

2018 TCA

Country	Programmatic Area (2018, see	Activity	Partner	Milestones		Expected Outcome	TOTAL
				Pre-Joint Appraisal	30-Nov		
Ethiopia	Data	Birth registration provides the data on live births, the denominator, for estimating immunization coverage rates. Train community health workers and civil status officers in selected kebeles/Wereda Supportive supervision and follow up	World Bank	Health extension workers, civil status officers, women development army trained on using immunization processes for birth registration by June 2018	Health extension workers, civil status officers, women development army trained on using immunization processes for birth registration by December 2018	Improved birth registration rates contributing to improved data for estimating immunization rates.	150000
Ethiopia	Data	Re-establish CRS surveillance in Ethiopia. CRS Surveillance is important to identify disease burden, to monitor the impact of vaccine introduction, and to monitor progress towards rubella elimination. Previous effort to establish CRS surveillance in Ethiopia was unable to identify cases. In order to collect data on the number of cases, CRS surveillance is planned to be reestablished in 2-3 surveillance sites in Ethiopia.	CDC	Review previous surveillance and update protocol	Surveillance producing data	Functional CRS surveillance established with cases reported in preparation for introduction	59950
Ethiopia	Supply Chain	Technical support for the following: 1. Implementation and Roll out of CCEOP - Procurement services package including arrival, clearance, end user delivery & installation, on site trainings certifications; national level coordination and monitoring; 2. Participation to TWG on development of CCEI tools/training/monitoring data collection at selected areas; 3. Support in tracking vaccine shipments and stock levels, analyze against the forecast - utilized - advice and support implement of corrective actions. 4. Deploy consultant to support for EVMA and development of EVM IP 2018-2021. 5. Conduct one month training for about 30 PFSA cold chain and vaccine managers provide cold chain maintenance and vaccine management for 200 Woreda cold chain EPI focal staffs (SNNPR and Amhara regions)	UNICEF UNICEF		1. Ensure availability of cold chain equipment through the technical support by the implementation of CCEOP 2. Technical support and regular follow up on the uses of CCEI data bases to improve quality data system on the availability and functionality of CCE. 3. Technical support and regular follow up to develop RI and SIAs supply plan. Ensure supply plan, PO's are integrated in to the HCMIS to improve data quality and the overall supply chain management at all levels. 4. Implementation and roll out in Ethiopia 2018	1. Improved availability of reliable cold chain equipment in 30% of the health facilities. 2. Availability of updated CCE inventory in a quarterly basis3. Availability of analysed stock data in a quarterly basis to be used for the decision makers 4. Improvement on the EVM indicators and contributes to strengthened Immunization Supply and Cold Chain Logistics Management System in the areas of increasing CC space, vaccines stock management, forecasting, procurement and regular inventories.5. Improved vaccine and cold chain management practices	
Ethiopia	Program Implementation/ Coverage & Equity	Technical support on customization of RED/REC guide, WG member on PIRI implementation. TA at national level and in 10 focus zones and priority woredas on RED/REC and equity analysis, equity based planning and implementation/monitoring and documentation. (SNNP, Oromia, Amhara, AA, B.Gumuz and Gambella)	UNICEF	Finalized PIRI guide and PIRI priority implementation zones. Differentiated strategies in urban/dense settings, pastoralists, remote regions, regions with chronic, complex emergencies	Progress reports on the following are available: Equity Assessment, National RED/REC Guidelines, REC implementation at priority subnational levels including communication strategies.	1. Contributes to strengthened capacity of woreda and PHC staff to prepare evidence based and equity focused microplans that target/reach priority marginalized and unreached groups and addressing systems barriers 2. Documentation of changes/results in the form of case studies 3. Monitoring implementation of RED/REC approaches and bottleneck reduction	
Ethiopia	Data	Technical Support on HMIS (DQR) training in focus zones in SNNPR, Amhara, BG and Gambella regions with immunization focus: ; support promotion/advocacy on use, national scale up of newly designed HBR, JRF data reviews for improved JRF reporting; improving coordination with HF and woreda authorities to promote linkage of birth registration and immunization cohort registries in project woredas in coordination with WB.	UNICEF		Newly designed HBR print ready material with simple guide for HWs on utilization. Timely and improved JRF reports. Progress report of Birth registration interoperability with HF based HMIS immunization registry.	Contributes to Improved data quality in JRF reporting. Better recording and reporting system at health center and health posts level.	1044981
Ethiopia	Demand Promotion	Technical support on the development and implementation/roll out, monitoring of Communication Plan on HPV (regional ToT focusing on Amhara, SNNPR and B.Gumuz) Technical support on the development and implementation/roll out, monitoring of Communication Plan on MCV2 (focusing on two agrarian regions and B.Gumuz) - TA integrating strengthening community participation in the RI equity analysis, equity based planning and implementation and monitoring in 10 focus zones and priority woredas	UNICEF		- Community engagement and Risk Communication Plan on EPI including HPV and MCV2 roll out in all regions is finalized, endorsed by MOH and implementation is supported. - Equity focused EPI micro-plans integrating community representatives' input	Contributes to increase in uptake of HPV and MV2 introduction and more trust on routine immunization by the public and caregivers.	
