

2019 TCA				Milestones			GPF indicator code					
Country	Programmatic Area	Activity	Partner	Jun-19	Nov-19	Jun-20	If applicable, enter the code to the Grant Performance Framework indicator to which this activity is linked	Expected Duration of Activity	Expected Outcome	Link to PEF Functions, if applicable	Budget assumptions	TOTAL
Cambodia	Supply Chain & Procurement	1. Technical support to improve knowledge and skills of seven newly assigned "PHD-NIP Managers" and an "Alternate Central Vaccine Store Manager" in immunization supply chain management.	UNICEF		Six newly assigned "PHD-NIP Managers" and an "Alternate Central Vaccine Store Manager" are trained in SOPs for immunization supply chain management, including one post training follow up.		HSS - Objective 2: IR-T 4	> 1 year	Six newly assigned PHD-NIP Managers and an "Alternate Central Vaccine Store Manager" have knowledge and skills in immunization supply chain management.	Countries conduct barrier and enabler assessments for vaccines and vaccination services that include the perspective of end users, relevant community stakeholders and front-line providers as appropriate	One full time (100%) National Officer (NO2 level) providing technical support for Gavi-HSS planning/ implementation and skills transfer in SOP for immunization supply chain management, scale up of data quality improvement,	
Cambodia	Supply Chain & Procurement	2. Technical support to train health center staff in SOPs for immunization supply chain management	UNICEF		50% of all provinces (13 out of 25) trained their health center staff in in SOP for immunization supply chain management		HSS - Objective 2: IR-T 4, IR-T 5	6 - 12 months	All health facilities with vaccine storage have at least two staff having knowledge and skills in SOP	National Logistics Working Groups (NLWGs) review vaccine stocks at central and subnational levels (e.g. to districts) on a regular basis (e.g. monthly, quarterly), identify priority actions, and address problems	implementation of communication strategic plan, EVM assessment and development of EVM implementation plan, regular progress tracking report,	
Cambodia	Health Information Systems (Data)	3. Technical assistance in national scale up and monitoring of following activities which was piloted in 2018 under Gavi TCA funds 1. Immunization service delivery assessment 2. Development of session plan 3. Data accuracy 4. Denominator use at local level.	UNICEF		Implementation of scale up conducted nationally with allocated budget using the new list of village, new session plan, agreed upon denominator at HC and data accuracy template. Documentations done and shared.		HSS - Objective 5: OI-C 1 (1-6), OI-C 2 (1-6)	6 - 12 months	Improved immunization service delivery system with appropriate session plan and improved and reliable reported immunization coverage data	Immunization data, including monthly data on coverage at district or equivalent level, is tracked at central/province level and used to guide program decisions, including prompt pro-active actions taken to address significant declines or lack of improvement in coverage		
Cambodia	Demand Promotion & ACSM	4. Technical support to implement the Communication Strategic Plan for Immunization	UNICEF		Development of key communication materials listed in Communication Strategic Plan (Gavi-HSS fund);	Progress tracking report	HSS - Objective 3: All	> 2 years / long-term	Communication materials developed timely and Launching event conducted along with all communication strategies implemented and monitored.	Countries implement and monitor evidence-based demand promotion strategies as part of their Annual EPI Operational Plan		
Cambodia	Vaccine-Specific Support	5. Technical support to immunization supply chain management	UNICEF		Annual vaccines/ injection forecast developed, procurement, funding disbursement followed up, local distribution, national and sub-national level stock monitoring, quarterly report		HSS - Objective 2: IR-C 5.0	> 2 years / long-term	Available of vaccines, injection devices, cold chain functioning with less stock out and less interruption of immunization service delivery all year round.	National Logistics Working Groups (NLWGs) review vaccine stocks at central and subnational levels (e.g. to districts) on a regular basis (e.g. monthly, quarterly), identify priority actions, and address problems	One full time (100%) national officer (NO1 level) providing support to all aspect of vaccines, supply planning, procurement, stock management, local distribution, temperature monitoring for vaccine storage, stock management	
Cambodia	Supply Chain & Procurement	6. Technical support to conduct EVM assessment and development of improvement plan and conduct bi-annual review the progress in implementation of EVM improvement plan	UNICEF		EVM-Assessment conducted, EVM-Improvement Plan developed and tracking tool developed. Lessons learned from implementing last EVM Improvement Plan are documented.	Progress tracking tool for EVM-Improvement plan quarterly updated, report to NIP managers, WG	HSS - Objective 2: IR-C 2.0, IR-C 3.0,	> 2 years / long-term	EVM-Assessment conducted, EVM-Improvement Plan developed/ costed and tracking tool developed with core group assigned to monitor the implementation quarterly	Immunization data, including monthly data on coverage at district or equivalent level, is tracked at central/province level and used to guide program decisions, including prompt pro-active actions taken to address significant declines or lack of improvement in coverage	One full time (100%) consultant for a period of 30 working days for conducting EVMA and EVM-IP	\$ 261,360



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Cambodia	Programme Implementation/ Coverage & Equity	7. Technical support to five remote north-east provinces to reduce dropout rates (baseline 2018).	UNICEF		25% of health centers (with dropout rate above 10% for Penta1-3 in 2018) in 5 north-east provinces targeted with technical assistance and results / approaches documented to help reduce dropout rates		HSS - Objective 1: OI-C 2.1, OI-C 2.2, OI-C 2.4	> 1 year	Health centers with high dropout of either penta1-3 more than 10% (baseline 2018) reduced dropout rate to below 10%	Immunization data, including monthly data on coverage at district or equivalent level, is tracked at central/province level and used to guide program decisions, including prompt pro-active actions taken to address significant declines or lack of improvement in coverage	Two Zone Health Officers NO2 Level (80% each) covering five north-east provinces (RKR, MKR, STR, KRT, PVH) providing technical support to reduce dropout rates for immunization, to implement the Communication Strategic Plan for Immunization in five north-east provinces focusing on difficult access areas, ethnic minorities and technical support in immunization supply chain and logistics.	
