

# **Independent Review of the Value Added of the Central Emergency Response Fund (CERF) in the Countries Affected by the South Sudan Crisis**

## **Regional Synthesis Report**



**Jock Baker**  
**Independent Consultant**  
**2015**

## Table of Contents

List of Acronyms .....	i
Acknowledgements .....	ii
<b>EXECUTIVE SUMMARY .....</b>	<b>1</b>
Summary of Recommendations.....	3
<b>INTRODUCTION .....</b>	<b>4</b>
Objectives and Scope of this CERF Regional Review .....	4
Methodology .....	5
Humanitarian context of the South Sudan Crisis.....	6
<b>MAIN FINDINGS.....</b>	<b>9</b>
Value-Added of CERF .....	9
CERF Inputs .....	9
CERF Outputs .....	17
CERF Outcomes .....	20
CERF from a Regional Perspective.....	24
Using the CERF PAF as a Facilitation Tool during Reviews .....	24
<b>CONCLUSION .....</b>	<b>25</b>
<b>RECOMMENDATIONS.....</b>	<b>26</b>
RC/HC and Humanitarian/UN Country Teams.....	26
OCHA Pooled Fund Focal Points .....	26
CERF Recipient Agencies .....	26
CERF Recipient Agencies and Sector Leads in Uganda .....	27
CERF Recipient Agencies and Cluster Leads in South Sudan .....	27
CERF secretariat .....	28
<b>ANNEXES .....</b>	<b>- 1 -</b>
Annex 1- CERF PAF Ratings for the South Sudan Crisis during 2014 .....	- 1 -
Annex 2 - CERF PAF Ratings for South Sudan (Country Assessment) .....	- 14 -
Annex 3 - CERF PAF Ratings for Uganda (Country Assessment) .....	- 24 -
Annex 4 – CERF Grants for S. Sudan, Uganda, Kenya, Ethiopia and Sudan .....	- 36 -
Annex 5 – Key Reference Documents.....	- 41 -
Annex 6 – List of Interviewees.....	- 43 -
Annex 7: Terms of Reference.....	- 48 -

Cover photo © Jacob Zocherman

## List of Acronyms

AAP	Accountability to Affected Populations
AAR	After-Action Review
CCCM	Camp Coordination and Camp Management cluster
CERF	Central Emergency Response Fund
CHF	Common Humanitarian Fund
DRR	Disaster Risk Reduction
ERC	Emergency Relief Coordinator
FTS	Financial Tracking Service
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HRF	Humanitarian Response Fund
HRP	Humanitarian Response Plan
IASC	Inter-Agency Standing Committee
ICCM	Inter-Cluster Coordination Mechanism
ICRC	International Committee of the Red Cross
IDP	Internally Displaced Person
INGO	International Non-Governmental Organisation
IOM	International Organisation for Migration
KLDG	Kiryandongo Local District Government (Uganda)
NCE	No-Cost Extension
NFI	Non-Food Item
NGO	Non-Governmental Organisation
NNGO	National Non-Governmental Organisation
OCHA	Office for the Coordination of Humanitarian Affairs (United Nations)
OPM	Office of the Prime Minister (Government of Uganda)
PAF	Performance and Accountability Framework (CERF)
PCA	Programme Cooperation Agreement (UNICEF)
PoC	Protection of Civilian sites
RC/HC	Resident Coordinator/Humanitarian Coordinator
RR	Rapid Response
RRP	Regional Response Plan (UNHCR)
SGBV	Sexual and Gender-Based Violence
SRP	Strategic Response Plan
TOR	Terms of Reference
UFE	Underfunded Emergency
UN	United Nations
UNDP	United Nations Development Program
UNDSS	UN Department of Safety and Security
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization (United Nations)

## Acknowledgements

The support and engagement of agency staff in Uganda, Kenya and South Sudan and representatives of South Sudanese refugees in Uganda during this CERF Review was essential to the success of this exercise and very much appreciated. UNHCR staff and staff from the UN Resident Coordinator's office in Uganda and OCHA staff in Kenya, South Sudan, Ethiopia and Sudan facilitated the process at every stage by helping to organize interviews and provide administrative support whenever necessary. Staff at the CERF secretariat were also very helpful and provided support and information whenever requested.

The open dialogue during this review was very constructive and the openness to explore lessons learned was critical to understanding the context, especially given the broad scope of the assessment and analysis.

This is an independent review and the author therefore assumes responsibility for all opinions, recommendations and any inadvertent errors that may appear in this report.

\*\*\*\*\*

## EXECUTIVE SUMMARY

The primary purpose of this review was to assess the value added by Central Emergency Response Fund (CERF) funding allocated during 2014 for the humanitarian response to the crisis in South Sudan and bordering countries that provided asylum to South Sudanese refugees after the conflict had intensified in December 2013. A revised set of indicators in a draft version of CERF's Performance and Accountability Framework (PAF) was used as a tool to assess CERF's contribution with the objective of providing assurances to the Emergency Relief Coordinator (ERC) that commitments regarding inclusive planning processes, adherence to quality criteria, efficient allocation and use of CERF resources, and adequacy of recipient agency monitoring and evaluation systems are being respected.

### Scope and Context of the Review

Of the five countries covered by this review, the consultant visited Uganda, South Sudan, and also made a brief visit to Kenya. Desk reviews were carried out for Ethiopia and Sudan. The visit to Uganda included a site visit to Kiryandongo refugee settlement, providing an opportunity to interview agency staff in the field and refugee community representatives.

Despite the contextual differences between countries, comparisons of CERF processes and outcomes between countries provided the opportunity to identify commonalities that can be attributed to CERF systems and processes. Findings in this report have therefore focused on commonalities, highlighting where contextual differences have had a specific influence on outcomes.

This review also provided an opportunity to review how UNHCR's Refugee Coordination Model<sup>1</sup> had been applied to CERF during a large-scale emergency response.

### Value-Added of CERF during 2014 in the South Sudanese Crisis

The ERC allocated some US\$ 116 million in the form of CERF rapid response grants to support aid operations for the South Sudanese crisis during 2014. For South Sudan itself, some \$15 million was allocated in January, when the violence first escalated. Another \$15 million was allocated in April following the declaration of an L3 emergency, \$3.5 million in June for a response to an outbreak of cholera and another \$20 million during December. An additional \$62 million was allocated to four countries hosting South Sudanese refugees; some \$24 million at the beginning of the year to deal with the initial influx and an additional \$38 million towards the end of 2014.

The rapidity with which the South Sudanese crisis escalated into a major crisis following the events in South Sudan in December 2013 came as a surprise to both humanitarian agencies and donors. CERF allocations at the beginning of 2014 along with emergency reserves (for those agencies which had access to reserves) helped to ensure that, by the

---

<sup>1</sup> Joint UNHCR - OCHA Note on Mixed Situations: Coordination in Practice  
<http://reliefweb.int/report/world/joint-unhcr-ocha-note-mixed-situations-coordination-practice>

time an L3 emergency was declared by the ERC in February, recipient agencies had already been able to reinforce their operational presence and deliver life-saving assistance to populations affected by the crisis. The exception was Sudan, which took longer to scale up due to a combination of factors including poor infrastructure, initial reluctance by the government to recognize the influx of South Sudanese as refugees and low capacity of international agencies in areas where the influx occurred. CERF grants also filled critical gaps in humanitarian needs during the latter part of 2014.

The crisis quickly escalated into a major protection crisis affecting girls, boys, women and men characterized by widespread displacement, ethnic-based harassment, sexual and gender-based violence (SGBV), forced recruitment. By the end of 2014, the death toll was estimated to be over 50,000 and a food security crisis for an estimated 5.8 million people in South Sudan alone. CERF was widely recognised by recipient agencies and their partners as a timely and critical support in all five countries and there were numerous examples where CERF played a key role in supporting start-up of operations for activities in life-saving sectors while at the same time reinforcing the role of the RC/HC and other humanitarian coordination systems. CERF not only supported RC/HC coordination, but also demonstrated the usefulness of UNHCR's Refugee Coordination Model in complementing OCHA's role in coordinating and managing CERF processes.

The discretionary CERF grants allocated by the Emergency Relief Coordinator (ERC) at the end of 2014 resulted in processes that bore more resemblance to Underfunded Emergency (UFE) grants than they did for Rapid Response (RR) grants. In addition, prioritization for the CERF allocations at the end of 2014 tended to be less efficient in all five countries as agencies competed for funds to fill critical humanitarian gaps. This difficulty was attributed in part to challenges faced by HCTs and inter-sectoral working groups in assessing overall priorities, an issue that has been found during previous CERF country reviews. Nevertheless, in each country subsequent decisions by the RC/HCs on funding allocations were assessed as largely being consistent with CERF life-saving criteria that addressed specific humanitarian priorities.

While there was relatively little relevant outcome data available from agency evaluations and reviews, based on available evidence, it was evident that CERF had been an important contribution in strengthening agency capacities to deal with this crisis in all of the affected countries and interventions on the whole appeared to be appropriate, efficient and effective.

### **The CERF PAF as Measurement Tool**

This was the fourth CERF review where the PAF was used to facilitate a participative reflection with country level stakeholders to assess performance on the use of CERF. Feedback from participants suggested that this was a useful way of structuring data collection and discussions while at the same time raising awareness amongst recipient agencies, partners and cluster coordinators of the practical implications of PAF commitments. Three performance ratings were done for the current review: two separate country-specific assessments for South Sudan and Uganda, and a synthesised

version for all five countries.<sup>2</sup> The two country assessments were validated together with key stakeholders during interactive working sessions at the end of each field visit.

## Summary of Recommendations

A series of recommendations are provided at the end of this report, targeted separately at the RC/HC, the Humanitarian Country Team (HCT), OCHA Country Offices, CERF Recipient Agencies and the CERF secretariat.

**Recommendations targeted at the RC/HC and HCT** highlight the importance of strong leadership of CERF processes and point to the need for the development and application of user-friendly tools to facilitate decision-making, notably in terms of identifying overall priority humanitarian needs.

**Recommendations targeted at OCHA** suggest a key supporting role to facilitate needs-based decision-making by the HCT/UN Country Team, improving the utility of After Action Reviews and making use of consultations with agencies about other pooled funds as opportunities to raise awareness amongst recipient agencies about CERF.

**Recommendations targeted at specific recipient agencies** are:

- For **UNHCR**, it is recommended that guidelines be developed for UNHCR staff to help them better understand how they can support coordination of pooled funds when implementing the Refugee Coordination Model. Relevant learning from experiences of implementing the Refugee Coordination Model in Uganda and Sudan should be captured to inform these guidelines.
- For **UNICEF**, ensure UNICEF Country Offices and partners understand how to apply the revised Programme Cooperation Agreement to streamline the pass through of funds to partners.
- For **UNFPA, FAO, UNDP and UN Women**, improve the timeliness of transferring funds to implementing partners.

**Recommendations targeted at the CERF secretariat** encourage the development of “toolkits” for recipient countries to facilitate needs-based prioritization of decision-making by HCT/UN Country Teams and improve the utility of After Action Reviews (AARs). Since this review was the first opportunity to field test the draft version of the revised PAF, there are a number of recommendations for improving its relevance and utility during the next revision.

---

<sup>2</sup> The three PAF performance ratings are attached as annexes to this report.

## INTRODUCTION

The CERF secretariat initially developed a Performance and Accountability Framework in 2010 and proposed that the ERC select between three to five countries each year where a CERF country-level review<sup>3</sup> should be carried out. This CERF review covered five countries affected by the South Sudan crisis and offered a first opportunity to field test a draft updated version of the PAF. The PAF was used not only to guide data collection, but also as a facilitation tool during a working session with stakeholders at the end of field visits in Uganda and South Sudan.

### Objectives and Scope of this CERF Regional Review

The Terms of Reference (TOR) for this review (attached as an annex) detail the objectives and key questions of the review. The main purpose of this review is to assess the value added by CERF funding towards the humanitarian response to the crisis in South Sudan and its neighbouring countries since the intensification of the conflict in December 2013. Its scope covers inputs, processes, outputs and outcomes of CERF allocations<sup>4</sup> during 2014 for South Sudan and neighbouring countries (Ethiopia, Kenya, Sudan and Uganda) that were affected by the influx of South Sudanese refugees.

The revised list of PAF indicators provided the basis of quality assurance around certain specific broad areas of concern to the ERC:

1. *An independent assessment on how CERF processes are achieving key management benchmarks:*
  - CERF submissions are based on an inclusive planning process and adhere to established quality criteria;
  - Transparent systems are in place for correct allocation, efficient flow and use of CERF by agencies;
  - Adequate monitoring and evaluation systems are in place at the agency level for measuring and reporting on results;
2. *An independent assessment on the extent to which CERF has achieved the following:*
  - Consolidation of humanitarian reform by empowering the RC/HC and enhancing the quality of coordination within the cluster approach and across clusters;
  - Facilitation of adequate coverage, eliminates gaps and facilitates an effective division of labour among humanitarian actors;
  - Contribution to a timelier response; and
  - Favours the delivery of relevant life-saving actions at critical moments.

---

<sup>3</sup> CERF Country Reviews can be downloaded from the CERF website at <http://www.unocha.org/cerf/reportsevaluations/evaluations/country-reviews/performance-and-accountability-framework>

<sup>4</sup> More details of CERF allocations to the South Sudanese crisis are provided in a background note prepared by the CERF secretariat, which is attached as an annex.



## Methodology

The broad scope of this regional review along with the fact that Sudan had hosted a CERF review the previous year meant that the consultant only visited three of the five countries covered by this review; South Sudan, Uganda and a brief visit to Kenya. The Uganda mission included a site visit to Kiryandongo refugee settlement in the north, which provided a valuable opportunity to meet with refugee community representatives, agency and government staff in the field and observe completed activities supported by CERF and other donors. Due to a combination of logistic, security and time constraints in the countries, site visits were not feasible in the other countries.

Key informants were purposely selected to provide a representative sample of key stakeholders; CERF focal points and senior managers in recipient agencies, national and international NGO partners of recipient agencies, NGO representatives in the HCT, cluster coordinators and, in Uganda, authorities at both national and local level. A total of 143 persons were interviewed (71 men and 72 women),<sup>5</sup> of which 81 were staff of CERF recipient agencies or from the CERF secretariat (see table below). Priority was given to staff in recipient agencies with significant involvement in CERF processes and/or experience with implementing or monitoring activities supported by CERF.

**Table 1 – Numbers of UN and IOM Key Informants**

	Male	Female
<b>Global</b>	4	5
<b>Ethiopia</b>	3	4
<b>Kenya</b>	5	6
<b>South Sudan</b>	17	9
<b>Sudan</b>	1	8
<b>Uganda</b>	7	12
<b>TOTAL</b>	<b>37</b>	<b>44</b>

Comparisons of CERF processes between the five different countries covered under this review provided the opportunity to identify commonalities that could be attributed more to CERF systems and processes than the country context. Findings have therefore focused on commonalities, highlighting where contextual differences have played a specific role in influencing outcomes.

### Limitations and Constraints

As described in the Monitoring and Evaluation section below, the ability to track and attribute outputs and outcomes to CERF varied according to whether funds were used in a specific project or as a contribution to a broader programme. Recipient agencies had conducted very few external reviews or evaluations and agency staff were often

---

<sup>5</sup> A list of interviewees is attached as an annex.

reluctant to share internal monitoring reports and other documents, particularly in the desk review countries. This was felt to be a significant constraint on the ability to assess CERF contribution and led to the recommendation to make recipient agencies in countries scheduled for a review aware of the CERF PAF and advise them in advance which documentation they may be expected to share.

A related constraint was that the timing of the field visits meant that many of the CERF reports for the 2014 had not yet been prepared, either because they were delayed or not yet due. This meant that there was more of a focus on gathering of primary data rather than on validation of reported outputs and outcomes.

Out of a total of 30 days allocated for this review, 17 days were spent on field visits to three of the five countries selected for this review. A combination of time, logistics and security constraints<sup>6</sup> meant that there was only one site visit to meet with representatives of the affected population. Desk reviews for Sudan and Ethiopia provided less scope for data collection than field visits, although the recent CERF Review for Sudan helped to compensate for the lack of a field visit. Turnover of international staff, particularly in South Sudan, meant that the majority of key informants only had detailed knowledge about those CERF grants allocated at the end of 2014.

The methodology was designed to mitigate these limitations and constraints in various ways, including giving priority to key informants who had spent a substantial amount of time working in field sites while also providing representatives of stakeholder groups with several opportunities to validate and substantiate findings.

### **Humanitarian context of the South Sudan Crisis**

The people of South Sudan have been subjected to decades of conflict, natural disasters and political upheaval. There was a period of hope for the world's newest country during a period of political stability after independence in July 2011. This changed on 15 December 2013 when interethnic fighting broke out between government troops following a power struggle between the president and his former deputy.

Despite a functioning humanitarian coordination system and a presence of a relatively large UN Mission in South Sudan (UNMISS), the way in which that the crisis escalated into a full-blown regional humanitarian crisis was largely unexpected. The crisis broke at the beginning of the holiday period when many international staff were already out of the country or were preparing to leave. Many of the national staff working for humanitarian agencies were directly threatened due to their ethnic backgrounds and were unable to work effectively. Agency compounds were looted and vehicles stolen.

The crisis quickly escalated into a major protection crisis affecting girls, boys, women and men. It resulted in ethnic-based harassment, widespread displacement, sexual and gender based violence (SGBV), forced recruitment, over 50,000 deaths,<sup>7</sup> and, in South

---

<sup>6</sup> The itinerary field visit to South Sudan originally included a site visit to the Bentiu PoC site, but this was cancelled two days before the planned departure because of security and logistics constraints.

<sup>7</sup> <http://reliefweb.int/report/south-sudan/50000-and-not-counting-south-sudans-war-dead>

Sudan alone, an estimated 5.8 million people who were food insecure by the end of 2014.<sup>8</sup>

Once it became clear that it had escalated into a major humanitarian crisis, a Level 3 emergency was declared by the ERC in February 2014, along with a warning that the current crisis was likely to affect more than one in two South Sudanese by the end of 2014.<sup>9</sup>

Planning parameters for the 2014 South Sudan Crisis Response Plan,<sup>10</sup> with funding requirements at some \$1.8 billion were:

- Over 7 million people are food insecure
- Nearly 4 million people face alarming food insecurity
- Up to 1.5 million people become internally displaced.
- 835,000 people seek refuge in neighboring countries.

By the end of 2014 it was estimated that 865,000 people had been displaced including 293,000 civilians<sup>11</sup> who had fled to neighbouring countries and over 400,000 IDPs who sought refuge in one of the Protection of Civilian (PoC) sites in UNMISS compounds.<sup>12</sup>

### **Protection of Civilian Sites**

PoC sites have played a critical humanitarian role in South Sudan and the establishment of such sites at such a scale at UN peacekeeping bases have no historical precedent.<sup>13</sup> Among other things, IOM had to play a key role in South Sudan as the lead for the Camp Coordination and Camp Management (CCCM) cluster.

### **CERF funding to the South Sudan Crisis during 2014**

During 2014, the UN Emergency Relief Coordinator allocated some US\$ 116 million in the form of CERF rapid response grants to support aid operations for the South Sudanese crisis. For South Sudan itself, some \$15 million was allocated in January, soon after the violence escalated. Additional grants were allocated in April following the declaration of an L3 emergency (\$15 million)<sup>14</sup>, another \$3.5 million in June for a response to an outbreak of Cholera. A grant in December (\$20 million) was mainly used to improve the Bentiu PoC site to avoid a repeat of the deplorable living conditions that IDPs had faced when the site flooded for extended periods during the previous rainy season.

---

<sup>8</sup> OCHA (2015) South Sudan Humanitarian Response Plan 2015

<sup>9</sup> <http://reliefweb.int/report/south-sudan/south-sudan-crisis-response-plan-2014>

<sup>10</sup> Published in June 2014

<sup>11</sup> Source: UNHCR

<sup>12</sup> 2014 Resident / Humanitarian Coordinator Report On The Use Of Cerf Funds Republic Of South Sudan for the November 2014 CERF Allocation

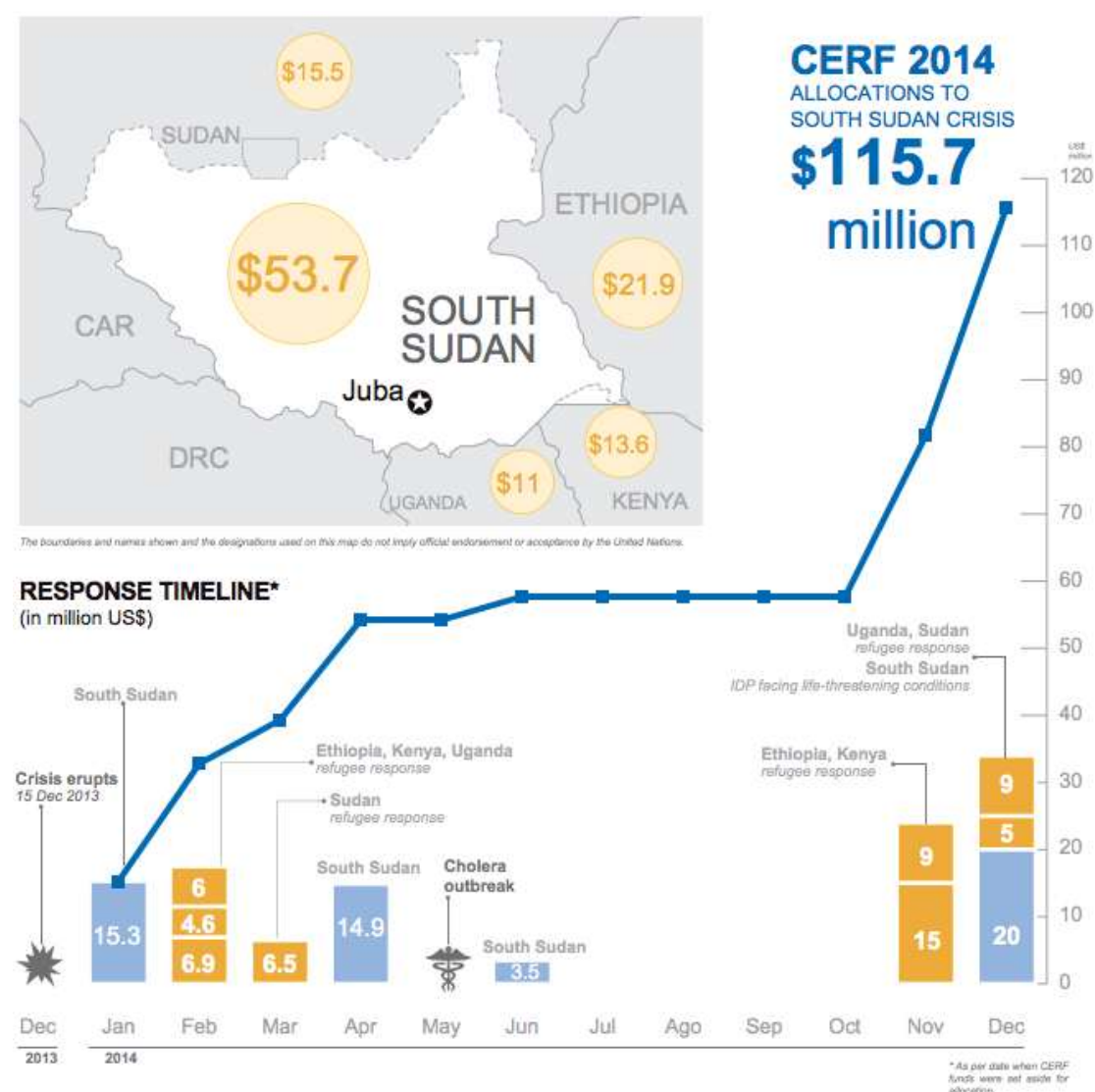
<sup>13</sup> Lilly, D. (2014)

<sup>14</sup> Note this was not an automatic allocation 'triggered' by the L3 declaration since experience has shown that CERF allocations are often issued before an L3 is declared for a slow onset emergency.

