Country	IRMMA Framework	Location	Programmatic Area	HSS objective	Activity	Partner	Name of subcontracted local partner, if applicable	21-Jun	21-Nov	22-Jun	If applicable, enter the code to the Grant Performance Framework indicator to	Expected Outcome	TOTAL
Ethiopia	Identify	Subnational	Service Delivery	Improved service delivery	Organize a two days advocacy workshops both at national and regional levels, in the four regions to identify '0' dose children, missed communities and identify priority zones for support: Participants are from Regional MCH, EPI experts from Zones and woredas: drafts a micro planning and work plan to reach the missed communities.	WHO		Health workers in the selected zones will support the effort to identify '0'dose children & unreached communities in their catchment areas	Advocacy (review) workshops will be conducted at the four regions involving the selected zones to aware them about the interventions Column1		Health facilities in the beneficiary zones of the four big regions and urban slums in the two	40 -80% % Health facilities in the targeted zones develop MP targeting to reach '0 dose children and missed communities. Combined RED/IIP training to the health workers and combined online and in class MLM training will be given to Zonal EPI focals. This will contribute to reduce '0 dose children and 'leave no one behind' and UCI targets.	
Ethiopia	Reach	Subnational	Human Resources for Health	Improved HR for immunization	Support training of health care workers in 12 priority zones in three big regions (Tigray, Amhara, Oromia) and one Benishangul Gumz region and , Addis Ababa and Dire Dawa City Administrations. (1) Train 100-120 Regions and EPI focals and experts on MLM (online and virtual and in persons) (2) Train 380-400 EPI experts working in health care facilities in Combined RED/IIP training and other Immunization in Actions interactive training	WHO		Trained health workers will developing operational MP and session planning to improve service delivery in their catchment areas	40-60% of trained health workers will develop operational micro planning including session planning to reach more '0' dose children in the selected zones	70-80% of trained health workers will develop operational micro planning including session planning to reach more '0' dose children in the selected zones			
Ethiopia	Reach	Subnational	Human Resources for Health	Improved HR for immunization	Conduct two rounds of annual post training supportive supervision and review meetings in the priority zones	WHO		System for regular monitoring and supervision of vaccinators / FHWs in priority areas is in place, allowing for assessing trend in performance	Post training supportive supervision and review meeting in 40-60% of health facilities in the selected zones will be conducted	Post training supportive supervision and review meeting in 70-80% of health facilities in the selected zones will be conducted			
Ethiopia	Identify	National	Human Resources for Health	Improved program management & data for action	Support one person from the MoH/EPI for vaccinology course abroad	WHO		One person from EPI case team trained in advanced vaccinology training abroad	Identification of the institute and ensure admission for the course	Selected person will enrolled in the training		One person will be trained in vaccinology	
Ethiopia	Reach	National & Subnational	Service Delivery	Improved service delivery	"Provide technical support to implement: • • PIRI in the targeted zones • AVW • New vaccine introduction (IPV2, COVID-19 vaccine, nOPV2, Yellow fever, MRV and MenAfric A) • SIA • Roll out of C-19 and HPV vaccinations in the big four regions"	WHO		Support NVI, PIRI, multiantigen catch-up campaigns as requested by FMoH and RHBs	prepare concept notes, proposals and workplan, assess readiness and monitor implementation and post implementation of the exercises	prepare concept notes, proposals and workplan, assess readiness and monitor implementation and post implementation of the exercises	90-95% of children vaccinated in the PIRI, AVW and or any locally arranged 'catch-up' campaign	implementations are supported and monitored	
Ethiopia	Measure	Subnational	Vaccine-Specific Support	Improved service delivery	Conduct MOV assessment in selected zones to determine the magnitude and reasons of MOV so that to guide policy changes and design MOV interventions for improving EPI coverage and reducing inequities	WHO		conduct MOV assessment in the selected zones to determine factors contributing to the missed children and community	Develop concept notes and proposals and share with FMoH for endorsement	conduct the survey, data collection and cleaning and analysis and develop a draft report		Assessment on MOV is conducted in the priority regions. COncept notes developed and survey conducted	
Ethiopia	Monitor	National	LMC	Improved program management & data for action	Organize consultative workshop and write up meetings to discuss on and revise the current EPI policy, implementation guide and cMYP development and write up meetings	WHO		Organize a consultative workshop to finalize the EPI policy, cMYP documents	EPI policy and cMYP completed and endorsed by NITAG and ICC		Improvement in quality of Immunization service provision: EPI Policy, implementing guideline and cMYP	Technical document completed and endorsed	$903,882.50
Ethiopia	Monitor	National	LMC	Improved program management & data for action	Technical Support NITAG/ICCC and EPI coordination mechanisms (TWGs) by meetings by preparing agendas, documents and prepare presentations and record recommendation: Support the training and field visits whenever possible	WHO		100% of NITAG meetings held and 100% of NITAG recommendations implemented	100% of NITAG meetings held and 100% of NITAG recommendations implemented	100% of NITAG meetings held and 100% of NITAG recommendations implemented			
Ethiopia	Monitor	National & Subnational	Vaccine-Specific Support	Improved effective vaccine quality assurance and system for adverse effect following immunization surveillance by the Ethiopian	Support biannual meeting of national AEFI committees and national stakeholders (EPI, NRA and partners).Provide Technical and financial support to Investigation of serious AEFI cases in the field	WHO		AEFI platform implemented	AEFI causality assessments conducted	AEFI causality assessments conducted		AEFI reporting is increased to improve vaccine safety in the country	