Cambodia	Demand Promotion & ACSM	8. Technical support to promote demand for immunization in health centers with low immunization coverage, ethnic minorities)	UNICEF		At least 50% of all selected health centers (N=6) with lowest penta3 are targeted with demand promotion activities and lessons learned / results are monitored and documented.		HSS - Objective 3: PR-T 15	> 1 year	Selected health centers with lowest penta3 increased immunization coverage (baseline 2018)	Countries implement and monitor evidence-based demand promotion strategies as part of their Annual EPI Operational Plan		
Cambodia	Supply Chain & Procurement	9. Technical support to collect and analyse data of temperature monitoring devices (30 DTR) during vaccine storage in all (N=109) health facilities in five remote north-east provinces to inform maintenance, refrigerator replacement.	UNICEF		Report numbers events (unwanted temperature for vaccine storage ; above 8°C more than 10 hours and below 0.5 °C more than 1 hours) all health facilities.		HSS - Objective 2: IR T 4, IR-T 5	6 - 12 months	100% (N=109) health facilities in north-east provinces have report numbers events (unwanted temperature for vaccine storage ; above 8°C more than 10 hours and below 0.5 °C more than 1 hours).	National Logistics Working Groups (NLWGs) review vaccine stocks at central and subnational levels (e.g. to districts) on a regular basis (e.g. monthly, quarterly), identify priority actions, and address problems		
Cambodia	Supply Chain & Procurement	10. Technical support to update the cold chain inventory of 109 health facilities in five remote north-east provinces.	UNICEF	Available (completed and up to date) cold chain inventory for all health facilities in the web-based cold chain inventory			HSS - Objective 2: IR T 4, IR-T 5	6 - 12 months	100% of health facilities in the five north east provinces have completed and up to date cold chain inventory for all health facilities in the web-based cold chain inventory	National Logistics Working Groups (NLWGs) review vaccine stocks at central and subnational levels (e.g. to districts) on a regular basis (e.g. monthly, quarterly), identify priority actions, and address problems		
Cambodia	Programme Implementation/ Coverage & Equity	Technical support to NIP in implementation of Gavi HSS grant's supported activities as per NIP's AOP including planning, preparation, implementation and monitoring of high risk community outreach services and catch-up vaccination; support to other Gavi related activities	WHO	Supported to plan and implement activities of NIP AOP by using Gavi HSS grant; planned, prepared and participated in monitoring of one/two rounds of high risk communities outreach services/catch-up vaccination	Supported to plan and implement activities of NIP AOP by using Gavi HSS grant; planned, prepared and participated in monitoring of two/three rounds of high risk communities outreach services/catch-up vaccination	Supported to plan and implement activities of NIP AOP by using Gavi HSS grant; planned, prepared and participated in monitoring of four rounds of high risk communities outreach services/catch-up vaccination	All OI-C indicators except OI1.6, 5.6, plus OI-T 29 plus all IR-C except 1.6.1, 1.6.2, 1.6.3, 1.6.4, 3.0, 5.0 plus IR-T 1,2, 3, plus PR-T 16,17	> 1 year	Missed children vaccinated and increased immunization coverage for all antigens in all the provinces	Countries develop annual EPI Operational Plan focusing on improving low coverage and high inequity	45% salary of international P staff position/ international long term consultant and 70% salary of national professional officer to fully support to plan, implement and monitor NIP's activities as well as skill transfer	
Cambodia	Programme Implementation/ Coverage & Equity	Technical support to develop comprehensive multi-year plan (2021-2024)	WHO	Discussions held and activities planned	Identified a consultant, development process started	Finalized first draft of comprehensive multi-year plan for comments	All core, tailored, intermediate results, process/activity tailored indicators2	> 1 year	Developed realistic objectives, strategies and activities with costing aligning with the national health strategic plan towards financial sustainability by increasing domestic resources	Immunization program frameworks (HSIS/cMYP/Annual EPI Operational Plans) target low coverage communities facing geographical, economic, and social barriers to immunization, and support the implementation of effective coverage improvement activities		

