

NEPAL COVAX TA PLAN											
Country	Programmatic Area	Activity	Partner	Milestones				Expected Duration of Activity	Expected Outcome	Please specify detailed budget assumptions including 1. FTE of proposed consultants where applicable - this should reconcile with the HR profile on the next page	TOTAL
				January 2021	March 2021	June 2021	November 2021				
Nepal	Vaccine, Cold Chain & Logistics	H.1 Establish/strengthen the national logistics working group with appropriate terms of reference and standard operating procedures to coordinate COVID-19 vaccines and ancillary products deployment	UNICEF	Key roles and responsibilities needed for vaccine and ancillary products deployment mapped; contact information for key personnel and facilities collected and confirmed.	Dry storage and cold chain capacity at all levels with regards to the COVID-19 vaccines characteristics are assessed and supply and logistics gaps are identified and filled.	Standard operating procedures (SOPs) or guidelines for collection and disposal of medical waste to the relevant stakeholders provided.	Vaccine stock management tools and operating procedures to reflect the characteristics of COVID-19 vaccines (i.e. vial size, VVM...) updated.	Develop/upgrade strategies, tools and guidance on Cold Chain Logistics (CCL) policies, procedures, systems, and activities according to National COVID-19 Vaccine Introduction and Deployment Plan. Partners are supported on warehouse and logistics management and technical assistance delivered to national systems to plan their needs and meet minimum standards in relation to equipment use in the CCL system, vaccine stock management to prevent stock-outs and over-stocking and optimize vaccine usage/transport and temperature monitoring according to received COVID-19 vaccine characteristics.	Immunization Specialist, COVAX Supply and Cold Chain Strengthening (Int. Prof. Temporary Appointment) - full for 6 months; additional LWG workshops and consulting, setting in grant, monitoring visits.	\$374,554.80	
Nepal	Vaccine, Cold Chain & Logistics	H.4 Assess dry storage and cold chain capacity at all levels with regards to the COVID-19 vaccines characteristics and fill the identified supply and logistics gaps	UNICEF	Key roles and responsibilities needed for vaccine and ancillary products deployment mapped; contact information for key personnel and facilities collected and confirmed.	Dry storage and cold chain capacity at all levels with regards to the COVID-19 vaccines characteristics are assessed and supply and logistics gaps are identified and filled.	Standard operating procedures (SOPs) or guidelines for collection and disposal of medical waste to the relevant stakeholders provided.	Vaccine stock management tools and operating procedures to reflect the characteristics of COVID-19 vaccines (i.e. vial size, VVM...) updated.	Partners are supported on warehouse and logistics management and technical assistance delivered to national systems to plan their needs and meet minimum standards in relation to equipment use in the CCL system, vaccine stock management to prevent stock-outs and over-stocking and optimize vaccine usage/transport and temperature monitoring according to received COVID-19 vaccine characteristics.	Provincial/District COVAX Vaccines and Cold Chain Logistics Consultants (13 FTE/National) around 2 each in each province @USD 10,000 each for 6 months including travel		
Nepal	Demand Generation & Communication	J.2 Establish data collection systems, including 1) social media listening and rumor management, and 2) assess behavioral and social data	UNICEF	Demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) designed.		Data collection systems, including 1) social media listening and rumor management, and 2) assessing behavioral and social data established.		Strengthened government-led multi-sector coordination for COVID-19 vaccines demand generation, improved capacity in managing crisis communication; established Behavioral and Social Data (BeSD) for Listening to people and communities on COVID-19 vaccination.	COVAX crisis communication and media Specialist, one senior national consultant for 6 months		
Nepal	Demand Generation & Communication	J.1 Design a demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) to generate confidence, acceptance and demand for COVID-19 vaccines. Must include a crisis communications preparedness planning	UNICEF	Demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) designed.	Demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) designed.			Strengthened government-led multi-sector coordination for COVID-19 vaccines demand generation, risk communication and community engagement; established Advocacy Communication and Social Mobilization Committee and improved capacity in managing crisis communication; established Behavioral and Social Data (BeSD) for Listening to people and communities on COVID-19 vaccination; a national vaccine misinformation management plan developed.	Communication for Development Specialist, COVAX Demand Generation and community engagement (Int. Prof. consultant) for developing tools and mechanism for demand generation, social listening, rumors and misinformation management and evidence based community engagement strategy for 40 days. Consultant will work remotely		