CERF also provided funding to address the needs of South Sudanese refugees and host communities in two rounds of funding to Ethiopia (\$21 million), Kenya (\$13.6 million), Sudan (\$15.3 million) and Uganda (\$11.9 million).<sup>15</sup>

All the CERF allocations took the form of rapid response grants, although the allocations at the end of 2014 resulted from a decision by the ERC, rather than being triggered by a specific disaster event.

**Figure 1 – CERF Response to the Crisis in South Sudan during 2014<sup>16</sup>**



<sup>15</sup> Source: CERF secretariat

<sup>16</sup> CERF (2014) South Sudan: CERF allocations overview as of 5 December 2014  
[http://reliefweb.int/sites/reliefweb.int/files/resources/05%20South%20Sudan\\_CERF\\_20141212.pdf](http://reliefweb.int/sites/reliefweb.int/files/resources/05%20South%20Sudan_CERF_20141212.pdf)

## MAIN FINDINGS

Findings are structured based on the PAF inputs, outputs and outcomes, together with relevant findings relating to questions raised in the TOR for the review. Country-level ratings for each indicator, supported by a brief narrative for South Sudan and Uganda, together with a regional synthesis assessment are attached as Annexes.

### Value-Added of CERF

Based on findings from this review, CERF funding was judged to have provided critical and timely support to agencies for ramping up their operational presence and deliver life-saving assistance to populations affected by the crisis. CERF funds also helped to fill gaps in humanitarian needs towards the end of 2014. Detailed findings are described below, categorized by inputs, outputs and outcomes.

### CERF Inputs

#### *What is being measured?*

Indicators for inputs in the CERF PAF assess funding levels, the extent to which prioritisation and allocation processes were participatory. They also measure the timeliness and quality of submissions, contracting processes, reporting and quality assurance systems of the recipient agencies. Input indicators also assess the extent to which other funding sources were considered, consistency with CERF life-saving criteria, how capacity is taken into account during proposal development, and the quality of OCHA support provided.

#### *What were the main findings?*

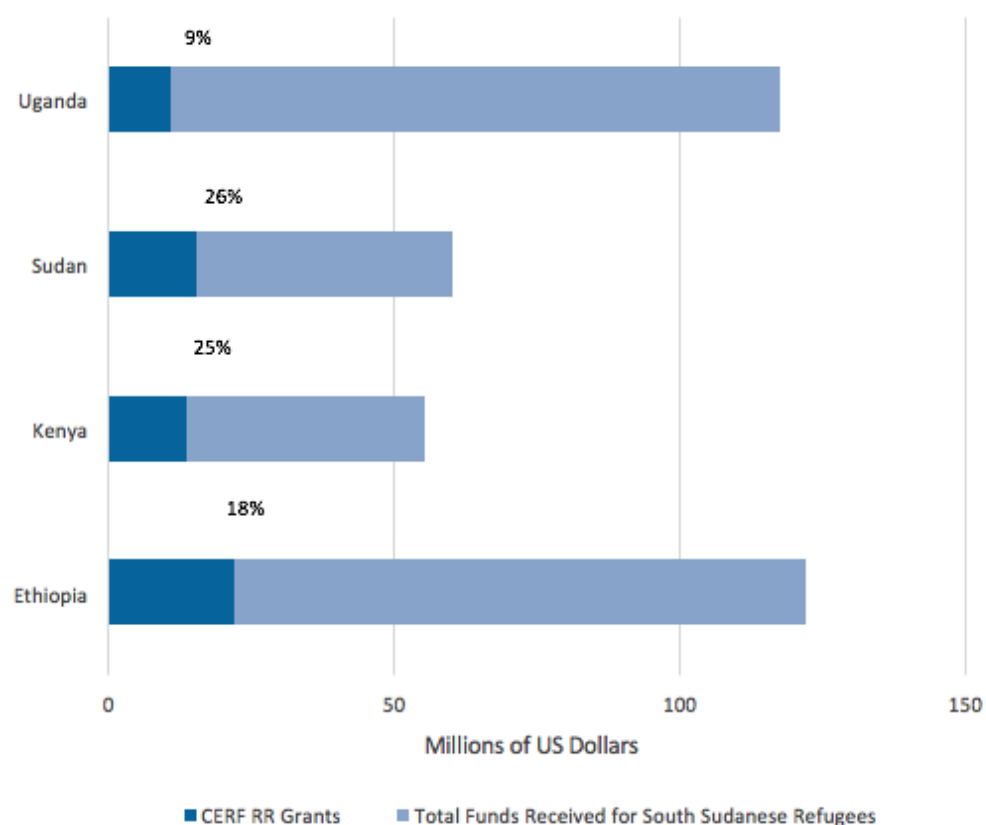
CERF funding to the South Sudan crisis was significant, accounting for some 25% of global CERF grants (RR and UFE combined) allocated during 2014. Available evidence indicated that increased levels of funding, beyond the \$116 million allocated, would not likely have added significant value since the declaration by the ERC of a L3 emergency was widely viewed as the main catalyst in leveraging additional donor contributions. There was relatively more participation of the HCTs/UN Country Teams and cluster/sector leads in the final round of 2014 CERF grants than earlier rounds. However, there were also higher transaction costs and more frustration expressed by agencies and partners with CERF processes during the final round, which suggests a need to review/revise this PAF indicator to take efficiency into account. Recipient agencies were satisfied overall with support provided by OCHA and the CERF secretariat, although there were some examples of back-and-forth communication with the CERF secretariat to clarify technical issues and revised submission/reporting templates.

### Funding Availability (PAF Indicator 1)

CERF funding allocated to the South Sudan crisis accounted for some 25% of total CERF allocations (RR and UFE combined) during 2014. The five countries covered by this

review were amongst the top ten recipients of CERF funding in 2014, including the highest three (South Sudan, Sudan and Ethiopia).<sup>17</sup> Even though South Sudan was the largest single recipient country in 2014, CERF allocations only amounted to 3% of total contributions to the HRP. In surrounding countries, however, CERF represented a more substantial contribution (see Figure below).

**Figure 2 – Contribution of CERF to South Sudanese Refugee Operations<sup>18</sup>**



### **Inclusiveness and Transparency of the Allocation Process (PAF Indicators 2-7)**

Consultations around the initial RR allocations at the beginning of the year involved a small number of recipient agencies, with the HCT (and the UN Country Team in Uganda) and clusters being informed rather than directly involved in decision-making. Despite the relatively limited consultation, there was broad acceptance of the result for these initial allocations, including amongst agencies who did not receive CERF funds. Life-saving priority needs were clear from the initial assessments and agency staff recognised the need for a timely response.

On the other hand, CERF prioritization processes for the allocation at the end of 2014 bore some of the characteristics of a UFE process since, instead of being field driven based on a needs assessment to a specific disaster event, this was an allocation decision at a global level by the ERC based on the following rationale:

<sup>17</sup> CERF (2015)

<sup>18</sup> OCHA Financial Tracking Service and CERF secretariat data

- a) Underfunded appeal requirements, covered only 51% of the South Sudan Crisis Response Plan towards the end of 2014;
- b) Current refugee figures reaching or exceeding original regional refugee planning scenarios, particularly for South Sudan;
- c) Continued deterioration of humanitarian conditions; food security and fighting in South Sudan with subsequent population displacements; and
- d) Need for timely funding to ongoing large-scale crises as conditions are expected to deteriorate.

By the end of 2014, a wider range of funding sources were available and efforts were made to encourage greater involvement of clusters and the HCTs in consultations. Key informants in all five countries characterized the prioritization process as more time-consuming and competitive than CERF processes earlier in the year. It took more time to reach a decision on how to best allocate funding to meet critical humanitarian gaps, which echoed one of the key findings in the 2011 global evaluation of CERF:

*The CERF's operational management, however, continues to be undermined by structural weaknesses, in particular those stemming from competition between agencies for funding. In this sense, the CERF reflects the fault-lines in the humanitarian system, and the competitive nature of funding as an influence on decision-making among the UN agencies themselves and between the UN and NGOs.<sup>19</sup>*

In most countries, any blockages were resolved by an intervention by the RC/HC to reach a final decision. The end result was overall satisfactory, with evidence from key informants and available documentation confirming that CERF funding had been allocated in accordance to CERF life-saving criteria for priority sectors. In one country, there was a change of leadership during 2014 which resulted in an experienced HC being replaced by an RC with limited exposure to CERF who invited a wide range of stakeholders, including donor representatives, to collectively determine priorities. Following subsequent briefings by OCHA representatives and UN staff to clarify CERF prioritisation criteria, an appropriate allocation was agreed by a smaller group.

Uganda was a unique case. The OCHA office closed in 2011 and there was no longer a HCT or cluster system in Uganda. Prioritization was mainly done by sectoral coordination systems and the UN Country Team, under the overall coordination of the RC and the Ugandan government's Office of the Prime Minister. UNHCR Uganda played a coordination role similar to OCHA fund management units in other countries, and they were able to benefit from technical advice of the former Head of OCHA Uganda who had joined UNICEF Uganda after his position had been phased out. Effective leadership by the RC, the government and UNHCR, together with inclusive partnerships between recipient agencies and their implementing partners contributed to effective CERF prioritisation, although national government counterparts felt that they had been more involved in 2012 CERF prioritization processes than they had been during 2014.

---

<sup>19</sup> Channel Research (2011) page 5

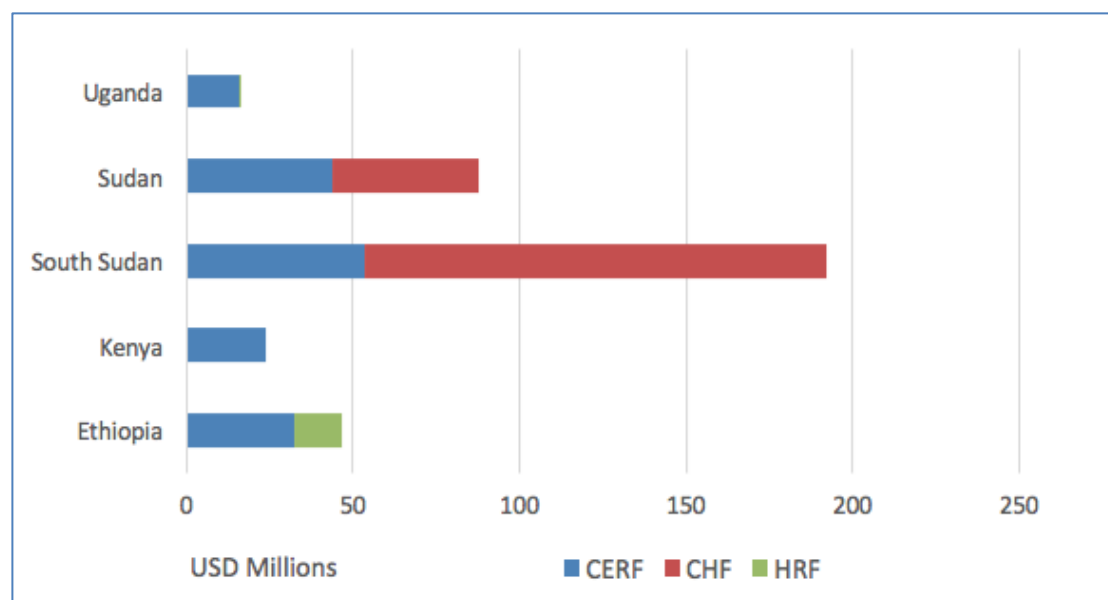
### Coherency of the Country Submission (PAF Indicators 8-13)

There was a variation in the quality of proposals by country and by agency. In some cases, particularly in South Sudan where there was considerable turnover amongst focal points in recipient agencies, key informants reported delays due to back-and-forth while developing draft submissions. Apart from staff turnover, the other challenges were 1) a relatively low level of awareness of CERF processes and criteria amongst staff and 2) lack of substantive involvement of CERF focal points at recipient agency HQ level.

Given the humanitarian context for South Sudanese affected by the crisis, it was not a challenge to identify interventions that satisfied CERF life-saving criteria but requests submitted by some agencies were not always in line with CERF guidelines. The Uganda context represented a different kind of challenge, since CERF life-saving criteria had to be applied through a lens of local settlement since there were no camps. Prioritization of site improvement of the Bentiu PoC site in South Sudan for the final round of funding in 2014 not only satisfied life-saving criteria but, in light of the subsequent influx in 2015, it represents a good practice example of early response.

In some countries, notably South Sudan and Sudan, country-based pooled funds were an important resource (see Figure 3 below), particularly for NGOs. In South Sudan, for example, 51% of funds from the Common Humanitarian Fund (CHF) were channelled to NGOs<sup>20</sup> whereas only 12% of CERF funds were forwarded to NGOs for the first three RR allocations of 2014. In Ethiopia, there was a clearer division, since 100% of the Humanitarian Response Fund (HRF) was channelled to NGOs. In Uganda and Kenya, CERF was the sole source of pooled funds during 2014.

**Figure 3 – Allocations of Pooled Funds during 2014<sup>21</sup>**



While limited amounts of CHF and HRF resources were used for quick interventions, most were allocated through a competitive submission process. Since the same OCHA

<sup>20</sup> OCHA South Sudan (2014) CHF Annual Report for South Sudan.

<sup>21</sup> OCHA Financial Tracking Service



units manage CERF processes there has been *de facto* coordination between the different pooled funds. In South Sudan, for example, CHF systems and processes were often used to also guide CERF allocation processes and CERF life-saving criteria were used as the basis for prioritisation of CHF funding. This helped to ensure that the HCs and OCHA units ensured other pooled funds were considered. In Ethiopia, only NGOs could apply for HRF funds.

Accountability to affected populations (AAP) received one of the lowest ratings in the PAF assessment. This was partially due to the fact that questions about AAP have only recently been included in CERF proposal and reporting formats. AAP was rarely mentioned in proposals and, according to several key informants, this was because the expectations of the CERF secretariat about AAP were not clear. Some implementing partners interviewed described how they had used participatory approaches, information and feedback systems consistent with AAP guidelines even though these were not actually described in proposals or reports.

### **Agency Capacity: Quality Assurance, Monitoring & Evaluation (Indicators 14-20)**

Agency capacity to implement was taken into account in all countries, particularly for allocations during the first part of 2014. An exception was the allocation to the United Nations Development Programme (UNDP) in South Sudan, which, due to cumbersome procurement processes, resulted in a delays of up to a month to transfer funds to the UN Department of Safety and Security (UNDSS) so that they could recruit Security Advisers. The lack of coherent protection strategy in South Sudan and unclear guidance from the nutrition cluster in South Sudan and the food security cluster in Ethiopia were also reported to have undermined the value-added of CERF.

While some agencies were able to provide good quality reports on schedule, others struggled to submit reports of adequate quality on time. Delays were attributed due to a combination of factors, including a lack of understanding about CERF procedures and inadequate capacity (both within recipient and coordinating agencies). Some agencies lacked systems for tracking reports. The result was substantial delays in submitting CERF reports, particularly in South Sudan, where it was rare that the same staff member that drafted the submissions would write the reports due to rapid turnover of CERF focal points in recipient agencies. Most NGO implementing partners provided inputs to reports although most claimed that they did not see the reports.

Based on feedback from NGO key informants, there were no significant sub-contracting issues for most partners of UNHCR or WFP. Problems in implementation due to delays in passing through CERF funds were reported by partners of UNICEF, UNFPA, UN Women, FAO and UNDP in different countries. Based on available evidence, these delays can mainly be attributed to global financial systems used by the recipient agencies, something that only UNICEF appears to have attempted to address through a revision of their their partnership agreements.

Access by agencies to affected populations was problematic due to weather and poor infrastructure in South Sudan, Ethiopia and Sudan, notably when transporting supplies and materials. In South Sudan, security was also a significant constraint.

All agencies were observed to have monitoring systems in place although, as described above in the “Limitations and Constraints” section, the extent to which CERF contributions can be tracked varied since it proved difficult to verify the effectiveness of monitoring systems due to the reluctance of some agency staff to share internal monitoring reports.

Feedback from OCHA and recipient agencies indicated that guidance from the CERF secretariat was both useful and timely. Guidance was provided by OCHA offices in country, but could have been more systematic and interactive to compensate for variable agency capacity and relatively high turnover. The OCHA office in Uganda closed down in 2011 and useful technical advice on CERF was provided by a former OCHA staff member who had been recruited by UNICEF Uganda.

As seen in the table below, aggregate data from Ethiopia, Kenya, South Sudan, Sudan and Uganda show that almost a third of CERF funds allocated to the South Sudanese crisis during 2014 were allocated to WFP. Allocations for the top four recipients is in fact largely consistent with CERF RR global allocations during 2014. The exception is IOM due mainly to their leading role within the CCCM cluster, including overseeing improvements at the Bentiu PoC site in South Sudan.

**Table 2 – CERF RR Allocations: Four Top Recipient Agencies during 2014<sup>22</sup>**

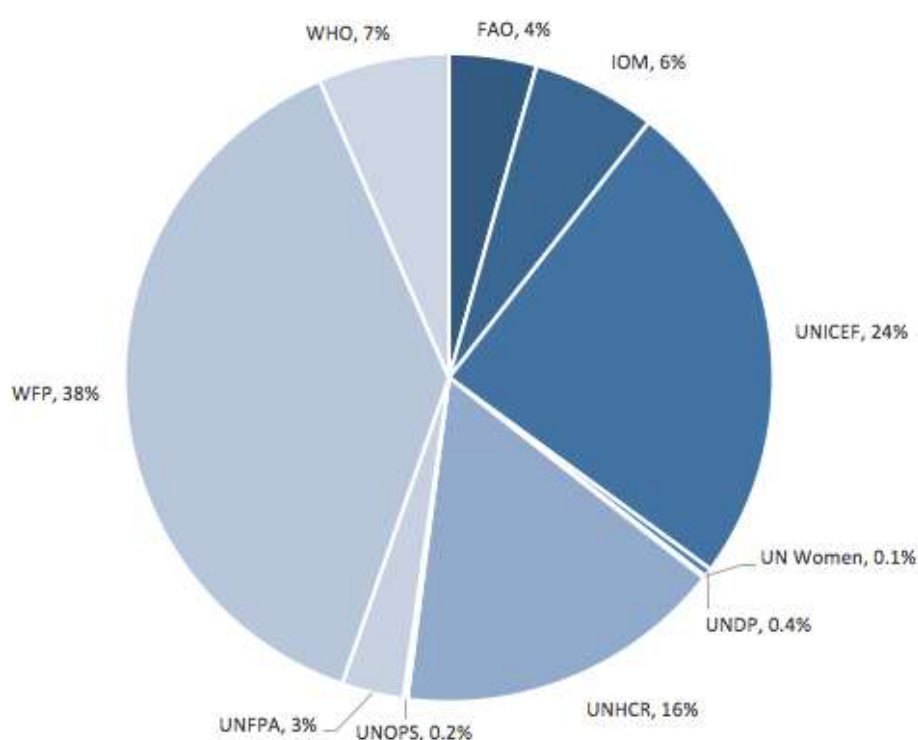
Agency	Worldwide	South Sudan Crisis
<b>WFP</b>	33%	32%
<b>UNICEF</b>	21%	22%
<b>UNHCR</b>	13%	13%
<b>IOM</b>	13%	18%
<b>TOTAL</b>	80%	84%

The distribution of CERF funding amongst recipient agencies changes somewhat when South Sudan is excluded and only refugee-receiving countries are considered, with a reduction in IOM’s share and increases for the other three agencies.

---

<sup>22</sup> Source: Financial Tracking Service and CERF secretariat

**Figure 4 – CERF RR Allocations during 2014 excluding South Sudan<sup>23</sup>**



#### **Streamlined Review, Allocation, Distribution & Reporting (PAF Indicators 21-24)**

Based on data from the CERF secretariat, there was an average<sup>24</sup> of 10 working days between receiving the original submission and an approval letter being sent to the recipient agency. An average of 7 working days was needed to finalise submissions, with 3 more working days needed to obtain approval from the ERC and forward the approval letter to agency. These timelines are in line with benchmarks that the CERF secretariat has set for itself for processing RR grant submissions.<sup>25</sup>

The above timeline does not include time that staff of recipient agencies spent at country level preparing initial submissions since this data is not tracked by the CERF. Some key informants cited examples of delays at country level before they sent the original submissions. These delays were partly attributed to slower mobilisation processes in some countries, most notably in Sudan where there was little agency presence in affected areas along with difficulties in obtaining the necessary government approvals. Other cases were reported where repeated communication with the CERF secretariat was needed to seek clarity on how life-saving criteria should be applied to specific situations, understand requirements in revised proposal formats and/or seek advice regarding technical questions.

<sup>23</sup> CERF secretariat data

<sup>24</sup> Time required for processing individual submissions ranged between 2 to 19 working days.

<sup>25</sup> Hidalgo, Silvia (2013)

## Timeliness of Onward Funding to Implementing Partners

Whereas global processes for transferring funds to recipient agencies in the countries were relatively streamlined, there was considerable variation in the time it took to transfer funds from UN recipient agencies to their implementing partners.

Key informants from NGO implementing partners and peer agencies of UNICEF, FAO, UNFPA and UN Women provided examples in different countries where there was a delay of several months with transfers due to extended contract processes. Data provided by UNICEF in one country showed it took between 1 to 10 months to transfer funds to partners after CERF grants had been approved. There were some cases where these recipient agencies were able to streamline pass through funding. In Kenya, for example, UNFPA used pre-existing agreements to expedite fund allocations to partners. Partners from UNHCR and WFP<sup>26</sup> did not report any delays. As previously described, these variations are mainly linked to the respective global systems of recipient agencies and are consistent with findings from previous reviews and global evaluations.<sup>27</sup>

UNICEF announced the good news during 2014 that they had revised partner contracting systems<sup>28</sup> so as to be better adapted to humanitarian contexts. Their revised system makes provision for contingency PCAs and simplified proposal/reporting systems along with other modifications. However, none of the UNICEF partner key informants seemed to be aware of these revisions, indicating the need for improved communications to effectively implement the new system.

The delays in transferring CERF funds impacted less on implementation by large international NGOs since they were usually able to pre-finance activities by borrowing from other funding sources. However, the majority of national partners claimed that they had to wait for funds to be transferred to start activities.

In South Sudan, security assessments were needed by many agencies before they could start implementation, and the delay in transferring CERF funds from UNDP to UNDSS in South Sudan was a significant obstacle. UNDSS had to wait for 3 to 4 weeks before they were able to recruit and contract surge Security Advisers to carry out security assessments.

---

<sup>26</sup> Complaints from WFP partners were mainly about the challenges of dealing with the consequences of ruptures in food pipelines, something that CERF funds were used to mitigate.

