven questions below, **either** by addressing each one in the PDF eSingle Form, **or** by addressing all questions in one document that can then be uploaded as an annex to the form.

ECHO's seven remote management questions		
N°	Question	Relevant section of the eSingle Form
1	Is there an access problem due to security or administrative obstacles?	3.1.3 (problem, needs and risk analysis) 6.6 (specific security constraints)
2	Does the proposed action include acceptance-building measures?	4.3 (results) 4.7 (additional information on the operational context of action) 7 (field coordination)
3	Is it a direct life-saving action or an action aimed at preserving crucial livelihoods?	4 (logic of the intervention)
4	Have all possible measures been taken to reduce the risk of losing the lives of those undertaking the work on the ground?	6.6 (specific security constraints)
5	What is the source of the needs assessment in a remotely managed action?	3 (needs assessment and beneficiaries)
6	Have robust systems been put in place to allow staff on the ground to provide all the relevant information to those who are ultimately responsible for the management and the quality of the action?	6.1 (human resources and management capacities)
7	Are the monitoring arrangements adapted for remote management?	8.1 (monitoring of the action)

For more information, see ECHO's [remote management guidelines](#) on the ECHO web site.

#### 4.12 Visibility and communication

Visibility is very important for ECHO. It expects WHO to acknowledge ECHO's financial contribution by ensuring that the European Union (EU) logo is duly displayed whenever and wherever possible (for example, on items of clothing worn by project staff, on supplies, equipment, workshops, signboards at project locations<sup>10</sup>, WHO information documents, and publications). This allows project beneficiaries and the general public to associate the humanitarian response with the EU.

**QUICK TIP:** ECHO's visibility guidelines contain precise instructions (size, colour, proportions) for replicating the EU logo. WCOs must comply with these specifications when ordering EU logos and stickers for project supplies. ECHO also has a visibility web site that contains tips about visibility initiatives.

In summary:

- Visibility and communication costs should be included in all ECHO proposals, unless the security situation does not permit this (see footnote below). If WHO wishes to waive visibility and communication costs, it must provide a justification in section 11 of the PDF eSingle Form.
- The amount authorized for **standard visibility** is 0.5% of direct eligible costs up to a maximum of €8,000.

<sup>9</sup> ECHO defines remote management as "an operational approach used to provide relief in situations where humanitarian access to disaster-affected populations for its partner organizations is limited by security concerns and/or formal or informal decisions imposed by de jure or de facto authorities, thus requiring adjustments to the management of the humanitarian actions".

<sup>10</sup> Unless such visibility may jeopardize the project objectives or the safety of WHO staff, implementing partners or local communities.

- For **non-standard visibility** activities, ECHO may approve budgets in excess of the standard amount provided that WHO submits a communication plan with the proposal. See next section below.
- WCOs should ensure they comply with ECHO's [visibility, information and communications guidelines](#), particularly as far as the size, format and colour of the EU logo are concerned.
- WCOs should provide proof of visibility and communication activities in their final reports to ECHO (e.g., photos showing the EU logo on supplies, equipment and project documents, photos of project staff wearing items of clothing showing both the WHO and EU logos, video documentaries, press releases that acknowledge the contribution of ECHO, etc.).

Note that the GSM does not have an expenditure category for visibility and communication costs. WCOs will have to identify these costs manually at the final reporting stage, or use the Contribution Budget facility in the GSM to map project expenditures against approved budgets..

#### Standard and above-standard visibility:

ECHO distinguishes between two types of visibility:

**Standard visibility** is a contractual obligation that applies to all partners and all types of projects. It entails:

- Displaying the EU logo on project sites.
- Acknowledging EU funding and partnership both orally and in writing.

**Above standard visibility** goes beyond standard obligations. WHO can opt for more elaborate communications that raise awareness of humanitarian issues among a defined audience in EU Member States and showcase the results of WHO's partnership with ECHO. ECHO can approve costs in excess of the normal amount for visibility, provided that WHO submits a communication plan as part of the PDF eSingle Form. A standard template is available on ECHO's [visibility web site](#).

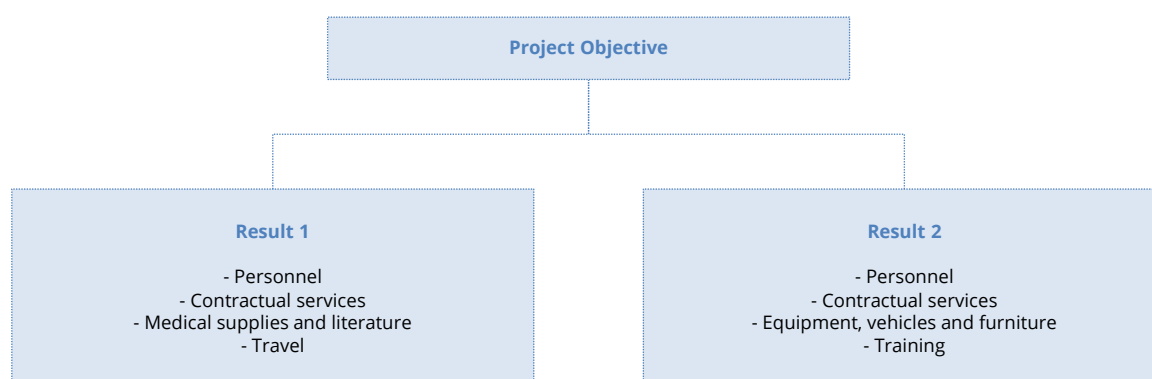
### 4.13 Budget

ECHO budgets are:

- Prepared in €. WHO converts the € amount to US\$ using the exchange rate in force on the day on which WHO recorded the entire amount of the contribution in the GSM.
- Organized by **result**, i.e., the total cost WHO anticipates is necessary to reach each result it aims to achieve. Each result is further broken down by budget heading (see schema below; budget headings are for illustrative purposes only). **Ideally, only one result should be included. There should be a maximum of two results.**
- Multi-donor, i.e., include the contributions of other donors towards the project. When identifying and costing the activities that can be fully or partially covered by other donor contributions, remember to include only the planned activities that fall fully within the implementation period of the ECHO grant. See [section 6.3](#) for more information.

ECHO budgets must include the following:

- **Visibility and communication costs.** See [section 4.12](#). These costs are mandatory in ECHO proposals. (ECHO will only waive its visibility requirements if WHO requests a specific waiver for security or other reasons.)
- RO and HQ **staff costs.** RO and HQ staff support ECHO projects throughout the project cycle and their costs must be included in proposal budgets. See [section 4.13.4](#) for more information.



**Limiting the number of results greatly facilitates subsequent project monitoring and reporting. One result is ideal, but no more than two results should be included.** Financial reporting for proposals with more than two results can become very complicated (for example, when expenditures have to be split across several results).

#### 4.13.1 Budget headings

To facilitate financial reporting, ECHO allows WHO to use its own internal budget headings when preparing funding proposals. WCOs should use the expenditure categories in the GSM:

- Staff and other personnel costs
- Contractual services
- Supplies, commodities, materials
- Equipment, vehicles and furniture
- Training
- Transfers and other grants to counterparts
- Travel
- General operating expenses

#### 4.13.2 Budget development workbook

HQ works closely with WCOs and ROs to prepare multi-donor ECHO budgets. HQ has developed a budget development workbook to facilitate the calculation of multi-donor budgets in €. **HQ does not accept budgets in any other format.** The workbook allows WCOs to:

- Cost the activities to be financed by ECHO in € (ECHO's currency of operation).
- Cost the activities to be financed by other donors in US\$ (WHO's currency of operation).
- Organize the budget by result, activity and GSM budget category.
- Automatically generate the final multi-donor budget in €, showing the total costs by result and by budget category.

The final budget is uploaded into section 10.2 of the PDF eSingle Form as a financial annex.

**10. Financial Overview of the Action** ✔ [Validate Chapter 10](#)

**10.1 Estimated expenditures**

	Initial budget	Revised budget	Intermediary report incurred costs	Final report incurred costs
Implementation costs	8.165.078,00 €			
Remuneration (max 7%)	431.555,00 €			
<b>Total costs</b>	<b>8.596.633,00 €</b>			

**10.2 Financial annex**  
[Insert an annex](#)

**10.3 Funding of action**

#### 4.13.3 Eligibility of expenditures

ECHO may reimburse costs incurred by WHO outside the implementation period of projects. For example, WHO may submit a proposal for an emergency mass vaccination campaign, and purchase the vaccines before ECHO has approved the project proposal. When preparing the project proposal, WCOs should:

- Enter the start date for eligibility of expenditures in section 1.5 of the PDF eSingle Form.
- Include a justification as to why the expenditures are eligible.
- The start date for eligibility may not precede the start date set out in section 2.2 of the HIP.

#### 4.13.4 Staff costs: RO and HQ

ECHO projects require close management and monitoring. RO and HQ staff support ECHO projects throughout the project cycle as follows:

- The public health focal point in the **RO**: reviews the public health content of project proposals; advises WCOs on the formulation of expected results, targets, indicators; provides public health advice to WCOs throughout the project cycle.
- The External Relations team at **HQ**: reviews, edits and finalizes project proposals and associated budgets in collaboration with WCOs; advises WCOs on ECHO's procurement restrictions and due diligence and CRC requirements for implementing partners; uploads proposals in APPEL; liaises between WCO and ECHO to convey ECHO's comments on proposals and revise them accordingly; processes ECHO contribution agreements and modifications thereto.
- The grant management team at **HQ**: jointly reviews proposals with ERX; supports the development of multi-donor budgets; requests the creation of awards; prepares financial analysis workbooks for ECHO-funded projects; advises WCOs on ECHO's financial and administrative rules and regulations; acts as the interface between WCOs and ECHO during project implementation; reviews and edits modification requests and intermediate reports; supports the preparation of detailed final reports (including financial reports), and uploads them in APPEL.

The cost of the above services must be included in project proposals submitted to ECHO. (Note that WHO does NOT charge the standard rate for project management, monitoring and reporting costs (PMR) on ECHO contributions.)

The costs of HQ and RO staff support to ECHO projects should:

- Be based on standard salary costs for the duty station (consult HQ for advice: [frechete@who.int](mailto:frechete@who.int)).
- Include the following, up to a maximum of 5% of direct project costs:
  - ✓ Two weeks' salary for an HQ grant manager
  - ✓ Two weeks' salary for an HQ finance assistant
  - ✓ Two weeks' salary for an external relations officer
  - ✓ Two weeks' salary for a public health officer in the Regional Office

#### 4.14 Annexes to be submitted with the proposal

##### Mandatory

- Work plan. This can be in the form of a simple Gantt chart. (See [ECHO work plan template](#) in the toolkit.)
- Budget breakdown. The budget breakdown must be prepared using WHO's [budget development workbook for multi-donor ECHO grants](#). HQ does not accept budgets in other formats. HQ will provide close support to WCOs preparing multi-donor budgets for ECHO.
- A detailed list of supplies and equipment to be procured under the project. See [sample list](#) in the toolkit.
- A list of NGO implementing partners if applicable, together with the types of services they will implement and the locations they will cover. (See template in the toolkit.) If WCOs plan to issue sub-contracts in excess of regional ceilings for CRC clearance, the prior clearance of the regional CRC will be required.

##### Optional/suggested

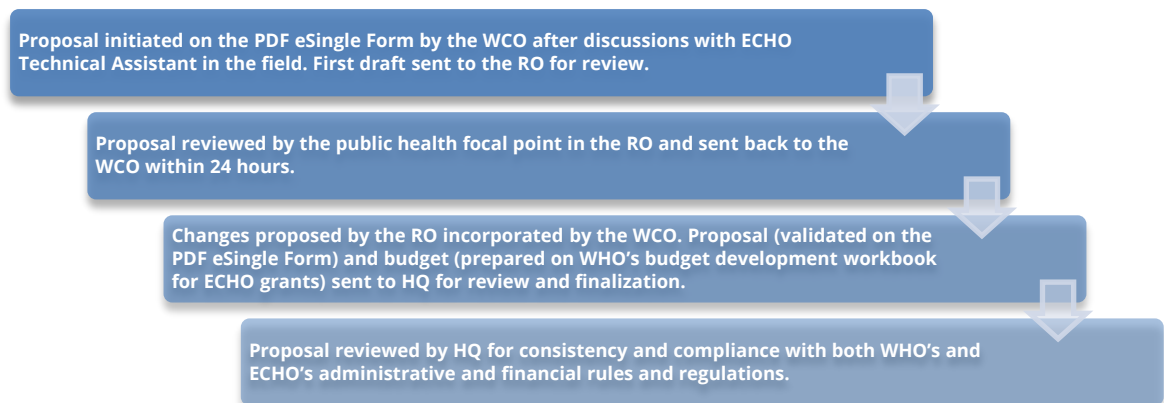
- Maps showing:
  - ✓ the geographical area(s) of intervention,
  - ✓ the location of IDP sites,
  - ✓ the status of health care facilities in the country or geographical area of intervention
  - ✓ targeted health care facilities
- Latest needs assessments
- List of planned training courses (type of training, tentative date, location, number of participants)

- Stakeholder analysis
- Monitoring and evaluation plan for NGO partners
- Detailed information on the content of WHO's standard health kits

#### 4.15 Proposal review process

WCOs should send project proposals to HQ only after they have been vetted and cleared by the RO. The public health focal point in the RO should be involved in the development of the proposal at the earliest possible stage.