Nepal	Demand Generation & Communication	J.1 Design a demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) to generate confidence, acceptance and demand for COVID-19 vaccines. Must include a crisis communications preparedness planning	UNICEF	Demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) designed.	Demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) designed.	Key messages and materials for public communications and advocacy, in alignment with demand plan developed.	Key messages and materials for public communications and advocacy, in alignment with demand plan developed.	Strengthened government-led multi-sector coordination for COVID-19 vaccines demand generation, risk communication and community engagement; established Advocacy Communication and Social Mobilization Committee and improved capacity in managing crisis communication; established Behavioral and Social Data (BeSD) for Listening to people and communities on COVID-19 vaccination; a national vaccine misinformation management plan developed.	Communication for Development Specialist, COVAX Demand Generation and community engagement (Int. Prof. consultant) for developing tools and mechanism for demand generation, social listening, rumors and misinformation management and evidence based community engagement strategy for 40 days. Consultant will work remotely		
Nepal	Planning & Coordination	A.6 Develop the National Deployment and Vaccination Plan (NDVP) with input from relevant bodies (National COVID-19 Response Coordinating Committee, CNCC, CTWG, NITAG, National Immunization Programme, National Regulatory Authority, AEFI committee and other relevant groups such as private sector). The NDVP should be in line with WHO guidance and SAGE recommendations (plan can be developed by adapting the Pandemic Influenza NDVP, if essential)	WHO	NDVP developed with input from relevant bodies (National COVID-19 Response Coordinating Committee, CNCC, CTWG, NITAG, National Immunization Programme, National Regulatory Authority, AEFI committee and other relevant groups such as private sector), in line with WHO guidance and SAGE recommendation.	Briefing schedule for key ministries, NITAG, stakeholders and partners developed and followed.	Government signature for legal agreement for receiving Covid-19 vaccines reviewed and prepared for.		Vaccination Plan (NDVP) is fully developed with input from relevant bodies and authorities. By end January 2021, full first draft NDVP is developed. Depending upon the progressive scenario, the NDVP is continuously updated. By end February 2021, full final NDVP is available. Apart from developing NDVP, support for and achievement is done for all activities from A1 - A8 (because of this two consultants are required).	Budget is for two national consultants (with one consultant of higher-level) including travel for 6 months period. The national consultant will be situated at central (federal) level.	\$374,142.73	
Nepal	Planning & Coordination	A.5 Inform regulatory & disseminate global and regional guidance (i.e. SAGE) with NITAGs & RITAGs and support NITAG working groups on COVID-19 vaccines	WHO	NDVP developed with input from relevant bodies (National COVID-19 Response Coordinating Committee, CNCC, CTWG, NITAG, National Immunization Programme, National Regulatory Authority, AEFI committee and other relevant groups such as private sector), in line with WHO guidance and SAGE recommendation.	NITAG subcommittees for the following workstreams: 1) service delivery 2) vaccine, cold chain & logistics, 3) demand generation & communication 4) prioritization, targeting and COVID-19 surveillance, 5) Monitoring and Evaluation: determination and proof of eligibility, proof of vaccination, monitoring of coverage among at-risk groups, and monitoring of vaccine impact 6) Safety, including injury prevention and AEFI detection and response, established or if pre-existing, engaged.	Global and regional guidance disseminated to NITAGs & RITAGs and NITAG working groups on COVID-19 vaccines.		Full technical support is provided for planning, coordination and technical aspects of preparation and delivery of COVID-19 vaccine, including support for preparation of NDVP. The international consultant will provide support to national consultants and the committee as well, and help translate global and regional guidance into practical day-to-day operational tasks.	Budget is for international consultant for 90 person days over 6 months period. The international consultant will work remotely.		
Nepal	Planning & Coordination	A.4 Brief key ministries, NITAG, stakeholders and partners about COVID-19 vaccine introduction and their expected roles	WHO		Briefing schedule for key ministries, NITAG, stakeholders and partners developed and followed.			All aspects of planning, coordination and preparation (including briefing of progress) is undertaken and technical support is provided to Ministry of Social Development and Provincial Health Directorate at Provincial Level (and below provincial level as per requirement). Besides this, supervision and management of TA support (HR) of sub-national level is provided.	Budget is for 1 local/national consultant each for 7 provinces at provincial level. Nepal is now a federalized country with 7 provinces. The consultants will be medical doctors (with public health experience) at degree level. The budget also includes travel to sub-provincial level (district and panchayat level). This can be hired through SSA contracts.		
Nepal	Resources & Funding	B.3 Finalize the budgeted micro-plans for vaccination including plans for other relevant components such as demand generation, risk communications and safety surveillance.	WHO	Financial and human resources required for deployment and vaccination operations, and the required number of days for deployment and vaccination operations estimated.	Budgeted micro-plans for other relevant components such as demand generation, risk communications and safety surveillance, finalized.	Mechanisms to release and distribute to lowest levels for operators ensured.		All budget needs and calculations including micro-budgeting, allocations for all levels, support to relevant finance units of the government (Finance Section, Department of Health Services, Financial Comptroller General Office), financial paperwork required for disbursements and funds release is conducted and achieved timely.	Budget is for 1 national consultant at central level for 6 months.		