<sup>27</sup> e.g. UNHCR “...analysis from the CERF secretariat suggests that UNHCR performs extremely well in the timeliness of its sub-granting although its own pre-financing tools are often supplemented by the willingness of its partners to pre-finance their own activities.” Featherstone, A. (2014) page 5.

<sup>28</sup> UNICEF (2015)

## CERF Outputs

### *What is being measured?*

Indicators for outputs assess the extent to which CERF helps to leverage resources from other donors, its sectoral and geographic coverage, its contribution to meeting critical life-saving needs in a timely way, its influence on coordination mechanisms and the RC/HC's leadership. Indicators also look at how CERF has complemented other sources of funding and whether reporting processes have encouraged interagency reflection.

### *What were the main findings?*

The rapid, and unexpected, spread of the crisis in South Sudan meant that CERF played a crucial role in enabling recipient agencies and their partners to establish (or reinforce) their presence in affected areas in early 2014 and start delivering relief assistance. Allocations towards the end of 2014 were mainly used to fill unmet critical humanitarian needs. CERF generally provided effective support to RC/HC coordination, while at the same time demonstrating that UNHCR's Refugee Coordination Model provides a useful way of sharing workloads with OCHA in a systematic and transparent fashion. At the same time, there is a lack of guidance for management of pooled funds when the Refugee Coordination Model is applied. CERF was well-coordinated with CHF (in Sudan and South Sudan) and with the HRF (in Ethiopia) since the same OCHA units managed both pooled fund processes. There tended to be a higher level of awareness of recipient agencies and partners about CHF and HRF than about CERF.

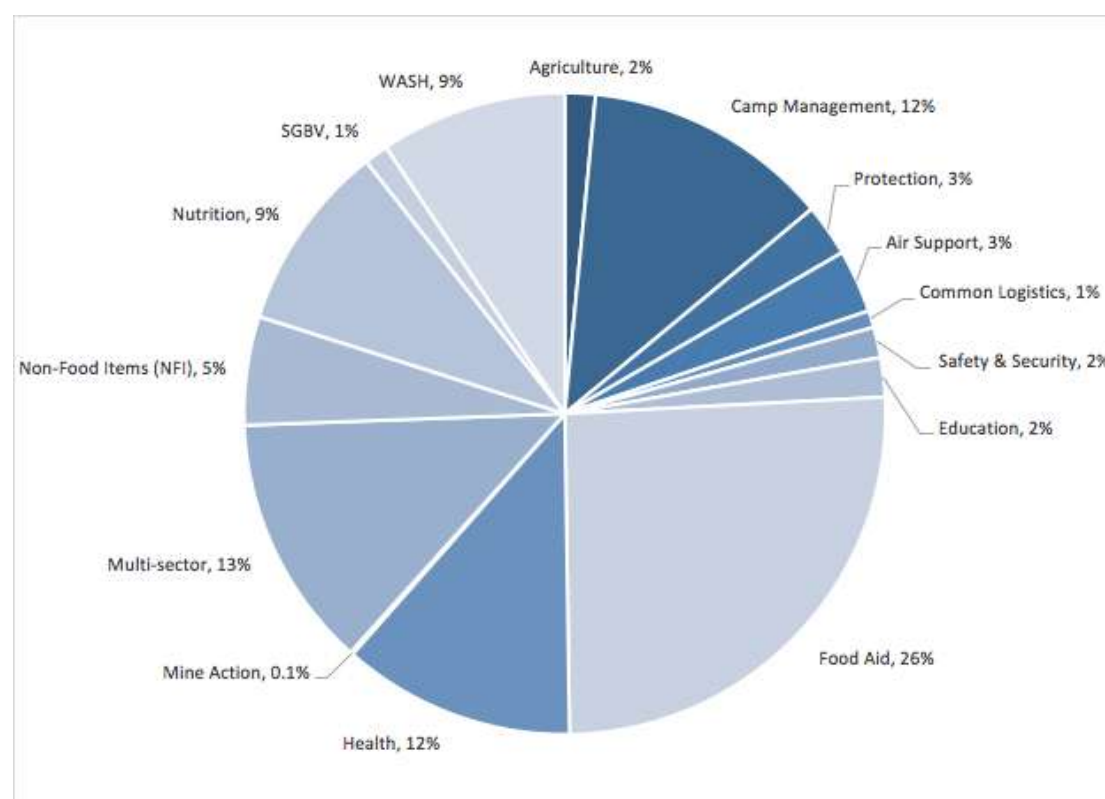
### **Humanitarian Actors Better Able to Respond (PAF Indicators 25-27)**

The rapidity with which the South Sudanese crisis escalated into a major crisis came as a surprise to both humanitarian agencies and donors. CERF allocations at the beginning of 2014 and emergency reserves (for those agencies which have them) provided critical support to recipient agencies during the startup phase. By the time an L3 emergency was declared by the ERC in February, agencies in most countries had already been able to establish a presence in affected areas and had started operating. The exception was Sudan, which took longer to scale up due to a combination of poor infrastructure, little international presence in affected areas, and a lack of consensus between international agencies and the government regarding the scale of humanitarian needs.

The rapid scale-up of the South Sudanese crisis meant that, although CERF allocations were being monitored by donors, major inflows of funds from donors were mainly registered following the declaration of a L3 emergency. As described above, discretionary CERF RR allocations by the ERC at the end of 2014 had many of the characteristics of a UFE process, including filling critical humanitarian gaps where there were significant gaps in other donor funding (notably in Sudan) for activities that met life-saving criteria. In South Sudan, for example, extensive flooding in the Bentiu PoC during August and September had highlighted the need for urgent site improvement, but donors were initially hesitant to commit to large-scale investments in part due to a desire to avoid creating pull factors into PoCs. A large-scale CERF investment at the end of 2014 helped leverage funding from other donors, notably from the Netherlands. In Kenya and Uganda, grants to UNFPA enabled the agency to set up SGBV activities with

support from partners that are still being sustained. Most of the CERF allocations at the end of 2014 were used for activities that were assessed as critical life-saving needs.

**Figure 5 – Allocation of CERF by Sector/Cluster for all Five Countries**



### **Increased Coordination and HC Leadership (PAF Indicators 28-31)**

Overall, CERF supported RC/HC coordination although cases were observed where humanitarian coordination systems struggled with prioritisation between sectors/clusters, notably for CERF allocations at the end of 2014 following the regional allocation by the ERC. In most cases, RC/HCs were able to decide on allocations for priority life-saving needs following consultation with cluster/sector coordinators and OCHA, although there were reports of at least two examples of RC/HCs allocating CERF funds to mitigate friction between agencies.

The South Sudanese crisis provided an opportunity to observe how the Refugee Coordination Model<sup>29</sup> had been applied to CERF processes and to what extent it was able to fill its intended role of increasing the professionalism and inclusiveness of coordination of refugee emergencies. Based on the experience during the South Sudanese crisis, the model demonstrated its usefulness as a tool for management and coordination of CERF processes notably in helping to share workloads between UNHCR and OCHA. In Kenya, Uganda, Ethiopia and Sudan UNHCR took on a major share of the work for supporting CERF allocations for refugee operations with OCHA and the CERF

<sup>29</sup> UNHCR (2014a)

secretariat providing overall guidance and technical advice. This arrangement allowed OCHA to focus more on non-refugee emergencies (IDPs, food security crises) while UNHCR assisted OCHA and the HC with linking coordination of refugee response and the preparation of CERF submissions and reports by agencies who received funds for South Sudanese refugees. This was generally viewed as an effective working relationship, although UNHCR staff reported challenges due to a lack of suitable guidance for application of the Refugee Coordination Model to the coordination of pooled funds processes.

### **Life-Saving Activities Supported (PAF Indicator 32)**

The scale of humanitarian needs together with a relatively good awareness of CERF life-saving criteria amongst humanitarian agencies, notably amongst UN and IOM leadership, ensured that most interventions clearly satisfied CERF life-saving criteria. The significance of CERF's contribution varied according to the agency. In the case of WFP, for example, most CERF funds were used to help maintain food pipelines. Notable examples where CERF provided strategic support include CERF contributions to help start up UNFPA's operations in Uganda and Kenya, IOM in South Sudan for site improvement in the Bentiu PoC site and funding of joint UNHAS and UNDSS security assessments in South Sudan during early 2014 that facilitated relief operations of humanitarian agencies.

A key factor undermining CERF's effectiveness was the disparity between official and unofficial exchange rates in South Sudan that resulted in a high *de facto* "tax" rate on CERF contributions. UN agencies are required to transfer funds to their partners at the official exchange rate of SSP 3.1. This effect was mitigated since the majority of CERF resources (88% of the first three allocations) were used for direct implementation by recipient agencies. Market rates were already much lower during 2014, but when this review took place in mid-2015 the South Sudanese Pound (SSP) was reported to be trading at over 3 to 4 times the official rate.<sup>30</sup>

### **Timely Response (PAF Indicators 33-35)**

There was a clear, and early, message from the CERF secretariat that no-cost extensions would not be considered since these were Rapid Response grants and therefore time-critical. This did not prevent a small number of requests being made, although only two no-cost extension (NCE) requests were approved in the end amongst all five countries. The two NCE requests approved were both for UNDSS in South Sudan, which had to delay recruitment of Security Advisers for almost a month due to a combination of relatively slow UNDP procurement systems and lack of familiarity of UNDSS staff with CERF formats and processes. These requests were exceptionally approved since humanitarian agencies were relying on these security assessments to be able to operate.

---

<sup>30</sup> Al Jazeera (2015) Independent South Sudan's economic woes - 09 Jul 2015 <http://www.aljazeera.com/indepth/features/2015/07/independent-south-sudans-economic-woes-150705112843046.html>

A key aim of CERF is to reinforce the RC/HC and related coordination systems. Harmonization with other pooled funds was fairly systematic since OCHA financing units managed both CERF and HRF (in Ethiopia) or CERF and CHF (Sudan, South Sudan). CERF was the sole pooled fund available to humanitarian agencies for the South Sudan crisis in both Uganda and Kenya since neither country had country-based pooled funds during 2014. In several cases, particularly in the health sector/cluster, CERF processes resulted either in a joint submission (Uganda and South Sudan) or reinforced coordination (e.g. between UNDSS and WFP humanitarian air services in South Sudan). In South Sudan, the CERF health submission in late 2014 resulted from a collaboration involving WHO, UNFPA, UNICEF and IOM.

## CERF Outcomes

### *What is being measured?*

Indicators for outcomes assess the extent to which CERF has supported humanitarian reform processes, the Humanitarian Programme Cycle and accountability to affected populations along with its contribution to the timeliness, predictability and quality of the response. Indicators in this category also measure beneficiary coverage and the extent to which outcomes from CERF-supported activities are captured in reports and evaluations.

### *What were the main findings?*

Based on available evidence, CERF was an important contribution to strengthen agency capacity during the initial response at the beginning of 2014 in all of affected countries and interventions were on the whole appropriate, efficient and effective. While CERF grants made later during the year helped in filling life-saving gaps, the efficiency of related processes was undermined by involvement of a greater number of agencies and clusters in CERF processes and difficulties in reaching a consensus on interagency cluster/sector priorities. Predictability of CERF funding was higher amongst larger recipient agencies although the CERF allocation at the end of 2014, while it certainly helped to meet critical humanitarian needs, was unexpected and not planned for. Beneficiary coverage reported by recipient agencies mostly exceeded initially planned figures, although it was difficult to verify these numbers. CERF After Action Reviews in different countries usually involved a small number of agencies followed by a briefing on results to the HCT/UN Country Team. Relatively little secondary data was available in the form of reviews or evaluations and what was available did not analyse results of CERF contributions.

### **Humanitarian Reform Process Supported (PAF Indicator 36-37)**

There was a broad appreciation amongst recipient agencies of the crucial supporting role that CERF had played during the response to the South Sudanese crisis, both in terms of providing critical support during the start-up phase in early 2014 as agencies scrambled to cope with a rapidly escalating crisis and, later during 2014, when it helped to fill critical humanitarian gaps. There was a tendency for CERF processes to be prioritised by recipient agencies during the assessment and implementation phases and receive less attention during later phases. Some effects of these changing priorities over



time include a relatively low level of interest in participation in CERF After Action Reviews, delayed submission of reports and omission of CERF contributions when drafting TORs of agency and interagency evaluations.

Accountability to affected populations (AAP) was an area where PAF assessment ratings were consistently low. As described above, there was evidence that NGOs were using AAP approaches, but CERF submission and reporting formats were not conducive to reporting on relevant indicators. CERF proposal and reporting formats were revised during 2014 and subsequent reports will require agencies to describe how they address AAP. It is also worth noting that gaps in AAP extend well beyond CERF. In the IASC Operational Peer Review<sup>31</sup> carried out in South Sudan during June 2014, the HCT assessed AAP as a particular gap.

### **Predictability and Reliability Enhanced (PAF Indicators 38-39)**

CERF was an important contribution to strengthen agency capacity during the initial response at the beginning of 2014 in all of the affected countries and interventions were on the whole appropriate, efficient and effective. The efficiency of later allocations was undermined somewhat by delays resulting from back-and-forth debates between South Sudan recipient agencies and the CERF secretariat for the cholera response in South Sudan. Prioritisation processes for the allocation by the ERC at the end of 2014 in all five countries encountered challenges in prioritising and agreeing on allocations. This was attributed to the lack of a specific needs assessment linked to the CERF allocation, and a larger number of agencies and clusters involved in decision-making processes. HCTs and clusters also had challenges in identifying inter-sectoral priorities, a phenomenon that has been identified in previous CERF country reviews.

Staff of larger humanitarian agencies (UNHCR, WFP, WHO, UNICEF) were confident that CERF RR grants would be forthcoming in early 2014, but smaller agencies felt funds were not predictable and could not be guaranteed. For the larger agencies, and some of the smaller ones, their own emergency reserves also helped them to start operations. However, large allocations from emergency reserve funds<sup>32</sup> were made on the assumption that these would be replenished from CERF and other sources of funding.

### **Quality of Response (PAF Indicators 40-43)**

Coverage of beneficiary populations by CERF presented a mixed picture. The influx of asylum seekers into surrounding countries was 30-40% lower than predicted as outflows slowed, resulting in lower numbers than initially foreseen compared with revised planning figures. In South Sudan, on the other hand, populations in PoC sites doubled during 2014, while coverage was less than half of that planned outside due mainly to a combination of security and access constraints faced by agencies in accessing populations outside PoC sites. Beneficiary coverage reported by recipient

---

<sup>31</sup> IASC (2014)

<sup>32</sup> As an example, UNHCR Uganda received \$48.5 million from UNHCR's emergency reserve in January 2014 and 100% of CERF funds allocated to UNHCR were used in partial reimbursement.

agencies mostly exceeded planned figures, although it was difficult to verify these numbers.

**Table 3 Coverage by Country<sup>33</sup>**

Country	Summary of Coverage
South Sudan	<ul style="list-style-type: none"> <li>• The initial allocation supported a total of 661,710 beneficiaries (more than the 628,000 initially planned) with CCCM activities. The rest of the allocation supported WFP logistics, air support services and UNDSS-led security risk assessments that enabled agencies to start or resume operations.</li> <li>• A second allocation assisted 427,800 beneficiaries with emergency shelter, nutrition, health services and logistic support for humanitarian partners.</li> <li>• The third allocation was specifically to support a response to a cholera endemic when CERF was among the first funding received. While cholera is endemic in South Sudan, widespread displacement and impact of the conflict on services meant that the capacity to cope with this outbreak required additional support. 102,972 beneficiaries were reported to have received WASH assistance and 72,400 received health assistance - significantly higher than the planning figure of 66,200.</li> <li>• The final allocation during 2014 was targeted mainly at improving living conditions for the IDP population in Beintu PoC, with some assistance provided to host populations. Reports were not available at the time this review was being drafted, but planning figures for accepted proposals anticipating coverage of 30,000 beneficiaries in education, coordinated health and WASH activities to support 50,000, 43,000 for nutrition (supplementary and therapeutic), a total of 47,600 supported by protection-related activities (including SGBV), for 13,000, WASH for 51,000, Protection (UNHCR) 21,660, improved living conditions for 49,600, NFIs for 7,500, and 16,300 provided with food assistance. CERF funding also allowed broader support to a planned 12,000 passengers (humanitarian staff) for security and air support throughout South Sudan.</li> </ul>
Ethiopia	Both CERF allocations during 2014 prioritized core life-saving sectors of food, Water, Sanitation and Hygiene (WASH), relief items, registration and border relocation support for South Sudanese refugees. IOM evacuated a total of almost 26,000 persons from at-risk areas, 130,000 received WASH assistance, 60,000 increasing to 191,000 beneficiaries for general food distribution. 90% of the refugee population were women and children.
Kenya	Over 251,000 beneficiaries were reported to have been assisted for the first round of CERF funding, of which some 199,000 were under the age of five. Activities ranged from food assistance, health, education, protection and multi-sectoral activities (implemented by IOM, UNHCR and their partners). This figure was larger than the 160,000 originally planned, although much of this was old caseload since there were around 46,000 new arrivals during 2014. Over half of

<sup>33</sup> Data sourced from agency reporting and key informant interviews. Reports for November/December allocations were not yet available for South Sudan or Sudan.

Country	Summary of Coverage
	the second round was allocated to WFP for food assistance to maintain full rations for some 144,000 beneficiaries.
Sudan	Sudan was a challenging operating environment for agencies since, along with a complex political environment, agencies had little presence in affected areas and it was difficult to carry out needs assessments. CERF was the first external funding received for the South Sudanese crisis. The first round of CERF assisted 32,100 individuals (55% of the South Sudanese refugee population) with food, protection, WASH, health, nutrition, shelter and education assistance.
Uganda	The first CERF submission planned for 60,000 South Sudanese refugees, but by July 2014 a total of over 118,000 new arrivals were being supported by CERF with food, health agriculture and multi-sectoral assistance. Numbers of assisted for the second round rose to over 155,000 and protection activities were added. There was no camp-based assistance in Uganda – Government policy was to integrate refugees into local communities.

Consistent with the findings of the 5-year global evaluation of CERF, the ability to attribute outputs to CERF support was mainly dependent on:

- Whether funds were used for a specific project activity or whether they were a contribution to a broader program (where attribution is more difficult).
- The monitoring and evaluation capacities of the individual recipient agencies (and, where applicable, their implementing partners).

UN agencies mainly used monitoring data gathered from implementing partner reports to monitor project implementation along with their own periodic field monitoring (e.g. WFP's post distribution monitoring). Challenges to monitoring varied in different countries and many were not confined to CERF, such as access to affected populations and the level of government support. Such challenges included:

- Difficulties in gathering accurate data on instable populations;
- Difficulties accessing populations due to insecurity or poor infrastructure (notably in South Sudan and Sudan);
- Relatively low technical capacity of some of the implementing partners, notably for NGOs in South Sudan that experience a high turnover of staff.

After Action Reviews (AAR) have been promoted by the CERF secretariat as a tool to support continuous improvement. According to relevant guidelines,<sup>34</sup> AARs should be relatively light processes that offer the HCT and/or other key CERF stakeholders with the opportunity to reflect on the overall CERF process to identify key points and strategic issues for the RC/HC report. AARs for the first round of allocations took place in two countries (Uganda and South Sudan) involving a limited number of CERF focal points from recipient agencies, and results were subsequently reported during UN

---

<sup>34</sup> CERF secretariat (2014)

Country Team (Uganda) or HCT (South Sudan) meetings. Even though participation was limited, the AARs were nevertheless useful in understanding outcomes, especially since CERF reports mainly describe activities and outputs.

A team member participating in a UNHCR regional evaluation was consulted during this review, but the report was not yet available at the time this review was being drafted. A draft report of the Interagency Evaluation in South Sudan<sup>35</sup> was made available. However, although it analysed CHF contributions there was no mention of CERF contributions, even though significant CERF resources had been allocated. WHO South Sudan carried out an internal review that covered CERF-supported activities, but no other evaluations were available from other recipient agencies which made it difficult to assess contributions using secondary data.

### **CERF from a Regional Perspective**

The TOR also asked to what extent CERF grants allocated to countries reflected larger regional planning processes and regional priorities. Amongst recipient agencies, UNHCR's South Sudan Refugee Regional Response Plan (RRP) had a clearly defined regional strategy and CERF allocations and interventions were broadly consistent with proportional funding requirements in the RRP for all countries apart from South Sudan.<sup>36</sup> At the same time, based on interviews with regional level stakeholders and review of relevant documentation, it was clear that CERF processes were largely country-driven and that regional strategies were not a primary driver of related processes.

### **Using the CERF PAF as a Facilitation Tool during Reviews**

The 2013 CERF PAF Review recommended that the CERF secretariat develop a performance measurement system based on the PAF that could be used during CERF Country Reviews. The potential advantages of such a system was that this could be a useful, and more accountable, way of summarizing findings and the use of a qualitative scoring system against benchmarks could help with tracking trends.

As described in the Methodology section, relevant PAF indicators were rated based on the findings and, in two countries (Uganda and South Sudan), a draft version was used to guide the discussion during a 1½-hour debriefing session facilitated by the consultant with a representative sample of stakeholders (CERF focal points from recipient agencies, cluster coordinators, NGO partners and HCT/UN Country Team members). The feedback from participants were generally positive, who felt that:

- The approach provided a reasonably systematic and objective basis for assessing performance; and

---

<sup>35</sup> The draft report of the IASC Interagency Evaluation of the South Sudanese crisis carried out prior to this review made no mention of CERF's contribution (Clark, et al. 2015)

<sup>36</sup> UNHCR (2014b) CERF allocations between countries were broadly consistent with UNHCR requirements in the RRP apart from South Sudan, which was only allocated a total of \$2.88 million in CERF funding during 2014.

- It helped to raise awareness about what the PAF indicators meant in practice and therefore provided the basis for a self-assessment during future CERF allocations.

Although there was fairly low awareness of the PAF amongst HCT members (and other interviewees), once they saw how the PAF could be used for assessment feedback was generally positive. Participants also suggested some improvements, which were considered when formulating recommendations for the CERF secretariat.

An aggregated rating for all five countries included in the review was also drafted by the consultant based on the overall results and shared with stakeholders in draft form for review, validation and feedback.

## CONCLUSION

The rapidity with which the South Sudanese crisis escalated into a major crisis following the events in South Sudan during December 2013 came as a surprise and CERF helped to ensure that, by the time an L3 emergency was declared by the UN in February, recipient agencies had already been able to expand their operational presence and deliver life-saving assistance to populations affected by the crisis. Even in South Sudan, where CERF amounted to only 3% of overall contributions during 2014 for this L3 emergency, CERF was amongst the first external funding received and initial allocations played a crucial role in meeting life-saving needs during a rapidly evolving humanitarian crisis. The final round of CERF funding in 2014 to improve living conditions for IDPs in the Bentiu PoC site provided a good practice example of early response, as IDP numbers rose from 20,000 to almost 100,000 at the time this review took place as the conflict intensified.

CERF provided effective support to RC/HC coordination overall, even if humanitarian coordination systems did struggle with prioritisation between sectors/clusters for CERF allocations at the end of 2014. The Refugee Coordination Model demonstrated it can be a useful tool to support CERF management and coordination since it facilitated sharing of workloads between UNHCR and OCHA while fulfilling their respective mandates.

With the exception of South Sudan where there was a relatively high staff turnover, there was a reasonable level of awareness about CERF processes and life-saving criteria amongst recipient agencies, partners and, with one exception, RC/HCs. However, the variable quality of submissions, reports and understanding of CERF's overall purpose translated into increased transaction costs and demonstrated that improvements are still needed.