Ethiopia	Vaccine-Specific Support	Technical support during planning, procurement services, trainings, monitoring for introduction for HPV and MCV2 .	UNICEF		Progress on HPV and MV2 roll out, other RI priorities including TCA are reviewed and reported to partners	Contributes to increase uptake of NVI	
Ethiopia	Vaccine-Specific Support	Support the capacity of three national MOH staff on vaccinology course	UNICEF			Leadership and technical skills improved	

Ethiopia	Vaccine-Specific Support	Support mid-year meetings on RI implementation and TCA progress	UNICEF			Better program management	
Ethiopia	Program Implementation/Coverage & Equity	Contextualize the revised AFRO RED guideline and PIRI documents in to national context; Print 6000 copies of the RED revised guideline; Identify zones with large number of unvaccinated children and prioritize/classify woredas for RED support and PIRI strategy based on agreed upon criteria: Zones will be selected from the big regions (Amhara, Oromia, SNNPR and Tigray) to bring impact in increasing coverage without duplication of efforts and resources with UNICEF and other partners Training on RED approach for 178 EPI officers from 72 woredas in 6 zones of the 4 regions. Train 288 Health Workers from the same woredas Conduct quarterly supportive supervision in the six zones to guide and monitor implementation of RED/C and PIRI; Support national level EPI specific supportive supervision; Conduct one day review meeting in the six zones after 4 months of implementation to analyse data, discuss problems and solutions, Document lessons learnt from RED and PIRI to understand what can be scaled up to other regions Deploy 2-4 technical assistants to support planning and monitoring of MCV2 and HPV introduction activities at sub-national levels; Support development and printing of MCV2 introduction materials (guidelines and data collection tools); Organize workshop with multiple stakeholders to ensure that HPV introduction is seen as a multi-pronged activity; Support micro-planning including verification of in school girls and registration of girls out of school in 72 woredas of the big regions; Conduct school and health facility readiness assessment using WHO tool in 72 woredas of the 4 regions; Support supervision and monitoring of implementation of new vaccine introduction in the 4 regions and selected zones; Support Post Introduction Evaluation for the newly introduced vaccines Support vaccinology course for 4 FMOH EPI officers Conduct national MLM ToT training for FMOH and RHB EPI officers and for 58 zonal EPI officers in the 4 regions. IIP training for 200 health workers in the 6	WHO	6000 copies printed 6 priority zones identified and microplans developed RED Training package finalised Supportive supervision plan endorsed Consultant recruited Consultants recruited Materials finalized and printed	Copies of revised RED guidelines distributed to all woredas Monthly reports from all priority zones and written feedback provided 288 health workers trained Quarterly supportive supervision reports submitted Problems identified and plans amended RED and PIRI lessons documented and shared with all regions and partners Prepared progress report on MCV2 and HPV introduction and shared with all regions and partners Materials distributed to all woredas Workshop organized Microplanning supported in 72 woredas Readiness assessment done in 72 woredas Supervision conducted in 4 regions and 10 zones Preparatory activities for PIE finalized 4 FMOH staffs trained 258 health workers trained	Rollout of RED implementation Reduction in numbers of unimmunized children Problems identified and corrected Problems identified and corrected Lessons applied to strengthen implementation of RED MCV2 and HPV vaccines introduced MCV2 and HPV vaccines introduced Stakeholders updated on HPV vaccine introduction; concerns/suggestions compiled to improve vaccine introductions Issues related to denominator identified and corrective measure taken Issues related to school and health facility readiness identified and corrective measure taken Problems identified and corrected Lessons documented and subsequent corrective measures taken Better knowledge and skill to manage the program	945497