Nepal	Regulatory Aspects	C.3 Identify the requirements and documents needed to import COVID-19 vaccines	WHO	Expedited regulatory pathway for approval of COVID-19 vaccines (i.e. emergency use authorization, exceptional approval/ waiver mechanism based on reliance/recognition, abbreviated procedure, fast track, etc.) identified and confirmed.	Requirements and documents needed to import COVID-19 vaccines identified.	Review of summary protocols is completed, and a system of waiving local lot release testing based off for review is established.		Due to activity selection by drop-down, only one activity is selected here. However, TA support for this will be for all activities under Regulatory programmatic area (C1 - C5). Outcome will be that all required regulatory requirements will be achieved timely. Coordination with NRA will be done as required.	Budget is for 1 higher-level national consultant at central level for 6 months.		
Nepal	Training & Supervision	F.2 Adapt and translate training materials developed by WHO and develop additional training materials as outlined in the training plan	WHO	Training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual) developed.	Training materials developed by WHO adapted and translated, as well as additional training materials developed as required.	Trainings conducted as per the training plan.		All activities under 'training and supervision' programmatic area will be achieved including training plan and training materials developed. The same consultant will also be responsible to support activities under 'monitoring and evaluation'. Therefore, monitoring tools will also be developed.	Budget is for 1 higher-level national consultant at central level for 6 months.		
Nepal	Training & Supervision	F.3 Conduct virtual and/or in person trainings as outlined in the training plan	WHO	Training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual) developed.	Trainings conducted as per the training plan.	Trainings conducted as per the training plan.		One of the most important components for successful delivery of the COVID-19 vaccine will be good training. TA will be provided at sub-national level - province, district, and local/palika level for supervision, training. Further, the same HR will be responsible to support activities under 'monitoring and evaluation' programmatic area. Therefore, trainings will be completed before vaccine introduction and monitoring tools will be tested and in place to vaccine introduction.	Budget is for 1 higher-level national consultant at central level for 7 provinces for 5 months period. Further, as SIA experience has shown, consultants will be needed in each of the 6 metropolitan cities - therefore, the provincial level TA support placed (under 'planning and evaluation') will also be providing support for this activity at each of the metropolitan cities. The consultants will be medical doctors (with preferable public health experience or degree). The budget includes travel for		

	Monitoring & Evaluation				Necessary monitoring tools developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adopted and analytical tools to monitor progress and coverage among different at-risk categories developed.	Monitoring tools produced and distributed to eligible vaccination providers.		more than 3 months	Monitoring tools, recording and reporting formats and forms are developed and IT support is provided for supervision and training (including online/virtual training), and monitoring and evaluation.	Budget is for 1 consultant at central level for 6 months
Nepal		G.2 Develop or adapt necessary monitoring tools or adapt existing tools: vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic) and analytical tools to monitor progress and coverage among different at-risk categories	WHO							
Nepal	Safety Surveillance	I.1 Ensure that guidelines, documented procedures and tools for planning and conducting vaccine pharmacovigilance activities (i.e. AEFI reporting, investigation, causality assessment, risk communication and response) are available	WHO	AEFI committee to review COVID-19 vaccine safety data (e.g. causality assessment of serious AEFI, clusters of AEFI, emerging safety concerns etc.) is trained.	Guidelines, documented procedures and tools for planning and conducting vaccine pharmacovigilance activities (i.e. AEFI reporting, investigation, causality assessment, risk communication and response) are made available.	Communication channels to share COVID-19 vaccine safety data and findings with relevant regional and international partners secured.		more than 3 months	Guidelines and tools for COVID-19 vaccine AEFI reporting, investigation and causality assessment is prepared, and the National AEFI Investigation Committee is supported.	Budget is for international consultant for 90 person-days over 6 months period. The international consultant will work remotely.
Nepal	Safety Surveillance	I.2 Assure competent and trained staff to perform vigilance activities	WHO	Provisions that require manufacturers to implement risk management plans and collect and report COVID-19 vaccine safety data to the NSA are identified.	Competent and trained staff to perform vigilance activities	Competent and trained staff to perform vigilance activities		more than 3 months	Support is provided to the National AEFI Investigation Committee to prepare for COVID-19 vaccine AEFI. Training plan and materials are developed and sub-national level is trained on AEFI reporting and investigation.	Budget is for 1 national consultant for central level for 3 months, including travel to sub-national level.