A key area of concern that risks to significantly undermine CERF's value for money in South Sudan is the disparity between official and unofficial exchange rates that represents a high *de facto* "tax" on CERF contributions. This was already an issue during 2014, but with the currency reported to be trading at 3 to 4 times the official rate in mid-2015 continuation of current system of transferring funds to partners will reduce coverage.

## RECOMMENDATIONS

Recommendations below are separately targeted at the RC/HC (and the Deputy HC in South Sudan), the Humanitarian Country Team, OCHA Pooled Fund Focal Points, sector leads in Uganda, cluster leads in South Sudan, selected CERF recipient agencies and the CERF secretariat.

### RC/HC and Humanitarian/UN Country Teams

1. Continue to improve the consistency of humanitarian leadership. As highlighted in the Five-Year Global Evaluation of the CERF, a critical factor for effective use of CERF resources is effective leadership from the RC/HC, sector/cluster coordinators and operational support from OCHA. While humanitarian leadership was effective overall, important gaps appeared due to delays in filling key positions (e.g. UNHCR in Ethiopia, HC in Sudan) or other factors highlight the need for RC/HCs and HCTs to both advocate with agencies to fill key vacancies and take interim measures to mitigate leadership gaps to maintain the required level of leadership.

### OCHA Pooled Fund Focal Points

2. Support the HCT and ICCM in adapting and testing of appropriate resource allocation tools to facilitate needs-based decision-making on priority interventions. Such a tool should not necessarily be CERF-specific, but rather something that facilitates overall prioritisation processes which at the same time highlights for the HCT specific projects and activities where CERF can potentially add the most value.
3. For countries with country-based pooled funds (CHF, HRF) that involve periodic consultations with recipient agencies, use these as opportunities to raise awareness about CERF life-saving criteria, processes and how it complements other sources of funding.
4. Convene CERF focal points in recipient agencies periodically as follows:
  - a. At the beginning of the submission process, provide appropriate orientation to clarify criteria (including life-saving criteria) and strategic priorities;
  - b. Three months before the expiry of CERF grant (“mid-term review”) to review project status, review reporting requirements and timeline and recommend ways to overcome bottlenecks; and
  - c. Make use of the After Action Review to agree on common elements in the report (outcomes, challenges and lessons learned).
5. Support the HCT in finding an appropriate AAR process that maximises value-added for in-country stakeholders.
6. Circulate CERF reports to recipient agencies and encourage sharing with partners (in line with the CERF PAF and as stipulated in CERF reporting guidance).

### CERF Recipient Agencies

7. **UNDSS** should explore alternative pass-through mechanisms for CERF fund or find other ways of streamlining processes.

8. **UNICEF** should ensure their Country Offices and partners understand how to effectively use the revised Programme Cooperation Agreement and simplify the PCA process for emergency contexts to streamline passing through pooled funds such as CERF to partners.
9. **UNFPA, FAO, UNDP** and **UN Women** should identify ways to streamline transferring funds to implementing partners.
10. For **UNHCR**, it is recommended that they use lessons learned from the planned UNHCR/OCHA joint review of application of the Refugee Coordination Model to:
  - a. Develop guidelines for UNHCR staff to support OCHA's lead role in coordination and support of pooled funds when applying the Refugee Coordination Model. These guidelines could make use of lessons learned from experiences of implementing Refugee Coordination Model during the response to the South Sudan crisis in Uganda and Sudan;
  - b. Recognise that additional capacity and skills are needed to support country level pooled fund processes when the Refugee Coordination Model is activated and update preparedness plans accordingly; and
  - c. Preparedness for activation of the refugee coordination model should include training of both OCHA and UNHCR staff in the coordination of pooled funds along with the capability of providing surge capacity to compensate for additional workloads where needed.

#### **CERF Recipient Agencies and Sector Leads in Uganda**

11. Improve the efficiency and effectiveness of sectoral level coordination.
12. **UNHCR** Uganda's implementation of the Refugee Coordination Model should be captured and shared with UNHCR HQ as good practice.
13. **UNICEF, UN Women and FAO** should improve the efficiency for channelling funds to partners to ensure that activities are not impacted by unnecessary delays.

#### **CERF Recipient Agencies and Cluster Leads in South Sudan**

14. In their protection cluster coordinator role, **UNHCR** should lead the development of an operational plan that facilitates prioritisation for resources such as CERF.
15. **UNICEF** should initiate an open dialogue with partners with the aim of improving service provision in nutrition (both as UNICEF and their cluster lead roles).
16. **IOM** should capture the experience in South Sudan as an example of good practice (e.g. effective and efficient implementation in a complex operating environment, effective working relationships with partners).
17. Use lessons learned from Zimbabwe in 2008 and other high inflation environments and skewed exchange rates to ensure that CERF (and other similar funding) continues to provide value for money by, for example, prioritizing international procurement and use of offshore transfers to partners.



## CERF secretariat

18. Provide a two-page briefing note for countries hosting CERF reviews to facilitate preparations. Such briefs should describe the purpose and approach of PAF reviews, explain the role of the PAF and clarify which types of documents are likely to be requested during country level reviews.
19. Develop guidance aimed at HCTs and inter-cluster working groups based on good practice examples of needs-based decision-making about priority sectors and interventions. Such a tool should not necessarily be CERF-specific, but rather something that facilitates overall prioritisation processes which at the same time highlights for the HCT specific projects and activities where CERF can potentially add the most value
20. Review the guidance for AARs based on good practice examples and develop a toolkit for field-based staff that includes guidance not only for participants but also specific guidelines for those organising and facilitating these sessions.
21. Increase the relevance and utility of the CERF PAF by:
  - a. Restructuring the PAF through a participatory process with country-level stakeholders so it is able to more effectively fulfil its intended function “...as a means of clarifying accountability and performance expectations around a set of agreed CERF outputs, outcomes and impacts.”<sup>37</sup> Part of clarifying expectations should be to develop a communication strategy for the PAF that includes clear descriptions of performance benchmarks for both the CERF secretariat and recipient agencies;
  - b. Including guidance aimed at Humanitarian Coordinators to clarify what they are actually accountable for in the PAF when leading/coordinating CERF-related processes. Such guidance could take the form of a concise “Executive Summary” aide-memoire of the PAF;
  - c. Providing guidance for CERF focal points in countries being reviewed, including a list of documentation that is likely to be requested (e.g. internal monitoring reports);
  - d. Adapting the PAF to accommodate country contexts similar to Uganda where the Refugee Coordination Model and related coordination mechanisms are applied, including revision of PAF indicators to ensure their relevance in countries where there are no clusters or humanitarian coordination teams; and
  - e. Adapting the PAF to accommodate the refugee coordination model where UNHCR leads coordination either by itself (e.g. Uganda) or together with OCHA (e.g. Ethiopia and Sudan).
22. Develop evaluation questions for pooled funds (including CERF) to be included in TOR templates for L3 Operational Peer Reviews and Interagency Humanitarian Evaluations.

---

<sup>37</sup> <http://www.unocha.org/cerf/reportsevaluations/evaluations/country-reviews>



23. Recognise that regional reviews of L3 crises where significant CERF funding has been allocated require more capacity and a modified approach in comparison to CERF country reviews. A minimum of two team members will be required while ensuring that adequate time is allocated for field visits.

## ANNEXES

### Annex 1- CERF PAF Ratings for the South Sudan Crisis during 2014<sup>38</sup>

Inputs: CERF Funding				
Input I: Funding Available to UN Agencies/IOM				
#	Indicator	Scoring Scale	Rating	Justification
1	Funding available for crises (rapid response & underfunded window) by country (CERF as a percentage of other sources of funding available).	<i>0 = No CERF funding available</i> <i>1 = Limited CERF funding availability</i> <i>2 = CERF funding largely adequate</i> <i>3 = CERF funding satisfactory</i>	3	Although CERF allocations for the South Sudanese crisis during 2014 amounted to only 4% of overall donations in all five countries, CERF was nevertheless an important contribution since it was a) amongst the first significant funding available for the crisis, and b) if South Sudan is not included, CERF funds amounted to between 9% (Uganda) and 26% (Sudan) of total contributions for the South Sudanese refugee crisis in those countries.
Input II: Transparent and Inclusive Prioritization and Decision Making				
#	Indicator	Scoring Scale	Rating	Justification
2	Intra- and inter-cluster/sector prioritization process is inclusive of all relevant stakeholders, and adheres to Principles of Partnership (endorsed by the Global Humanitarian Platform, 12 July 2007).	<i>0 = Not at all (i.e. prioritisation process does not include relevant stakeholders and the Principles of Partnership are not taken into account)</i> <i>1 = Somewhat (i.e. prioritisation process takes into account some relevant stakeholders and/or the Principles of Partnership are somewhat taken into account, however prioritisation process is mainly driven by a few stakeholders)</i> <i>2 = Mostly (i.e., prioritisation process takes into account most relevant stakeholders and/or the Principles of Partnership are taken into account, however not all relevant stakeholders are included)</i>	2	Decision-making for the initial grants during the first half of 2014 was mainly by recipient agencies (coordinated by OCHA and/or UNHCR) to streamline processes. Involvement of ICWG and cluster members was largely limited to information sharing. The round in late 2014 did not have the same time pressures, so more consultation did take place.

<sup>38</sup> This table is a synthesis of assessment results for all five countries covered by this review (Ethiopia, Kenya, South Sudan, Sudan and Uganda). Country-specific assessment results for the two countries visited are included in the South Sudan and Uganda country reports also attached as annexes.

		<i>3 = Fully (i.e. prioritisation process takes into account all relevant stakeholders and the Principles of Partnership are fully taken into account)</i>		
3	Agencies involve their intended implementing partners in CERF project selection and formulation.	<i>0 = None (i.e. no demonstrated involvement implementing partners in CERF project selection and formulation)</i> <i>1 = Low (i.e. limited involvement of implementing partners in CERF project selection and formulation)</i> <i>2 = Reasonable (evidence of regular involvement of implementing partners in CERF project selection and formulation)</i> <i>3 = High (evidence that affected population perspectives have a high influence in implementing partners in CERF project selection and formulation).</i>	2	Participation of NGO partners varied; there were some examples when NGO partner assessments directly influenced proposals, whereas others were developed with minimal consultation, particularly for allocations during the first part of 2014 when a timely response was a priority.
4	Demonstrated involvement of affected community in needs assessment and programme design (required for underfunded emergencies and if unavailable for rapid onset, justification and plan for consultation in place).	<i>0 = None (i.e. no demonstrated involvement of affected population in needs assessment or program design)</i> <i>1 = Low (i.e. nominal involvement of affected population in needs assessment and program design)</i> <i>2 = Reasonable (evidence of regular involvement of affected population in needs assessment and program design)</i> <i>3 = High (evidence that affected population perspectives have a high influence in needs assessment and program design).</i>	1	Although some NGO partners report consultation with communities, there was little evidence that communities have directly influenced the proposal design. This appears partially due to CERF's proposal and reporting system that does not provide specific requirements around Accountability to Affected Populations (AAP).
5	Analysis of funding undertaken to inform prioritization process and facilitate appropriate direction of funds	<i>0 = None (i.e. there is no analysis of funding)</i> <i>1 = Low (i.e. very basic analysis of funding informs prioritisation process)</i> <i>2 = Acceptable (i.e. analysis of funding to inform prioritisation based on available FTS data)</i> <i>3 = Adequate (i.e. analysis of funding and donor/agency consultation informs prioritisation process)</i>	2	The level of analysis varied by country, although funding analyses were done. In Uganda, UNHCR led the development of a detailed analysis. In other countries the analysis was less formal and detailed.
6	CERF underfunded (UFE) country selection/apportionment process at headquarters level undertaken in a		N/A	

	transparent manner.			
7	Where applicable, the analysis, consultation and prioritization processes for CERF allocation take into consideration the country-based pooled funds.	<p>0 = CERF request did not take account of country-based pooled funds</p> <p>1 = CERF request took some account of country-based pooled funds</p> <p>2 = CERF request took account of country-based pooled funds</p> <p>3 = CERF request took full account of country-based pooled funds</p>	3	Uganda and Kenya did not have country-based pooled funds during 2014. In the other three countries, the fact that OCHA managed all pooled funds (including CERF) helped to ensure effective coordination.
<b>Input III: Coherent Country Submission (including complementarity with other sources of funding)</b>				
#	Indicator	Scoring Scale	Rating	Justification
8	CERF submission to the HC is of high quality and consistent with humanitarian priorities.	<p>0 = Not at all (i.e. there is no submission from cluster/sectors or they are rejected since they do not reflect assessment results)</p> <p>1 = Partly (i.e. initial submission does not necessarily reflect standards and requires substantial revision)</p> <p>2 = Mostly (i.e. cluster submission partly based on assessment results and does not necessarily reflect standards)</p> <p>3 = Fully (i.e. cluster submission follows CERF guidelines and fully reflects priority needs in assessments)</p>	2	There was a variation in the quality of proposals by country and by agency. In some cases, particularly in South Sudan where there was considerable turn-over amongst focal points in recipient agencies, a series of drafts needed to be developed. Apart from staff turnover, the other challenges were 1) a relatively low level of awareness of CERF processes and criteria amongst staff and 2) lack of substantive involvement of CERF focal points at recipient HQ level.
9	CERF request adheres to the CERF life-saving criteria and is of high quality.	<p>0 = Not at all (i.e. CERF requests do not adhere to cluster/sector standards and/or Life-Saving Criteria)</p> <p>1 = Partly (i.e. CERF request somewhat adheres to cluster/sector standards and/or Life-Saving Criteria, however other criteria are taken into account and/or different interpretations of Life-Saving Criteria and Sector/Cluster standards are prevalent)</p> <p>2 = Mostly (i.e. CERF request usually adheres to cluster/sector standards and/or Life-Saving Criteria, however Life-Saving Criteria and Sector/Cluster standards are prevalent)</p> <p>3 = Fully (i.e. CERF requests follows cluster guidance and fully adhere to Life-Saving Criteria)</p>	2	Interventions generally satisfied life-saving criteria but requests submitted were not always in line with CERF guidelines (e.g. request for procurement of vehicles in South Sudan). Uganda context required that life-saving criteria be applied through a lens of local settlement. Prioritization on improvement of the Bentiu PoC in site South Sudan was not only life-saving but, in light of the subsequent influx, a good example of an early response.
10	CERF request is considered timely and appropriate with respect to needs and	<p>0 = CERF request is absent or significantly delayed</p> <p>1 = CERF request substantially delayed</p> <p>2 = CERF request somewhat delayed</p>	2	Numerous examples in all five countries were observed where CERF played a strategic and timely role in supporting start-up of operations in life-saving sectors. Some delays were experienced during

	context.	<i>3 = CERF request is timely</i>		preparation of submissions.
11	CERF where applicable uses existing Country Based Pooled Fund processes and structures to support CERF allocations.	<i>0 = Not considered at all</i> <i>1 = Occasionally considered</i> <i>2 = Regularly considered</i> <i>3 = Always considered</i>	3	The combination of OCHA managing different pooled funds along with consultative processes for pooled funds apart from CERF ensured that these were largely complementary.
12	RC/HC allocates CERF funds through a strategy that considers other sources of funding (including Country Based Pooled Funds where these exists) and uses these according to their comparative advantage.	<i>0 = Not considered at all</i> <i>1 = Occasionally considered</i> <i>2 = Regularly considered</i> <i>3 = Always considered</i>	3	The HC and OCHA ensured other sources of funding (such as CHF) were considered. There was a general trend for more in-country pooled fund resources to be channelled directly to NGOs. Other stakeholders were less clear on how the different funds complemented each other. See also narrative for indicator no. 7 above.
13	The IASC Principals' 2011 Commitments on AAP demonstrably incorporated into project submissions and reporting as per the guidelines (This includes that agency commitments on such cross-cutting issues as gender, protection, diversity and disability are identified and addressed in the proposed response).	<i>0 = Not incorporated at all</i> <i>1 = Occasionally included</i> <i>2 = Regularly included</i> <i>3 = Always included</i>	1	Accountability to affected populations is rarely specifically considered in proposals or reports.

#### Input IV. Agency Capacity, M/R & E + Quality Assurance Systems in Place

#	Indicator	Scoring Scale	Rating	Justification
---	-----------	---------------	--------	---------------

14	Agency performance (capacity to implement within the timeframe of the grant, past performance, speed of distribution and absorptive capacity) is considered when developing and reviewing the proposal.	<p><i>0 = Very weak (no attention paid to agency capacities)</i></p> <p><i>1 = Weak (agency capacities partly considered)</i></p> <p><i>2 = Satisfactory (agency capacities mostly considered)</i></p> <p><i>3 = Good (agency capacities fully considered).</i></p>	2	Agency capacity to implement was taken into account on the whole, with some exceptions (e.g. UNDP procurement processes, lack of protection strategy, nutrition clusters, agriculture, smaller UN agencies).
15	Agencies, both at HQ and in the field provide satisfactory (quality and timeliness) inputs (as defined by CERF secretariat guidelines) to the RC/HC CERF Report and the UN Agency/IOM HQ narrative report, which adhere to reporting guidelines	<p><i>0 = Inputs for CERF reports not at all timely and/or are not in accordance with guidelines</i></p> <p><i>1 = Inputs for CERF reports are significantly delayed and/or inputs are mostly not in accordance with CERF guidelines</i></p> <p><i>2 = Inputs for CERF reports are have minor delays and/or are largely in accordance with CERF guidelines</i></p> <p><i>3 = Inputs for CERF reports are on time and are in accordance with CERF guidelines.</i></p>	2	While some countries were able to provide good quality reports on schedule (or with reasonable justifications), others struggled to submit reports of adequate quality on time due to a lack of understanding about procedures, lack of agency-specific report tracking system, inadequate capacity (selected recipient agencies and cluster coordinators), and other factors. The result was substantial delays in submitting CERF reports. This problem was particularly acute in South Sudan, where there was substantial turnover amongst CERF focal points in recipient agencies.
16	The RC/HC CERF report is prepared in an inclusive and transparent manner involving relevant stakeholders	<p><i>0 = CERF report preparation is not inclusive or transparent</i></p> <p><i>1 = Limited inclusion/transparentcy of CERF report preparation</i></p> <p><i>2 = Fair amount of inclusion/transparentcy during CERF report preparation</i></p> <p><i>3 = High level of inclusion/transparentcy during CERF report preparation</i></p>	2	Stakeholders, including NGOs, were generally involved. A particular challenge in South Sudan was the rapid staff turnover.
17	Agencies have the procurement/sub-contracting procedures suited for emergency situations and sufficient staff, access, etc.	<p><i>0 = Incompatible: procurement/sub-contracting processes incompatible with emergency situations</i></p> <p><i>1 = Poor compatibility: procurement/sub-contracting processes ill-suited to emergency situations</i></p> <p><i>2 = Mostly: procurement/sub-contracting processes mostly suited to emergency situations</i></p>	2	Access by agencies to affected populations was problematic due to weather and poor infrastructure in South Sudan, Ethiopia and Sudan, notably when transporting supplies and materials. In South Sudan, security was also a significant constraining factor.

		<i>3 = Fit for purpose: procurement/sub-contracting processes fully suited to emergency situations.</i>		
18	Agencies receiving grants have internal monitoring, evaluation, quality assurance and accountability mechanisms.	<i>0 = Not at all (i.e. agencies do not have an accountability framework or evaluation policy, or field staff are unfamiliar with these)</i> <i>1 = Partly (i.e. some agencies have monitoring, evaluation and accountability mechanisms)</i> <i>2 = Mostly (i.e. most agencies have and use monitoring, evaluation and accountability mechanisms)</i> <i>3 = Completely (i.e. all agencies have robust M&amp;E systems, accountability frameworks, which staff are familiar with and consistently apply)</i>	2	Agency M&E systems were in place, but accountability frameworks (where agencies had these) are not necessarily being systematically applied.
19	CERF secretariat has provided adequate global guidance on the standards for reporting and CERF-related processes.	<i>0 = No guidance from CERF secretariat</i> <i>1 = Limited guidance from CERF secretariat</i> <i>2 = Guidance from CERF secretariat mostly adequate</i> <i>3 = All necessary guidance provided by the CERF secretariat</i>	3	Feedback from OCHA and recipient agencies indicated that CERF guidance was both useful and timely.
20	OCHA CO/RO, in support of the RC/HC, provides guidance to agencies, and facilitates input for RC/HC CERF report.	<i>0 = No guidance or facilitation for inputs to RC/HC's CERF report.</i> <i>1 = Nominal (i.e. limited guidance or facilitation for inputs to RC/HC's CERF report)</i> <i>2 = Mostly (i.e. substantial guidance or facilitation for inputs to RC/HC's CERF report)</i> <i>3 = Completely (i.e. required level guidance and facilitation for inputs to RC/HC's CERF report)</i>	2	Guidance was provided, but could have been more systematic and interactive to compensate for variable agency capacity and high turnover. The OCHA office in Uganda closed down in 2011 and useful technical advice on CERF was provided by a former OCHA staff member who had been recruited by UNICEF Uganda.
<b>Input V: Streamlined Review, Allocation, Distribution and Overall Reporting</b>				
#	Indicator	Scoring Scale	Rating	Justification
21	Average number of working days between final submission of a CERF grant request package from RC/HC	<i>0 = Significant delays prior to disbursement of funds (more than 100% of benchmark).</i> <i>1 = Delays prior to disbursement of funds (50 – 100% of benchmark).</i>	2	Agencies with their own emergency reserves began implementation in anticipation of approval. For the others, the letter of approval from the ERC was sufficient to begin implementation. The date of fund disbursement was thus not relevant in this case.



	and fund disbursement by OPPBA to UN HQ	<p><i>2 = Some delay prior to disbursement of funds (up to 50% of benchmark).</i></p> <p><i>3 = Disbursement of funds meets benchmark.</i></p>		What is more relevant was that there was an average of 10 working days between the date of initial submission and issue of letters of approval to agencies (not including dialogue between CERF secretariat staff and recipient agencies prior to the original submission). On the whole, the time taken to prepare and finalise submissions did not have a negative effect apart from a few isolated cases.
22	Average number of working days from disbursement from UN HQ to country office	<p><i>0 = Significant delays prior to disbursement of funds.</i></p> <p><i>1 = Delays prior to disbursement of funds that had negative impact on implementation.</i></p> <p><i>2 = Minimal delay prior to disbursement of funds that had a limited adverse impact on implementation.</i></p> <p><i>3 = Disbursement of funds timely without any adverse impact on implementation.</i></p>	3	Transfer of funds from recipient agency HQ to country was reported to be timely in all countries.
23	<p>Timely sub-granting arrangements between CERF recipient agencies and their implementing partners.</p> <p>Number of days from UN agency/IOM HQ receives CERF funding to first instalment disbursed to implementing partners (IPs).</p> <p>Number of days from UN agency/IOM HQ receives CERF funding to their implementing partners (IPs) start implementation of CERF funded</p>	<p><i>0 = No guidance or facilitation for inputs to RC/HC's CERF report.</i></p> <p><i>1 = Nominal (i.e. limited guidance or facilitation for inputs to RC/HC's CERF report)</i></p> <p><i>2 = Mostly (i.e. substantial guidance or facilitation for inputs to RC/HC's CERF report)</i></p> <p><i>3 = Completely (i.e. required level guidance and facilitation for inputs to RC/HC's CERF report)</i></p>	2	Based on feedback from NGO key informants, there were no significant sub-contracting issues for partners of either UNHCR or WFP. Delayed implementation due to delays in passing through CERF funds were reported by partners of UNICEF, UN Women, UNFPA and FAO in some countries. UNDP procurement processes delayed UNDSS activities in South Sudan.



	activities.			
24	Overall quality and timeliness of the RC/HC CERF report	<i>0 = Very poor quality and/or significant delays in submission</i> <i>1 = Poor quality and/or delays in submission</i> <i>2 = Good quality and/or minor delay in submission</i> <i>3 = High quality and submitted on time</i>	2	Quality Assessment performed by the CERF secretariat on relevant 2014 reports that had been cleared (9 out of 11) found report quality to be either good or very good with high levels of achievement. Timeliness was a problem in some countries, particularly South Sudan due to a combination of staff turnover in recipient agencies and lack of awareness of CERF processes.
<b>Outputs: Humanitarian Actors Better Able to Respond</b>				
<b>Output I: Time-Critical Life-Saving Activities Supported</b>				
#	Indicator	Scoring Scale	Rating	Justification
25	CERF funds allow agencies to demonstrate capability to leverage donor confidence for future contributions.	<i>0 = No leverage or negative effect (i.e. following CERF contributions, the perception is that other donor funding goes to other projects or future contributions are unrelated to CERF funding)</i> <i>1 = Limited leverage (i.e. some funding complemented)</i> <i>2 = Partial leverage (i.e. future contributions are partly related to CERF funding)</i> <i>3 = Significant Leverage (i.e. CERF funds significantly leverage donor confidence in a given agency for future contributions)</i>	3	The scale of this crisis caught most humanitarian agencies and donors off guard. CERF helped to ensure that by the time an L3 emergency was declared by the UN in February, agencies in affected countries had already started operating.
26	Availability of CERF funding recognized by relevant stakeholders (recipient agencies, NGOs, INGOs, Government, other donors) as being fundamental to ability to respond to life saving needs and gaps.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	2	CERF was widely recognized as filling critical gaps for allocations during the first half of the year. The allocation at the end of the year was based on a decision by the ERC and not based on a significant change in humanitarian needs, as with the allocations at the beginning of 2014. Most of these funds were used for activities that were assessed as critical, but there were some exceptions in the protection, food security and other areas.