Ethiopia	Leadership Management and Coordination (LMC)	Strengthen EPI coordination mechanisms and management nationally and in the four big regions; Support comprehensive EPI-VPD surveillance review and use the evidence to prepare plan of action to course action; Support E-NITAG activities including hiring consultant for evidence generation; Support quarterly EPI/Surveillance review at national level Support evidence generation on VPDs through technical support including: laboratory support (Measles, Rota, PBM); trend of incidence/burden of VPD through measles case based surveillance Document burden of CRS through sentinel sites including laboratory support (revitalizing of the two sentinel sites and expansion of 4 sites) Strengthen AEFI surveillance for RI and SIAs	WHO	Coordination efforts are documented and shared Comprehensive EPI-VPD surveillance conducted Consultant hired	Support at least two coordination meetings in each region NITAG activities documented and implementation status of recommendations monitored Quarterly meetings conducted Timely VPD surveillance data submitted and disseminated 4 new sites established and made functional 500 health workers trained	Efforts coordinated to support planning and implementation priorities of the regions Lessons documented and areas for improvement identified to plan corrective measures Available evidence used for NVI and/or program adjustment Lessons documented and areas for improvement identified to plan corrective measures Impact of vaccination monitored Documented burden of CRS in Ethiopia Rollout of routine AEFI surveillance	
Ethiopia	Data	Support data triangulation activities at national level and in the 4 big regions; Capacitate national and regional EPI and HMIS officers on advanced excel and GIS skills; Provide technical support on basic data management training for woreda and health facility teams; Support workshop to review national and sub national data quality; Support Routine Data Quality Assessment in Oromia, Tigray, AA, DD and Harari.	WHO		Data triangulation meetings held at least every quarter in the four big regions Training reports and action plans shared Training reports and action plans shared Data quality review workshop report shared DQS assessment report submitted	Problems identified and corrected Capacity of performance review team strengthened Capacity of performance review team strengthened National and sub-national immunization coverage estimates produced Data quality issues identified and measures taken	
Ethiopia	Supply Chain	Vaccine and cold chain management training to EPI Logistics officers in 100 woredas in Oromia and Tigray regions; Support implementation of EVM assessment including training and data collection;	WHO	EVMA Conducted; CCE inventory updated	300 health workers trained EVMA and CCI report submitted	Improved cold chain management Improved supply chain management	
Ethiopia	Advocacy	CSO platforms have improved governance and operations	CRS	CSO platforms have democratically-elected leadership		CSO platforms have improved functionality	180,759.72
Ethiopia	Advocacy	CSO platforms have improved governance and operations	CRS	CSO platforms have strategies and plans created by members		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have improved governance and operations	CRS	CSO platforms have increased member engagement		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have improved governance and operations	CRS	CSO platforms meet member expectations		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms and member organizations have improved monitoring, evaluation, accountability and learning (MEAL)	CRS	CSO platforms establish and implement MEAL systems		CSO platforms have improved functionality	