##### Review process for ECHO project proposals:



#### 4.16 RO and HQ support

The **RO** will

- Review and clear the public health content of ECHO project proposals.
- Advise WCOs on the formulation of expected results, indicators and targets.

**HQ** will:

- Review ECHO project proposals for consistency, clarity and adherence to ECHO's and WHO's administrative and financial rules and procedures.
- Support the development of multi-donor budgets.
- Advise WCOs on the validation process for proposals on the PDF eSingle Form.
- Upload project proposals and annexes into APPEL.
- Liaise between WCOs and ECHO in Brussels and convey ECHO's comments and decisions on project proposals to WCOs.
- Upload revised versions of proposals in APPEL.

**Key points section 4**

- ✓ Project proposals are prepared on ECHO's standard proposal format: the PDF eSingle Form.
- ✓ Project proposals submitted to ECHO must be closely aligned with the objectives and priorities set out in ECHO financing decisions and/or HIPs. This will greatly increase their chances of being funded.
- ✓ The logical framework is the core element of the project proposal. A well-written logical framework should function as a stand-alone document that allows the reader to comprehend the objectives and results of the proposal.
- ✓ Remember to under-estimate the number of targeted beneficiaries by 10 to 20%, to be reasonably sure of reaching project targets most of the time.
- ✓ Proposals should include at least one key outcome indicator (KOI) for the specific objective.
- ✓ Proposals should include at least one key results indicator (KRI) by sector/result.
- ✓ Simplicity is key: no more than one result; narrow frame of activities; limited number of other donors.
- ✓ WCOs should maintain close contact with ECHO Technical Assistants in the field, who can guide them on the formulation of project proposals for ECHO.
- ✓ Well-conceived project proposals and budgets greatly facilitate subsequent technical and financial reporting.
- ✓ WCOs should ensure that sections 1 through 9 of project proposals are validated before sending them to HQ for review, finalization and uploading in APPEL.
- ✓ ECHO budgets are prepared in €.
- ✓ ECHO contributions for approved project proposals are made in €. WHO converts € to US\$ using the exchange rate in force on the day on which WHO recorded the entire amount of the contribution in the GSM.
- ✓ To facilitate the preparation of financial reports, the number of results should be limited to a maximum of two. One is better! Tracking expenditures for projects with more than two results can become very complicated (for example, when expenditures have to be split across several different results).
- ✓ RO and HQ staff costs must be included in proposal budgets.
- ✓ Visibility and communication costs must be budgeted in ECHO project proposals (unless security does not permit this).

## 5. ACCEPTANCE OF PROPOSALS AND SIGNATURE OF AGREEMENTS

### 5.1 Indirect management delegation agreements

If ECHO accepts the proposal, it will conclude an "Indirect Management Delegation Agreement"<sup>11</sup> with WHO. Each agreement sets out ECHO's terms and conditions related to its financing:

- The implementation and eligibility periods of the project
- The dates on which WHO is required to submit reports to ECHO
- The total estimated amount of the project, and the amount of ECHO's contribution
- The Special Conditions of the agreement. The Special Conditions overwrite ECHO's General Conditions (see section 11.3 of these guidelines). The General Conditions are not attached to each agreement, but apply if they are not overwritten by the Special Conditions.

ECHO pays 80% of its contribution at the beginning of the project. This has no practical implications for WHO as the full amount of the agreement will be made available in the GSM. WHO's final accounts are adjusted once it submits its final reports and ECHO releases the final instalment. Note that if ECHO deems that some expenditures are ineligible, it may not pay the full amount of the second instalment (or may even ask WHO to refund all or part of the first instalment). In these cases, WCOs will have to find other sources of funding to cover these costs.

### 5.2 Eligibility period versus implementation period

To avoid uncertainties concerning the eligibility of costs incurred between the time WHO submits the proposal and the start date of the project, ECHO contribution agreements distinguish between the **implementation period** and the **eligibility period** of projects:

- The **implementation period** is the time during which the project is implemented. The start date of this period is set out in Article 2.2 of the Special Conditions of the contribution agreement.
- The **eligibility period** covers the time between the date of receipt of the proposal by ECHO and the end of the implementation period. WHO may claim reimbursement of project expenditures incurred during this period. For example, WHO may submit a proposal for an emergency mass vaccination campaign, and purchase the vaccines before ECHO has approved the project proposal. WHO should enter the start date for eligibility of expenditures in section 1.5 of the PDF eSingle Form, together with a justification, for ECHO's review and approval. (There is always a risk that ECHO might not approve the proposal. In this case WCOs will have to find other sources to cover the costs incurred.) The Technical Annex of the HIP sets out the earliest possible date of eligibility.
- The eligibility period is set out in Article 2.3 of the Special Conditions.

### 5.3 Internal review and clearance process

Before agreements received from ECHO are countersigned by WHO, they go through a rigorous review process involving several different HQ departments. To facilitate the clearance process and allow the administration to verify that WHO has complied with ECHO's procurement restrictions and WHO's own administrative requirements, WCOs must submit detailed plans for the following procurement categories:

- Medical goods
- Non-medical goods
- Transfers of grants to counterparts
- Contractual services

The purpose of the above procurement plans is to allow the administration to ensure that WCOs are complying with ECHO's procurement restrictions. Therefore, the plans should:

- Cover the goods and services to be procured **using ECHO funds only**.
- Be aligned with the budget breakdown for procurement in sheet 3 of the ECHO budget development workbook (see section [4.13.2](#) of these guidelines, and the [budget development workbook](#) in the toolkit).

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<sup>11</sup> For ease of reference, the Indirect Management Delegation Agreement is referred to as a "contribution agreement" elsewhere in these guidelines.

WHO is legally obliged to return countersigned agreements to ECHO within fifteen calendars following their receipt in WHO. Thus, WCOs must have prepared their ECHO-specific procurement plans, and obtained all internal WHO clearances, by the time agreements are received in WHO headquarters.

The table below summarizes ECHO and WHO requirements for each of the above four categories.

Type of procurement		Details	Documentation required	
<b>Goods</b>	Medical goods	Transaction value <€60,000	<ul style="list-style-type: none"> <li>Specify the types of medical goods to be procured</li> <li>Specify whether the goods will be procured from the WHO catalogue or purchased under an LTA signed by WHO</li> </ul>	
		Transaction value >€60,000	<ul style="list-style-type: none"> <li>Specify the types of medical goods to be procured</li> <li>Specify whether the WCO will:               <ul style="list-style-type: none"> <li>✓ use an LTA signed by WHO</li> <li>✓ use an LTA of another UN organization</li> <li>✓ post an invitation to bid on the UN Global Market Place web site.</li> </ul> </li> </ul>	
	Non-medical goods	Transaction value <€60,000	<ul style="list-style-type: none"> <li>Specify the types of goods to be procured</li> <li>Specify whether the goods will be procured from the WHO catalogue or purchased under an LTA signed by WHO</li> </ul>	
		Transaction value >€60,000	<ul style="list-style-type: none"> <li>Specify the types of goods to be procured</li> <li>Specify whether the WCO will:               <ul style="list-style-type: none"> <li>✓ use an LTA signed by WHO</li> <li>✓ use an LTA of another UN organization</li> <li>✓ post an invitation to bid on the UN Global Market Place web site.</li> </ul> </li> </ul>	
<b>Services</b>	Transfers and grants to counterparts	All amounts	<p><b>For implementing partner(s) named in the proposal, provide:</b></p> <ul style="list-style-type: none"> <li>The amount of the contract to be issued by WHO to each implementing partner (IP).</li> <li>Confirmation that the IP is not-for-profit (and hence not subject to ECHO's procurement restrictions)</li> <li>Proof that , where applicable, regional CRC clearance (or waiver) has been obtained for each IP named in the proposal.</li> <li>Proof that due diligence has been obtained</li> </ul>	<p><b>For implementing partner(s) not yet identified:</b></p> <ul style="list-style-type: none"> <li>Indicate the tentative number of IPs and the approximate amount of the contract to be issued to each one.</li> <li>Confirm that the WCO will apply for due diligence as soon as each IP has been identified</li> <li>Confirm that the WCO will obtain regional CRC clearance where appropriate, as soon as each IP has been identified.</li> </ul>
	Contractual services	All amounts	<p><b>For sub-contractor(s) named in the proposal, provide:</b></p> <ul style="list-style-type: none"> <li>The approximate amount of the contract to be issued by WHO to each external entity</li> <li>Information on whether the external entity is 1) not-for-profit or 2) private.</li> <li>Proof that , where applicable, regional CRC clearance (or waiver) has been obtained for each sub-contractor. For NGOs/not-for-profit entities, proof that due diligence has been obtained</li> </ul>	<p><b>For sub-contractor(s) not yet identified:</b></p> <ul style="list-style-type: none"> <li>Indicate the tentative n° of sub-contractors and the approximate amount of the contract to be issued to each one.</li> <li>Confirm that the WCO will obtain regional CRC clearance where appropriate, as soon as each sub-contractor has been identified.</li> <li>Confirm that the WCO will apply for due diligence for each NGO/not-for-profit entity to be sub-contracted by WHO.</li> </ul>

WCOs should submit the above information using the standard procurement template developed by HQ. The table on the next page shows a completed procurement plan for **services** prepared by a WCO using the standard template. HQ is integrating procurement templates for goods and services into the budget development workbook for ECHO grants.

<b>ECHO Procurement Plan: Services</b>	
Project title:	
Principal objective:	
Country of implementation:	
Implementation period:	
Financing modality:	
Amount requested from ECHO (in EUR):	

Result n°	Result description	Activity description	Budget Category	Amount (EUR) to be transferred or paid	Name of NGO or private company (if not identified yet, please specify NGO 1, NGO 2 or company 1, company 2)	Status of contractual partner (not-for-profit / private)	ECHO procurement restrictions	Due Diligence conducted	CRC clearance obtained
2	Critical needs of secondary and primary health care addressed	2.4 Increase access to life-saving surgical interventions	Transfers and other grants to counterparts	37,842	Al Ihsan Charity	Not-for-profit	Do not apply	Cleared, copy attached	N/A
2	Critical needs of secondary and primary health care addressed	2.4 Increase access to life-saving surgical interventions	Transfers and other grants to counterparts	40,545	Al Berr Charity	Not-for-profit	Do not apply	Cleared, copy attached	N/A
2	Critical needs of secondary and primary health care addressed	2.4 Increase access to life-saving surgical interventions	Transfers and other grants to counterparts	37,842	Circassian Charity Association	Not-for-profit	Do not apply	Cleared, copy attached	N/A
2	Critical needs of secondary and primary health care addressed	2.4 Increase access to life-saving surgical interventions	Transfers and other grants to counterparts	37,842	Al Ta'Alouf Charity	Not-for-profit	Do not apply	Cleared, copy attached	N/A
2	Critical needs of secondary and primary health care addressed	2.4 Increase access to life-saving surgical interventions	Transfers and other grants to counterparts	70,000	Not identified yet, several NGOs will be executing this task. Each individual transfer will not exceed EUR 60,000.	Not-for-profit	Do not apply	To be conducted as soon as partners identified	N/A
3	Routine immunization and immunization campaigns supported	3.1 Support polio, routine immunization and immunization activities: campaign activities.	Transfers and other grants to counterparts	644,000	UCSSM	Not-for-profit	Do not apply	Cleared, copy attached	Cleared, copy attached
1	Trauma Care/Mass Casualty Management and first line responders capacity strengthened	1.3 Strengthening emergency preparedness and response to trauma cases	Transfers and other grants to counterparts	250,000	Not identified yet, several NGOs will be executing this task. Each individual transfer will not exceed EUR 100,000.	Not-for-profit	Do not apply	To be conducted as soon as partners identified	N/A
3	Routine immunization and immunization campaigns supported	3.1 Support polio, routine immunization and immunization activities: campaign activities.	Contractual services	100,000	Not identified yet, several companies will support vaccination activities with training and transport. Each individual transfer will not exceed EUR 60,000.	Private	Do not apply	N/A	N/A
4	Coordination and Surveillance for effective health response in Syria strengthened	4.1 Harmonization of the HeRAMS and Early Warning system tools & collection methods	Contractual services	27,770	Not identified yet	Private	Do not apply	N/A	N/A

Procurement of Services Overview	
Transfers and other grants to counterparts - Total	1,118,071.00
Contractual services - Total	1127,769.70
<b>Total budget</b>	<b>1,245,840.70</b>
Activity 1.3 - Total	250,000.00
Activity 2.4 - Total	1,224,071.00
Activity 3.1 - Total	1,744,000.00
Activity 4.1 - Total	127,769.70
<b>Total budget</b>	<b>1,245,840.70</b>

The amounts here should match the amounts in sheet 3 of the budget development workbook

## 5.4 RO and HQ support

HQ will:

- Inform WCOs and ROs as soon as ECHO has approved project proposals submitted for funding.
- Obtain supporting documents from WCOs to facilitate WHO's clearance of agreements.
- Arrange for the signature of ECHO-WHO contribution agreements.
- Transmit copies of contribution agreements to WCOs and ROs.
- Handle the award creation process.