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Cambodia	Programme Implementation/ Coverage & Equity	Technical assistance in national scale up and monitoring of following activities which was piloted in 2018 under Gavi TCA funds 1. Immunization service delivery assessment 2. Development of session plan 3. Data accuracy 4. Denominator use at local level.	WHO	Discussions held, scale up plan is in place with Gavi-HSS funding allocation in AOP, implementation started (assessment, review, validation, etc.) in each health centre nationally	Implementation of scale up conducted nationally with allocated budget using the new list of village, new session plan, agreed upon denominator at HC and data accuracy template. Documentations done and shared.		All OI-C indicators except OI1.6, 5.6 plus OI-T 29 plus all IR-C except 1.6.1, 1.6.2, 1.6.3, 1.6.4, 3.0, 5.0 plus IR-T 1.2, 3, plus PR-T 16	6 - 12 months	Improved immunization service delivery system with appropriate session plan and improved and reliable reported immunization coverage data	Countries conduct barrier and enabler assessments for vaccines and vaccination services that include the perspective of end users, relevant community stakeholders and front-line providers as appropriate		\$ 216,568
Cambodia	Programme Implementation/ Coverage & Equity	Technical support to NIP to establish a NIP model village in each of two provinces with <90% penta3 coverage and explore integration of other services with ultimate target towards model health village	WHO	Discussions held and identified two villages with NIP in two provinces, concept note finalized and planned for implementation		Report prepared and shared	All OI-C indicators except OI1.6, 5.6 plus OI-T 29 plus all IR-C except 1.6.1, 1.6.2, 1.6.3, 1.6.4, 3.0, 5.0 plus IR-T 1.2, 3, 6,7,8,9,10,11	> 1 year	Innovation and set an example as model NIP village for sharing to all provinces, OD and HCs	Countries conduct barrier and enabler assessments for vaccines and vaccination services that include the perspective of end users, relevant community stakeholders and front-line providers as appropriate		
Cambodia	Health Information Systems (Data)	Analysis and monitoring of routine immunization coverage and VPD surveillance performance indicators/reporting by national/ provinces/ODs/HCs.	WHO	40% of expected number of AFP and 50% of expected number of suspected measles cases reported from almost half of provinces; immunization and surveillance data analysed/shared and monthly VPD disease bulletin prepared and distributed	Exceeded expected number of AFP and suspected measles cases reported from most of the provinces; immunization and surveillance data analysed/shared and monthly VPD disease bulletin prepared and distributed	Annual routine immunization and VPD surveillance data analysed and annual bulletin prepared and distributed	All OI-C indicators except OI1.6, 5.6, plus OI-T 29 plus all IR-C except 1.6.1, 1.6.2, 1.6.3, 1.6.4, 3.0, 5.0 plus IR-T 1.2, 3, 6,7,8,9,10,11 plus PR-T 16,17	> 1 year	PHD and OD NIP staffs gained knowledge and AFP and measles/rubella performance indicators' rate increased/sustained. Reliable reported immunization coverage data	Immunization data, including monthly data on coverage at district or equivalent level, is tracked at central/province level and used to guide program decisions, including prompt pro-active actions taken to address significant declines or lack of improvement in coverage		
Cambodia	Health Information Systems (Data)	Support in implementation of data quality improvement plan	WHO	Supported to plan activities of HMIS unit of DPPI/MOH as per data quality improvement plan and AOP by using Gavi HSS grant.	Supported to conduct implementation of two major activities of data quality improvement plan of HMIS unit as per AOP		All OI-C indicators except OI1.6, 5.6, plus OI-T 29 plus all IR-C except 1.6.1, 1.6.2, 1.6.3, 1.6.4, 3.0, 5.0 plus IR-T 1.2, 3, 6,7,8,9,10,11 plus PR-T 16,18	> 1 year	Improved data accuracy and quality	Countries develop and implement strategic data improvement plans with annual monitoring of implementation		