27	Extent to which gaps, both geographic and sectoral, have been identified and addressed through use of CERF funds.	<p><i>0 = Not at all (i.e. CERF funding does not contribute to identifying and addressing geographical or sectoral gaps)</i></p> <p><i>1 = Partly (i.e. CERF funding does not always contribute to identifying and addressing geographical and/or sectoral gaps; geographical and sectoral gaps remain overlooked or other sources of funding contribute more to identifying and addressing these gaps)</i></p> <p><i>2 = Mostly (i.e. CERF funding contributes to identifying and addressing geographical and/or sectoral gaps, but CERF has not necessarily been the initial source or funding is limited)</i></p> <p><i>3 = Significantly (i.e. CERF funding contributes to a large extent to identifying and addressing geographical and/or sectoral gaps)</i></p>	3	The focus of CERF allocations on the South Sudanese crisis with widespread life-saving needs made decision-making about which sectors and geographic areas should be prioritised relatively easy. The allocation at the end of 2014 was less straightforward but, despite questions about the value-added of a few activities, most of CERF resources appear to have been well-targeted.
<b>Output II: Increased Coordination and HC Leadership</b>				
#	Indicator	Scoring Scale	Rating	Justification
28	CERF contributes to improve coordination and to enhance RC/HC leadership.	<p><i>0 = Not at all (i.e. coordination and leadership of the HC did not improve due to CERF funding)</i></p> <p><i>1 = Partly (i.e. weak relation between leadership and CERF, or CERF has not contributed to strengthening leadership)</i></p> <p><i>2 = Mostly (i.e. RC/HC leadership has been somewhat strengthened given CERF funds, however, this relationship is not crucial)</i></p> <p><i>3 = Significantly (i.e. RC/HC leadership has been significantly strengthened by CERF and the relationship is crucial)</i></p>	2	There was widespread appreciation amongst stakeholders for the strong and effective leadership from the HCs in South Sudan, Uganda and, for the first round of CERF funding, in Kenya. Since the Refugee Coordination Model was activated, the leadership roles of the UNHCR Representatives in adjacent countries was also critical. In most countries this was viewed as effective. There were some key gaps in leadership. In Sudan the HC was expelled at the end of 2014 and, in mid-2014, the UNHCR Representative in Ethiopia and the HC in Kenya were transferred. These resulted in gaps in leadership, which were particularly marked in Ethiopia and Sudan due to politically charged atmospheres.
29	Strengthened function of clusters and of inter-cluster forum.	<p><i>0 = Not at all (i.e. no cluster system in place)</i></p> <p><i>1 = Partly (i.e. CERF funding has, on specific points,</i></p>	2	Cluster systems have not been activated in either Uganda or Kenya. In lieu there is sectoral coordination with government leadership.

		<p><i>strengthened the functioning of clusters, however, this is not generally observed)</i></p> <p><i>2 = Mostly (i.e. CERF funding is considered to strengthen the functioning of clusters, however, other factors contribute to the strengthening of the cluster system, or the cluster system in many sectors and ICC remains weak)</i></p> <p><i>3 = Significantly (i.e. CERF funding has unquestionably strengthened the functioning of clusters)</i></p>		Involvement of clusters and inter-cluster forum in other countries in CERF processes have been variable, with relatively more engagement during the allocation at the end of 2014. However, actual decision-making was primarily done by the HC. The South Sudan crisis provided much valuable learning in Sudan and Ethiopia about how clusters function once a Refugee Coordination Model has been activated.
30	RC/HC leverages CERF and complementarity between different sources of funding is enhanced. (e.g. funds are used jointly and strategically according to their respective comparative advantages).	<p><i>0 = Not at all</i></p> <p><i>1 = Partly</i></p> <p><i>2 = Mostly</i></p> <p><i>3 = Significantly</i></p>	3	See Indicator 5 above.
31	The RC/HC CERF reporting process fosters joint reflection on results achieved with CERF funds and lessons learned	<p><i>0 = Not at all</i></p> <p><i>1 = Partly</i></p> <p><i>2 = Mostly</i></p> <p><i>3 = Significantly</i></p>	2	AARs were conducted for the initial CERF grants in South Sudan and Uganda. While the process in these two countries was relatively good, participation was limited to a few agencies. In other countries, it was an agenda item during the HCT and CERF focal point meetings.
<b>Output III: UN Agencies' Capacity Strengthened</b>				
#	Indicator	Scoring Scale	Rating	Justification
32	Extent to which CERF enhances the ability of recipient agencies to respond to humanitarian crises.	<p><i>0 = Not at all</i></p> <p><i>1 = Partly</i></p> <p><i>2 = Mostly</i></p> <p><i>3 = Significantly</i></p>	2	Varied according to agency. Some examples IOM's lead CCCM role in South Sudan and UNFPA in Uganda and Kenya which otherwise would not have been able to scale up. Perhaps the most significant example was how UNHCR's role in coordination was strengthened in surrounding countries.

Output IV. Timely Response				
#	Indicator	Scoring Scale	Rating	Justification
33	Number and cause of no-cost extension requests.	<i>0 = More than 50% no-cost extension requests</i> <i>1 = 20-50% no-cost extension requests</i> <i>2 = 5-20% no-cost extension requests</i> <i>3 = less than 5% no-cost extension requests</i>	3	There was a clear, and early, message from the CERF secretariat that no-cost extensions would not be considered since these were Rapid Response grants. There were a small number of requests made, but only two no-cost extension requests in South Sudan were approved for UNDSS (delays were attributed to bureaucratic UNDP procurement systems unsuited to humanitarian contexts and gaps in grant management by UNDSS).
34	CERF funds fill a critical time gap as measured in relation to time that other contributions are received.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	2	See indicator 26 above.
35	Utilization rates of CERF funding	<i>0 = More than 50% no-cost extension requests</i> <i>1 = 20-50% no-cost extension requests</i> <i>2 = 5-20% no-cost extension requests</i> <i>3 = less than 5% no-cost extension requests</i>	3	See indicator 33 above.
Outcomes: Humanitarian Performance Strengthened				
Outcome I: Humanitarian Reform Process, incl. Transformative Agenda, Supported				
#	Indicator	Scoring Scale	Rating	Justification
36	Extent to which CERF supports the full Humanitarian Programme Cycle and the collective results that the humanitarian community aims to achieve.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	CERF-supported activities widely recognized by stakeholders as supporting key programme activities.

37	Extent to which CERF has acted as a tool to incentivize overall coordination, empowered RC/HC leadership and strengthened accountability, including accountability to affected populations.	<p><i>0 = Not at all (i.e. CERF is not used to incentivise coordination. No cluster/sectoral meetings discuss CERF)</i></p> <p><i>1 = Partly (i.e. coordination is partly incentivised through CERF grant discussions in coordination structures)</i></p> <p><i>2 = Mostly (i.e. CERF grants discussions and joint applications increase coordination)</i></p> <p><i>3 = Significantly (i.e. CERF grants significantly increases coordination through discussion, implementation and monitoring, and review processes)</i></p>	2	See indicator 28 above.
----	---	--	---	-------------------------

### Outcome II: Predictability and Reliability Enhanced

#	Indicator	Scoring Scale	Rating	Justification
38	Response capacity is strengthened given knowledge that CERF is a reliable source of funding.	<p><i>0 = NA (i.e. CERF is not regarded as a predictable source of funding)</i></p> <p><i>1 = Limited (i.e. operations are not deployed more rapidly due to predictability of funding)</i></p> <p><i>2 = Mostly (i.e. operations are sometimes deployed more rapidly due to predictability of funding, however problems remain in terms of ensuring rapidness)</i></p> <p><i>3 = Significantly (i.e. operations are unquestionably deployed more rapidly due to predictability of funding, UN agencies feel confident enough to advance funds anticipating CERF grants and examples of frontloading are easy to find)</i></p>	2	CERF appears to have been an important contribution for strengthening capacity during the initial response at the beginning of 2014 in all affected countries. The allocations during the first quarter of 2014 merit a “3” rating. Later allocations received a lower rating due to a combination of the “surprise” element resulting from the unsolicited allocation at the end of 2014 and slower decision-making processes. There were delays in allocating funds for the cholera response in South Sudan due to incomplete submissions and other factors.
39	Operations deployed more rapidly due to ‘predictability’ of CERF as a quick funding source.	<p><i>0 = NA (i.e. CERF is not regarded as a predictable source of funding)</i></p> <p><i>1 = Limited (i.e. operations are not deployed more rapidly due to predictability of funding)</i></p> <p><i>2 = Mostly (i.e. operations are sometimes deployed more rapidly due to predictability of funding, however problems remain in terms of ensuring rapidness)</i></p> <p><i>3 = Significantly (i.e. operations are unquestionably deployed more rapidly due to predictability of funding, UN agencies feel confident enough to advance funds anticipating CERF grants and examples of frontloading are easy to find)</i></p>	2	Internal funding from other sources (UNHCR, WFP, UNICEF) supported initial operations. Other agencies (FAO, IOM, WHO) only started activities once CERF funding was approved.

### Outcome III: Quality Response

#	Indicator	Scoring Scale	Rating	Justification
40	Extent of coverage of beneficiary targets in relation to the initial proposal (e.g. number, type).	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Meets or exceeds beneficiary targets in comparison with proposal</i>	2	In South Sudan, beneficiary coverage was approximately doubled in PoC sites, but much lower than anticipated outside due to security and access constraints. In refugee-receiving countries, the trend was that influxes were greater than the initial planning figures in early 2014, but did not reach revised planning numbers due to a decrease in arrival rates later in the year.
41	Agencies' CERF-related outcomes are reported to CERF and the RC/HC on the basis of their M/R & E and quality assurance systems	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Systematically reported based on M&amp;E and quality assurance systems</i>	2	Mainly reporting outputs, rather than outcomes. AARs in Uganda and South Sudan helped with understanding outcomes.
42	For the CERF, evaluative processes enable continuous improvement and ensure a quality response. Evaluations are undertaken regularly and there is a management response to recommendations.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Evaluative processes systematically consider contributions of CERF and other pooled funds</i>	2	<ul style="list-style-type: none"> <li>• Recipient agencies carried out very few evaluations and reviews. WHO commissioned an independent review of their cholera response and UNHCR was in the process of evaluating their response in countries of asylum for South Sudanese refugees. Neither of these included an assessment of CERF contributions. The draft Interagency Evaluation report also did not include an analysis of CERF.</li> <li>• CERF secretariat had previously commissioned country reviews in Kenya (2012), Sudan (2014) and Ethiopia (2011 &amp; 2012).</li> </ul>
43	Evaluations undertaken demonstrate CERF's contribution to a more coherent and effective quality response.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Evaluative processes systematically demonstrate contributions of CERF and other pooled funds</i>	1	See indicator 42 above. Of those few evaluations completed or in process CERF's contribution was not part of the analysis.



## Annex 2 - CERF PAF Ratings for South Sudan (Country Assessment)

Inputs: CERF Funding				
Input I: Funding Available to UN Agencies/IOM				
#	Indicator	Scoring Scale	Rating	Justification
1	Funding available for crises (rapid response & underfunded window) by country (CERF as a percentage of other sources of funding available).			
Input II: Transparent and Inclusive Prioritization and Decision Making				
#	Indicator	Scoring Scale	Rating	Justification
2	Intra- and inter-cluster/sector prioritization process is inclusive of all relevant stakeholders, and adheres to Principles of Partnership (endorsed by the Global Humanitarian Platform, 12 July 2007).	<p><i>0 = Not at all (i.e. prioritisation process does not include relevant stakeholders and the Principles of Partnership are not taken into account)</i></p> <p><i>1 = Somewhat (i.e. prioritisation process takes into account some relevant stakeholders and/or the Principles of Partnership are somewhat taken into account, however prioritisation process is mainly driven by a few stakeholders)</i></p> <p><i>2 = Mostly (i.e., prioritisation process takes into account most relevant stakeholders and/or the Principles of Partnership are taken into account, however not all relevant stakeholders are included)</i></p> <p><i>3 = Fully (i.e. prioritisation process takes into account all relevant stakeholders and the Principles of Partnership are fully taken into account)</i></p>	2	Decision-making mainly by recipient agencies under the strong guidance and direction of the HC. Involvement of ICWG and cluster members has been largely limited to information sharing. This was justifiable for the first three grants due to the need for timely responses. The exception was the fourth CERF grant, allocated to Bentiu, where transaction costs were relatively heavy and only moved forward following direct intervention by the HC.
3	Agencies involve their intended implementing partners in CERF project selection and formulation.	<p><i>0 = None (i.e. no demonstrated involvement implementing partners in CERF project selection and formulation)</i></p> <p><i>1 = Low (i.e. limited involvement of implementing partners in CERF project selection and formulation)</i></p> <p><i>2 = Reasonable (evidence of regular involvement of implementing partners in CERF project selection and formulation)</i></p>	2	Participation of NGO partners varied; examples were seen where NGO partner assessments directly influenced proposals, whereas others were developed with minimal consultation.



		<i>3 = High (evidence that implementing partners were involved in CERF project selection and formulation).</i>		
4	Demonstrated involvement of affected community in needs assessment and programme design (required for underfunded emergencies and if unavailable for rapid onset, justification and plan for consultation in place).	<i>0 = None (i.e. no demonstrated involvement of affected population in needs assessment or program design)</i> <i>1 = Low (i.e. nominal involvement of affected population in needs assessment and program design)</i> <i>2 = Reasonable (evidence of regular involvement of affected population in needs assessment and program design)</i> <i>3 = High (evidence that affected population perspectives have a high influence in needs assessment and program design).</i>	2	Based on discussions with recipient agencies and NGO implementing partners, affected communities have been involved in planning and implementation and there are feedback systems in place. This is, however, has not really reflected in the proposals or reports and In Bentiu, there were indications greater participation could have improved the quality of interventions supported by CERF.
5	Analysis of funding undertaken to inform prioritization process and facilitate appropriate direction of funds	<i>0 = None (i.e. there is no analysis of funding)</i> <i>1 = Low (i.e. very basic analysis of funding informs prioritisation process)</i> <i>2 = Acceptable (i.e. analysis of funding to inform prioritisation based on available FTS data)</i> <i>3 = Adequate (i.e. analysis of funding and donor/agency consultation informs prioritisation process)</i>	2	No detailed funding analysis was done (as in Uganda). However, meetings minutes show that a level funding analysis was done that considered other funding and how CERF could best add value.
6	CERF underfunded (UFE) country selection/apportionment process at headquarters level undertaken in a transparent manner.			
7	Where applicable, the analysis, consultation and prioritization processes for CERF allocation take into consideration the country-based pooled funds.	<i>0 = CERF request did not take account of country-based pooled funds</i> <i>1 = CERF request took some account of country-based pooled funds</i> <i>2 = CERF request took account of country-based pooled funds</i> <i>3 = CERF request took full account of country-based pooled funds</i>	3	The combination of a RC/HC who had a good understanding of strategic management of pooled funds and a OCHA unit that managed both CHF and CERF ensured that there was systematic analysis.
<b>Input III: Coherent Country Submission (including complementarity with other sources of funding)</b>				
#	Indicator	Scoring Scale	Rating	Justification

8	CERF submission to the HC is of high quality and consistent with humanitarian priorities.	<p>0 = Not at all (i.e. there is no submission from cluster/sectors or they are rejected since they do not reflect assessment results)</p> <p>1 = Partly (i.e. initial submission does not necessarily reflect standards and requires substantial revision)</p> <p>2 = Mostly (i.e. cluster submission partly based on assessment results and does not necessarily reflect standards)</p> <p>3 = Fully (i.e. cluster submission follows CERF guidelines and fully reflects priority needs in assessments)</p>	2	Evidence suggest that many of the recipient agencies had an insufficient understanding of criteria and information requirements. Most did not involve their CERF focal points at HQ in the proposal design process. The result was more “back-and-forth” than usual even prior to submission of the proposal to the CERF secretariat.
9	CERF request adheres to the CERF life-saving criteria and is of high quality.	<p>0 = Not at all (i.e. CERF requests do not adhere to cluster/sector standards and/or Life-Saving Criteria)</p> <p>1 = Partly (i.e. CERF request somewhat adheres to cluster/sector standards and/or Life-Saving Criteria, however other criteria are taken into account and/or different interpretations of Life-Saving Criteria and Sector/Cluster standards are prevalent)</p> <p>2 = Mostly (i.e. CERF request usually adheres to cluster/sector standards and/or Life-Saving Criteria, however Life-Saving Criteria and Sector/Cluster standards are prevalent)</p> <p>3 = Fully (i.e. CERF requests follows cluster guidance and fully adhere to Life-Saving Criteria)</p>	2	Interventions were life-saving but requests were not always in line with CERF guidelines (e.g. procurement of vehicles). Focus of final tranche of 2014 on Bentiu can be considered not only as life-saving but, in light of subsequent influx, a good example of early response.
10	CERF request is considered timely and appropriate with respect to needs and context.	<p>0 = CERF request is absent or significantly delayed</p> <p>1 = CERF request substantially delayed</p> <p>2 = CERF request somewhat delayed</p> <p>3 = CERF request is timely</p>	3	All four CERF rapid response allocations filled critical humanitarian needs.
11	CERF where applicable uses existing Country Based Pooled Fund processes and structures to support CERF allocations.			
12	RC/HC allocates CERF funds through a strategy that considers other sources of funding (including Country Based Pooled Funds where these exists) and uses these according to their comparative advantage.	<p>0 = Not considered at all</p> <p>1 = Occasionally considered</p> <p>2 = Regularly considered</p> <p>3 = Always considered</p>	3	The HC and OCHA ensured other sources of funding (such as CHF) were considered. Other stakeholders were less clear on how the different funds complemented each other.

13	The IASC Principals' 2011 Commitments on AAP demonstrably incorporated into project submissions and reporting as per the guidelines (This includes that agency commitments on such cross-cutting issues as gender, protection, diversity and disability are identified and addressed in the proposed response).	<i>0 = Not incorporated at all</i> <i>1 = Occasionally included</i> <i>2 = Regularly included</i> <i>3 = Always included</i>	2	Since accountability to affected populations was not specifically requested in previous versions of CERF proposal or reporting formats in use during much of 2014 it is not clear how this has influenced design. However, discussions with recipient agencies and their implementing partners indicated that there were regular consultations.
<b>Input IV. Agency Capacity, M/R &amp; E + Quality Assurance Systems in Place</b>				
#	Indicator	Scoring Scale	Rating	Justification
14	Agency performance (capacity to implement within the timeframe of the grant, past performance, speed of distribution and absorptive capacity) is considered when developing and reviewing the proposal.	<i>0 = Very weak (no attention paid to agency capacities)</i> <i>1 = Weak (agency capacities partly considered)</i> <i>2 = Satisfactory (agency capacities mostly considered)</i> <i>3 = Good (agency capacities fully considered).</i>	2	Agency capacity to implement was taken into account on the whole, with a few exceptions (e.g. UNDP, protection, nutrition clusters).
15	Agencies, both at HQ and in the field provide satisfactory (quality and timeliness) inputs (as defined by CERF secretariat guidelines) to the RC/HC CERF Report and the UN Agency/IOM HQ narrative report, which adhere to reporting guidelines	<i>0 = Inputs for CERF reports not at all timely and/or are not in accordance with guidelines</i> <i>1 = Inputs for CERF reports are significantly delayed and/or inputs are mostly not in accordance with CERF guidelines</i> <i>2 = Inputs for CERF reports are have minor delays and/or are largely in accordance with CERF guidelines</i> <i>3 = Inputs for CERF reports are on time and are in accordance with CERF guidelines.</i>	1	While some agencies were able to provide good quality inputs on schedule (or with a reasonable justification), others struggled resulting in substantial delays in submitting the reports for the first three grants (the fourth is not due until September).
16	The RC/HC CERF report is prepared in an inclusive and transparent manner involving relevant stakeholders	<i>0 = CERF report preparation is not at inclusive or transparent</i> <i>1 = Limited inclusion/transparentcy of CERF report preparation</i> <i>2 = Fair amount of inclusion/transparentcy during CERF report preparation</i> <i>3 = High level of inclusion/transparentcy during CERF report</i>	2	Not all stakeholders systematically involved. A particular challenge in South Sudan is the rapid staff turnover.