Ethiopia	Monitor	National & Subnational	Data	Improved program management & data for action	Conduct data triangulation workshop to estimate national and subnational immunization coverage estimates using global data triangulation guideline(s)	WHO		Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)	Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)	Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)		DIP developed and implemented	
Ethiopia	Monitor	National & Subnational	Data	Improved program management & data for action	Conduct joint quarterly visits to regions to evaluate data validation and data triangulation systems focusing in the four big region	WHO		In-depth assessment of data quality (DQR, DQA, audit) performed	Data Improvement Plan (DIP) developed	Data Improvement Plan (DIP) implemented			
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Training on RDQA/DQS methodology for national and regional experts (30-40)	WHO		Data Improvement Plan (DIP) developed	Data Improvement Plan (DIP) implemented	In-depth assessment of data quality (DQR, DQA, audit) performed			
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Training on RDQA/DQS methodology for national and regional experts (30-40)	WHO		Data Improvement Plan (DIP) developed	Data Improvement Plan (DIP) implemented	In-depth assessment of data quality (DQR, DQA, audit) performed			
Ethiopia	Measure	National & Subnational	Supply Chain	Improved supply chain & vaccine delivery	"CCE inventory data regularly updated and rehabilitation plan developed/implemented for 85% of the national & subnational (EPSA centre & hubs) and 80% districts at 14 Unicef supported zones in three regions, quarterly. (Comment: Can make it clear and the CCEI is done recently by MoH and what is the importance of it)[Response:1. Review CCEOP-ODP implementation /follow up the installation /commissioning and update the CCEI 2. Rehabilitation – follow up new CCE deployment and maintenance of the existing equipment progress] "	UNICEF		CCE inventory performed/updated	CCE inventory performed/updated	CCE inventory performed/updated		80% of vaccine storage points at central, EPSA hubs and in the 14 zones with optimal cold chain maintained.	
Ethiopia	Measure	National & Subnational	Supply Chain	Improved supply chain & vaccine delivery	Conducted EVMA self-assessment in 85% of EPSA centre and hubs and 80% of districts at the 14 UNICEF supported zones, EVM Improvement plan developed; and attain EVM indicator for temperature (E2) at least 80% in 85% of the targets once in a year.	UNICEF		EVMA performed	EVMA performed	EVMA performed		EVMA self-assessment conducted, cIP developed and implemented	
Ethiopia	Reach	National & Subnational	Supply Chain	Improved supply chain & vaccine delivery	Triangulatation conducted on vaccine stock and performance, administrataive data validated and feedback provided quarterly in 80% of woredas in 14 UNICEF supported zones in Amhara, Oromia and SNNP Regions.	UNICEF		Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)	Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)	Data improvement field activity implemented (review, validation, monitoring, harmonisation, mentorship, workshop, others)		Administration report validated and feedback provided	
Ethiopia	Monitor	National & Subnational	Supply Chain	Improved supply chain & vaccine delivery	Monitor stock data and provide feedback for 85% of districts in the 14 UNICEF supported zones who are using mBrana quarterly. (Comment: is that supervision or feedback)- [Respon. mBrana data accessed remotely, analyzed and feedback provided to assessed districts. Supervision and workshop will be conducted in person to reinforce mBrana utilization.]	UNICEF		Remote data collection platform implemented	Remote data collection platform implemented	Remote data collection platform implemented		mMbrana utilization improved at 80% of targets	
Ethiopia	Reach	Subnational	Service Delivery	Improved service delivery	Identification , mapping, and targeting through REC micro-plan preparation to reach missed/underserved communities in six zones with high number of zero dose children	UNICEF		Equity or Accessibility assessment performed	Data desk review or triangulation analysis performed (coverage, validation, monitoring, harmonisation, mentorship, workshop, others)	Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)		missed community reached, zero dose and dropout rate reduced	
Ethiopia	Monitor	Subnational	Service Delivery	Improved service delivery	Immunization service avilability monitored biannually by type of HFs in 14 Zones and at least one advocacy meeting conducted per zone for service expantion	UNICEF		Master facility list platform implemented	Data Improvement Plan (DIP) implemented	Routine immunisation coverage survey (national /targeted - various methods) implemented		Immunization service expanded to HFs which were not rendering befofre to increase access	
Ethiopia	Measure	Subnational	Service Delivery	Improved program management & data for action	Coverage survey conducted in at least 70 villages far from health facilities and risk communities in 14 zones to generate evidence on zero dose and under vaccination	UNICEF		Routine immunisation coverage survey (national /targeted - various methods) implemented	Data desk review or triangulation analysis performed (coverage, surveillance, operational, others)	Routine immunisation coverage survey (national /targeted - various methods) implemented		Rapid convinance survey result that indicate level of coverage, zero dose and drop out in targeted areas	$953,220.80
Ethiopia	Monitor	National	LMC	Improved program management & data for action	EPI performance review and/or MSD supported and progress documented	UNICEF		In-depth assessement of data quality (DQR, DQA, audit) performed	Equity or Accessibility assessment performed	M&E plan developed			

Country	Strategy	Level	Theme	Output	Activity	Partner	Milestone Q1	Milestone Q2	Milestone Q3	Contribution	Budget