### Key points section 5

- ✓ ECHO Indirect Management Delegation Agreements contain the key contractual and financial information on ECHO projects:
  - The implementation and eligibility periods of projects
  - The dates on which WHO is required to submit reports to ECHO
  - The total estimated amounts of projects, and the amount of ECHO's contribution
  - The Special Conditions related to each agreement. The Special Conditions overwrite ECHO's General Conditions (see section 11.3 of these guidelines).
- ✓ To facilitate WHO's internal review and clearance of contribution agreements, WCOs must:
  - Submit detailed procurement plans for goods and services to be purchased using ECHO funds.
  - Provide the following information:
    - Goods**
      - A breakdown of the transaction value of each order to be placed using ECHO funds.
      - Confirmation that that goods with a transaction value of over EUR 60,000 will be procured either through LTAs or through invitations to bid on the UN Global Market Place web site.
    - Services**
      - A breakdown of the amount of the contract to be issued to each entity sub-contracted by WHO using ECHO funds.
      - Information on whether each entity is not-for-profit, or private/for profit.
      - Proof that due diligence has been obtained for all NGO and non-profit implementing partners named in proposals.
      - Proof that, where appropriate, regional Contract Review Committee (CRC) clearance (or a CRC waiver) has been obtained for all external entities to be sub-contracted by WHO.

✓

## 6. PROJECT IMPLEMENTATION

### 6.1 Critical factors for successful implementation

1. Establish a detailed monitoring plan to monitor all aspects of the project (activities, results, indicators, targets, beneficiaries, implementing partners, procurement and delivery of supplies, project risks, etc.).
2. Track beneficiary numbers throughout the project. Remember that ECHO will judge the success of projects according to whether the number of targeted beneficiaries has been reached and results have been demonstrably achieved.
  - ✓ Direct beneficiaries can be counted, or theoretically tracked at the individual level (even if this is not done in practice). A direct beneficiary is defined as someone who personally benefits from the project (for example, a patient treated by a physician who is fully or partially paid under the project). Indirect beneficiaries are the populations covered or potentially covered by the project.
  - ✓ If you have no alternative to calculating beneficiaries other than by extrapolation, be sure that the methodology you use is sound and cannot be challenged.
3. Designate focal points to monitor all aspects of project implementation, including procurement (the purchase, distribution and use of supplies), activities implemented by NGO partners, multi-donor financial implementation rates, activity schedules, project risk factors, reporting due dates, progress towards targets as set out in project indicators.
4. Procure project supplies at the beginning of the project. The late placing of purchase orders or the delayed delivery of supplies are the main reasons for delays in clearing encumbrances and preparing final financial reports. Goods and supplies purchased for the use of the project must be delivered within the implementation period AND used/distributed to beneficiaries within the project implementation period in order to be considered as eligible costs by ECHO. ECHO will make an exception to this rule in some cases (see [section 9.3](#) of these guidelines).
5. Remain in close contact with ECHO focal points in the field throughout project implementation, and keep ECHO informed of project progress and any changes, even minor. Transparency for ECHO is crucial to build trust.
6. Seek advice from HQ about how to handle any project changes. While a report of non-essential changes may be all that is needed for minor changes, a formal modification request may be required for more significant project amendments.
7. Make sure that reports are submitted on time:
  - ✓ Intermediate reports are normally due three months before the end date of projects (the contribution agreement signed between WHO and ECHO specifies the date on which intermediate reports are due).
  - ✓ Modification requests must be submitted no later than one month before the end of projects.
  - ✓ Final reports are due three months after the end of projects.

### 6.2 Monitoring implementation

At the end of the implementation period, WCOs will be required to report back to ECHO in great detail on every aspect of the project. It is vital to establish a monitoring plan and assign roles and responsibilities to project staff. In addition to helping keep the project on track, this will help WCOs identify delays and obstacles at an early stage and keep ECHO informed of any modifications that may be required.

With the addition of columns, the project logical framework can easily be converted into a monitoring tool that allows WCOs to compile data for each result and outcome indicator, including a more detailed definition of:

- The data to be collected
- Data sources
- Data collection methods and timing
- Responsible officer(s)

The table below lists some of the main areas to be monitored, the project staff to whom responsibility should be assigned, and the tools and templates available in the toolkit.

Area to be monitored		Responsible officer	Tools and templates	Key monitoring questions
1	Progress towards results	Project manager	The project manager tracks overall progress based on the overall results of the project, the number of beneficiaries reached, disease outbreak data, etc.	<ol style="list-style-type: none"> <li>1. Are activities being implemented on schedule and within budget?</li> <li>2. Are the activities leading to the expected results?</li> <li>3. Are the results leading to the achievement of the specific objective?</li> <li>4. What is causing delays or unexpected results?</li> <li>5. Are there any external factors or events that require the submission of a report of non-essential changes or a formal modification request to ECHO?</li> <li>6. Have all <b>procurement orders</b> been placed at the beginning of the project, and has a <b>distribution plan</b> been established?</li> <li>7. Have there been any changes to the <b>approved procurement plan</b> that require the submission of a formal modification request to ECHO?</li> <li>8. Have there been any changes to the <b>approved list of implementing partners</b> that require the submission of a report of non-essential changes to ECHO?</li> <li>9. Have <b>anticipated contributions from other donors</b> been received?</li> </ol>
2	Beneficiaries	Public health officer	See the beneficiary tracking table in <a href="#">module 4</a> of the toolkit.	
3	Work plan	Project officer	See sample work plan in <a href="#">module 3</a> of the toolkit.	
4	Finances	Project/finance officer	Financial analysis spreadsheet developed by HQ (see section <a href="#">6.4</a> of these guidelines)	
5	Procurement	Procurement focal point	Tracking matrix being developed	
6	Human resources	Project/HR officer	List of project staff as set out in the proposal	
7	NGO implementing partners	Public health officer or NGO focal point	See sample Excel sheet in <a href="#">module 4</a> of the toolkit.	
8	Risk	Project officer	See the risk management matrix in <a href="#">module 4</a> of the toolkit.	
9	Aid diversion <sup>12</sup>	Project officer	ECHO has developed its own matrix to report on aid diversion incidents. Please contact HQ for a sample matrix.	

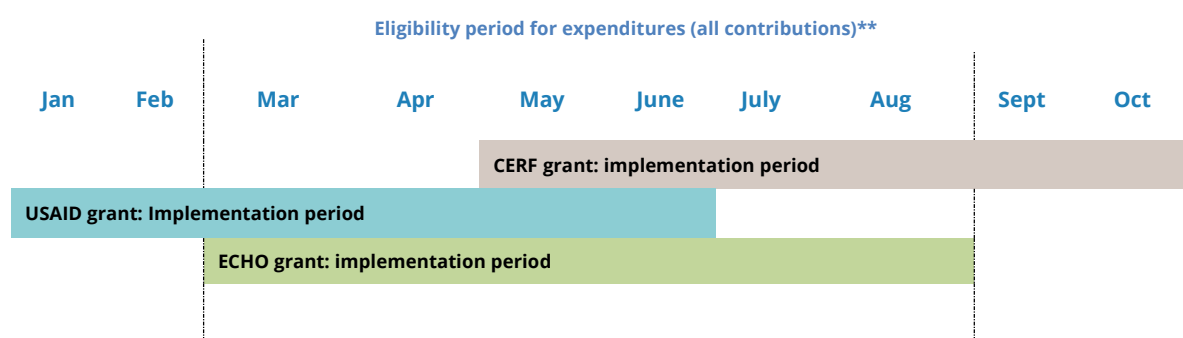
### 6.3 Eligibility of costs

WCOs must be aware of ECHO's **eligibility criteria** for project expenditures:

- Project costs must fall fully within the project implementation period.
- Goods and supplies purchased for the project must be delivered within the implementation period and used/distributed to beneficiaries within the project implementation period.

<sup>12</sup> In some countries in complex emergencies, ECHO requires WHO to submit detailed quarterly reports of all confiscated aid and the mechanisms put in place by WHO to mitigate the effect of diverted supplies and equipment. Please contact HQ ([soperp@who.int](mailto:soperp@who.int)) for a sample aid diversion report. WCOs who apply for ECHO funding for projects in highly insecure locations must make sure that they have robust monitoring mechanisms in place to track and report aid diversion incidents.

- ECHO will not reimburse (even partially) the costs of activities that fall only partially within the project period.
- For projects financed under ECHO's multi-donor financing modality, WCOs must ensure that costs incurred using other donor contributions **fall fully within the implementation period of the ECHO project**. (The implementation period for other donor contributions will not necessarily match the implementation period of the ECHO grant. Therefore, WCOs will need to be vigilant in ensuring that all reported expenditures incurred using other donor contributions fall fully within the implementation period of the project.) See example below.



\*\* Only applies when the eligibility and implementation periods are the same. In some cases the eligibility period for expenditures precedes the implementation period of the award (see section 5.2).

- ECHO will reject the **entire costs** of any expenditures incurred using other donor contributions if these costs are not fully within the project implementation period.

#### 6.4 Mapping expenditures against project budgets

- WHO's Global Management System (GSM) does not allow WCOs to monitor ECHO project expenditures to the level of detail required by ECHO (i.e. by result and budget heading in the approved project budget). Therefore, WCOs will need to monitor ECHO project expenditures separately, or use the Contribution Budget facility in the GSM to map expenditures against approved budget lines.
- The GSM operates in US\$. WCOs will need to convert GSM expenditures back into €, using the UN operational rate of exchange in force on the day in which WHO recorded the entire amount of ECHO's contribution in the GSM.
- Some GSM entries (e.g. "DFC") will not match the budget headings in approved ECHO budgets. WCOs will need to analyse these entries and map them manually against budget headings and results in the approved budget. WCOs will also need to upload all supporting documents in the GSM, and ensure that FACE reports for DFC and DI activities are uploaded in the GSM. (See section 9.5.3 for more information on FACE reports.)
- When expenditures are significantly lower than anticipated, either because other donor contributions have not materialized or because expenditures from other awards are not eligible, ECHO should be informed either at the intermediate reporting stage or by means of a report of non-essential changes (when intermediate reports are not required).

**QUICK TIP:** HQ has developed a financial monitoring workbook in Excel to help WCOs manage their ECHO project finances.

#### 6.5 RO and HQ support

HQ will:

- Prepare a financial analysis workbook for each project funded by ECHO, and send it to the WCO at the start of the project.
- Help WCOs match GSM expenditures to results and budget headings in approved ECHO budgets.
- Using the workbook, convert GSM US\$ expenditures to €, using the exchange rate in force on the day on which WHO recorded the entire amount of the contribution in the GSM.
- Work closely with WCOs throughout the implementation period to match multi-donor project expenditures against results and budget headings in approved budgets.

- Analyse areas that are under- or over-implemented or that require supporting documentation.
- Ascertain whether a budget reprogramming is necessary (e.g. when expenditures are significantly lower than anticipated, either because other donor contributions have not materialized or because expenditures from other awards are not eligible).

#### Key points section 6

- ✓ WCOs must establish detailed monitoring plans and assign dedicated focal points to monitor the different aspects of ECHO-funded projects (e.g., tracking project indicators and numbers of beneficiaries, ensuring that supplies and equipment procured are aligned with approved procurement plans and are used/distributed within the project period; monitoring contracts issued to implementing partners and reporting any changes to ECHO; tracking project finances and activity timelines).
- ✓ ECHO staff in the field must be kept informed of project implementation and all project changes, even those that are minor.
- ✓ In addition to keeping ECHO focal points in the field informed, WCOs should prepare reports of non-essential changes describing minor project modifications, and send them to HQ for submission to ECHO in Brussels.
- ✓ WCOs should carefully track the number of beneficiaries throughout projects. ECHO will judge the success of projects according to whether the numbers of planned beneficiaries have been reached.
- ✓ WCOs should remain in close contact with the emergency grant management team at HQ and seek their advice about how to report project changes to ECHO.
- ✓ Expenditures from other donors must be fully within the implementation periods of ECHO-funded projects.
- ✓ When expenditures are significantly lower than anticipated, either because other donor contributions have not materialized or because expenditures from other awards are not eligible, WCOs should inform either at the intermediate reporting stage or by means of reports of non-essential changes.
- ✓ Project supplies that are received after the end of the implementation periods of projects will not be considered as eligible costs.
- ✓ Encumbrances in the GSM must be cleared at the time of preparation of the final reports and before final certified financial statements are requested. Normally encumbrances should be cleared no later than three months after the end of the implementation period of projects, to ensure that WHO is able to provide final reports to ECHO in a timely manner.
- ✓ HQ has developed a financial analysis workbook to help WCOs manage their ECHO project finances.