		<i>preparation</i>		
17	Agencies have the procurement/sub-contracting procedures suited for emergency situations and sufficient staff, access, etc.	<i>0 = Incompatible: procurement/sub-contracting processes incompatible with emergency situations</i> <i>1 = Poor compatibility: procurement/sub-contracting processes ill-suited to emergency situations</i> <i>2 = Mostly: procurement/sub-contracting processes mostly suited to emergency situations</i> <i>3 = Fit for purpose: procurement/sub-contracting processes fully suited to emergency situations.</i>	2	All agencies experienced challenges with access, particularly when transporting supplies and materials.
18	Agencies receiving grants have internal monitoring, evaluation, quality assurance and accountability mechanisms.	<i>0 = Not at all (i.e. absence of an accountability framework or evaluation policy, or field staff are unfamiliar with these)</i> <i>1 = Partly (i.e. some agencies have monitoring, evaluation and accountability mechanisms)</i> <i>2 = Mostly (i.e. most agencies have and use monitoring, evaluation and accountability mechanisms)</i> <i>3 = Completely (i.e. all agencies have robust M&amp;E systems, accountability frameworks, which staff are familiar with and consistently apply)</i>	2	M&E systems in place, but accountability frameworks (where agencies have these) are not being systematically applied.
19	CERF secretariat has provided adequate global guidance on the standards for reporting and CERF-related processes.			
20	OCHA CO/RO, in support of the RC/HC, provides guidance to agencies, and facilitates input for RC/HC CERF report.	<i>0 = No guidance for inputs to RC/HC's CERF report.</i> <i>1 = Nominal (i.e. limited guidance or facilitation for inputs to RC/HC's CERF report)</i> <i>2 = Mostly (i.e. substantial guidance or facilitation for inputs to RC/HC's CERF report)</i> <i>3 = Completely (i.e. required level guidance and facilitation for inputs to RC/HC's CERF report)</i>	2	Guidance was provided, but could have been more systematic and interactive to compensate for variable agency capacity and high turnover.
<b>Input V: Streamlined Review, Allocation, Distribution and Overall Reporting</b>				
#	Indicator	Scoring Scale	Rating	Justification

21	Average number of working days between final submission of a CERF grant request package from RC/HC and fund disbursement by OPPBA to UN HQ			
22	Average number of working days from disbursement from UN HQ to country office	<p><i>0 = Significant delays prior to disbursement of funds.</i></p> <p><i>1 = Delays prior to disbursement of funds that had negative impact on implementation.</i></p> <p><i>2 = Minimal delay prior to disbursement of funds that had a limited adverse impact on implementation.</i></p> <p><i>3 = Fund disbursement does not affect implementation.</i></p>	3	Transfer of funds from recipient agency HQ to country appears to have been quite rapid.
23	<p>Timely sub-granting arrangements between CERF recipient agencies and their implementing partners.</p> <p>Number of days from UN agency/IOM HQ receives CERF funding to first instalment disbursed to implementing partners (IPs).</p> <p>Number of days from UN agency/IOM HQ receives CERF funding to their implementing partners (IPs) start implementation of CERF funded activities.</p>	<p><i>0 = Impractical: sub-granting processes make implementation of CERF-funded activities almost impossible for partners</i></p> <p><i>1 = Significant: sub-granting processes significantly hinder implementation of CERF-funded activities by partners</i></p> <p><i>2 = Partially: sub-granting processes partially hinder implementation of CERF-funded activities by partners</i></p> <p><i>3 = Fit for purpose: sub-granting processes facilitate implementation of CERF-funded activities and have little or no impact on partner operations.</i></p>	2	No significant delays in receiving CERF funds reported by implementing partners. The only delay that directly affected CERF interventions was the relatively long processing time of UNDP for UNDSS operations.
24	Overall quality and timeliness of the RC/HC CERF report	<p><i>0 = Very poor quality and/or significant delays in submission</i></p> <p><i>1 = Poor quality and/or delays in submission</i></p> <p><i>2 = Good quality and/or minor delay in submission</i></p> <p><i>3 = High quality and submitted on time</i></p>	2	Quality Assessment performed by the CERF secretariat on relevant 2014 reports found them to be between good to very good. The rating was reduced due to significant delays in submission.
<b>Outputs: Humanitarian Actors Better Able to Respond</b>				
<b>Output I: Time-Critical Life-Saving Activities Supported</b>				

#	Indicator	Scoring Scale	Rating	Justification
25	CERF funds allow agencies to demonstrate capability to leverage donor confidence for future contributions.	<p><i>0 = No leverage or negative effect (i.e. following CERF contributions, the perception is that other donor funding goes to other projects or future contributions are unrelated to CERF funding)</i></p> <p><i>1 = Limited leverage (i.e. some funding complemented)</i></p> <p><i>2 = Partial leverage (i.e. future contributions are partly related to CERF funding)</i></p> <p><i>3 = Significant Leverage (i.e. CERF funds significantly leverage donor confidence in a given agency for future contributions)</i></p>	3	CERF helped to ensure that by the time an L3 emergency was declared by the UN in February, agencies in South Sudan were already operational.
26	Availability of CERF funding recognized by relevant stakeholders (recipient agencies, NGOs, INGOs, Government, other donors) as being fundamental to ability to respond to life saving needs and gaps.	<p><i>0 = Not at all</i></p> <p><i>1 = Partly</i></p> <p><i>2 = Mostly</i></p> <p><i>3 = Significantly</i></p>	2	CERF was widely recognized as filling critical gaps. Exceptions were protection activities in Bentiu and WFP food security interventions, which were often topping up ongoing programmes.
27	Extent to which gaps, both geographic and sectoral, have been identified and addressed through use of CERF funds.	<p><i>0 = Not at all (i.e. CERF funding does not contribute to identifying and addressing geographical or sectoral gaps)</i></p> <p><i>1 = Partly (i.e. CERF funding does not always contribute to identifying and addressing geographical and/or sectoral gaps; geographical and sectoral gaps remain overlooked or other sources of funding contribute more to identifying and addressing these gaps)</i></p> <p><i>2 = Mostly (i.e. CERF funding contributes to identifying and addressing geographical and/or sectoral gaps, but CERF has not necessarily been the initial source or funding is limited)</i></p> <p><i>3 = Significantly (i.e. CERF funding contributes to a large extent to identifying and addressing geographical and/or sectoral gaps)</i></p>	2	As per 26 above.
<b>Output II: Increased Coordination and HC Leadership</b>				
#	Indicator	Scoring Scale	Rating	Justification



28	CERF contributes to improve coordination and to enhance RC/HC leadership.	<p><i>0 = Not at all (i.e. coordination and leadership of the HC did not improve due to CERF funding)</i></p> <p><i>1 = Partly (i.e. weak relation between leadership and CERF, or CERF has not contributed to strengthening leadership)</i></p> <p><i>2 = Mostly (i.e. RC/HC leadership has been somewhat strengthened given CERF funds, however, this relationship is not crucial)</i></p> <p><i>3 = Significantly (i.e. RC/HC leadership has been significantly strengthened by CERF and the relationship is crucial)</i></p>	3	Stakeholders acknowledged and appreciated the HC's primary role in determining strategic role of CERF.
29	Strengthened function of clusters and of inter-cluster forum.	<p><i>0 = Not at all (i.e. no cluster system in place)</i></p> <p><i>1 = Partly (i.e. CERF funding has, on specific points, strengthened the functioning of clusters, however, this is not generally observed)</i></p> <p><i>2 = Mostly (i.e. CERF funding is considered to strengthen the functioning of clusters, however, other factors contribute to the strengthening of the cluster system, or the cluster system in many sectors and ICC remains weak)</i></p> <p><i>3 = Significantly (i.e. CERF funding has unquestionably strengthened the functioning of clusters)</i></p>	2	There was variable engagement by ICWG and/or relevant cluster coordinators in CERF processes. During CERF processes in early 2014, these were primarily led by HC and recipient agencies with limited engagement by clusters or ICWG. There was much more involvement during the last allocation in 2014.
30	RC/HC leverages CERF and complementarity between different sources of funding is enhanced. (e.g. funds are used jointly and strategically according to their respective comparative advantages).	<p><i>0 = Not at all</i></p> <p><i>1 = Partly</i></p> <p><i>2 = Mostly</i></p> <p><i>3 = Significantly</i></p>	3	A large-scale CERF investment at the end of 2014 helped leverage funding from other donors for Bentiu PoC, which required site improvements.
31	The RC/HC CERF reporting process fosters joint reflection on results achieved with CERF funds and lessons learned	<p><i>0 = Not at all</i></p> <p><i>1 = Partly</i></p> <p><i>2 = Mostly</i></p> <p><i>3 = Significantly</i></p>	2	AAR conducted, but with limited participation.
<b>Output III: UN Agencies' Capacity Strengthened</b>				
#	Indicator	Scoring Scale	Rating	Justification



32	Extent to which CERF enhances the ability of recipient agencies to respond to humanitarian crises.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	2	Varies according to agency, IOM providing an example of an agency whose ability was substantially strengthened.
<b>Output IV. Timely Response</b>				
#	Indicator	Scoring Scale	Rating	Justification
33	Number and cause of no-cost extension requests.	<i>0 = More than 50% no-cost extension requests</i> <i>1 = 20-50% no-cost extension requests</i> <i>2 = 5-20% no-cost extension requests</i> <i>3 = less than 5% no-cost extension requests</i>	3	Only two no-cost extension requests (UNDSS and UNHAS) due to delays in fund processing by UNDP and recruiting surge staff.
34	CERF funds fill a critical time gap as measured in relation to time that other contributions are received.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	2	See indicator 26 above.
35	Utilization rates of CERF funding.			
<b>Outcomes: Humanitarian Performance Strengthened</b>				
<b>Outcome I: Humanitarian Reform Process, incl. Transformative Agenda, Supported</b>				
#	Indicator	Scoring Scale	Rating	Justification
36	Extent to which CERF supports the full Humanitarian Programme Cycle and the collective results that the humanitarian community aims to achieve.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	CERF-supported activities widely recognized by stakeholders as supporting key programme activities.
37	Extent to which CERF has acted as a tool to incentivize overall coordination, empowered RC/HC leadership and strengthened accountability, including	<i>0 = Not at all (i.e. CERF is not used to incentivise coordination. No cluster/sectoral meetings discuss CERF)</i> <i>1 = Partly (i.e. coordination is partly incentivised through CERF grant discussions in coordination structures)</i> <i>2 = Mostly (i.e. CERF grants discussions and joint applications</i>	2	Reinforced HC leadership role and provided a catalyst for joint activities (health in Bentiu). Clusters and ICWG were only marginally involved.

	accountability to affected populations.	<i>increase coordination)</i> <i>3 = Significantly (i.e. CERF grants significantly increases coordination through discussion, implementation and monitoring, and review processes)</i>		
<b>Outcome II: Predictability and Reliability Enhanced</b>				
#	Indicator	Scoring Scale	Rating	Justification
38	Response capacity is strengthened given knowledge that CERF is a reliable source of funding.	<i>0 = NA (i.e. CERF is not regarded as a predictable source of funding)</i> <i>1 = Limited (i.e. operations are not deployed more rapidly due to predictability of funding)</i> <i>2 = Mostly (i.e. operations are sometimes deployed more rapidly due to predictability of funding, however problems remain in terms of ensuring rapidness)</i> <i>3 = Significantly (i.e. operations are unquestionably deployed more rapidly due to predictability of funding, UN agencies feel confident enough to advance funds anticipating CERF grants and examples of frontloading are easy to find)</i>	2	On the whole CERF facilitated a rapid response. The exceptions were interventions in Bentiu when there was evidence that decision-making processes were drawn out and the cholera response due to a need to resolve queries from the CERF secretariat about the perceived duplication of activities.
39	Operations deployed more rapidly due to 'predictability' of CERF as a quick funding source.	<i>0 = NA (i.e. CERF is not regarded as a predictable source of funding)</i> <i>1 = Limited (i.e. operations are not deployed more rapidly due to predictability of funding)</i> <i>2 = Mostly (i.e. operations are sometimes deployed more rapidly due to predictability of funding, however problems remain in terms of ensuring rapidness)</i> <i>3 = Significantly (i.e. operations are unquestionably deployed more rapidly due to predictability of funding, UN agencies feel confident enough to advance funds anticipating CERF grants and examples of frontloading are easy to find)</i>	2	Internal funding from other sources (UNHCR, WFP, UNICEF) supported initial operations. Other agencies (FAO, IOM, WHO) only started activities once CERF funding was approved.
<b>Outcome III: Quality Response</b>				
#	Indicator	Scoring Scale	Rating	Justification
40	Extent of coverage of beneficiary targets in relation to the initial proposal (e.g. number, type).	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i>	2	Beneficiary coverage was approximately doubled in PoC sites, but much lower than anticipated outside due to security and access constraints.

		<i>3 = Meets or exceeds beneficiary targets in comparison with proposal</i>		
41	Agencies' CERF-related outcomes are reported to CERF and the RC/HC on the basis of their M/R & E and quality assurance systems	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Systematically reported based on M&amp;E and quality assurance systems</i>	2	Mainly reporting outputs, rather than outcomes.
42	For the CERF, evaluative processes enable continuous improvement and ensure a quality response. Evaluations are undertaken regularly and there is a management response to recommendations.			
43	Evaluations undertaken demonstrate CERF's contribution to a more coherent and effective quality response.			

### Annex 3 - CERF PAF Ratings for Uganda (Country Assessment)

Inputs: CERF Funding				
Input I: Funding Available to UN Agencies/IOM				
#	Indicator	Scoring Scale	Rating	Justification
1	Funding available for crises (rapid response & underfunded window) by country (CERF as a percentage of other sources)			

	of funding available).			
<b>Input II: Transparent and Inclusive Prioritization and Decision Making</b>				
#	Indicator	Scoring Scale	Rating	Justification
2	Intra- and inter-cluster/sector prioritization process is inclusive of all relevant stakeholders, and adheres to Principles of Partnership (endorsed by the Global Humanitarian Platform, 12 July 2007).	<p>0 = Not at all (i.e. prioritisation process does not include relevant stakeholders and the Principles of Partnership are not taken into account)</p> <p>1 = Somewhat (i.e. prioritisation process takes into account some relevant stakeholders and/or the Principles of Partnership are somewhat taken into account, however prioritisation process is mainly driven by a few stakeholders)</p> <p>2 = Mostly (i.e., prioritisation process takes into account most relevant stakeholders and/or the Principles of Partnership are taken into account, however not all relevant stakeholders are included)</p> <p>3 = Fully (i.e. prioritisation process takes into account all relevant stakeholders and the Principles of Partnership are fully taken into account)</p>	2	No cluster system currently in Uganda. Using sectoral coordination systems instead. Good prioritization processes effectively balanced efficiency with inclusion of implementing partners. However, government counterparts felt that they had been more involved in 2012 CERF prioritization processes than in 2014.
3	Agencies involve their intended implementing partners in CERF project selection and formulation.	<p>0 = None (i.e. no demonstrated involvement implementing partners in CERF project selection and formulation)</p> <p>1 = Low (i.e. limited involvement of implementing partners in CERF project selection and formulation)</p> <p>2 = Reasonable (evidence of regular involvement of implementing partners in CERF project selection and formulation)</p> <p>3 = High (evidence that affected population perspectives have a high influence in implementing partners in CERF project selection and formulation).</p>	3	Developed jointly by UN Country Team members in close consultation with the Office of the Prime Minister and implementing partners.
4	Demonstrated involvement of affected community in needs assessment and programme design (required for underfunded emergencies and if unavailable for rapid onset, justification and plan for consultation in place).	<p>0 = None (i.e. no demonstrated involvement of affected population in needs assessment or program design)</p> <p>1 = Low (i.e. nominal involvement of affected population in needs assessment and program design)</p> <p>2 = Reasonable (evidence of regular involvement of affected population in needs assessment and program design)</p> <p>3 = High (evidence that affected population perspectives have a high influence in needs assessment and program design).</p>	1	These were Rapid Response grants so there were time constraints. Nevertheless there was scope for greater consultation during the second round. Field visit indicated relatively low levels of refugee participation in decision-making processes.

5	Analysis of funding undertaken to inform prioritization process and facilitate appropriate direction of funds	<i>0 = None (i.e. there is no analysis of funding)</i> <i>1 = Low (i.e. very basic analysis of funding informs prioritisation process)</i> <i>2 = Acceptable (i.e. analysis of funding to inform prioritisation based on available FTS data)</i> <i>3 = Adequate (i.e. analysis of funding and donor/agency consultation informs prioritisation process)</i>	3	Systematic funding analysis undertaken.
6	CERF underfunded (UFE) country selection/apportionment process at headquarters level undertaken in a transparent manner.			
7	Where applicable, the analysis, consultation and prioritization processes for CERF allocation take into consideration the country-based pooled funds.			

**Input III: Coherent Country Submission (including complementarity with other sources of funding)**

#	Indicator	Scoring Scale	Rating	Justification
8	CERF submission to the HC is of high quality and consistent with humanitarian priorities.	<i>0 = Not at all (i.e. there is no submission from cluster/sectors or they are rejected since they do not reflect assessment results)</i> <i>1 = Partly (i.e. initial submission does not necessarily reflect standards and requires substantial revision)</i> <i>2 = Mostly (i.e. cluster submission partly based on assessment results and does not necessarily reflect standards)</i> <i>3 = Fully (i.e. cluster submission follows CERF guidelines and fully reflects priority needs in assessments)</i>	3	Joint needs assessment done in January 2014 contributed to a high quality submission that required only minor corrections prior to approval. Second round was of a similarly high quality.
9	CERF request adheres to the CERF life-saving criteria and is of high quality.	<i>0 = Not at all (i.e. CERF requests do not adhere to cluster/sector standards and/or Life-Saving Criteria)</i> <i>1 = Partly (i.e. CERF request somewhat adheres to cluster/sector standards and/or Life-Saving Criteria, however other criteria are taken into account and/or different interpretations of Life-Saving Criteria and Sector/Cluster standards are prevalent)</i>	2	Uganda context for reception of refugees is unique in that refugee sites resemble more of a returnee programme than a typical refugee emergency. As a consequence, apart from initial water trucking and temporary reception infrastructure, there was not many relief

		<p>2 = Mostly (i.e. CERF request usually adheres to cluster/sector standards and/or Life-Saving Criteria, however Life-Saving Criteria and Sector/Cluster standards are prevalent)</p> <p>3 = Fully (i.e. CERF requests follows cluster guidance and fully adhere to Life-Saving Criteria)</p>		activities. As a result, there were some initial challenges to adapt and re-submit the proposal so that it corresponded to CERF life-saving criteria.
10	CERF request is considered timely and appropriate with respect to needs and context.	<p>0 = CERF request is absent or significantly delayed</p> <p>1 = CERF request substantially delayed</p> <p>2 = CERF request somewhat delayed</p> <p>3 = CERF request is timely</p>	2	The first request was submitted on Jan 17 <sup>th</sup> and CERF request was approved during the second week of February, after the South Sudanese refugee influx had already exceeded 70,000.
11	CERF where applicable uses existing Country Based Pooled Fund processes and structures to support CERF allocations.			
12	RC/HC allocates CERF funds through a strategy that considers other sources of funding (including Country Based Pooled Funds where these exists) and uses these according to their comparative advantage.	<p>0 = Not considered at all</p> <p>1 = Occasionally considered</p> <p>2 = Regularly considered</p> <p>3 = Always considered</p>	3	No other emergency pooled funds were available in Uganda. A detailed funding analysis was done (see indicator 5 above)
13	The IASC Principals' 2011 Commitments on AAP demonstrably incorporated into project submissions and reporting as per the guidelines (This includes that agency commitments on such cross-cutting issues as gender, protection, diversity and disability are identified and addressed in the proposed response).	<p>0 = Not incorporated at all</p> <p>1 = Occasionally included</p> <p>2 = Regularly included</p> <p>3 = Always included</p>	1	Cross-cutting issues such as gender, protection, diversity and disability were considered, but other elements in the framework of the Accountability to Affected Populations were not adequately addressed (see indicator 4 above). Despite the relatively high percentage of women refugees, SGBV was not adequately considered during the initial stages and relevant activities did not start until April/May.
<b>Input IV. Agency Capacity, M/R &amp; E + Quality Assurance Systems in Place</b>				
#	Indicator	Scoring Scale	Rating	Justification



14	Agency performance (capacity to implement within the timeframe of the grant, past performance, speed of distribution and absorptive capacity) is considered when developing and reviewing the proposal.	<i>0 = Very weak (no attention paid to agency capacities)</i> <i>1 = Weak (agency capacities partly considered)</i> <i>2 = Satisfactory (agency capacities mostly considered)</i> <i>3 = Good (agency capacities fully considered).</i>	3	Available evidence indicates that agency capacities were considered, despite the challenges as very few agencies were already working in refugee-receiving areas.
15	Agencies, both at HQ and in the field provide satisfactory (quality and timeliness) inputs (as defined by CERF secretariat guidelines) to the RC/HC CERF Report and the UN Agency/IOM HQ narrative report, which adhere to reporting guidelines	<i>0 = Inputs for CERF reports not at all timely and/or are not in accordance with guidelines</i> <i>1 = Inputs for CERF reports are significantly delayed and/or inputs are mostly not in accordance with CERF guidelines</i> <i>2 = Inputs for CERF reports are have minor delays and/or are largely in accordance with CERF guidelines</i> <i>3 = Inputs for CERF reports are on time and are in accordance with CERF guidelines.</i>	3	Agency inputs were timely and judged to be largely in accordance with CERF guidelines.
16	The RC/HC CERF report is prepared in an inclusive and transparent manner involving relevant stakeholders	<i>0 = CERF report preparation is not at inclusive or transparent</i> <i>1 = Limited inclusion/transparency of CERF report preparation</i> <i>2 = Fair amount of inclusion/transparency during CERF report preparation</i> <i>3 = High level of inclusion/transparency during CERF report preparation</i>	3	Report preparation was an inclusive and transparent process involving recipient agencies and implementing partners.
17	Agencies have the procurement/sub-contracting procedures suited for emergency situations and sufficient staff, access, etc.	<i>0 = Incompatible: procurement/sub-contracting processes incompatible with emergency situations</i> <i>1 = Poor compatibility: procurement/sub-contracting processes ill-suited to emergency situations</i> <i>2 = Mostly: procurement/sub-contracting processes mostly suited to emergency situations</i> <i>3 = Fit for purpose: procurement/sub-contracting processes fully suited to emergency situations.</i>	2	Most agencies had appropriate systems and surge capacities in place. Some exceptions were seen with procurement processes that caused delays in transferring funds (FAO, UN Women and UNICEF), procurement (FAO) and surge capacities (WHO and UN Women).
18	Agencies receiving grants have internal monitoring, evaluation, quality assurance and accountability	<i>0 = Not at all (i.e. agencies do not have an accountability framework or evaluation policy, or field staff are unfamiliar with these)</i> <i>1 = Partly (i.e. some agencies have monitoring, evaluation and</i>	2	M&E systems in place, but accountability frameworks (where agencies have these) are not being systematically applied.



	mechanisms.	<i>accountability mechanisms)</i> <i>2 = Mostly (i.e. most agencies have and use monitoring, evaluation and accountability mechanisms)</i> <i>3 = Completely (i.e. all agencies have robust M&amp;E systems, accountability frameworks, which staff are familiar with and consistently apply)</i>		
19	CERF secretariat has provided adequate global guidance on the standards for reporting and CERF-related processes.			
20	OCHA CO/RO, in support of the RC/HC, provides guidance to agencies, and facilitates input for RC/HC CERF report.	<i>0 = No guidance or facilitation for inputs to RC/HC's CERF report.</i> <i>1 = Nominal (i.e. limited guidance or facilitation for inputs to RC/HC's CERF report)</i> <i>2 = Mostly (i.e. substantial guidance or facilitation for inputs to RC/HC's CERF report)</i> <i>3 = Completely (i.e. required level guidance and facilitation for inputs to RC/HC's CERF report)</i>	3	Although there was no OCHA presence, the supporting coordination role for the RC was filled very effectively by UNHCR supported by technical advice from a former OCHA staff member who is now with UNICEF.
<b>Input V: Streamlined Review, Allocation, Distribution and Overall Reporting</b>				
#	Indicator	Scoring Scale	Rating	Justification
21	Average number of working days between final submission of a CERF grant request package from RC/HC and fund disbursement by OPPBA to UN HQ			
22	Average number of working days from disbursement from UN HQ to country office	<i>0 = Significant delays prior to disbursement of funds.</i> <i>1 = Delays prior to disbursement of funds that had negative impact on implementation.</i> <i>2 = Minimal delay prior to disbursement of funds that had a limited adverse impact on implementation.</i> <i>3 = Disbursement of funds timely without any adverse impact on</i>	2	Funds were not received until March even though the initial proposal was submitted on January 17 <sup>th</sup> . WHO experienced delays in transferring funds.