Ethiopia	Reach	National & Subnational	Demand	Improved service demand for vaccine	Capacity building of EPI/health promotion officers from prioritized zones of Amhara, Oromia and SNNP on Human Centered Design Thinking approach for contextualized immunization demand generation	UNICEF	Plan to overcome vaccine demand-related barriers in high risk communities developed	Plan to overcome vaccine demand-related barriers in high risk communities developed	Plan to overcome vaccine demand-related barriers in high risk communities developed	Contributes to strengthen capacity of frontline health workers in prioritized zone on knowledge, skills and capacity on application of Human Centered Design Thinking approach on addressing local barriers on immunization service uptake	
Ethiopia	Reach	Subnational	Demand	Improved service demand for vaccine	Prototyping of demand generation intervention by using human centered design thinking approach in peri-urban communities of Oromia which has highest number of zero-dosed children	UNICEF	Plan to overcome vaccine demand-related barriers in high risk communities developed		C4I strategy developed	Contributes to increase in uptake of routine immunization by the caregivers in peri-urban communities through contextualized interventions to address local bottlenecks with participation and leadership of the community	
Ethiopia	Reach	National	Demand	Improved service demand for vaccine	Support EPI on development of crisis/risk communication plan of action on routine immunization and new vaccine introduction such as nOPV2 (Comment: I thought this was planned by Covax/Gavi TCA so what makes it different	Reply: This will be for routine immunizatio nand nOPV2.	UNICEF		Risk communication plan developed		Contributes to the preparedness and response on social listening, rumors control, misinformation, disinformation and AFEI related crisis/risk communication plan with clear process for the immunization program	
Ethiopia	Reach	National & Subnational	Demand	Improved service demand for vaccine	Support EPI on developing evidence-based demand generation plan of actions on routine immunization in reaching zero-dosed and under-immunized children	UNICEF			C4I strategy developed	Contributes to the immunization road map 2030 on reaching zero-dosed and under-immunized children with national and subnational plan of action to create demand on immunization services	
Ethiopia	Monitor	National & Subnational	Demand	Improved service demand for vaccine	Monitoring on the implementation of community engagement activities in prioritized zones of Amhara, SNNP and Oromia especially on the participation of women, in the planning and monitoring of immunization sessions in the framework of the RED/REC	UNICEF		Implementation of C4I activities at the community level in the prioritized zones are monitored.	Implementation of C4I activities at the community level in the prioritized zones are monitored.	Improve monitoring and supportive supervision in the communities with high number of zero-dosed and under-immunized children	
Ethiopia	Reach	Subnational	Vaccine-Specific Support	Improved program management & data for action	"Continued technical assistance in support of increasing MCV2 uptake in Ethiopia in Oromia Region, including a) programmatic support for strategies to increase uptake; b) support for increasing the quality of recording/reporting of vaccines doses delivered in 2YL; c) assessing strategies for improving defaulter tracing and, use of MCV2 as an opportunity for catch-up of children who missed their measles vaccination during the first year of life; d) communications messaging to increase awareness and demand for MCV2; e) capacity building for data quality assurance, analysis and triangulation of MCV1 & MCV2 data, measles surveillance data and	CDC Foundation	Carry out a dissemination workshop on the barriers to MCV2 uptake in Oromia Region (across 18 woredas); supportive supervision in priority Zones focusing on MCV2; systematically assess the defaulter tracing mechanisms in the Region broadly	Demand creation for MCV2 and RI; data triangulation for programatic use around MCV2 and RI; recommendations for reporting/recording quality improvements	Recommend new/modified standardized defaulter tracing strategies to implement for decreasing the occurrence of drop outs (both drop out from DTP1 to DTP3 and MCV1 to MCV2 will be examined), and measles catch-up in Oromia Region.	"OI-C 2.1 Drop-out rate between Penta1 and Penta3; OI-C 2.4 Drop-out rate between MCV1 and MCV2; IR-C" Program improvement for the uptake for MCV2 and other routine immunizations in Oromia Region, increased MCV2 coverage, supportive supervision on MCV2 across priority Zones, carry out a dissemination workshop on the barriers to MCV2 uptake in Oromia Region, make recommended changes to MCV2 recording/reporting tools, suggest new/modified defaulter tracing strategies for decreasing the occurrence of drop outs generally, and measles catch–	$404,320.00
Ethiopia	Measure	Subnational	Vaccine-Specific Support	Improved service delivery	Continue the implementation period, and carry out the endline survey for a study to examine the impact of the use of a 5 dose measles vaccine vial on measles coverage. CDC has been working with Ethiopia MoH, JSI, WHO, UNICEF, EPHI and RHBs to implement a randomized control study to document and measure the impact of reducing the measles vaccine vial size from a 10-dose vial to a 5-dose vial. The baseline is complete, and the study started implementation mid-December 2020 and will continue for 1 year. We are implementing 3 arms in the study (5-dose vial and trainings, 10-dose vial and trainings, and control group) and will measure the impact on	CDC Foundation	6 months of the measles 5 dose RCT implemention completed in study sites (across 60 woredas). Interim report on progress at half way point of implementtaion.	10 months of the measles 5 dose RCT implemented in study sites (across 60 woredas). Finalize field protocol for the endline survey.	Completion of measles 5 dose RCT at 12 months implementation, endline survey complete, dissemination workshop undertaken	"IR-C 1.4.1 Number of surviving infants who received the first recommende d dose of measles" Results of the RCT to look at the impact of the use of a measles 5 dose vaccine vial on measles coverage available for decision making. A full 12 month implementation period will be completed and the endline survey completed (endline needed as the study outcomes are assessed by comparison of measles coverage before and after the RCT).	