## 7. MODIFICATION REQUESTS & REPORTS OF NON-ESSENTIAL CHANGES

### 7.1 Overview

ECHO expects WHO to keep it closely informed of project implementation, especially any issues that might hamper progress or affect the achievement of results. WCOs should maintain close contact with ECHO Technical Assistants in the country, whose role is to monitor the implementation of ECHO-funded projects.

Changes such as a decrease or increase in the number of beneficiaries, a new area of implementation, or revised indicators, must be communicated as soon as possible to ECHO's Technical Assistants. Even minor changes (e.g., a change in activities) must be communicated to ECHO well in advance. The table below sets out the type of report required for different project modifications. The table in Annex 1 (taken from ECHO's web site) contains additional information on the elements of the project that can be modified.

PROJECT CHANGES, AND TYPE OF REPORT REQUIRED				
Change to project	Type of report to be submitted	Deadline for submission	WHO action	ECHO action
Changes to: <ul style="list-style-type: none"> <li>✓ Project title</li> <li>✓ Principal objective</li> <li>✓ Specific objective</li> <li>✓ Country of project</li> </ul>	These can be changed only in exceptional circumstances. An <b>E-modification request</b> should be submitted to ECHO.	As soon as possible, and no later than one month before the end of the implementation period.	WCO: discusses the proposed changes with ECHO focal point in the country ahead of time.  HQ: sends e-modification request form to WCO for completion.	<ul style="list-style-type: none"> <li>■ Reviews and approve request within 30 days.</li> <li>■ Notifies WHO of acceptance of changes by means of a formal letter.</li> </ul>
Changes to: <ul style="list-style-type: none"> <li>✓ Budget categories</li> <li>✓ Activities</li> <li>✓ Staff plan</li> <li>✓ Implementing partners</li> <li>✓ WHO bank account details</li> <li>✓ Contact addresses</li> <li>✓ Estimated amount of total eligible costs (for multi-donor projects).</li> </ul>	EITHER <b>A report of non-essential changes</b> (in cases where an intermediate report is either not required, has already been submitted, or is not due for another couple of months)  OR <b>An intermediate report</b> (if the changes coincide with the preparation of the intermediate report).	As soon as possible.          Three months before the end of the implementation period	WHO can make these changes unilaterally (no need for ECHO prior clearance).  WCO: keeps the ECHO focal point in country informed of project implementation challenges and proposed changes.  HQ: prepares the reporting form and sends to the WCO for completion.	N/A
Changes to: <ul style="list-style-type: none"> <li>✓ Indicators</li> <li>✓ Beneficiaries</li> <li>✓ Results</li> <li>✓ Area of implementation</li> </ul>	<b>E-modification request</b>	No later than one month before the end of the implementation period	WCO: discusses the proposed changes with ECHO focal point in the country ahead of time.  HQ: sends e-modification request form to WCO for completion.	<ul style="list-style-type: none"> <li>■ Reviews and approve request within 30 days.</li> <li>■ Notifies WHO of acceptance of changes by means of a formal letter.</li> </ul>
Changes to: <ul style="list-style-type: none"> <li>✓ The implementation period (e.g., no-cost extension)</li> <li>✓ The amount of funding sought from ECHO (i.e., additional funds)</li> </ul>	<b>E-modification request</b>	No later than one month before the end of the implementation period	WCO: discusses the proposed changes with the ECHO focal point in the country ahead of time.  HQ: sends e-modification request form to the WCO for completion.	<ul style="list-style-type: none"> <li>■ Reviews and approves request within 30 days.</li> <li>■ Notifies WHO of acceptance of changes by means of a formal letter.</li> </ul>

### 7.2 Preparing eModification requests and reports of non-essential changes

Both eModification requests and reports of non-essential changes are prepared using the latest version of the PDF eSingle Form.

- HQ can advise WCOs on whether an eModification request is required or whether a report of non-essential changes will suffice.

- HQ will prepare the relevant reporting format on the PDF eSingle Form (see below) and send it to WCOs on request.
- WCOs should (1) complete the form, updating the sections to be modified; (2) provide a summary of the modifications in section 13 of the form; (3) validate the form; and (4) send it to WHO headquarters for uploading in APPEL.
- E-modification requests should be submitted to ECHO no later than one month before the end of the implementation period of ECHO-funded projects.

**QUICK TIP:** WCO staff who have completed ECHO's distance learning modules will be entitled to request reader rights in APPEL. This will allow them to access their project documents directly in APPEL. See [section 11.2](#) for more information.



### 7.3 RO and HQ support

HQ will:

- Prepare templates for modification requests and reports of non-essential changes on the PDF eSingle Form and send them to WCOs for completion.
- Upload modification requests and reports of non-essential changes into APPEL.
- Process formal amendments to the original contribution agreements signed by WHO and ECHO.
- Amend awards if necessary to reflect the changes agreed by ECHO.

**Key points section 7**

- ✓ Different types of project amendment are subject to different modification procedures.
- ✓ WCOs should discuss project modifications with ECHO focal points in the field well in advance.
- ✓ WCOs should keep ECHO informed of even minor changes to projects.
- ✓ In addition to keeping ECHO field staff informed, WCOs should prepare reports of either non-essential changes or modification requests and send them to HQ for submission to ECHO in Brussels.
- ✓ Changes that require an E-modification request must be submitted to ECHO in Brussels no later than one month before the end of the implementation period of ECHO-funded projects.

## 8. INTERMEDIATE REPORTS

### 8.1 Overview

The purpose of intermediate reports is to review the work accomplished and compare:

- The results envisaged and progress made
- Activities envisaged and implemented
- Costs budgeted and costs incurred.

Intermediate reports are:

- Prepared on the PDF eSingle Form.
- Normally required for projects with implementation periods of more than ten months. (ECHO will not generally request intermediate reports for projects with implementation periods under ten months, but this may vary from project to project<sup>13</sup>.)
- Normally due three months before the end of the implementation period.
- A good moment to notify ECHO of minor changes to projects. ("Minor changes" are defined as changes that WHO can make unilaterally, and that do not require ECHO's prior agreement. See [section 7](#) of these guidelines for more information.)
- Even minor changes should be discussed with ECHO focal points at country level before intermediate reports are submitted to ECHO headquarters in Brussels.

A detailed intermediate financial report is **not required**. WHO only needs to:

- Update the financial overview in section 10 of the PDF eSingle Form.
- Include information on costs incurred at the intermediate reporting stage.
- If necessary, revise its original budget projections in section 10.3 of the PDF eSingle Form.

Intermediate reports **must be submitted to ECHO on time**. Non-submission of these reports means that ECHO is not able to review project progress at the intermediate stage and alert WHO to any contractual changes that may be required. ECHO may even consider WHO's failure to submit an intermediate report by the required deadline, without any valid justification, as sufficient grounds to terminate the contribution agreement.

### 8.2 Completing the intermediate report, section by section

Minimum essential information to be included in the intermediate report		<ul style="list-style-type: none"> <li>▪ Activities carried out during the reporting period (i.e., directly related to the project description and activities foreseen in the agreed proposal).</li> <li>▪ Difficulties encountered and measures taken to overcome problems.</li> <li>▪ Changes in implementation.</li> <li>▪ Achievements to date/progress against results using the indicators set out in the agreed project proposal.</li> <li>▪ A summary of funds encumbered and expended.</li> </ul>
1. General information	1.3 Narrative summary	<b>This section is optional.</b> Update only if figures have changed since the proposal was submitted (e.g., the number of people in need, changes in the political/ security situation).
	1.4 Area of intervention	<b>This section is optional.</b> It should be completed only if there are changes in the geographical areas of intervention. List these changes and briefly explain the rationale behind the changes of location, if not explained in other sections of the Single Form. <b>Do not wait until the intermediate reporting stage to report these changes: you should 1) inform the ECHO focal point in the field as soon as they occur and 2) prepare an eModification request</b> to be submitted formally to ECHO through APPEL. Transparency with ECHO, even for minor issues, is crucial to maintain a relationship of mutual trust.

<sup>13</sup> The individual contribution agreements signed between ECHO and WHO set out the reporting requirements for each project.

3. Needs assessment and beneficiaries	3.1.5 Previous evaluation or lessons learned exercise relevant for this Action	<p>Provide information on new assessment(s) carried out since the submission of the proposal. Bear in mind that ECHO pays close attention to the results of assessments, and may well request the actual assessment report if the information provided in section 3.1.5 is not satisfactory.</p> <p>Ensure that the titles of assessments are not overblown or misleading, and always provide realistic information, in order to avoid raising the expectations of the donor<sup>14</sup>. Failure to submit a satisfactory assessment report might diminish the trust of the donor and jeopardize the rest of the good achievements of the country office.</p>		
	4.2.3 Indicator	Provide an update on progress made towards the achievement of the specific objective.		
4. Logic intervention	4.3.4 Comments on beneficiaries	<p>ECHO must be kept informed of changes to project beneficiaries throughout project implementation. <b>Do not wait until the intermediate reporting stage to report these changes: instead, please 1) inform the ECHO focal point in the field as soon as they occur and 2) prepare an eModification request</b> to be submitted formally to ECHO headquarters in Brussels. ECHO must be informed of sudden changes in the number of beneficiaries reached during the implementation period. The donor may decide to terminate the agreement with WHO if it considers that the justification provided by WHO is not sufficient.</p> <ul style="list-style-type: none"> <li>▪ <b>Progress value:</b> Provide an update on the progress value, if available.</li> <li>▪ <b>Update on indicators:</b> Provide an update on all indicators.</li> <li>▪ Provide an overall update on progress made in the implementation of the activities.</li> </ul> <p>ECHO has often commented on the lack of <b>quantitative and qualitative data</b> with regard to the implementation of activities in the field. For instance, WCOs may report simply that activities have been 'achieved' without providing any further information.</p> <p>Provide a detailed description of each activity implemented, including tables, maps and other data that allow ECHO to understand how the results were achieved.</p> <p>ECHO has stressed on several occasions that a clear breakdown of the activities implemented <b>by partners</b> was missing in WHO's reports.</p> <p>In your report, please clarify the role of implementing partners and the exact type of interventions that were implemented. Doing so will help in justify the decentralization of activities and show the benefits of involving local partners. Prepare a table showing the name of each NGO subcontracted, the amount received, their geographic location and the range of interventions they implemented .</p>		
	4.7 Additional information on operational context of Action	Provide an update on assumptions, preconditions and risks.		
	6. Implementation	6.1 Human resources and management capacities	Provide an update only if the management of human resources has had a negative effect on project implementation.	
		6.3 Equipment and goods	<p><b>This section is optional.</b> Provide an update only in case of changes or where issues related to equipment and goods may have had a negative effect on the implementation of the project.</p> <p>In several cases, ECHO found that information provided in reports was not sufficient to determine, for example, which items were procured during the reporting period.</p> <p>Provide detailed lists of all items procured. At the proposal development stage, you should have submitted detailed procurement and distribution plans to ECHO (with maps, if possible). Ensure that lists of items procured 1) are aligned with the initial lists submitted to ECHO and 2) match the information in the GSM.</p>	
			6.5 Work Plan	Attach an updated version of the work plan, if needed.

<sup>14</sup> For example, ECHO requested the document 'data analysis based on monthly reports from the contracted NGOs detailing consultations and treatment provided as well as health kits delivered' mentioned in the intermediate report submitted by a WHO country office. In reality, no analysis had been conducted and the country office was only able to submit the list of implementing partners and the intervention areas they had been working in throughout the implementation period.