		<i>implementation.</i>		
23	<p>Timely sub-granting arrangements between CERF recipient agencies and their implementing partners.</p> <p>Number of days from UN agency/IOM HQ receives CERF funding to first instalment disbursed to implementing partners (IPs).</p> <p>Number of days from UN agency/IOM HQ receives CERF funding to their implementing partners (IPs) start implementation of CERF funded activities.</p>	<p><i>0 = Impractical: sub-granting processes make implementation of CERF-funded activities almost impossible for partners</i></p> <p><i>1 = Significant: sub-granting processes significantly hinder implementation of CERF-funded activities by partners</i></p> <p><i>2 = Partially: sub-granting processes partially hinder implementation of CERF-funded activities by partners</i></p> <p><i>3 = Fit for purpose: sub-granting processes facilitate implementation of CERF-funded activities and have little or no impact on partner operations.</i></p>	2	On the whole transfers were timely and, in the case of agencies such as UNHCR and WFP, grants tended to be seamlessly incorporated into existing sub-agreements. Some delays were reported by implementing partners of UNICEF, UN Women and FAO due to contracting processes. Apart from SGBV issues mentioned in indicator 13, these delays did not have a significantly adverse effect on the response.
24	Overall quality and timeliness of the RC/HC CERF report	<p><i>0 = Very poor quality and/or significant delays in submission</i></p> <p><i>1 = Poor quality and/or delays in submission</i></p> <p><i>2 = Good quality and/or minor delay in submission</i></p> <p><i>3 = High quality and submitted on time</i></p>	3	Quality Assessment performed by the CERF secretariat on relevant 2014 reports found them to be between good to very good. They were also submitted in a timely fashion.
<b>Outputs: Humanitarian Actors Better Able to Respond</b>				
<b>Output I: Time-Critical Life-Saving Activities Supported</b>				
#	Indicator	Scoring Scale	Rating	Justification
25	CERF funds allow agencies to demonstrate capability to leverage donor confidence for future contributions.	<p><i>0 = No leverage or negative effect (i.e. following CERF contributions, the perception is that other donor funding goes to other projects or future contributions are unrelated to CERF funding)</i></p> <p><i>1 = Limited leverage (i.e. some funding complemented)</i></p> <p><i>2 = Partial leverage (i.e. future contributions are partly related to CERF funding)</i></p> <p><i>3 = Significant Leverage (i.e. CERF funds significantly leverage donor confidence in a given agency for future contributions)</i></p>	3	CERF helped to ensure that by the time an L3 emergency was declared by the UN in February, agencies in Uganda were already operational.

26	Availability of CERF funding recognized by relevant stakeholders (recipient agencies, NGOs, INGOs, Government, other donors) as being fundamental to ability to respond to life saving needs and gaps.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	The crisis erupted in 2013 Dec and quickly escalated into a major protection crisis affecting children, women and men forced recruitments, SGBV, ethnic-based harassment, loss of livelihood and widespread displacement. CERF was widely recognised as a timely and critical support.
27	Extent to which gaps, both geographic and sectoral, have been identified and addressed through use of CERF funds.	<i>0 = Not at all (i.e. CERF funding does not contribute to identifying and addressing geographical or sectoral gaps)</i> <i>1 = Partly (i.e. CERF funding does not always contribute to identifying and addressing geographical and/or sectoral gaps; geographical and sectoral gaps remain overlooked or other sources of funding contribute more to identifying and addressing these gaps)</i> <i>2 = Mostly (i.e. CERF funding contributes to identifying and addressing geographical and/or sectoral gaps, but CERF has not necessarily been the initial source or funding is limited)</i> <i>3 = Significantly (i.e. CERF funding contributes to a large extent to addressing geographical and/or sectoral gaps)</i>	3	As per 26 above.
<b>Output II: Increased Coordination and HC Leadership</b>				
#	Indicator	Scoring Scale	Rating	Justification
28	CERF contributes to improve coordination and to enhance RC/HC leadership.	<i>0 = Not at all (i.e. coordination and leadership of the HC did not improve due to CERF funding)</i> <i>1 = Partly (i.e. weak relation between leadership and CERF, or CERF has not contributed to strengthening leadership)</i> <i>2 = Mostly (i.e. RC/HC leadership has been somewhat strengthened given CERF funds)</i> <i>3 = Significantly (i.e. RC/HC leadership has been significantly strengthened by CERF and the relationship is crucial)</i>	3	A “one UN” system is currently operating in Uganda and CERF processes have had a visible beneficial effect in strengthening the RCO systems and reinforcing teamwork within the UNCT.
29	Strengthened function of clusters and of inter-cluster forum.	<i>0 = Not at all (i.e. no cluster system in place)</i> <i>1 = Partly (i.e. CERF funding has partially strengthened the</i>	N/A	The decision was made not to reactivate the cluster system in Uganda. UNHCR is

		<i>functioning of clusters)</i> <i>2 = Mostly (i.e. CERF funding is considered to strengthen the functioning of clusters, however, other factors contribute to the strengthening of the cluster system, or the cluster system in many sectors and ICC remains weak)</i> <i>3 = Significantly (i.e. CERF funding has unquestionably strengthened the functioning of clusters)</i>		coordinating most of the sectors.
30	RC/HC leverages CERF and complementarity between different sources of funding is enhanced. (e.g. funds are used jointly and strategically according to their respective comparative advantages).	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	See Indicator 5 above.
31	The RC/HC CERF reporting process fosters joint reflection on results achieved with CERF funds and lessons learned	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	Systematic capturing of lessons learned. This is most apparent in 2012, when a number of lessons from CERF grants used for Congolese and Karamoja crises were successfully applied to the South Sudanese refugee crisis.
<b>Output III: UN Agencies' Capacity Strengthened</b>				
#	Indicator	Scoring Scale	Rating	Justification
32	Extent to which CERF enhances the ability of recipient agencies to respond to humanitarian crises.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	2	On the whole, CERF enhanced the ability of agencies to respond to the crisis. Context meant that CERF's
<b>Output IV. Timely Response</b>				
#	Indicator	Scoring Scale	Rating	Justification

33	Number and cause of no-cost extension requests.	<i>0 = More than 50% no-cost extension requests</i> <i>1 = 20-50% no-cost extension requests</i> <i>2 = 5-20% no-cost extension requests</i> <i>3 = less than 5% no-cost extension requests</i>	2	Two no-cost extensions (FAO and IOM)
34	CERF funds fill a critical time gap as measured in relation to time that other contributions are received.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	See indicator 26 above.
35	Utilization rates of CERF funding.			

### Outcomes: Humanitarian Performance Strengthened

#### Outcome I: Humanitarian Reform Process, incl. Transformative Agenda, Supported

#	Indicator	Scoring Scale	Rating	Justification
36	Extent to which CERF supports the full Humanitarian Programme Cycle and the collective results that the humanitarian community aims to achieve.	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Significantly</i>	3	Joint and inclusive processes coordinated by UNHCR and the Office of the Prime Minister throughout the project cycle helped maximize value-added.
37	Extent to which CERF has acted as a tool to incentivize overall coordination, empowered RC/HC leadership and strengthened accountability, including accountability to affected populations.	<i>0 = Not at all (i.e. CERF is not used to incentivise coordination. No cluster/sectoral meetings discuss CERF)</i> <i>1 = Partly (i.e. coordination is partly incentivised through CERF grant discussions in coordination structures)</i> <i>2 = Mostly (i.e. CERF grants discussions and joint applications increase coordination)</i> <i>3 = Significantly (i.e. CERF grants significantly increases coordination through discussion, implementation and monitoring, and review processes)</i>	2	RC/HC leadership strengthened as described under indicator 28. Accountability to affected populations requires more attention as described in indicator 13.

#### Outcome II: Predictability and Reliability Enhanced

#	Indicator	Scoring Scale	Rating	Justification
38	Response capacity is	<i>0 = NA (i.e. CERF is not regarded as a predictable source of</i>	3	Rapid response grant to the South Sudan

	strengthened given knowledge that CERF is a reliable source of funding.	<i>funding)</i> <i>1 = Limited (i.e. operations not deployed more rapidly due to predictability of funding)</i> <i>2 = Mostly (i.e. operations are sometimes deployed more rapidly due to predictability of funding, however problems remain in terms of ensuring rapidness)</i> <i>3 = Significantly (i.e. operations are unquestionably deployed more rapidly due to predictability of funding, UN agencies feel confident enough to advance funds anticipating CERF grants and examples of frontloading are easy to find)</i>		crisis was widely viewed as a reliable source of predictable funding.
39	Operations deployed more rapidly due to 'predictability' of CERF as a quick funding source.	<i>0 = NA (i.e. CERF is not a predictable source of funding)</i> <i>1 = Limited (i.e. operations are not deployed more rapidly due to predictability of funding)</i> <i>2 = Mostly (i.e. operations are sometimes deployed more rapidly due to predictability of funding, however problems remain in terms of ensuring rapidness)</i> <i>3 = Significantly (i.e. operations are unquestionably deployed more rapidly due to predictability of funding, UN agencies feel confident enough to advance funds anticipating CERF grants and examples of frontloading are easy to find)</i>	2	Internal funding from other sources (UNHCR, WFP, UNICEF, UNFPA) supported initial operations. Other agencies (FAO, IOM, WHO UN Women) only started activities once CERF funding was approved.
<b>Outcome III: Quality Response</b>				
#	Indicator	Scoring Scale	Rating	Justification
40	Extent of coverage of beneficiary targets in relation to the initial proposal (e.g. number, type).	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Meets or exceeds beneficiary targets in comparison with proposal</i>	3	Beneficiary coverage was approximately doubled based on the planning figures in early 2014.
41	Agencies' CERF-related outcomes are reported to CERF and the RC/HC on the basis of their M/R & E and quality assurance systems	<i>0 = Not at all</i> <i>1 = Partly</i> <i>2 = Mostly</i> <i>3 = Systematically reported based on M&amp;E and quality assurance systems</i>	2	Detailed reporting of activities and outputs. Limited reporting of outcomes.

42	For the CERF, evaluative processes enable continuous improvement and ensure a quality response. Evaluations are undertaken regularly and there is a management response to recommendations.			
43	Evaluations undertaken demonstrate CERF's contribution to a more coherent and effective quality response.			



## Annex 4 – CERF Grants for S. Sudan, Uganda, Kenya, Ethiopia and Sudan<sup>39</sup>

### South Sudan

YEAR	RR Funding	UFE Funding	Total
2011	\$11,309,590	\$11,457,364	\$22,766,954
2012	\$20,027,456	\$20,016,635	\$40,044,091
2013	\$11,586,879		\$11,586,879
2014	\$53,671,182		\$53,671,182
<b>Total</b>	<b>\$96,595,107</b>	<b>\$31,473,999</b>	<b>\$128,069,106</b>

### 2014 Rapid Response Grants

Month	Emergency Description	Recipient Agencies	Amount
Jan	Deteriorating humanitarian situation following outbreak of hostilities between government and opposition forces; 628,000 affected, including 400,000 internally displaced people.  Prioritization: The HC prioritized the CERF submission in parallel with the reprogramming of the first standard allocation from the CHF. CHF funds had been allocated to specific sectors and agencies in late 2013. This funding was “reprogrammed” within the same sectors but could not be reallocated to new agencies or sectors. Therefore, CERF funds filled these gaps: the establishment of the CCCM cluster (UNHCR and IOM) and the increase in UNHAS and UNDSS.	UNHCR, IOM, UNDP, WFP	\$15,314,820
Mar	Worsening humanitarian situation; CERF allocation to position supplies prior to the onset of the rainy season. Funds used to bolster capacity and assistance in PoC sites as well as deliver health and nutrition supplies to regional warehouses for distribution during rainy season	UNICEF, UNFPA, IOM, WFP, WHO	\$14,933,150
Jun	Cholera outbreak following conflict and mass displacement	UNICEF, WHO	\$3,498,910
Nov	With the end of the rainy season, conflict and population movement increased. ERC allocated additional funding for the emergency. HC prioritized urgent improvements at the Bentiu PoC site and immediate surroundings following massive flooding during the rainy season. HC also included additional funding for UNHAS and UNDSS, as well as an allocation of \$2 million for protection cluster  Objectives included: Improve infrastructure and expand assistance for displaced people in Bentiu facing life-threatening conditions; to scale up prevention and response for those most at risk of gender based and other forms of violence; and to provide security and safety services to aid agencies, vital to the continuing scale-up of the collective humanitarian response.	UNICEF, UNFPA, UNHCR, IOM, UNDP, WFP, WHO	\$19,924,302

<sup>39</sup> CERF secretariat (2015)

## Uganda

YEAR	RR Funding	UFE Funding	Total
2007	\$13,001,015		\$13,001,015
2008	\$5,681,929		\$ 5,681,929
2009	\$1,191,321		\$ 1,191,321
2010			
2011			
2012	\$6,887,544		\$6,887,544
2013	\$4,974,413	\$3,999,807	\$8,974,220
2014	\$11,919,440	\$4,019,310	\$15,938,750
<b>Total</b>	<b>\$43,655,662</b>	<b>\$8,019,117</b>	<b>\$51,674,779</b>

### 2014 Rapid Response Grants

Month	Emergency Description	Recipient Agencies	Amount
Feb	Refugees from South Sudan, CERF allocation to assist 60,000 people in Adjumani, Arua, and Kiryandongo districts	UNIEF, FAO, UNFPA, UNHCR, IOM, WFP, WHO	\$6,911,547
Nov/Dec	With the end of the rainy season in South Sudan, violence and population movement increased. Additional refugee influx to Uganda surpassed original planning figures. Refugees from South Sudan, CERF allocation to assist 175,000 people in Adjumani, Arua, and Kiryandongo districts. (Part of regional allocation announced in October)	UNICEF, FAO, UNFPA, UNHCR, IOM, WFP, WHO, UN Women	\$5,007,893

### 2014 Underfunded Emergency Grants

Round	Emergency Description	Recipient Agencies	Amount
I	<b>Not related to South Sudan crisis.</b> Assistance to 41,780 Congolese refugees in Kisoro, Bundibugyo, Koboko, Hoima, and Kamwenge districts; and support to 1.6 million people in the Karamoja region with food security and nutrition assistance.	UNICEF, FAO, UNFPA, UNHCR, IOM, WFP, WHO	\$4,019,310

## Ethiopia

YEAR	RR Funding	UFE Funding	Total
2006	\$8,972,986	\$1,000,000	\$9,972,986
2007	\$3,367,543	\$8,998,116	\$12,365,659
2008	\$21,876,887	\$9,651,153	\$31,528,040
2009		\$15,645,398	\$15,645,398
2010		\$16,690,193	\$16,690,193
2011	\$24,499,990	\$21,975,663	\$46,475,653
2012	\$4,072,334	\$9,912,447	\$13,984,781
2013	\$6,972,905	\$17,000,030	\$23,972,935
2014	\$20,982,700	\$11,593,620	\$32,576,320
<b>Total</b>	<b>\$90,745,345</b>	<b>\$112,466,620</b>	<b>\$203,211,965</b>

### 2014 Rapid Response Grants

Month	Emergency Description	Recipient Agencies	Amount
Feb	Assistance to South Sudanese refugees	UNICEF, UNHCR, IOM, WFP	\$5,982,930
Nov	With the end of the rainy season in South Sudan, violence and population movement increased. Additional refugee influx to Ethiopia surpassed original planning figures. Assistance to South Sudanese refugees. (Part of regional allocation announced in October)	UNICEF, UNHCR, IOM, WFP	\$14,999,770

### 2014 Underfunded Emergency Grants

Round	Emergency Description	Recipient Agencies	Amount
II	<b>Not related to South Sudan crisis.</b> Assistance to two million people in Afar, Amhara, Beneshangul-Gumuz, Gambella, Oromia, SNNP, Somali and Tigray regions. Response to the drought situation, for neglected displacements and critical common services.	UNICEF, FAO, UNFPA, UNHCR, IOM, UNDP, WFP, WHO	\$11,593,620

## Kenya

YEAR	RR Funding	UFE Funding	Total
2006	\$26,186,918	\$1,000,000	\$27,186,918
2007	\$1,944,057	\$3,002,501	\$4,946,558
2008	\$19,563,931	\$6,406,348	\$25,970,279
2009	\$18,298,355	\$8,038,330	\$26,336,685
2010	\$10,048,510	\$9,981,466	\$20,029,976
2011	\$16,689,624	\$5,993,848	\$22,683,472
2012	\$2,000,830		\$2,000,830
2013	\$3,039,186		\$3,039,186
2014	\$13,635,078	\$10,005,413	\$23,640,491
<b>Total</b>	<b>\$111,406,489</b>	<b>\$44,427,906</b>	<b>\$155,834,396</b>

### 2014 Rapid Response Grants

Month	Emergency Description	Recipient Agencies	Amount
Feb	Assistance to South Sudanese refugees	UNICEF, UNHCR, IOM, WFP, WHO	\$4,628,600
Nov	With the end of the rainy season in South Sudan, violence and population movement increased. Additional refugee influx to Kenya surpassed original planning figures. Assistance to South Sudanese refugees. (Part of regional allocation announced in October)	UNICEF, UNFPA, UNHCR, IOM, WFP, WHO	\$9,006,478

### 2014 Underfunded Emergency Grants

Round	Emergency Description	Recipient Agencies	Amount
I	<b>Not related to South Sudan crisis.</b> Assistance to 1.5 million people in Wajir, Mandera, Lamu, Marsabit, Turkana, Baringo, Tana River, Samburu, Garissa, West Pokot, and Isiolo. Response to food insecurity, malnutrition levels, and WASH related diseases.	UNICEF, IOM, WFP, WHO	\$10,005,413

## Sudan

YEAR	RR Funding	UFE Funding	Total
2006	\$35,519,099		\$35,519,099
2007	\$19,475,033	\$6,000,000	\$25,475,033
2008	\$16,025,254		\$16,025,254
2009	\$25,820,034		\$25,820,034
2010	\$23,856,917		\$23,856,917
2011	\$18,321,205		\$18,321,205
2012	\$6,163,967	\$13,994,482	\$20,158,449
2013	\$30,525,358	\$16,922,090	\$47,447,448
2014	\$23,232,114	\$19,986,820	\$43,218,934
<b>Total</b>	<b>\$198,938,981</b>	<b>\$56,903,392</b>	<b>\$255,842,373</b>

### 2014 Rapid Response Grants

Month	Emergency Description	Recipient Agencies	Amount
Apr	Assistance to South Sudanese refugees	UNICEF, UNFPA, UNHCR, WFP, WHO	\$6,513,561
Oct	<b>Not related to South Sudan crisis.</b> Increased displacement in Darfur.	UNICEF, FAO, UNFPA, WFP, WHO	\$7,884,802
Nov	With the end of the rainy season in South Sudan, violence and population movement increased. Additional refugee influx to Sudan surpassed original planning figures. Assistance to South Sudanese refugees. (Part of regional allocation announced in October).	UNICEF, FAO, UNFPA, WFP, WHO	\$7,884,802

### 2014 Underfunded Emergency Grants

Round	Emergency Description	Recipient Agencies	Amount
I	<b>Not related to South Sudan crisis</b> though a small component of protection includes response to “acute lifesaving protection issues” of South Sudanese refugees (among other groups). Assistance to 3.8 million people in high priority areas of Darfur, South Kordofan, Blue Nile and eastern states. Response to life-saving needs and nutrition crisis.	UNICEF, FAO, UNFPA, UNHCR, IOM, UNOPS, WFP, WHO	\$19,986,820

## Annex 5 – Key Reference Documents

CERF secretariat (2015) Background Note for CERF PAF Regional Review: 26 May 2015 (unpublished draft).

CERF secretariat (2014) After Action Reviews: CERF Guidance

<https://docs.unocha.org/sites/dms/CERF/CERF%20After%20Action%20Guidance.pdf>

CERF (2015) CERF Annual Report for 2014

[https://docs.unocha.org/sites/dms/CERF/CERF-Annual\\_Report\\_2014-Final-6.15.15-WEB.pdf](https://docs.unocha.org/sites/dms/CERF/CERF-Annual_Report_2014-Final-6.15.15-WEB.pdf)

Channel Research (2011) 5-Year Evaluation of the Central Emergency Response Fund

<http://www.unocha.org/cerf/reportsevaluations/evaluations/general-assembly-mandated-evaluations/five-year-evaluation>

Clark, N. *et al.* (2015) Inter-Agency Humanitarian Evaluation (IAHE) of the Humanitarian Response to Conflict in South Sudan (unpublished draft report)

FAO (2010) Evaluation of FAO Interventions Funded by CERF.

<http://www.unocha.org/cerf/reportsevaluations/evaluations/external-reviews/evaluation-fap-interventions-funded-cerf>

Featherstone, A. (2014) A review of UNHCR's utilisation of the Central Emergency Response Fund. <http://www.alnap.org/resource/12430>

Ferris, Elizabeth (2011) The Politics of Protection: The Limits of Humanitarian Action.

Hidalgo, Silvia (2013) Review of the Central Emergency Response Fund (CERF) Performance and Accountability Framework

<http://www.unocha.org/cerf/reportsevaluations/evaluations/country-reviews>

IASC (2014) Operational Peer Review: Response to the Crisis in South Sudan. Internal Report.

Lilly, Damien (2014) Protection of Civilians sites: a new type of displacement settlement? Issue 62 September 2014 Humanitarian Exchange Magazine.

<http://www.odihpn.org/humanitarian-exchange-magazine/issue-62/protection-of-civilians-sites-a-new-type-of-displacement-settlement>

Mowjee, T. and Poole, L. (2014) Study of CERF and Humanitarian Donor Decision-Making. <http://www.unocha.org/cerf/partner-resources/evaluations-and-studies/external-reviews/study-cerf-and-humanitarian-donor-decisio>

Mowjee, T. (2014) Independent Review of the Value Added of the Central Emergency Response Fund (CERF) in Sudan.

<https://docs.unocha.org/sites/dms/CERF/Sudan%202014%20CERF%20Review%20Final%20Report.pdf>

OCHA (2011) CERF Rapid Response Window: Procedures and Criteria

<http://www.unocha.org/cerf/resources/how-apply/rapid-response-0>

OCHA (2015) CERF 2014 Annual Report

[https://docs.unocha.org/sites/dms/CERF/CERF-Annual\\_Report\\_2014-Final-6.15.15-WEB.pdf](https://docs.unocha.org/sites/dms/CERF/CERF-Annual_Report_2014-Final-6.15.15-WEB.pdf)

Office of the Inspector General (2013) IOM Evaluation of CERF-Funded Interventions (2006-2012) <http://www.unocha.org/cerf/reportsevaluations/evaluations-and-studies/external-reviews/iom-evaluation-cerf-funded-interventions>

Taylor, G. (2012) Independent Review of the Value Added of the Central Emergency Response Fund (CERF) in Kenya.  
<https://docs.unocha.org/sites/dms/CERF/Kenya%20CERF%20PAF%20Review%20-%20Final%20Report%2018%20Oct.pdf>

UNHCR (2014a) UNHCR Refugee Coordination Model: Adaptation of UNHCR's refugee coordination in the context of the Transformative Agenda  
<http://www.unhcr.org/53679e2c9.html>

UNHCR (2014b) South Sudan Refugee Emergency Revised Response Response Plan: January-December 2014.