Ethiopia	Monitor	National & Subnational	LMC	Improved program management & data for action	"1) Drive further improvements in EPI performance in Oromia, Afar and Addis Ababa 2) Launch the program across the Amhara region from March 2021 3) Strengthen oversight, accountability and coordination across different levels of the system, and amongst key teams 4) Strengthen capacity by developing EPI management best-practice case-studies, and by improving 'supportive' supervision to enhance capacity of front-line staff 5) Develop a framework to transfer selected program activities to Federal and RHB teams based on the achievement of several principles for sustainability	Expanded Partner (Acasus)	● Finalised plan for the scale-up in the Amhara region	"● Launch improved dashboard for senior managers in FMoH and RHBs ● Introduce new meeting tools, e.g. guidelines, dashboards, minutes, actions, to improve quality, enhance follow-up, and increase accountability ● Scale Cold Chain monitoring dashboard to other regions ● Launch traffic light routines, monthly performance reviews and data-pack reports in Amhara region ● Introduce quarterly stocktake reviews jointly attended by between FMoH, RHB leaders, and national	"● New and improved management tools, routines, and processes launched and sustained to enable performance increase in Amhara ● Launch of new meeting tools, e.g. guidelines, dashboards, minutes, actions, to improve quality, enhance follow-up, and increase accountability ● Development of new best practice case study materials ● Selected activities transferred over to the FMoH and RHBs, i.e. managing supervision follow-up, tracking of traffic lights, etc."	"● Consistently achieve 80%+ supervision performance across all program areas ● Develop a robust way to collect Health Post activity data through Health Centre supervisions ● Make continued increases in the number of fixed and outreach sessions held each month per health facility, and in the number of children vaccinated in them ● Improving the quality and targeting of micro-plans through new geo-spatial analyses ● Support EPSA to strengthen stock management and operations,	$319,025.00
Ethiopia	Reach	Subnational	Service Delivery	Improved service delivery	"Support RED micro-planning in 8 project woredas Afar and Somali regions - Support development of RED microplanning - Support monitoring of RED microplan utilization - Support revision of RED microplan"	Expanded Partner (PATH)			"1. 100% of project woredas oriented on RED approach, PIRI and RED microplan development processes 2. 100% of project woredas have develped RED micro-plan"	RED micro-plan developed and utilized in 8 project woredas	
Ethiopia	Reach	Subnational	Human Resources for Health	Improved HR for immunization	Facilitate Integrated refresher training (IRT) for 80 HEWs and HP nurses in 8 project woredas (4 in Afar & 4 in Somali regions)	Expanded Partner (PATH)			Training conducted	80 HEWs and HP nurses trainied	
Ethiopia	Identify	Subnational	Demand	Improved service demand for vaccine	"Support the implementation of PIRI in 8 project woredas of Afar and Somali regions - Identify and register zero-dose children and pregnant women - Support PIRI implementation to vaccinate identified targets - Support monitoring of PIRI implementation status"	Expanded Partner (PATH)			"1. 90% of zero-dose children and pregnant women during the registration period registered 2. 80% of identified targets vaccinated through PIRI 3. PIRI implementation status monitored in all project woredas"	80% of zero-dose children and pregnant women vaccinated in 8 project woredas	
Ethiopia	Identify	Subnational	Demand	Improved service demand for vaccine	"Conduct program specific SS & on Job Training(OJT) on EPI program in 8 project woredas of Afar and Somali regions - Conduct supportive supervision using checklist - Provide onsite and written feedback"	Expanded Partner (PATH)			"1. Supportive supervision conducted using checklist in all project woredas 2. Onsite and written feedback provided to all project woredas"	Performance reviewed, challenges/gaps identified, feedback provided and corrective action taken based on provided feedback	
Ethiopia	Monitor	National	LMC	Improved service demand for vaccine	Provide capacity building support for lower level government and social structures (kebele leaders, health development army, social mobilization committee, religious leader, caln leader) on how to identify and link zero-dose children and missed communities to immunization services	Expanded Partner (PATH)		Capacity building support provided to lower level government and social structures in 4 woredas of Afar and 4 woredas of Somali regions	Lower level government and social structures engaged in identifying and linking zero-dose children and missed community to immunization services	
Ethiopia	Monitor	Subnational	LMC	Improved service demand for vaccine	Provide TA to lower level government and social structures through supportive supervision & on Job Training (OJT) in 8 selected implementation woredas (4 in Afar & 4 in Somali regions)	Expanded Partner (PATH)			Supportive supervision & OJT conducted	One round SS & OJT condacted in each woredas	