Ethiopia	Advocacy	CSO platforms and member organizations have improved monitoring, evaluation, accountability and learning (MEAL)	CRS	CSO platforms track and report their contributions to the GVAP		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms and member organizations have improved monitoring, evaluation, accountability and learning (MEAL)	CRS	CSO platform annual reports		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms and member organizations have improved monitoring, evaluation, accountability and learning (MEAL)	CRS	CSO platforms contribute to regional and global evidence base		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have increased access to Gavi HSS funding	CRS	CSO platforms jointly develop Gavi HSS proposals with EPI/MOH		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have increased capacity to secure diversified funding	CRS	CSO platforms implement resource mobilization plans		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have increased capacity to secure diversified funding	CRS	CSO platforms create and share marketing products		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have increased capacity to secure diversified funding	CRS	CSO platforms have close partnership with CSO Constituency SC		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have increased capacity to secure diversified funding	CRS	CSO platforms have a close partnership with Gavi representatives		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms have increased capacity to secure diversified funding	CRS	CSO platforms have a close working relationship with the Francophone CSO platform (OAFRESS)		CSO platforms have improved functionality	
Ethiopia	Advocacy	CSO platforms are recognized by MOH as key HSS partners	CRS	CSO platforms are knowledgeable about HSS		CSO platforms have improved capacity to contribute to national health sector planning and coordination	
Ethiopia	Advocacy	CSO platforms are recognized by MOH as key HSS partners	CRS	CSO work plans are in line with national priorities		CSO platforms have improved capacity to contribute to national health sector planning and coordination	
Ethiopia	Advocacy	CSO platforms have improved capacity to promote equity	CRS	CSO platform have beneficiary accountability mechanisms		CSO platforms have improved capacity to contribute to national health sector planning and coordination	
Ethiopia	Advocacy	CSO platforms have improved capacity to promote equity	CRS	CSO platforms provide rights-based input into health policies		CSO platforms have improved capacity to contribute to national health sector planning and coordination	
Ethiopia	Advocacy	CSO platforms have improved capacity to promote equity	CRS	CSO platforms are gender-sensitive		CSO platforms have improved capacity to contribute to national health sector planning and coordination	
Ethiopia	Advocacy	CSO platforms have improved capacity to promote equity	CRS	CSO platforms sensitize and mobilize vulnerable populations		CSO platforms have improved capacity to contribute to national health sector planning and coordination	
Ethiopia	Vaccine-specific support	Activity 2.1. Support the planning and preparation of HPV national introductions in collaboration with WHO and partners	PATH	Minutes from meetings and summaries of workgroup activities for national planning and all materials, tools, documents developed for such are submitted to Gavi. Summary of regional training events conducted during this period submitted to Gavi.		PATH contributes to the coordination, planning, and preparation for national HPV vaccine introduction.	30073.54
Ethiopia	Vaccine-specific support	Activity 2.4. PATH TA team coordination and management by project director	PATH	Regular reports of PATH's country-level activities reported to Gavi in the frequency requested by Gavi.		PATH's TA work with countries and participation/representation at global and regional activities is well-coordinated and managed.	
Ethiopia	Vaccine-specific support	Activity 2.2. Support the planning and implementation of social mobilization and communication plans in collaboration with Unicef, WHO, and partners	PATH	Minutes from meetings and summaries of workgroup activities for national social mobilization, and all materials, communication plans, and other relevant documents developed for such are submitted to Gavi. Summary of launch events conducted during this period submitted to Gavi.		PATH contributes to the preparation and implementation of social mobilization activities for national HPV vaccine introduction.	