UNICEF (2015) UNICEF CSO Procedure – Overview of Key Revisions  
[http://www.unicef.org/about/partnerships/index\\_81428.html](http://www.unicef.org/about/partnerships/index_81428.html)

WFP (2015) Summary Evaluation Report of WFP's use of Pooled Funds for Humanitarian Preparedness and Response (2009–2013)  
<http://documents.wfp.org/stellent/groups/public/documents/eb/wfpdoc063674.pdf>

Willitts-King, B. (2012) Independent Review of the Value Added of CERF in Ethiopia 2011.  
<https://docs.unocha.org/sites/dms/CERF/20120917%20CERF%20Ethiopia%20final%20report.pdf>

In addition to the above, a collection of documents specific to the five countries under review were consulted, including Humanitarian Response Plans, RC/HC reports on the utilization of CERF funds, AARs (South Sudan and Uganda), cluster action plans, HCT and cluster meeting minutes and agency/cluster-specific reports.



## Annex 6 – List of Interviewees

### UN and IOM Staff

Name	Org. and function	♂	♀	Date	Location
Tim Mander	Humanitarian Response Fund Manager, UNOCHA	1		15-Jun-15	Addis Ababa (Skype)
Senait Arefaine	Humanitarian Affairs Officer UNOCHA Ethiopia		1	15-Jun-15	Addis Ababa (Skype)
Getahun Amogne	Donor Relations Officer, WFP Ethiopia	1		24-Jun-15	Addis Ababa (Skype)
Delphine Dechaux	Head of Refugee Section, WFP Ethiopia		1	24-Jun-15	Addis Ababa (Skype)
Gabriel Okutoi	Senior Operations Officer, IOM Ethiopia	1		25-Jun-15	Addis Ababa (Skype)
Mona M. Ahmed	Humanitarian Reports Specialist UNICEF Ethiopia		1	25-Jun-15	Addis Ababa (Skype)
Nadia Aslanyan	Emergency Specialist, UNICEF Ethiopia		1	25-Jun-15	Addis Ababa (Skype)
Paul Turnbull	Acting Country Director, WFP Kenya	1		16-Jul-15	Nairobi
	FGD CERF Focal Points for Recipient Agencies in Kenya	2	3	16-Jul-15	Nairobi
Jerotich Seii Houlding	CERF Focal Point in the Resident Coordinator's Office		1	16-Jul-15	Nairobi
Patrick Lavand'homme	Head of Emergency Programmes, UNICEF Kenya	1		16-Jul-15	Nairobi
Rose Njagi	CERF technical focal point, UNICEF Kenya		1	16-Jul-15	Nairobi
Sam Chakwera	Assistant Representative for Programme, UNHCR Kenya	1		16-Jul-15	Nairobi
Ivana Unluova	Sr. Programm Officer, UNHCR Kenya		1	16-Jul-15	Nairobi
David Throp	Head of Humanitarian Financing Unit, UNOCHA South Sudan	1		Mon 06 Jul	Juba
Delphine Vakuta	Assoc HAO, UNOCHA South Sudan		1	Mon 06 Jul	Juba
Samson Mwangi	Chief, UNHAS South Sudan	1		Mon 06 Jul	Juba
Chris du Toit	Chief, UNDSS South Sudan	1		Mon 06 Jul	Juba
Royson Wright	Deputy Chief, UNDSS South Sudan	1		Mon 06 Jul	Juba
Onic Evans	Administrative Assistant, UNDSS South Sudan	1		Mon 06 Jul	Juba
Estaban Sacco	Deputy Head of Office, OCHA, South Sudan	1		Tue 07 Jul	Juba
Dr. Tarande Manzila	Representative, WHO South Sudan	1		Wed 08 Jul	Juba
Dr. Mpairwe M. Allan	Emergency Coordinator, WHO South Sudan	1		Wed 08 Jul	Juba
Olivier Nkidiaka	HAO, OCHA South Sudan	1		Wed 08 Jul	Juba
Mustapha Koroma	M&R Specialist for the CCCM Cluster	1		Fri 10 Jul	Juba
Ettie Higgins	Deputy Representative, UNICEF South Sudan		1	Fri 10 Jul	Juba
Cecilia Nderi	Budget Officer, UNICEF South Sudan		1	Fri 10 Jul	Juba
Nozomi Hashimoto	Donor Relations Officer, WFP South Sudan		1	Fri 10 Jul	Juba
Shaun Hughes	Head of Programme, WFP South Sudan	1		Fri 10 Jul	Juba
Vincent Leilei	former Head of Office, OCHA South Sudan	1		Tue 16 Jun	Geneva
Marina Askalova	former Senior Program Officer, UNHCR South Sudan		1	Thu 18 Jun	Geneva

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Harriet Inayni Aseru	Monitoring & Reporting Assistant (Shelter), IOM South Sudan		1	Fri 10 Jul	Juba
Antonio Torres	WASH Project Manager, IOM South Sudan	1		Fri 10 Jul	Juba
Haley West	Health Project Manager, IOM South Sudan		1	Fri 10 Jul	Juba
Katey Snowball	Programme Support Officer (Bentiu), IOM South Sudan		1	Fri 10 Jul	Juba
Iain McLellan	Programme Support Officer (M&E), IOM South Sudan	1		Fri 10 Jul	Juba
Jean Luc Kagaio	Former Nutrition Cluster Coordinator, UNICEF Bentiu	1		Sat 11 Jul	Juba
John McCue	Operations Coordinator, IOM South Sudan	1		Mon 13 Jul	Juba
Anne Sophie Le Beau	former M&E Officer for OCHA South Sudan (2012-2015)		1	Mon 20 Jul	Bangui (Skype)
Toby Lanzer	Former Humanitarian Coordinator for South Sudan	1		Tue 04 Aug	Dakar (Tel)
Doa'a Abdel-Rahman	Humanitarian Financing and Resource Mobilization Section OCHA Sudan		1	Mon 15 Jun	Khartoum (Skype)
Yngvil Foss	former Head, Humanitarian Funding Section, OCHA Sudan		1	Fri 19 Jun	Bangkok (e-mail)
Juliette Stevenson	Reporting Officer, UNHCR Sudan		1	Tue 23 Jun	Khartoum (Skype)
Claudia Hargarten	Humanitarian Affairs Officer, OCHA Sudan		1	Wed 24 Jun	Khartoum (Skype)
Mohamed Adar	UNHCR Representative for Sudan and formerly for Uganda	1		Thu 30 Jul	Khartoum (Tel)
Kate Carey	Donor Relations & Policy Officer, WFP Sudan		1	Mon 03 Aug	Khartoum (Skype)
Inas Abbas	South Sudan focal point, UNFPA Sudan		1	Wed 12 Aug	Khartoum (Skype)
Dr. Abeer Salam	RH Coordinator, Humanitarian Unit, UNFPA Sudan		1	Wed 12 Aug	Khartoum (Skype)
Mastura Hamid	SGBV Coordinator, UNFPA Sudan		1	Wed 12 Aug	Khartoum (Skype)
Elisabet Frisk	Coordination Specialist, UN Uganda		1	26-May	Kampala (Skype)
Sakura, Atsumi	Deputy Representative, UNHCR Uganda	1	1	1-Jun	Kampala
Morshed Anwar	Snr. Field Co-ordinator	1		1-Jun	Kampala
Makonnen Tesfaye	Snr. Programme Officer, UNHCR Uganda		1	1-Jun	Kampala
Cindy Calago	RCO, UN Uganda		1	1-Jun	Kampala
Dr. Nalugwa Caroline	Program Associate, UNFPA Uganda		1	1-Jun	Kampala
Beatrice Okello	National Program Manager, FAO		1	2-Jun	Kampala
Joseph Oneka	Project Manager, FAO	1		2-Jun	Kampala
Amel Ferchichi	Coordination Officer UN Women Uganda		1	2-Jun	Kampala
Judi Emorut	Associate, UN Women Uganda		1	2-Jun	Kampala
Gerry Dyer	Emergency Coordinator, UNICEF Uganda	1		2-Jun	Kampala
Mariela Guajarda	Program Coordinator, IOM Uganda		1	2-Jun	Kampala
Boiketho Murima	Emergency Specialist, UNICEF Uganda	1		2-Jun	Kampala
Michael Lukwiyama	Emergency Specialist, WHO Uganda	1		2-Jun	Kampala
Geoffrey Ebong	Programme Officer, WFP Uganda	1		2-Jun	Kampala
Michelle Iseminger	Head of Office, RCO Uganda		1	3-Jun	Kampala
Ahunna Eziakonwa-Onochie	UN Resident Coordinator for Uganda		1	3-Jun	Kampala
Neimah Warsame	Representative, UNHCR Uganda		1	4-Jun	Kampala

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Katende Gabriel	Asst. Program Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda
Salaton Leteipen	Protection Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda
Disanullah Khan	Protection Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda
James Onyango	Associate Field Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda
Ray Chikwanda	Associate Field Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda
Michael Ojaru	WASH Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda
Freda Apio	Field Monitoring Assistant, UNHCR		1	2-Jun	Kiryandongo, Uganda
Doreen Komuhangi	GBV & Humanitarian Coordinator, UNFPA		1	2-Jun	Kiryandongo, Uganda
Sammy Poro	Program Officer, UNICEF	1		2-Jun	Kiryandongo, Uganda
Ocan Godfrey	Program Officer, FAO	1		2-Jun	Kiryandongo, Uganda
Katende Gabriel	Asst. Program Officer, UNHCR	1		2-Jun	Kiryandongo, Uganda

## NGOs

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Karoline Rosholm	Regional Programme Adviser, NRC		1	17-Jul-15	Nairobi
Sophie Nguigi	Women's Protection and Empowerment Coordinator, IRC		1	17-Jul-15	Nairobi
Thomas Chege	Program Officer, LWF Kenya	1		17-Jul-15	Nairobi
Omondi Charles	Learning & Information Officer, Helpage Kenya constructing shelters for elderly	1		17-Jul-15	Nairobi
Karoline Rosholm	Regional Programme Adviser, NRC		1	17-Jul-15	Nairobi
Aimee Ainsari	Country Director, CARE S. Sudan & HCT Member		1	Sun 05 Jul	Juba
Feargal O'Connell	Concern	1		Tue 07 Jul	Juba
Caelin Briggs	Humanitarian Policy & Protection Advisor and Protection Cluster Co-Coordinator		1	Tue 14 Jul	Juba
Tiffany Easthom	Country Director, NonViolent Peaceforce		1	Mon 13 Jul	Juba
Patrick Philips	former Grants Manager, DRC South Sudan	1		Tue 07 Jul	Juba (phone)
Gerry Garvey	Head of Unit, Danish Refugee Council HQ, Copenhagen, Denmark	1		Tue 07 Jul	Juba
Alex Kiwesi	Head of Program, Hold the Child South Sudan	1		Tue 07 Jul	Juba
Joseph Gama	Healthlink South Sudan	1		Mon 13 Jul	Juba
Paul Howe	Country Director, ADRA South Sudan (NGO member of the HCT)	1		Mon 03 Aug	Paul Howe
NGO Partner Focus Group Discussion	Inter Aid Uganda (IAU), Windle Trust Uganda (WTU), Real Medicine Foundation (RMF), Danish Refugee Council (DRC), International Rescue Committee (IRC), African Development Corps (ADC), War	8	9	2-Jun	Kiryandongo, Uganda

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
	Child Canada, Uganda Red Cross, Save the Children International (SCI), Transcultural Psychosocial Organization (TPO), Action Contre La Faim (ACF), Concern World Wide				

### Donor Representatives

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Juliette Prodhan	Head of Humanitarian Team, DFID Ethiopia		1	26-Aug-15	Juliette Prodhan
Emily Dakin	DART Team Leader, OFDA/USAID South Sudan		1	Tue 07 Jul	Juba
Simon Mansfield	Technical Assistant, ECHO South Sudan	1		Sat 11 Jul	Juba
Olivia Kalis	Humanitarian Adviser, DFID South Sudan		1	Mon 13 Jul	Juba
Annie Stephanie Gacukuzi	Refugee Program Assistant, PRM, US Dept of State		1	7-Jul	Kampala

### Host Government Officials

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Mr David Kazungu	Commissioner for Refugees Office of the Prime Minister	1		5-Jun	Kampala
Douglas Asinwe	Focal Point for Protection, OPM	1		5-Jun	Kampala
Charles Babfki	Focal Point for Integration, OPM	1		5-Jun	Kampala
Owiny Chis	Agricultural Production Officer, Kiryandongo Local District Govt.	1		2-Jun	Kiryandongo District
Nicuba B. Esther	HI Educator, HFP, KDLG		1	2-Jun	Kiryandongo District
Candid Joseph	Water Officer, KDLG	1		2-Jun	Kiryandongo District
Byrokkyia Issa H.	Principal Agricultural Officer, KDLG	1		2-Jun	Kiryandongo District
Kurya Edward	District Education Officer	1		2-Jun	Kiryandongo District
Abenaiue Robeert	D/CAO, KDLG	1		2-Jun	Kiryandongo District
Dr. Matiyabe Imaam	DHO, KDLG	1		2-Jun	Kiryandongo District
Datanaja Geofrey	Ag DCAO, KLDG	1		2-Jun	Kiryandongo District
Robert Bajnamwesiga	SP Commandant, OPM	1		2-Jun	Kiryandongo District

### Focus Group Discussions: Community Members

<i>Role and Function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Community members	9	8	02 Jun	Kiryadongo, Uganda

## Global Level

<i>Name</i>	<i>Org. and function</i>	♂	♀	<i>Date</i>	<i>Location</i>
Shelly Cheatham	Program Officer, CERF secretariat		1	26 May	NY (Skype)
Nicolas Rost	Program Officer, CERF secretariat	1		26 May	NY (Skype)
Oscar Mundia	Operations Manager, East & Horn of Africa, Chad and Sudan Bureau of Africa, UNHCR HQ	1		17 Jun	Geneva
Soo-Jin Rhee	Senior Desk Officer, Bureau for Africa		1	17 Jun	Geneva
Anna Buskens	Associate Donor Relations Officer, DRRMS, UNHCR HQ		1	17 Jun	Geneva
Axel Bisschop	Chief of Section, Humanitarian Financing & Field Support Section, DRRMS, UNHCR HQ	1		17 Jun	Geneva
Guido Ambroso	Sr. Evaluation Officer, UNHCR	1		16 Jun	Geneva
Marina Askalova	former Senior Program Officer, UNHCR South Sudan		1	18 Jun	Geneva
Edem Wosornu	Chief, Asia and the Pacific Section, OCHA		1	21 Oct	NY (Tel)

## **Annex 7: Terms of Reference**

# **INDEPENDENT REVIEW OF THE VALUE ADDED OF THE CENTRAL EMERGENCY RESPONSE FUND (CERF) IN THE COUNTRIES AFFECTED BY THE SOUTH SUDAN CRISIS**

## **Terms of Reference**

---

### **1. Background to the CERF and Performance and Accountability Framework**

It is widely recognized that the key strengths of CERF lie in its ability to respond quickly and in the relatively high degree of flexibility it affords users compared with other sources of humanitarian funding. Member States and private donors require appropriate assurances that the considerable funds involved are managed appropriately and meaningful results are being achieved. The ERC function is charged with a formal fiduciary responsibility over the proper use of CERF funds, and relies upon the CERF secretariat to assist with the proper discharge of these responsibilities. In this context, the development of a Performance and Accountability Framework (PAF) for CERF is regarded as an effective tool.

Paragraph 19 of General Assembly Resolution 60/124 calls for “the establishment of an appropriate reporting and accountability mechanism to ensure that the funds allocated through the Fund are used in the most efficient, effective and transparent manner possible.” Consequently, the CERF Advisory Group at its meeting on 12 October 2006 called for the development of a Performance and Accountability Framework. In addition, the 2008 CERF Two-Year Evaluation gave as Key Recommendation 4: “The multiple lines of accountability for CERF need to be clarified, in consultation with the UN Controller and the operational agencies, to specify the roles of each actor.” In response, the CERF secretariat worked on developing a PAF, a first draft was circulated in 2009 and the PAF adopted in 2010.

The CERF PAF proposes, among other things, the introduction of independent reviews to be conducted annually within a sample of three to five countries as determined by the ERC. The CERF Advisory Group supported the inclusion of such an independent country-level mechanism. Following a pilot review conducted in Kenya in early 2010, the CERF Advisory

Group met on 1 July 2010 and endorsed the PAF. Since then, the CERF secretariat has aimed to conduct between three and five country-level reviews per year.<sup>40</sup>

## 2. Scope and Purpose

The main purpose of the present country-level reviews will be to assess the value added by CERF funding towards the humanitarian response to the crisis in South Sudan and its neighboring countries since the intensification of the conflict in December 2013. The review includes CERF allocations to South Sudan during 2014, as well as CERF allocations to neighboring countries (Ethiopia, Kenya, Sudan, and Uganda) in 2014 and 2015 that are directly related to the regional impact of the South Sudan crisis, i.e., mainly to provide humanitarian assistance to South Sudanese refugees in these countries. The relevant CERF allocations are listed in a separate background note.

A major aim of the review will be to provide the ERC with an appropriate level of assurance around the achievement of key performance benchmarks and planned results for the CERF mechanism. The review will also include recommendations aimed at improving operational aspects of the CERF and may also identify relevant policy issues which need to be addressed at a global level.

## 3. Key issues

The critical overriding question on which assurance is sought by the ERC is: **Have CERF operations in the country successfully added value to the broader humanitarian endeavor?**

Using a revised list of PAF indicators, assurances will be sought around the following specific broad areas of concern to the ERC:

*1. CERF processes are achieving key management benchmarks in that:*

- CERF submissions are based on an inclusive planning process and adhere to established quality criteria.

---

<sup>40</sup> A full list of reviews conducted to date and final reports are available online at <http://unocha.org/cerf/reportsevaluations/evaluations/country-reviews/performance-and-accountability-framework>



- Transparent systems are in place for correct allocation, efficient flow and use of CERF by agencies.
- Adequate monitoring and evaluation systems are in place at the agency level for measuring and reporting on results.

*2. There are reasonable grounds to believe that CERF operations favour the following results:*

- CERF consolidates humanitarian reform by empowering the RC/HC and enhancing the quality of coordination within the cluster approach and across clusters.
- CERF facilitates adequate coverage, eliminates gaps and facilitates an effective division of labor among humanitarian actors.
- CERF contributes to a more timely response to needs.
- CERF favors the delivery of relevant life-saving actions at critical moments.

Further key issues specific to this review are defined in a separate background note.

#### **4. Review Methodology**

During the PAF development process, UN agencies emphasized that the formal assessment of agency performance vis-à-vis CERF-funded activities remains the prerogative of recipient agencies via their own internal oversight procedures (internal performance reporting, audit and evaluation etc.). The review approach will therefore be designed in a manner which avoids duplication with such procedures and meets only the immediate assurance needs of the ERC in relation to the PAF.

Recognizing that CERF funds are often co-mingled with other donor funds by agencies and that the in-depth assessment of beneficiary-level impact is formally the charge of recipient agencies, the review will not attempt to link beneficiary-level changes to CERF activity, except where recipient agencies already have this data. The review mechanism will not seek to provide comprehensive coverage linked to detailed narratives and contextual analysis around how and why results are being achieved. Rather it will focus instead on providing an assurance around issues of the Fund's operational impact.

The review will consist of a desk review of relevant documents and visits to South Sudan and Uganda, and a short visit to Nairobi. These visits include travel to CERF-funded humanitarian projects and interviews with relevant stakeholders. The analytical approach will be deliberately kept rapid and light.

Prior to leaving each country, the Consultant will leave with the RC/HC a short analytical summary of initial observations and recommendations in relation to the key assurance issues identified above. The RC/HC, together with the HCT, will subsequently be requested to provide a “management response” to the recommendations in the report once it has been finalized.

Desk review: A quantitative analysis will be conducted on the data, reports and files available at the HQ and country level. The desk review includes:

- Funding data, including funding from sources other than the CERF (e.g. OCHA’s Financial Tracking Service)
- Timelines on sums requested, allocated from CERF database
- CERF country-level reports on context, needs, status of implementation, activities, results and lessons learned
- CERF meeting minutes at HQ and country-level and notifications of application decisions
- CERF Project files at HQ and country-level
- Humanitarian appeals and other humanitarian strategy documents

Semi-structured interviews at country level will include: RC/HC, Cluster leads, Heads of Agencies, I/NGO partner implementing CERF projects and those without access to CERF funds, host government, donors. Interviews will also take place with selected CERF secretariat staff to get further background and perspective. UN Agencies and IOM will be asked to provide relevant documents and indicate interview partners to facilitate the review.

Select project site visits: The consultant will visit sites of CERF-funded projects in Uganda and South Sudan (security permitting) to help provide some limited anecdotal information regarding the use of funding at the affected population level and can provide a field-level snapshot and some direct contact with affected people and other key informants in field locations.

In-Country working session at the end of the mission will review provisional results based on indicators in the CERF Performance and Accountability Framework. This will be used as learning opportunities to discuss, validate and fill key gaps in the findings and recommendations.

## **5. Proposed Consultants**

It is anticipated that one consultant will be required to prepare the reviews for the review. The consultant will be independent. He/she should have the following skills:

- Expertise in UN humanitarian reform & financing and knowledge of the Humanitarian Programme Cycle
- Expertise and extensive experience in humanitarian evaluation
- Expertise in analyzing financial data in tandem with other types of information
- Expertise in project management and implementation
- Knowledge, including field experience with a broad range of humanitarian actors, such as UN agencies, Red Cross/Red Crescent Movement, local government disaster response structures and systems, and NGOs
- Fluency in written and spoken English
- Familiarity with man-made disaster settings

## **6. Management and Support**

The review will be managed by the CERF secretariat, which will identify country-level focal points to support the review mission. Their responsibilities will include:

- Provide necessary administrative, coordination and logistical support to the consultants
- Facilitate the consultants' access to specific information, key informants and expertise necessary to perform the assessment
- Monitor and assess the quality of the review and its process
- Ensure sufficient engagement by the HCT during the mission and in response to the draft and final report
- When appropriate, recommend approval of final report
- Disseminate final report
- Facilitate management response to the final report and subsequent follow up

## **7. Deliverables**

(1) After the research phase and country visits, the consultant will prepare the draft report, soliciting comments from all stakeholders.

(2) The final output will be one concise regional synthesis report in English to the ERC, through the CERF secretariat, of no more than 50 pages (excluding appendices) in an electronic version, plus an Executive Summary (up to three pages). The report will be structured in the form of short observations and conclusions around the different assurance concerns linked to the PAF. The reports will include, as appropriate, a set of specific, well targeted and action-oriented recommendations whose purpose should be to improve the performance of the CERF within the country or raising any policy issues. The annexes will include country reports for South Sudan and Uganda, a brief description of the methods used and the analysis performed, PAF ratings and a list of persons interviewed.