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Assist in the planning, implementation and monitoring of national communication plan with participation in national CWG	Expanded Partner (PATH)		Participated in national communication working group	Participated in national communication working group	SBCC skill transferred	
Ethiopia	Measure	Subnational	Data	Improved program management & data for action	Assist in the planning, implementation and monitoring of regional communication plan with participation in regional CWG	Expanded Partner (PATH)		Participated in regional communication working group	Participated in regional communication working group	SBCC skill transferred	
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Support Afar and Somali RHBs and 8 project woredas EPI team to utilize DHIS2 for program monitoring and evidence based decision making	Expanded Partner (PATH)		1. Tworound TA provided for Afar and Somali RHBs and 8 project woredas through supportive supervision and on job training	EPI data analyzed and used to monitor EPI program at regional and project woreda level	
Ethiopia	Monitor	National	LMC	Improved program management & data for action	Conduct DQS in 8 project woredas of Afar and Somali regions	Expanded Partner (PATH)		DQS conducted in all project woredas	DQS conducted in all project woredas	DQS conducted in all project woredas at least bi-annually	
Ethiopia	Monitor	Subnational	LMC	Improved program management & data for action	Conduct regional data driven annual EPI program review in Afar and Somali regions	Expanded Partner (PATH)			Annual EPI program review meeting conducted in Afar and Somali regions	annual EPI program performance reviewed, priority set for the coming FY	
Ethiopia		National	LMC	Improved program management & data for action	Assist in the planning, implementation and monitoring of national data quality improvement plan, program quality with participation in national M and E WG	Expanded Partner (PATH)		Participated in national M&E technical working group	Participated in national M&E technical working group	Assisted evidence based decision making	$115,599.00
Ethiopia	Advocate	National & Subnational	Demand	Improved service demand for vaccine	Assist in the planning, implementation and monitoring of regional data quality improvement plan, program quality with participation in regional M and E WG	Expanded Partner (PATH)		Participated in regional M&E technical working group	Participated in regional M&E technical working group	Assisted evidence based decision making	
Ethiopia	Advocate	National & Subnational	Demand	Improved service demand for vaccine	Technical support for risk communication strategy cascade, message production and IEC materials development	Expanded Partner (PATH)		Risk communication plan cascaded, IEC materials developed	Translated crisis communication strategy and IEC materials	
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Provide TA to conduct post campaign review meetings.	Expanded Partner (PATH)		experiance shared among zones and performacne improvement observed	Post campaign review meetings conducted	
Ethiopia	Reach	Subnational	Service Delivery	Improved service delivery	Technically assist creation of MODEL Woreda in service perovision and Data quality	Expanded Partner (PATH)		Plan to overcome vaccine demand-related barriers in high risk communities developed	Onsite supportive supervision conducted	
Ethiopia	Reach	Subnational	Human Resources for Health	Improved HR for immunization	Conduct training on IIP for 60 health care workers	Expanded Partner (PATH)		trained health care workers	Trained health care workers	
Ethiopia	Advocate	Subnational	Demand	Improved service demand for vaccine	Provide support for sensitization workshops to strengthen social mobilization	Expanded Partner (PATH)		Increased demand in a low performing woredas	Conducted sensitization workshop	

Country	Approach	Level	Category	Sub-category	Activity	Partner	Sub-partners			Output	Output 2	Outcome	Cost
Ethiopia	Reach	National & Subnational	Service Delivery	Improved service delivery	Participation in national TWG, M&E task force and Training task force for 5th year HPV planning and preparation	Expanded Partner (PATH)					Participate on national and regional TWGs	Technical support provided	
Ethiopia	Monitor	National	Service Delivery	Improved service delivery	Provide support for FMOH for routine immunization supportive supervision	Expanded Partner (PATH)				Improved Monitoring and Evaluation		Logistical Support provided	
Ethiopia	Reach	National & Subnational	Service Delivery	Improved service delivery	Conduct on site support during HPV campaign and assist vertual orientation. Technical Assistance and Vehicle support for a HPV campaign by maintaining infection prevention and control principles.	Expanded Partner (PATH)				Improved HPV coverage		HPV campaign successfully executed	