	<b>6.6 Security</b>	Update section 6.6 only in cases where this section was initially filled in.
	<b>6.7.4 Coordination, supervision and controls</b>	<p>Provide an update on the entire implementing partner section.</p> <p>On several occasions, ECHO has highlighted the lack of clarity with regard to field coordination issues in reports submitted by WCOs. For example, it was not clear if the partners selected at the beginning of the project were actually able to implement activities foreseen (given the changing security situation in the country or the fragile legal status of the organization itself) and if any problems arose, e.g., with regard to coordination of activities in remote areas or geographical locations heavily affected by a conflict.</p> <p>Use this section to inform ECHO if coordination capacity at field level has decreased, as this might result in a lower implementation rate of activities. For instance, ECHO should be informed if a local partner has reduced access to the target areas, if its legal status has changed, if remote management tools selected are not allowing for effective coordination, etc.</p> <p>If these changes occur before the intermediate report is due, inform ECHO by means of a report of non-essential changes.</p>
<b>7. Coordination</b>	<b>7.4 Coordination with development actors &amp; programmes (transition, LRRD exit strategy &amp; resilience)</b>	<b>This section is optional.</b> Update this section only if there have been coordination difficulties that could have a significant impact on project implementation.
<b>8. Monitoring and evaluation</b>	<b>8.3 Studies carried out in relation to the Action (if relevant)</b>	Provide an update on project monitoring if relevant.
		In several cases, ECHO highlighted that reports were missing crucial quantitative and qualitative data. ECHO also suggested that in some cases indicators had not been checked and that data collection and analysis had not been conducted thoroughly.
		Make sure that you have a strong M&E framework in place before applying for ECHO funds, in order to be able to provide as much detailed information as possible in your intermediate and final reports.
<b>9. Visibility, communication and information</b>	<b>9.3 Additional information/communication activities</b>	Provide information on visibility activities. Describe any innovative methods employed to make ECHO interventions visible (e.g., when the standard display of the EU logo is not possible because of security concerns).
<b>10. Financial overview of the project</b>	<b>10.1 Estimated expenditures</b>	Provide one overall figure showing costs incurred at the intermediate reporting stage (see section 10.1 of the PDF eSingle Form).
		<p>The intermediate reporting phase is the ideal time to review all project expenditures (those incurred using funds from ECHO and from all other donors) so as to have a realistic overview of likely expenditures at the final reporting stage. This will allow you to adjust the figures and submit a revised budget to ECHO if necessary.</p> <p>Bear in mind that ECHO might interpret a drastic decrease in the overall budget during the implementation period as a negative development (e.g., the country office might have lost the trust of another donor during the implementation period).</p> <p>Should the overall budget decrease (e.g., because other donors changed the scope of their intervention in the country) inform ECHO as soon as possible and clearly explain why this happened. Remember that reducing the budget of a multi-donor project may well have a negative impact on the number of beneficiaries reached, and the cost per beneficiary calculations might change.</p> <p>Please note that ECHO focuses more on cost per result allocations, as opposed to cost per beneficiary allocations. In case of underspending – e.g., because an activity cannot be implemented - inform ECHO immediately and propose a reallocation of the funds.</p> <p>For projects financed under ECHO's multi-donor financing modality, the implementation period for other donor contributions will not necessarily match the implementation period of the ECHO grant. Therefore, WCOs will need to be vigilant in ensuring that all reported expenditures incurred using other donor contributions fall fully within the implementation period of the ECHO award.</p>

### 8.3 RO and HQ support

HQ will help WCOs prepare intermediate reports (using the financial monitoring workbook) by:

- Converting US\$ expenditures to €.
- Supporting the mapping of expenditures and encumbrances by result.
- Advising WCOs on whether a budget reprogramming is necessary.
- Submitting intermediate reports to ECHO through APPEL on the PDF eSingle Form.

#### Key points section 8

- ✓ A good intermediate report depends on good monitoring (see section 6 of these guidelines).
- ✓ The intermediate reporting stage is a good time to notify ECHO of minor project changes and adjust WHO's budget projections if necessary (e.g., if not all donor funding has materialized).
- ✓ WCOs should not wait until the intermediate reporting stage to request more substantial changes that require a formal amendment to the project (see [section 7](#) of this document). WCOs should prepare separate eModification requests for these changes.
- ✓ WCOs must submit intermediate reports on time, to allow ECHO to review project progress and advise WHO of any corrective actions that might need to be taken.

## 9. FINAL REPORTS

### 9.1 Overview

Final reports are:

- Prepared on the PDF eSingle Form.
- Due three months after the end of the implementation period of the project.
- Accompanied by detailed financial reports breaking down expenditures into main budget categories.

Final reports should allow ECHO to review the work accomplished by allowing a comparison between the principal objectives and:

- The results envisaged and those actually achieved
- The number of beneficiaries targeted and the number actually reached
- The activities envisaged and those implemented
- The costs budgeted and those incurred.

### 9.2 Critical factors for successful final reports

1. **The report should contain no surprises.** Any changes such as a decrease or increase in the number of planned beneficiaries, a new area of implementation, a change in implementing partners, or modified indicators, should have been communicated to ECHO well before the final reporting stage.
2. **The number of targeted beneficiaries has been reached.**
  - If your proposal has been correctly formulated, you will have underestimated the number of targeted beneficiaries by around 10 to 20%. Thus at the final reporting stage you will be reasonably sure to reach your goals most of the time and will not exceed your target by a wide margin, which ECHO will also query.
  - Make sure there is a clear link between the beneficiaries reached and the aid delivered.
  - Make sure that there is consistency between the number of beneficiaries reported per result and the overall number of beneficiaries reached. Explain any discrepancies.
3. **Include solid data to underpin the achievement of planned results.** The report should include quantitative and qualitative data to support the achievement of the results. ECHO will vet this thoroughly and may come back with questions. Therefore, make sure that your indicator reporting and data collection and analysis are thorough and accurate.
4. **Include full information on the distribution and use of project equipment and supplies.** It is not acceptable to order goods and simply put them into storage: ECHO requires detailed information on how the goods and supplies it has paid for were used to help project beneficiaries.
  - Provide information on how the supplies were distributed and who benefitted from them. The information could be in the form of a map showing the geographical distribution of supplies to health care facilities. WHO must be able to show that goods and supplies were delivered when they were still needed. For example, ECHO will object to funding the costs of vaccines and syringes that arrive after the end of disease outbreaks and vaccination campaigns.
5. **Provide detailed final lists of NGO implementing partners,** including: types of services offered, number of beneficiaries reached, geographical areas of intervention, the amount of the sub-contract issued by WHO to each NGO or other implementing partner.
6. **Include proof of visibility initiatives.** These may be: photos showing the EU logo on poster billboards; project staff wearing clothing with the EU logo; video documentaries; acknowledgement of EU funding in Web stories, media articles and press releases concerning the project.
7. **Ensure that all expenditures in the detailed financial report are fully justified** and directly linked to the project.

### 9.3 Goods remaining at the end of a project

Normally, ECHO considers supplies procured as eligible costs only if they are (1) received and used/distributed to beneficiaries during the implementation period of the project and (2) necessary for the project. However, in difficult operational contexts, e.g., Syria, ECHO has established the following steps to take in the event that there are remaining goods at the end of the implementation period of a project:

#### No-cost extension:

- WHO can request a no-cost extension to give it more time to distribute the remaining goods. This can only be done if:
  - The no-cost extension does not go beyond the time period covered by the applicable financing decision.
  - The distribution of the remaining goods is necessary in light of needs in the field (this would in most cases require a modification of the project results/indicators).
  - There is either no follow-up project funded by ECHO, or the follow-up project does not focus on the same needs (i.e., there is no overlap in activities/results).

#### Transfer or donation of remaining goods:

- When ECHO considers that the project results are satisfactory, and the remaining amount of goods is marginal (i.e., between 3% and 5% of all the goods of a similar type purchased during the project), WHO can transfer the goods to a follow up ECHO-funded project. In practical terms, this means that the costs are charged to the first project, but can then be used in the follow up project.
- If there is no ECHO follow-up project, WHO can donate the goods to local communities, NGOs, local authorities or other entities as identified in Article 10.4b of the General Conditions<sup>15</sup>.

ECHO will consider remaining goods in excess of 5% of all the goods of a similar type on a case-by-case basis.

### 9.4 Completing the final report, section by section

How to interpret the coloured text in the tables below:

	Issues that <u>ECHO has flagged repeatedly</u> in requests for additional information following its review of final reports submitted by WHO (and eventually measures that the donor has taken in response to these issues).
	<u>Suggestions, based on previous ECHO requests for additional information</u> , on how to improve reporting and therefore respond adequately to ECHO's expectations.

<b>1. General information</b>	<b>1.3 Narrative summary</b>	The narrative summary should succinctly describe and synthesize the achievements of the project.
	<b>1.4 Area of intervention</b>	<b>This section is optional</b> and should be completed only if there have been changes to the area of intervention. In that case, provide information on the locations which have changed, and explain the rationale behind the changes. Note that these changes should have been communicated to ECHO at an earlier stage, either by means of an intermediate report or a report of non-essential changes.
<b>2. Humanitarian organization in the area</b>	<b>2.2 Synergies with other projects</b>	<b>This section is optional.</b> Report here only when the situation described in the proposal has changed drastically.
<b>3. Needs assessment and beneficiaries</b>	<b>3.1.5 Previous evaluation or lessons learned exercise relevant for this project</b>	WHO should provide information on new assessment(s) carried out since the intermediate report. It should also report on major changes and specific difficulties encountered since the initial assessment.
		Sometimes ECHO requests the actual assessment report so as to have more insight into the analysis conducted at country-level. Note that ECHO might not be satisfied with the information provided, e.g., when the assessment title is too ambitious

<sup>15</sup> For goods that require expert handling (e.g., prosthetics and other health-related items), WHO may be granted a derogation to retain the goods in question, provided that it pledges to use them for the benefit of humanitarian action.

		compared to its findings.
		Always provide realistic information, in order to avoid raising the expectations of the donor. Failure to submit a satisfactory document might diminish the trust of the donor and jeopardize the rest of the good achievements of the country office.
3.2.1 Estimated total number of direct beneficiaries targeted by the project		The purpose of this section is to provide updated figures on the beneficiaries reached through the project.
		Discrepancies between the numbers of beneficiaries targeted in the original proposal and the final number of beneficiaries reached are one of the main issues identified by ECHO. Failure to provide a clear overview of the project beneficiaries can lead to ECHO's unilateral termination of the agreement.
		At the beginning of the project, prepare project-specific tables to track the number of beneficiaries reached each week or month and compare it to the number of beneficiaries targeted in the proposal (see <a href="#">section 6.2</a> of these guidelines). Continuous monitoring is essential to identify discrepancies between planned and actual numbers.
		The link between the beneficiaries reached and the aid delivered was not clear and necessitated further explanation (cost per beneficiary calculation imprecise or missing).
		Start by clearly stating in the project proposal the expected cost per beneficiary and report any deviations from the planned figure. If the deviation is noticed prior to the submission of the final report, immediately inform the donor, and provide a clear explanation of the reasons that led to the increase or decrease in the number.  ECHO does not seek the lowest cost per beneficiary but the lowest cost of providing essential services. So, rather than going for the cheapest option, go for real, reasonable costs, provided that you can prove that good-quality services have been delivered.
3.2.2 Estimated disaggregated data about direct beneficiaries		In its final report, WHO must provide disaggregated data about direct beneficiaries, even if this was not done in the initial funding proposal. If possible, provide estimated percentages of female and male beneficiaries in different age groups as this is relevant for identifying the changing needs of women and men, be they children, adults or older people in the specific intervention area.
		The total of the "estimated % of target group" (which includes infants and young children, adults, elderly, etc.) might not necessarily add up to 100%, as information might not be available for all age categories. However, the total of females and males should be equal to 100%.
3.2.3 Does the project specifically target certain groups/vulnerabilities?		<b>This section is optional.</b> WHO must provide an update in case the target groups change during the implementation period of the project.
3.2.6 Beneficiaries: more details		Include here any information on the involvement of beneficiaries in the implementation and evaluation of the project. Do not forget to report on major difficulties, as well as challenges with partners and affected populations.
4. Logic intervention	<b>This chapter is the most important part of the Single Form. The information provided will be used to assess the links between the previously identified needs, the principal and specific objectives, the results to be achieved, the activities, pre-conditions, risks, assumptions and costs.</b>	
	4.2.3 Indicator	<ul style="list-style-type: none"> <li>▪ <i>Achieved</i> - At the final report stage, WHO will be asked to provide the achieved value for each indicator.</li> <li>▪ <i>Report on specific objective</i> -Report on the level of achievement of the specific objective, providing additional information and context that the indicators might not have been able to capture.</li> </ul>
		If ECHO deems that objectives have not been achieved or that funds have not been used appropriately, it may ask WHO to refund all or part of the contribution. Since 2009, WHO has returned almost US\$200,000 to ECHO. As a result, WHO has had to identify funds from other sources to cover the cost of expenditures that were rejected by ECHO as ineligible.
		When filling out the final report, pay particular attention to the logical framework of the project and how the indicators link up directly to the overall project objective.