Ethiopia	Vaccine-specific support	NCE of activities above.	PATH				NCE
Ethiopia	Vaccine-specific support	Provide both management and technical support to the FMOH regarding the HPV introduction preparations and post introduction follow ups. Help plan, implement and monitor the timely execution of all HPV introduction activities, including stakeholder engagement towards integration of HPV delivery and adolescent health, and post introduction monitoring activities. Coordinate and align the effort of partners and other key stakeholders in the timely introduction of HPV vaccine in Ethiopia.	CHAI	High quality preparations take place, with appropriate coordination of all stakeholders' roles/responsibilities	Quality HPV introduction takes place	HPV2 coverage at 80% within 24 months of introduction	193708
Ethiopia	Vaccine-specific support	Share country information, provide feedback and collaborate within global leadership team. Relay key information to countries to facilitate introduction and coordination at country level	CHAI	Active participation in HPV leadership team meetings	CHAI has significantly contributed (knowledge, ideas and tools) to the HPV leadership group	Fluid information sharing of Gavi, global partners and in-country needs; improved coordination between CHAI and other partners for country support to priority areas; regular feedback on Gavi HPV policies based on country experience; development and sharing of tools for HPV country support	
Ethiopia	Vaccine-specific support	Conduct assessment on vaccination landscape at Regional Health Bureaus and Health Facilities in 4 regions.	Jhpiego	One assessment will be conducted to better understand the vaccination landscape by			369,523
Ethiopia	Vaccine-specific support	Compile results of assessment	Jhpiego	Competencies are defined. Gaps in vaccination services will be identified Existing Knowledge and skill status of health workers will be identified as baseline by			
Ethiopia	Vaccine-specific support	Design training packages for MCV2 and HPV vaccines in a national workshop	Jhpiego		Training packages that serve as tools to increase provider competency are developed for 40 participants by		
Ethiopia	Vaccine-specific support	Use the designed tools and other existing learning resources to finalize training packages at national workshop	Jhpiego		Learning resources that are used for 30 training of trainers and trainees by		

Ethiopia	Vaccine-specific support	Conduct workshop with FMOH NITAG and expanded partners to review training package	Jhpiego		Training package reviewed and finalized with stakeholders for 30 participants	
Ethiopia	Vaccine-specific support	Develop and/or adapt educational training videos	Jhpiego		One educational video developed by July 30 2018	
Ethiopia	Vaccine-specific support	Conduct pilot testing of MCV2 and HPV training courses	Jhpiego		Ensure training courses meet the needs and are improved by 15 August 2018	
Ethiopia	Vaccine-specific support	Conduct on site mentorship during HPV and MCV2 vaccine training course events	Jhpiego		Quality assurance is demonstrated in October and November ongoing.	
Ethiopia	Vaccine-specific support	To help program leaders at different level ensure quality of HPV and MCV2 vaccine programs, supervisory skills will be provided for 5 days for 60 participants.	Jhpiego		60 supervisors will get supervisory skills training to ensure quality service delivery by October 2018	
Ethiopia	Program Implementation/ Coverage & Equity	Support national level activity in finalizing and Implementing of new RED/C guide	PATH		Finalized RED guide	
Ethiopia	Program Implem	Support the rollout new health pass port rollout in Afar and Somali regions	PATH		Health passport Printed	
Ethiopia	Program Implem	Facilitate Integrated refresher training for 132 HEWs in 6 focal woredas (4 in Afar & 2 in Somali regions)	PATH		Plan communicated	
Ethiopia	Program Implem	Support the implementation of PIRI in 6 focal woredas (4 in Afar & 2 Somali regions)	PATH		Areas of support identified	
Ethiopia	Leadership Manag	Facilitate Immunization tailored PPP consultative workshop 40 private hospitals in AA & DD	PATH		Stakeholders Identified	
Ethiopia	Demand Promoti	Situational Analysis for Demand Promotion (DP) & Community Engagement (CE) conducted in 6 focal woredas (4 in Afar & 2 in Somali regions)	PATH		Desk review conducted	
Ethiopia	Demand Promoti	Provide Capacity building training to 120 committee memmmbers found in 6 focal woredas (4 in Afar & 2 in Somali regions)	PATH		Training provided	