Ethiopia	Reach	National & Subnational	Service Delivery		Provide technical assistance to implemention recommendations from HPV PIE	Expanded Partner (PATH)				Improved HPV coverage		PIE recommendation implemented	
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Assist routinizing HPV report through DHIS 2 by reporting in to routine HIS	Expanded Partner (PATH)				Assist regions to send HPV performance report through DHIS2		HPV reporting through DHIS 2 initiated	
Ethiopia	Reach	National & Subnational	Service Delivery	Improved service delivery	Participation in national TWG, M&E task force and Training task force for 4th year HPV planning and preparation	Expanded Partner (PATH)				Participate on national and regional TWGs		Technical input provided	
Ethiopia	Advocate	National & Subnational	Demand	Improved demand for vaccine	Participation in advocacy and coordination between national & regional levels in Afar and Somali	Expanded Partner (PATH)				Participation in advocacy and coordination between national & regional communication WGs and assisrt planning and implementation of SBCC work.		Technical support provided	
Ethiopia	Measure	National	Financial/General Management	Improved program management & data for action	Assist successful Gavi joint appraisal/MSD meetings by organizing One TA/MSD report finalization workshop	Expanded Partner (PATH)				MSD/JA report and one TA plan finalized finalized		MSD/ JA report and one TA plan timely submitted	
Ethiopia	Identify	Subnational	Service Delivery	Improved service delivery	Provide one day orientation for CVs/HAD leaders training of tracking and registring newborns and eligible chidren	Expanded Partner (CCRDA)	OWDA,PC, CRS				provaded to 2CVs/HAD leaders on how to register, track and refer	Reduced number of unvaccinated chidlern	
Ethiopia	Identify	Subnational	Service Delivery	Improved service delivery	Track and registr newborns and eligible chidren	Expanded Partner (CCRDA)	OWDA,PC, CRS				All newborns and eligible chlderes registered and refered to HFs Track and registre newborns and eligible chidren	Reduced number of unvaccinated chidlern	
Ethiopia	Identify	Subnational	Service Delivery	Improved service delivery	Identifay vaccination defaulter and refer for vaccination	Expanded Partner (CCRDA)	OWDA,PC, CRS				All defaulted children referred to the HFs	Reduced vaccination defaulter rate	
Ethiopia	Identify	Subnational	Service Delivery	Improved service delivery	Identify missed community in collaboration with local community leaders, kebele administration and health extension workers.	Expanded Partner (CCRDA)	OWDA,PC, CRS				Identified missed community in collaboration with local community leaders, kebele administration and health extension workers.	Improve immunization coverage and reduced number of missed communitis	
Ethiopia	Identify	Subnational	Service Delivery	Improved service delivery	Mapping of missed community though ODK	Expanded Partner (CCRDA)	OWDA,PC, CRS				Mapped of missed community though ODK	Improve immunization coverage and reduced number of missed communitis	
Ethiopia	Reach	Subnational	Service Delivery	Improved program management & data for action	Facilitate bottom up and doable RED/C micro planning at woreda level with the involvement of HEWs, Kebele administration and community representatives	Expanded Partner (CCRDA)	OWDA,PC, CRS			Bottom up RED/C micro plan developed at woreda levels		Improved planning and implemnntation capacity	
Ethiopia	Reach	Subnational	Service Delivery	Improved service delivery	Organize mobile and outreach vaccination sessions in the identified low performing kebeles/communities	Expanded Partner (CCRDA)	OWDA,PC, CRS			Unvaccinated and defaulted children vaccinated in each low performing kebeles and communities	Unvaccinated and defaulted children vaccinated in each low performing kebeles and communities	Improved vcaccination coverage	
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Condact monthly routine data follow up using simple DQAS tool at facility and community levels.	Expanded Partner (CCRDA)	OWDA,PC, CRS			Monthly data quality monitoring done in HFs	Monthly data quality monitoring done in HFs	Improved immunization data quality. Improved the quality of monthly immunization reported data.	
Ethiopia	Reach	Subnational	Data	Improved program management & data for action	Provide Data Quality Assessment (DQA) training for woreda health office experts, health workers and data validation team.	Expanded Partner (CCRDA)	OWDA,PC, CRS				HMIS, EPI focal and DVT traind on data quality assessments.	Improved data management and use of immunization rpoerted data	
Ethiopia	Monitor	Subnational	Data	Improved program management & data for action	Conduct routine data quality self-assessment twice a year	Expanded Partner (CCRDA)	OWDA,PC, CRS			Immunization data quality assessment done at HFs and woreda health office levels	Immunization data quality assessment done at HFs and woreda health office levels	Strengthened health facility staffs capacity in data management and reporting systems. Identification of data quality checks in the project implantation health facilities and one methods of ongoing project monitoring systems	