		<ul style="list-style-type: none"> <li>✓ Make sure that the report is aligned with the original project proposal and that it includes information on the implementation of each activity/indicator.</li> <li>✓ Make sure that the information you have collected is relevant to the indicators presented in the proposal.</li> <li>✓ Allow enough time to work on the narrative so that it clearly mirrors achievements and make sure that you have gathered all supporting documents (i.e., detailed list of medicines procured and distributed, names and locations of health facilities supported, NGO implementing partners, their activities and geographic areas of intervention, assessments conducted, etc.).</li> <li>✓ Remember that ECHO should have been informed of implementation problems either at the intermediate reporting stage or by means of a modification request. If you wait until the final report to describe problems that prevented you reaching your goals, it is too late.</li> </ul>
	<p><b>Single Form section 4.3: objectives, results and achievements</b></p> <p>Explain, in a narrative form, the results achieved and the related costs identified in the financial report as well as any changes that occurred as compared to the initial proposal with regard to means and costs.</p> <p>The main reporting focus should be on the results of the project and how they were achieved. Sometimes when more information is requested it is because it is not clear to ECHO how the results have been achieved or how the activities reported are related to the results of the project. It is important that this 'focus on results' be kept in mind when completing this section of the Single Form.</p>	
	<p><b>4.3.1 Estimated total number of direct beneficiaries targeted by the result</b></p>	<p>Provide the actual number of the project beneficiaries.</p> <p>ECHO often finds discrepancies in the number of beneficiaries reached. The number of beneficiaries reached under each result frequently does not add up in the section of the overall number of beneficiaries reached. Such mistakes reduce credibility and shed a negative light on the WCO with regard to its monitoring capacities.</p> <p>While developing project-specific tables to track planned beneficiaries versus beneficiaries reached (to be filled on a weekly/ monthly basis, allowing for continuous monitoring in order to avoid discrepancies in the respective reports), <b>make sure that you break down beneficiaries by intervention area or result.</b> This is crucial for monitoring purposes, but also to avoid miscalculations and therefore discrepancies in the number of beneficiaries reported. Also, before submitting, always double-check that figures add up and that an overview table is readily available should the donor request it.</p>
	<p><b>4.3.4 Comments on beneficiaries</b></p>	<ul style="list-style-type: none"> <li>▪ <i>Achieved value:</i> Update the value and provide the value actually achieved.</li> <li>▪ <i>Source of verification (SOV):</i> Update the SoV comments.</li> <li>▪ <i>Report on indicators:</i> Provide a comprehensive report on the level of achievement of the result and how it was verified and/or measured by the indicator. If the indicators are no longer verifiable and measurable, explain how the achievement of the result was measured. Conclude with overall comments on the achievement of the result and the main challenges encountered.</li> </ul>
	<p><b>Reporting on activities</b></p>	<ul style="list-style-type: none"> <li>▪ It is not enough to state merely that activities were "completed" or "implemented as planned". ECHO expects WHO to provide a detailed report on the implementation of each activity, describing which activities went well, which were more challenging, and what measures were taken to mitigate these challenges.</li> <li>▪ Provide a full update on activities at the final reporting stage, even if you have already provided a detailed description in your intermediate reports to ECHO. Avoid text that simply refers ECHO back to the intermediate report.</li> </ul>
	<p><b>4.7 Additional information on operational context of project</b></p>	<p>Explain whether the pre-conditions were met, whether any risks materialized, and how they affected the success of the project.</p>
5. Quality markers	<p><b>5.2 Additional comments and challenges</b></p>	<p>Provide information on improvements and setbacks in efforts to integrate gender, age and resilience.</p>
6. Implementation	<p><b>6.1 Human resources and management capacities</b></p>	<p>Provide an explanation in cases where the management of human resources has had a negative effect on the implementation of the project.</p>
	<p><b>6.3 Equipment and goods</b></p>	<p>Provide an explanation in case the purchase of equipment and goods has had a negative effect on the implementation of the project. In the case of unused items remaining at the end of the project, provide annexes explaining the end use of these supplies.</p> <p>In several cases, ECHO found that information provided in reports was not sufficient to clarify the items that were procured during the reporting period (in many cases no procurement lists were provided).</p>

		<p>You must fully account for the use of goods and supplies procured under the project. It is not enough to simply provide a list of items procured; please provide information on how the supplies were distributed and who benefited from them. This could be in the form of a detailed list of items procured, showing how and where they were distributed (with a map if possible). The procurement list must match the procurement data in the GSM.</p>
	<b>6.4 Use of humanitarian procurement centres (HPCs)</b>	WHO is revising its procurement procedures following a recent ECHO evaluation. Consult HQ for additional information.
	<b>6.6 Security</b>	Update section 6.6 only if this section was filled in at the proposal stage.
	<b>6.7.2 Added value</b>	Explain in general terms how WHO's implementing partners contributed to the achievement of the objective.
	<b>6.7.4 Coordination, supervision and controls</b>	Report on coordination, supervision and control mechanisms and explain any difficulties encountered. Include detailed information on the role of each implementing partner and the activities they implemented.
<b>7. Coordination</b>	<b>7.4 Coordination with development actors and programmes (issues of transition, LRRD exit strategy and resilience)</b>	<p>Provide updates only when necessary (e.g., when coordination difficulties significantly affected implementation of the project). You will also need to provide a detailed report of the role of implementing partners and the activities carried out by each one.</p> <p>ECHO has repeatedly stressed that it wishes to be informed of implementation challenges faced by WHO's implementing partners for whatever reason (e.g., deteriorating security, access difficulties, or because the organization is no longer recognized by the government as a legal entity in the country).</p> <p>Inform ECHO immediately if a partner organization is no longer able to implement activities, and identify/propose alternative partners. Failure to do so will most probably lead to project results not being achieved, reports being incomplete and hence a request from ECHO to return the funds provided.</p>
<b>8. Monitoring and evaluation</b>	<b>8.3 Studies carried out in relation to the project (if relevant)</b>	<p>Explain how monitoring has been carried out and the main challenges encountered. Report also on any evaluations carried out and their conclusions. Remember to include copies of the evaluations/audits financed with ECHO's contribution.</p> <p>In several cases, ECHO highlighted that reports were missing crucial quantitative and qualitative data or that data provided in a final report were not consistent with information contained in the intermediate reports. ECHO also suggested that in some cases indicators had not been checked and that data collection and analysis had not been conducted thoroughly.</p> <p>Make sure that your country office has a strong M&amp;E framework in place before applying for ECHO funds, in order to be able to provide as much detailed information as possible in the intermediate and final reports.</p> <p>ECHO emphasized in several cases that it was not clear how monitoring had been conducted throughout the project implementation period and that therefore it was not clear how access and coverage were achieved (especially in insecure and difficult areas).</p> <p>Before embarking on the project implementation, make sure that you have developed a clear M&amp;E matrix, with special attention to activities which are conducted through remote management and therefore require special M&amp;E tools.</p>
<b>9. Visibility, communication and information</b>	<b>9.3 Additional information and communication activities</b>	<p>WHO's efforts to give visibility to ECHO funding should be clear and sincere, but never excessive. ECHO's funds can be used to create visibility for both population needs and issues as well as for WHO and ECHO itself.</p> <p>Make sure that you provide evidence of visibility activities (e.g., photos of EU logos on project supplies, meeting materials, project billboards), and explain what type of activities have been implemented and where. You can also include links to web sites documenting visibility activities. In case ECHO's minimum visibility requirements were not met, you must provide strong justification.</p> <p>ECHO highlighted that the some reports did not explain how visibility and communication were addressed during the implementation period.</p> <p>You should clearly describe how you have given visibility to ECHO as a donor, e.g., by placing EU logos on project supplies and equipment, etc. Also attach photos or include links to other materials (e.g., video documentaries and articles on WHO's web site) documenting your visibility activities.</p>

10. Financial overview of the project	10.2 Financial overview of the project	See section 9.5 below.
	10.7 VAT exemption granted	WHO confirms that the co-financing has not led to a double-funding of the project.

## 9.5 Final financial reports

WHO submits two final financial reports to ECHO:

1. A financial report (jointly prepared by the WCO and HQ), organized by budget heading, with a clear identification of all expenditures incurred. The breakdown of the financial statement should be consistent with the original budget breakdown submitted to ECHO. For projects financed under ECHO's multi-donor financing modality, the financial report includes the expenditures incurred using other donors' contributions to the project.
2. A final certified financial statement signed by WHO's Chief Accountant.

The figures in the financial report prepared by the WCO and HQ must match those in the final certified financial statement signed by the Chief Accountant.

The above financial reports are:

- Sent together to ECHO.
- Submitted no later than three months after the end of the implementation period of the project.
- Drawn from the GSM, using GSM expenditure categories.
- Submitted in €. As the GSM operates in US\$, WHO has to convert expenditures back into € using the operational rate of exchange in force on the day that WHO recorded the entire contribution amount in the GSM.

WHO is no longer required to submit an individual signed management declaration for each project. Instead, WHO provides one annual management declaration that covers all ECHO-funded projects implemented over the course of the year.

As part of its financial reporting requirements, WHO also submits the following information to ECHO:

- The link to WHO's web site where information on contractors and implementing partners is available. See WHO's procurement web pages <http://www.who.int/about/finances-accountability/procurement/en/>. The web page contains several tabs. Click on the "Contract Awards" tab.
- For projects that are fully funded by ECHO, details on remaining goods and equipment, including low-value equipment referred to in Article 12.4.d.iv and goods referred to in Article 12.6.a of ECHO's General Conditions.

### 9.5.1 The notional approach

ECHO uses the so-called "notional approach" when evaluating multi-donor final financial reports. The "notional approach" means that ECHO will reimburse project costs in full provided the amount of eligible expenditures is equal to or exceeds the amount of ECHO's contribution to the project. When reviewing the eligibility of project expenditures, ECHO does not distinguish between expenditures using its own funds and those incurred using other donor contributions.

The use of the notional approach allows the EU to jointly co-finance projects, even though some of the project costs may not be eligible for EU funding.

See the practical example below, taken from ECHO's financial analysis of a previous WHO report:

EUROPEAN COMMISSION  
DIRECTORATE-GENERAL HUMANITARIAN AID AND CIVIL PROTECTION (ECHO)

Printed on:  
01/07/2013 10:07

Name of the humanitarian organisation : WORLD HEALTH ORGANIZATION  
Title of operation : Response to the ongoing outbreak of Yellow Fever in Uganda and other communicable diseases  
Agreement number : ECHO/DRF/BUD/2010/01006 Control mechanism: P

**FINANCIAL SUMMARY**

	Initial Budget EUR	Final committed EUR	Eligible amount EUR	Comments
Personnel	562.207,00	342.416,00	324.845,00	Ineligible : EUR 6.990 for personnel reported 6,5 months instead of 6 months + EUR 10.575 see comment below
Contractual services	150.773,00	58.035,00	0,00	Ineligible : EUR 58.035 see comment below
Medical supplies and literature	1.317.673,00	838.676,00	838.676,00	
Equipment, vehicles & furniture	85.000,00	34.999,00	26.540,00	Ineligible : EUR 6.459 see comment below
Training	117.381,00	20.000,00	0,00	Ineligible : EUR 20.000 see comment below
Travel	50.000,00	23.519,00	0,00	Ineligible : EUR 23.519 see comment below
General Operating Expenses	16.250,00	9.626,00	9.626,00	
<b>SUBTOTAL DIRECT COSTS</b>	<b>2.279.284,00</b>	<b>1.327.271,00</b>	<b>1.199.667,00</b>	
Indirect costs (max. 7%)	159.549,00	92.909,00	83.878,08	
Direct revenue / Interests / Other	0,00	0,00	0,00	
<b>TOTAL COSTS</b>	<b>2.438.833,00</b>	<b>1.420.180,00</b>	<b>1.283.545,08</b>	

Contract Amount (maximum contribution)	1.023.107,00
Contribution based on the eligible costs	
Contribution requested	
ECHO Contribution	1.023.107,00
Amount already paid	418.485,00
Balance	204.621,40

1.023.107,00 EUR  
ECHO Contribution

1.023.107,00  
418.485,00  
204.621,40

Comment:  
Only results 1 and 6 have been fully implemented. The other results (2 to 5), for which only 20% on average of the allocated budget has been properly implemented. The costs related to those results are not properly justified from an operational point of view. In addition, no justification was given by the partner on the under spending. For these reasons, results 2 to 5 have been declared ineligible.

Note that although ECHO rejected some expenditures as ineligible...

... the total amount of eligible expenditures identified by ECHO was greater than the amount of its contribution (ECHO assumes that the ineligible expenditures will be covered under other donor contributions).

Therefore, WHO was reimbursed in full.

**9.5.2 Minimum financial information to be provided to ECHO**

WHO is required to report on "significant costs" (defined as the costs that have a major financial impact on the project). These normally include the costs of:

- Personnel
- Equipment and supplies
- Running costs (general operating expenses)
- Communication, visibility and information activities
- Transfers and grants to counterparts
- Contractual services (including consultants, and contractual services that may be classified as DFC in the GSM).