Ethiopia	Demand Promoti	Conduct Bi annual Supportive supervision & On the Job Training(OJT) for SM committee members in 6 focal woredas (4 in Afar & 4 in Somali regions)	PATH		Supportive supervision & OJT conducted	
Ethiopia	Demand Promoti	Assist in the planning, implementation and monitoring of national communication plan with participation in the national CWG	PATH		CWG participated & contributed in planning, implementation and monitoring national communication activities	
Ethiopia	Demand Promoti	Assist in the planning, implementation and monitoring of regional communication plan with participation in the regional CWG	PATH		Regional level CWG meeting atnded	
Ethiopia	Data	Support National level annual EPI bulletin preparatation and printing	PATH		Preparation supported	
Ethiopia	Data	Provide capacity building training on DQS/DOR(TOT) for 50 Regional & woreda level data managers in Afar and Somali region	PATH		Training provided	
Ethiopia	Data	Conduct Annual EPI program & data Quality improvement plan review in 8 focal woreda 4 in Afar & 2 Somali region	PATH		Review meeting Conducted	
Ethiopia	Data	Conduct biannual Supportive supervision & Mentorship on EPI DQ for 8 focal woredas in Afar & Somali regions	PATH		SS conducted	
Ethiopia	Data	Assist in the planning, implementation and monitoring of national data quality improvement plan, program quilty with participation in the national M and E WG	PATH		M and E WG meeting participated	
Ethiopia	Advocacy	Plan & organize the 2018 African Vaccination Week (AVW) activities	PATH		Event Planned	
Ethiopia	LMC	improve leadership, management and coordination of the immunisation programme in Ethiopia	Acasus		-Quarterly report on progress - Presentation from the first stocktake - Plan for strengthening data systems - Plan for monitoring progress through household surveys - Quarterly report on progress - Presentation from the first stocktake - Compilation of best practices at regional and district levels - Detailed specification for the mobile data collection app	348,829
Ethiopia	Data	strengthening of national health information system (HIS) and establishing of robust and sustainable integrated systems, focusing on implementation of tools and building capacity for better quality and use of immunisation data	University of Oslo			347,970
Ethiopia	Vaccine-specific support	Detailed MCV2 introduction plan and training manual	JSI		MCV2 introduction plan and training manual reviewed	14327
Ethiopia	Vaccine-specific support	Microplanning tools for MCV2 and 2YL	JSI		Facility based microplan tools used	
Ethiopia	Vaccine-specific support	Microplanning and training	JSI		Technical support for training and microplanning provided	
Ethiopia	Vaccine-specific support	Communication and social mobilization materials	JSI		Communication and social mobilization materials reviewed	186,041
Ethiopia	Data	SO 1: Strengthen Immunization Data Quality and System	CCRDA		Conduct RED/C Micro planning	
Ethiopia	Data	SO 1: Strengthen Immunization Data Quality and System	CCRDA		Provide Data Quality Assessment (DQA) training for woreda and health facility officers	
Ethiopia	Data	SO 1: Strengthen Immunization Data Quality and System	CCRDA		Routine data quality self-assessment	

Ethiopia	Data	SO 1: Strengthen Immunization Data Quality and System	CCRDA		Purchase of EPI recording and reporting formats	
Ethiopia	Demand Promotion	SO 2: Demand generation on immunization program	CCRDA		Revise and reprint community conversation facilitation guide	
Ethiopia	Demand Promotion	SO 2: Demand generation on immunization program	CCRDA		Revise and reprint religious mainstreaming guide	
Ethiopia	Demand Promotion	SO 2: Demand generation on immunization program	CCRDA		Conduct Training on religious mainstreaming to the religious leaders	
Ethiopia	Demand Promotion	SO 2: Demand generation on immunization program	CCRDA		ToT Training for HEWs, Health workers and Woreda EPI experts	
Ethiopia	Demand Promotion	SO 2: Demand generation on immunization program	CCRDA		Develop and distribute IEC materials (billboard, poster, leaflets ...)	
Ethiopia	Demand Promotion	SO 2: Demand generation on immunization program	CCRDA		Establish and monitor EPI Task force at woreda level	
Ethiopia	Demand Promotion	SO3: Increase immunization access unreached community/PIRI/ Implementation	CCRDA		Evidence based selection of the low performing kebeles	
Ethiopia	Demand Promotion	SO3: Increase immunization access unreached community/PIRI/ Implementation	CCRDA		Registration of vaccination defaulters and eligible children and social mobilization	
Ethiopia	Demand Promotion	SO4: Monitoring and Evaluation	CCRDA		Baseline and final evaluation survey using WHO 30X10 cluster sampling method.	