Ethiopia	Reach	Subnational	Service Delivery	Improved service delivery	Conduct community Conversation (CC) on immunization at village ('Got') level with the involvement of community leaders and Mothers/Caretakers on monthly bases in selected low coverage keels. The health extension workers facilitates the transmission and acquisition of CC skills, concepts, and tools, and improves the understanding of RI issues at the individual, community and organizational levels. The impacts should be evaluated on the improvement of unimmunized children.	Expanded Partner (CCRDA)	OWDA,PC, CRS			Community Conversation (CC) on immunization conducted at village ('Got') level	Community Conversation (CC) on immunization conducted at village ('Got') level	Improved knowledge of communities on immunization. Reduced unimmunized children and improve the immunization coverage in the low preforming kebele	$132,325.00
Ethiopia	Measure	Subnational	Service Delivery	Improved service delivery	Provide training for HEWs/HWs on community conversation facilitation. Quality of the training is guided by the community Conversation on Routine Immunization facilitation guide, developed by FMoH and CORE Group polio project Ethiopia.	Expanded Partner (CCRDA)	OWDA,PC, CRS				HEWs/HWs on community conversation facilitation trainind.	Improved CC facilitation capacity of HEWs	
Ethiopia	Advocate	Subnational	Demand	Improved service demand for vaccine	"Conduct one day immunization advocacy meeting at zonal level with political, clan and religious leaders. The impact will assess on smooth relationships and good linkage of other health sectors "	Expanded Partner (CCRDA)	OWDA,PC, CRS			Zonal level advocacy meeting conducted	Zonal level advocacy meeting conducted	Increased religious and polittical leaders cmmitment	
Ethiopia	Advocate	Subnational	Demand	Improved service demand for vaccine	Conduct one day follow up meeting with religion leaders drawn from region, zone, woredas and kebeles	Expanded Partner (CCRDA)	OWDA,PC, CRS			Follow up meeting condacted with religion leaders		Increased religious and polittical leaders cmmitment	
Ethiopia	Advocate	Subnational	Demand	Improved service demand for vaccine	Conduct three days training on religious mainstreaming to the religion leaders drawn from region, zone and woreda.	Expanded Partner (CCRDA)	OWDA,PC, CRS				Religios leadrs traned on immunization mainstreaming	Icreased engagement of religious leaders on community mobilization	
Ethiopia	Monitor	Subnational	Financial/General Management	Improved service delivery	Support woreda EPI taskforce to monitor and evaluate the EPI program	Expanded Partner (CCRDA)	OWDA,PC, CRS			Woreda EPI taskforce to monitored and evaluated the EPI program		Increased management and monitoring capacities woreda health offices	
Ethiopia	Monitor	Subnational	Service Delivery	Improved service delivery	Conduct joint supportive supervision to the health facility and community levels jointly with PIPs filed officers and respective woreda health offices.	Expanded Partner (CCRDA)	OWDA,PC, CRS			Joint supportive supervision condacted to the health facility and community levels	Joint supportive supervision condacted to the health facility and community levels	Improved immunization service delivery, data quality and health workers staff capacity by identifying possible challenge and solution.	
Ethiopia	Monitor	National & Subnational	Service Delivery	Improved service delivery	Conduct joint supportive supervision to the health facility and community levels jointly with CGPP secretariat, PIPs and respective woreda health offices with the adopted Integrated supervision checklists and WHO QI tools.	Expanded Partner (CCRDA)	OWDA,PC, CRS			Joint supportive supervision condacted to the health facility and community levels	Joint supportive supervision condacted to the health facility and community levels	Improved immunization service delivery, data quality and health workers staff capacity by identifying possible challenge and solution.	
Ethiopia	Monitor	Subnational	Service Delivery	Improved program management & data for action	Organize and support quarterly EPI review meetings at woreda level with the aim of identifying gaps and proposing local solution with the involvement of HEWs/HWs, woreda health offices, partners and members of woreda level EPI task force.	Expanded Partner (CCRDA)	OWDA,PC, CRS			Quarterly EPI review meetings condacted at woreda level		Improved quality of working and one methods of ongoing project monitoring systems and strengthening project staffs capacity.	
Ethiopia	Monitor	Subnational	Service Delivery	Improved service delivery	Organize annual review meeting with the project implementing partners	Expanded Partner (CCRDA)	OWDA,PC, CRS				Annual parther review meeting condacted at secritariat level	Improve partnership b/n project partners and government staffs from each implementing region, zone and wordas to implementation progress, experience shirring and understand common cosines on the project activity.	