**9.5.3 Analysing GSM expenditures**

GSM expenditures will need to be analysed in detail and matched against the budget headings in the project. See the table on the next page.

GSM entries	Action required by WCOs
Direct financial cooperation (DFC)	<p>Under DFC arrangements, WHO transfers funds to governments to cover the cost of items or activities that would normally be borne by governments themselves. See WHO eManual XVI.2. WCOs should:</p> <ul style="list-style-type: none"> <li>▪ Ensure that detailed supporting documents to justify the initial DFC contract are accessible via the GSM.</li> <li>▪ Ensure that the Funding Authorization and Certification of Expenditure (FACE) report is uploaded in the GSM within three months after completion of activities. The FACE report comprises two parts: <ul style="list-style-type: none"> <li>✓ The technical report submitted by the contractual partner (i.e., the governmental authorities). The level of detail in the report should be commensurate with the value of the contract.</li> <li>✓ The Funding Authorization and Certification of Expenditure (FACE) report, signed by the WHO designated programme leader or WHO Representative.</li> </ul> </li> </ul> <p>The FACE report is the key tool for reporting on DFC activities and expenditures<sup>16</sup>. The report should include a detailed expenditure breakdown, by category of expenditure, following the original approved budget. The designated programme leader or the WHO Representative has primary responsibility for ensuring the submission of acceptable reports and for verifying on the face of the report that activities have been performed in conformity with agreements and that project expenditures reflect a fair accounting of disbursement of the DFC funds.</p>
Agreements with UN agencies and NGOs	<p>UN agencies and NGOs must also submit detailed technical and financial reports to WHO detailing the use of the funds transferred to WHO. WCOs must ensure that all UN agencies and NGOs have submitted these reports, and that FACE reports are available. For more information on FACE reports, see the explanation under DFC above.</p>
Direct implementation (DI)	<p>Direct implementation (DI) is used when a WCO implements activities on behalf of the government or Ministry of Health and a standard DFC contract cannot be used. See WHO eManual XVI.5. WCOs should:</p> <ul style="list-style-type: none"> <li>▪ Ensure that detailed supporting documents to justify the initial DI contract are accessible via the GSM.</li> <li>▪ Ensure that the FACE report for DI activities (comparing actual expenses with the budget) and the accompanying summary technical report are completed within three months of completion of the activity. The level of detail in the technical report should be commensurate with the value and scope of the activity.</li> </ul> <p>The DI FACE report should be completed by the responsible technical officer, approved by the programme manager, and cleared by the Imprest holder and finance officer. The DI FACE report should be uploaded in the GSM and receipted against the DI IPO when recording the final deliverable.</p>
Expenditure batch	<ul style="list-style-type: none"> <li>▪ WCOs should avoid processing expenditure batches to transfer DI and/or DFC contracts, because of the difficulties tracing the original documents in the GSM.</li> <li>▪ For other expenditure batches, WCOs should review each expenditure and: <ul style="list-style-type: none"> <li>✓ Match it against the relevant result and budget heading in the ECHO financial report.</li> <li>✓ Ensure the expenditure falls within the implementation period of the project.</li> </ul> </li> </ul>
Salary costs	<ul style="list-style-type: none"> <li>▪ Ensure that supporting documents are accessible via the GSM.</li> <li>▪ Ensure that salary costs for each individual are fully justified (i.e., all staff must have directly contributed to the project).</li> </ul>

<sup>16</sup> The FACE reporting template is annexed to the DFC contract generated through GSM. In addition to reporting on expenditures, FACE reports include a brief summary of the technical report. FACE reports are deemed acceptable if certified by the responsible technical officer.

The table below summarizes the standard information WHO needs to submit per budget heading in the approved project budget. This information must be consistent with the content of the final narrative report.

Budget heading	Information required		
Personnel	<b>WHO is no longer required to submit detailed staff plans to ECHO as part of its final reports. Nonetheless, WCOs should have staff lists ready for verification in the event of spot checks by the EU.</b>		
	<b>For each expatriate and key management staff</b> <ul style="list-style-type: none"> <li>▪ Name</li> <li>▪ Function</li> <li>▪ Period (dates) during which staff costs charged to project</li> <li>▪ Total cost</li> </ul>	<b>Other staff (e.g. local staff) per function</b> <ul style="list-style-type: none"> <li>▪ Number of persons</li> <li>▪ Total number of days/months charged per type of activity</li> <li>▪ Total cost</li> </ul>	<b>HQ and regional office staff directly involved in the project:</b> <ul style="list-style-type: none"> <li>▪ Name</li> <li>▪ Function and type of activities charged</li> <li>▪ Period (dates) during which staff costs charged to project</li> <li>▪ Total cost</li> </ul>
Equipment	<b>Multi-donor financing modality:</b> <ul style="list-style-type: none"> <li>▪ No need to donate equipment provided the said equipment is used to the benefit of humanitarian aid actions.</li> </ul>	<b>100% financing modality</b> <ul style="list-style-type: none"> <li>▪ <b>Equipment under € 750:</b> <ul style="list-style-type: none"> <li>✓ No need to donate.</li> <li>✓ WHO must pledge to use for the benefit of humanitarian action.</li> </ul> </li> <li>▪ <b>Equipment above € 750:</b> <ul style="list-style-type: none"> <li>✓ WHO must either : <ul style="list-style-type: none"> <li>○ transfer the equipment to another EU-funded humanitarian aid project, and submit information on its destination in the final report to ECHO;</li> <li>OR</li> <li>○ donate the equipment to project beneficiaries, non-profit organizations, local authorities identified as implementing partners, or local sub-delegatees.</li> </ul> </li> <li>✓ WHO must submit information on the equipment's destination and retain documentary proof, namely a donation certificate.</li> </ul> </li> <li>▪ <b>Equipment above € 750 but under €2,500</b> <ul style="list-style-type: none"> <li>✓ Where the individual purchase cost of the equipment exceeds €750 but does not exceed €2,500 per item, it shall be exempt from the obligation of transfer or donation provided that the total costs of the retained equipment do not exceed €15,000.</li> <li>✓ The costs must be itemized, verifiable and reflected in the final report.</li> <li>✓ WHO must pledge to use the retained equipment for the benefit of humanitarian aid actions.</li> </ul> </li> <li>▪ <b>Derogations</b> <ul style="list-style-type: none"> <li>✓ If equipment is specialized or requires expert handling (e.g., sophisticated diagnostics equipment), ECHO may agree to a derogation to transfer or donated, provided WHO pledges to use the retained equipment for the benefit of humanitarian aid actions.</li> </ul> </li> </ul>	
Goods and running costs	<ul style="list-style-type: none"> <li>▪ Goods: quantities of medicines, medical kits, supplies and equipment.</li> <li>▪ Overall running costs (general operating expenses).</li> </ul>		
Communication, visibility and information	<p>WHO should provide the following information in section 9 of the PDF eSingle Form:</p> <ul style="list-style-type: none"> <li>▪ A list of items (e.g., T-shirts, posters, leaflets, stickers).</li> <li>▪ Evidence of visibility activities (e.g., photos showing the ECHO logo on supplies, project signboards, etc., press releases; video-documentaries; web stories acknowledging ECHO's contribution to WHO's humanitarian work).</li> </ul>		

## 9.6 Annexes to be submitted with the final report

### Mandatory

- Final detailed financial report (jointly prepared by WCOs and HQ) showing overall costs incurred by budget category.
- Final certified financial statement (FCFS) signed by the Chief Accountant. The figures in the final detailed financial report prepared by the WCO and HQ must match those in the FCFS.
- Request for payment (prepared by HQ).
- List of NGO implementing partners, types of services offered, duration of contract, amount of sub-contract for each NGO, geographical area of location.
- List of all supplies and equipment procured, together with distribution details (see sample list in the toolkit).
- List of all training courses implemented under the project (type of training, date, location, number of participants, disaggregated by gender, cost).
- Visibility activities: photos of project staff wearing items with the EU logo; copies of training materials with the EU logo; website articles and press releases acknowledging the EU's support of the project, etc.

### Optional/suggested

- Needs assessments conducted during the implementation period of the project.
- Mission reports from consultants or surge staff.
- Updated map showing all targeted health care facilities that received supplies and equipment .
- Breakdown of the number of children vaccinated in measles/polio campaigns (disaggregated by age/gender/geographical location).
- Latest HeRAMS reports.
- Copies of weekly epidemiological bulletins issued during the implementation period of the project.
- Copies of health promotion materials developed (posters, messages broadcast via radio or television, etc.)
- Copies of guidelines produced under the project.

## 9.7 RO and HQ support

The RO will:

- Review and clear the public health content of the final report.

HQ will:

- Work closely with WCOs to review and classify project expenditures.
- Ensure that all expenditures are eligible and that supporting documentation is available for GSM entries that do not match budget headings in the approved budget.
- Prepare the final detailed financial report.
- Request central Accounts to prepare the final certified financial statement.
- Submit both reports to ECHO.
- Request payment of the balance due to WHO.

## Key points section 9

- ✓ WHO must submit final reports to ECHO within three months of the end of the implementation period of the project. All encumbrances must be cleared by this date.
- ✓ WHO must provide a detailed report on all aspects of project implementation, including full information on implementing partners, beneficiaries reached, supplies and equipment procured and distributed, project challenges and constraints.
- ✓ Preparing final financial reports for ECHO requires judgement and an understanding of the technical and financial aspects of the project. For example, when an expenditure can be matched against several budget headings (e.g., training or travel), WCOs should identify the budget headings that are under-implemented by comparing the original budget against the actual expenditures, and assigning the expenditures to areas that are under-spent.
- ✓ Some GSM entries (e.g. "DFC", or "expenditure batch") will not match budget headings in the ECHO budget. These entries will need to be analysed and justified by supporting documents.
- ✓ HQ works closely with WCOs to prepare final detailed financial reports. WCOs should ensure that FACE reports for all DFC and DI activities are uploaded in the GSM. Missing FACE reports can cause significant delays preparing final financial reports for ECHO.
- ✓ WHO will need to provide full details of project staff (function, status, number of months charged to the project). The salary costs being charged must be for a period that is fully within the implementation period of the project. WHO no longer needs to submit detailed staffing plans to ECHO, but information on staff costs must be kept ready in the event of spot checks by the EU.
- ✓ Visibility and communication costs may be buried in other GSM expenditure categories such as "contractual services" or "general operating expenses". These expenditures will have to be identified and matched to the visibility and communications budget heading in the approved budget.
- ✓ Intermediate and final financial reports should be consistent.
- ✓ Final financial reports should be consistent with narrative reports. Both parts should be coherent and complementary.
- ✓ If WHO fails to submit reports on time, ECHO extends its deadline for reviewing and approving reports by an equivalent number of days.
- ✓ ECHO may send WHO a request for complementary information following its review of the final report submitted by WHO. It will hold the release of its final payment pending WHO's reply.

## 10. ECHO REVIEW AND ACCEPTANCE OF FINAL REPORTS

### 10.1 Submission of final reports

WHO must submit final technical and financial to ECHO no later than three months after the end of the implementation period of ECHO-funded projects.

### 10.2 ECHO's review of final reports

ECHO's review of WHO's final reports is conducted as follows:

- ECHO's **geographical unit** is responsible for reviewing the technical content of reports and assessing whether projects have attained the expected results set out in project proposals and have been carried out in compliance with the contribution agreements signed between WHO and ECHO.
- ECHO's **finance unit** is responsible for scrutinizing detailed final financial reports and validating payment requests submitted by WHO.
- ECHO has 60 days in which to review final reports and pay the balance due to WHO. In the absence of any reply by ECHO within 60 days, the reports will be deemed to have been accepted by ECHO.

### 10.3 Requests for complementary information

- If ECHO is unable to accept the final reports submitted by WHO, it may request WHO to submit additional information within 30 calendar days. ECHO's deadline for reviewing WHO's reports is suspended until WHO provides the complementary information requested by ECHO. This is referred to as "Stop the Clock".
- ECHO's 60-day deadline for accepting WHO's reports starts running again on the date on which it receives the required information from WHO.
- In the absence of a reply from WHO within the 30 day deadline for submitting complementary information, ECHO may either reject the final reports submitted or continue the procedure on the basis of the available information.
- WHO's failure to submit complementary information within the 30-day deadline can have severe financial consequences for the Organization. For example, ECHO may request WHO to reimburse the entire amount paid by ECHO, or it may not agree to release the final payment due to WHO.

### 10.4 Final payment requests

- WHO submits final payment requests to ECHO together with the final reports. Final payment requests show the amount pre-financed by ECHO, the expenditures incurred by WHO, and the balance requested.
- Once ECHO has determined the total eligible costs of the project, it notifies WHO of the final amount and the amounts to be paid by or returned to ECHO.
- ECHO pays the balance due to WHO within 60 calendar days following the registration of the final report and request for payment, provided that the report has been accepted.
- If ECHO determines that any expenditures are not eligible, it will deduct them from the amount of its final payment.
- WHO has 60 calendar days in which to request clarification from ECHO concerning the final balance to be paid to WHO.
- ECHO must reply to WHO's requests for clarification in writing within 45 days of receiving the request.

### 10.5 Accounts, technical and financial checks

- As per Article 23.3 of ECHO's [General Conditions](#) of February 2014, WHO must keep and make available to ECHO all relevant financial information in its original form for five years after the end date of ECHO-funded projects. WHO shall allow the European Commission and the European Court of Auditors, or their authorized representatives, to conduct desk reviews and on-the-spot checks on the use made of the EU contribution (including procedures for the award of procurement contracts and grants).

## 10.6 RO and HQ support

HQ will:

- Liaise between WCOs and ECHO in responding to requests for complementary information from ECHO.
- Ensure that replies to ECHO's requests for complementary information are complete, and submit them to ECHO through APPEL.
- Inform WCOs of ECHO's decision on the amount of total eligible costs. If applicable, ask WCOs to identify other sources of funding to reimburse expenditures that are not eligible. Arrange for any refunds to ECHO, and close the award.

### Key points section 10

- ✓ WHO must submit final reports to ECHO no later than three months following the end of the implementation period of ECHO projects.
- ✓ WHO must reply to ECHO's requests for complementary information within 30 days , or run the risk of ECHO rejecting the reports submitted by WHO. If ECHO rejects the reports, WHO may have to reimburse the entire amount of the grant to ECHO.
- ✓ WCOs are liable for ineligible expenditures. In other words, if ECHO determines that any expenditures are ineligible, and WHO cannot provide proof of their eligibility, WCOs will have full responsibility for identifying funds from other sources to cover these expenditures.
- ✓ WCOs must retain all documentation related to the project for up to five years following the final payment. The project documentation may be subject to desk reviews and spot checks by the European Commission and the European Court of Auditors or their authorized representatives.

## 11. GETTING READY TO WORK WITH ECHO

### 11.1 Distance learning courses

ECHO's comprehensive online training modules are available on its web site: <http://dgecho-partners-helpdesk.eu/dl/start> WCOs that wish to apply for ECHO funding should complete the basic courses on offer (see below).

#### DISTANCE LEARNING

In this section you can find the training programs of the available asynchronous distance learning courses.

An on-line application procedure has to be followed to register to the DG ECHO distance learning courses. The online procedure is called **MANTRA** (click [here](#) for more information) and it is the same online system which is already used to apply for the classical training. The system is fully managed by punto.sud. [Here](#) the detailed instructions on how to use MANTRA. They will be repeated at every step of the registration process.

All the courses are available on the platform <http://dl.dgecho-partners-helpdesk.eu/>

Please send any of your inquiries on training issues to: [echo-fpa-dltraining@dgecho-partners-helpdesk.eu](mailto:echo-fpa-dltraining@dgecho-partners-helpdesk.eu)



**Distance learning training registration for DG ECHO Staff only**

#### DISTANCE LEARNING AVAILABLE COURSES

Start Date	End Date	Course description	Lang	Status
OPEN	OPEN	<a href="#">The Single Form PDF 2014</a>	EN	<b>APPLY NOW</b>
OPEN	OPEN	<a href="#">The PDF eSingle Form 2008</a>	EN	<b>APPLY NOW</b>
OPEN	OPEN	<a href="#">The Audit process 2014</a>	EN	<b>APPLY NOW</b>
OPEN	OPEN	<a href="#">A very short introduction to the 2014 FPA</a>	EN	<b>APPLY NOW</b>
OPEN	OPEN	<a href="#">Final Report 2014</a>	EN	<b>APPLY NOW</b>

### 11.2 ECHO training courses

ECHO offers two-day training courses in different locations throughout the year. See <http://dgecho-partners-helpdesk.eu/training/start>.

### 11.3 ECHO basic documents, guidelines and templates

ECHO's [web site](#) contains detailed reference documents on the following topics:

Title	Description
<a href="#">The ECHO-UN Financial and Administrative Framework Agreement (FAFA)</a>	<ul style="list-style-type: none"> <li>Applies to all agreements between the EC and UN agencies.</li> <li>Sets out the objectives, principles and modality of cooperation between ECHO and the UN.</li> </ul>
<a href="#">The General Conditions applicable to contribution agreements signed between ECHO and the UN</a>	<p>There are two sets of General Conditions:</p> <ul style="list-style-type: none"> <li><a href="#">2013 General conditions</a> that govern UN-ECHO contribution agreements signed as of 2013.</li> <li><a href="#">General conditions for delegation agreements</a> between ECHO and UN agencies, signed from 1/01/2014 onwards.</li> </ul>
<a href="#">Key outcome indicators (KOIs)</a>	List of KOIs and details in both English and French

<a href="#">Key results indicators (KRIs)</a>	List of ECHO's KRIs for health and criteria for selecting them.
<a href="#">Single form guidelines, June 2016</a>	Apply to ECHO projects for which proposals have been submitted after 22.06.2016.
<a href="#">ECHO's Health Technical Guidelines</a>	Contain tables and checklists with key information on the typical health impacts of different types of emergency, their associated risk factors, priority actions to be taken, and suggested health indicators.
<a href="#">ECHO visibility manual</a>	Contains detailed information on ECHO's visibility requirements, including the exact specifications for the EU logo, and the wording to be used on joint publications. Available on ECHO's <a href="#">visibility web site</a> .
<a href="#">ECHO's approach to remote management</a>	Contain detailed information on ECHO's approach to remote management, and how to answer its seven key questions.
<a href="#">Gender and age marker toolkit</a>	Contains detailed guidance on how to apply ECHO's gender and age marker to humanitarian projects.
<a href="#">Resilience toolkit</a>	Contains detailed guidance on how to apply ECHO's resilience marker to humanitarian projects.

#### 11.4 Additional WHO guidance and information

WHO's "[Funding and managing humanitarian operations in countries: a toolkit](#)", available on the HQ Intranet site, contains additional information, guidance and templates to help WCOs manage ECHO grants.

## 11.5 HQ focal points

WHO/HQ: FOCAL POINTS FOR ECHO				
SUBMISSION OF PROPOSALS AND PROCESSING OF CONTRIBUTION AGREEMENTS				
Geographical area of responsibility	Name	Technical area of responsibility	E-mail	Tel.
All regions	DIAZ-HERRERA, Ms Cintia	Humanitarian emergencies	<a href="mailto:diazherrerac@who.int">diazherrerac@who.int</a>	+41 22 791 16 29 Mobile +41 79 467 13 71
	KONE, Ms Mirka	Humanitarian emergencies	<a href="mailto:konemi@who.int">konemi@who.int</a>	+41 22 791 36 47
	KABIR, Sophia	Humanitarian emergencies	<a href="mailto:kabirs@who.int">kabirs@who.int</a>	+4122 791 2555
	KARGBO, Marianne	Humanitarian emergencies	<a href="mailto:kargbom@who.int">kargbom@who.int</a>	
	FERNANDEZ, Ms Katya	Disease outbreaks under Epidemic Decisions	<a href="mailto:fernandezk@who.int">fernandezk@who.int</a>	+41 22 791 37 96
	PEREA, Dr William	Disease outbreaks under Epidemic Decisions	<a href="mailto:pereaw@who.int">pereaw@who.int</a>	+41 22 791 16 18
GRANT MANAGEMENT				
Iraq, Pakistan, Somalia, Sudan	BETORI, Ms Nina	Humanitarian emergencies	<a href="mailto:betorin@who.int">betorin@who.int</a>	+ 41 22 791 1556
All countries in the African region Libya, Morocco, Tunisia	LANGELY, Ms Cécile	Humanitarian emergencies	<a href="mailto:langelyc@who.int">langelyc@who.int</a>	+ 41 22 791 26 29
All countries in the Americas, Europe, South-East Asia, Western Pacific. Afghanistan, Djibouti, Iran, oPT, Yemen	KAWANDAMI-NIJENHUIS, Ms Chisha	Humanitarian emergencies	<a href="mailto:kawandamil@who.int">kawandamil@who.int</a>	+ 41 22 791 37 30
Syria crisis	SOPER, Ms Paula	Humanitarian emergencies	<a href="mailto:soperp@who.int">soperp@who.int</a>	+ 41 22 791 32 72 Mobile +41 79 217 34 83
All regions	FERNANDEZ, Ms Katya	Disease outbreaks under Epidemic Decisions	<a href="mailto:fernandezk@who.int">fernandezk@who.int</a>	+41 22 791 37 96
FINANCIAL REPORTING				
All regions	FRECHET, Mr Eric	Humanitarian emergencies	<a href="mailto:frechete@who.int">frechete@who.int</a>	+41 22 791 13 43
All regions	FERNANDEZ, Ms Katya	Disease outbreaks under Epidemic Decisions	<a href="mailto:fernandezk@who.int">fernandezk@who.int</a>	+41 22 791 37 96
HQ FOCAL POINT FOR EC IN THE DEPARTMENT OF COORDINATED RESOURCE MOBILIZATION (CRM)				
Global	DIZIER, Dr Bernard	Overall policy and donor relations	<a href="mailto:dizierb@who.int">dizierb@who.int</a>	+41 22 791 33 84

## Annex 1 – project elements that can be modified

ARTICLE SGA or SF SECTION	APPLICATION – what can be modified?
Article 2 SGA	<ul style="list-style-type: none"> <li>- The total eligible costs of the Action (increase or decrease)</li> <li>- The amount of EU funding and the percentage of EU funding.</li> <li>- If such an amendment is approved, the amount of direct costs is automatically updated as well.</li> </ul>
Article 3 SGA	<ul style="list-style-type: none"> <li>- Extension or reduction of the implementation period of the Action.</li> <li>- In exceptional cases, it is possible to change the eligibility period of the Action.</li> </ul>
Article 4 SGA	<ul style="list-style-type: none"> <li>- Deadlines for submissions of Interim reports and Final Reports</li> <li>- Adding Interim Report if initially not foreseen, either because of the extension of the Action, or because of operational needs.</li> </ul>
Article 5 SGA	<ul style="list-style-type: none"> <li>- Modification of the pre-financing arrangements (in exceptional cases).</li> </ul>
Article 6 SGA	<ul style="list-style-type: none"> <li>- Change, insertion or deletion of any supplementing or derogating clauses, or change in the "urgent" qualification of the Action.</li> <li>- Authorisation of donations of remaining goods and equipment that require agreement of ECHO.</li> <li>- Suspending the Action or Resuming it.</li> </ul>
Title	<ul style="list-style-type: none"> <li>- Change of the wording of the title when the description does not correspond to the reality in the field. (in exceptional cases)</li> </ul>
Region	<ul style="list-style-type: none"> <li>- Addition or deletion of a region or country of implementation</li> </ul>
Principal objective	<ul style="list-style-type: none"> <li>- Change of the wording of the principal objective when it does not correspond to the reality in the field. (in exceptional cases)</li> </ul>
Specific objective	<ul style="list-style-type: none"> <li>- Change of the wording of the specific objective when it does not correspond to the reality in the field. (in exceptional cases)</li> </ul>
SO – indicators (description and values)	<ul style="list-style-type: none"> <li>- Addition of a new indicator or modification of existing one.</li> </ul>
Result title	<ul style="list-style-type: none"> <li>- Change of the wording of the result title when it does not correspond to the reality in the field.</li> </ul>
Result – sector, sub-sectors	<ul style="list-style-type: none"> <li>- Change the sector;</li> <li>- Addition or deletion of sub-sectors.</li> </ul>
Result – beneficiary type	<ul style="list-style-type: none"> <li>- Change the type of beneficiaries.</li> </ul>
Result – estimated number of beneficiaries	<ul style="list-style-type: none"> <li>- Increase or reduction of the number of beneficiaries. (see box below for more details)</li> </ul>
Result - indicator (+ values)	<ul style="list-style-type: none"> <li>- Addition of a new indicator or modification of existing one.</li> </ul>
Request for use of remote management	<ul style="list-style-type: none"> <li>- Amendment would be necessary if remote management not agreed at proposal stage in section 8.1 SF.</li> </ul>
Request for use of financial support to beneficiaries, or modification of any element indicated in Article 11 GC	<ul style="list-style-type: none"> <li>- Amendment necessary if financial support to beneficiaries not agreed at proposal stage, or if financial support was agreed to, but some of its features are modified: such as the amount of financial support, the criteria, the purpose of the financial support, the definition of the persons or categories of beneficiaries, the possible conditions, the monitoring or supervision mechanisms.</li> </ul>