Ethiopia	Reach	National & Subnational	Financial/General Management	Improved program management & data for action	Program support and adminstration costs	Expanded Partner (CCRDA)	OWDA,PC, CRS					Improve the smooth facilitation of the overall project activity	
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved service delivery	Objective 1: Build sustainable HPV Program in Ethiopia with equitable access to all Eligible girls.	Expanded Partner(CHAI)						Strengthened HPV Vaccination Program	$95,824.20
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved service delivery	Support regions to identify and capture out of school girls for HPV vaccination incollaboration with relevant stakeholdres	Expanded Partner (CHAI)				HPV Eligible girls at School and out of School are enumerated and mapped for Both HPV1 and HPV2 Vaccination	" HPV Eligible girls at School and out of School are enumerated and mapped for Both HPV1 and HPV2 Vaccination "	Target coverage for inschool and out of school girls achieved	
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved service delivery	Strengthen Linkage with Education and other adolescent Health Programs	Expanded Partner (CHAI)				Strengthened linkage with Adolescent Health programs and Education sector	Strengthened linkage with Adolescent Health programs and Education sector	Improved HPV Coverage by reducing missed opportunities for HPV Vaccination	
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved service delivery	Timely Collection and Compilation of reports at National and subnational level twice in a year and develop comprehensive technical report for each round/dose	Expanded Partner (CHAI)				Established stong data capturing mechanism, data analysis and data use for action	Established stong data capturing mechanism, data analysis and data use for action	Improve HPV Vaccination data quality and use for decision making	

Country	Approach	Level	Category	Sub-category	Activity	Partner	Col8	Milestone	Output	Result	Cost
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved program management & data for action	Support the regular monitoring, SS, and reviewing of HPV Implementationhe AND documentation of lessons learnt to be shared as best practices in the context of COVID-19 pandemic	Expanded Partner (CHAI)			Lessons and best practices captured during HPV Vaccination amid COVID_19 Pandemic	Lessons and best practices caprured, compiled and mitigation solutions implemented	
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved effective vaccine quality assurance and system for adverse effect following immunization surveillance by the Ethiopian	Support in the preparation, planning, coordination, implementation and post-implementation monitoring of MAC implementation if Global HPV Vaccine Supply allows the country for MAC implementation.	Expanded Partner (CHAI)			HPV MAC Supported	HPV MAC Implementation supported and Target coverage achieved	
Ethiopia		National & Subnational	Vaccine-Specific Support	Improved program management & data for action	Support the planning, coordination, preparation and implementation of Other NVIs in Ethiopia	Expanded Partner (CHAI)			Other NVI supported	"Other NVI supported and achieved succesfull introduction "	
Ethiopia					Objective 2: Ensure that Private Health Facilities deliver quality RI services and contribute to Quality and equitable access to all eligible children	Expanded Partner (CHAI)					$36,500.00
Ethiopia	Reach	National & Subnational	Service Delivery		Strengthen Public-Private Partnership in improving the quality of RI services in private Health Facilities in Addis Ababa City	Expanded Partner (CHAI)			Public Private Partnership strengthened between Addis Ababa RHB and Private HFs in delivering quality RI	Public Private Partnership strengthened between Addis Ababa RHB and Private HFs in delivering quality RI	Improve RI service delivery by Private HFs
Ethiopia	Reach	Subnational	Service Delivery		Identify bottlenecks and gaps in RI service delivery by private health facilities and based on the need assessment provide mitigating annual plan to improve the quality of the service being provided.	Expanded Partner (CHAI)			RI service barriers identified and mitigated	RI service barriers identified and mitigated	RI service barriers mitigated and contributed to improve RI coverage
Ethiopia	Reach	Subnational	Service Delivery		Regular Technical support as continueous monitoring, Capacity building and SS to Addis Ababa regional Health Bureau in strengthening optimizing, monitoring and capacity building activities to private routine immunisation delivering health facilities	Expanded Partner (CHAI)			TA provided	TA provided	Improve RI service coverage by Private HFs
Ethiopia	Reach	Subnational	Service Delivery		Support coordination of optimisation of the necessary service delivery components in private health facilities (such as make sure they are using optimal cold chain equipment, temperature monitoring devices, injection safety measures, proper recording and reporting system, effective vaccine management etc.).	Expanded Partner (CHAI)			Optimal CCE utilized to store vaccines by PHFs	Optimal CCE utilized to store vaccines by PHFs	# of PHF utilizing Optimal CCE increased
Ethiopia	Reach	Subnational	Service Delivery		Experience sharing with government health facilities with long time experience of RI service delivery will also be conducted.	Expanded Partner (CHAI)			Experience sharing activities conducted	Experience sharing activities conducted	about 50 PHFs EPI focal persons observe best performing HFs
Ethiopia	Reach	Subnational	Service Delivery		Strenghten the routine DHIS_2 RI data reporting mechanism	Expanded Partner (CHAI)			DHIS 2 reporting institutionalized	DHIS 2 reporting institutionalized	Data quality and reporting system improved
Ethiopia	Reach	Subnational	Service Delivery		Establish public private joint commitee to strenthen partnership for PHF RI service sustainability	Expanded Partner (CHAI)			PPP institutionalized and sustained	PPP institutionalized and sustained	sustainability of RI services by PHFs ensured
Ethiopia		Subnational	Vaccine-Specific Support		Share the Addis Ababa experiences and lessons to MOH for Subnational Scale up of the Public Private partnership in RI service delivery.	Expanded Partner (CHAI)			Addis Adada PHFs RI improvement scaled up to selected regions	Addis Adada PHFs RI improvement scaled up to selected regions	Public private partnership for RI services by PHF scaled up to more big cities in the country
Ethiopia	Reach	National	Service Delivery	Improved service delivery	Develop a national strategy for MOH to identify and reach zero-dose children across various contexts in Ethiopia (urban, rural remote, pastoralist, and IDP populations)	Expanded Partner (JSI)			Final strategy document shared with FMOH		National strategy document for identifying and reaching zero-dose children
Ethiopia	Reach	National	Service Delivery	Improved service delivery	Conduct national workshop to disseminate catch-up vaccination guidelines to RHBs	Expanded Partner (JSI)			One national workshop conducted and catch-up guidelines disseminated to all RHBs		Catch-up vaccination policy/guidelines developed and shared
Ethiopia	Reach	National	Service Delivery	Improved service delivery	Conduct two 2YL coordinating workshops with input from partners: 1) prioritization workshop for RMNCH staff at national level to identify priority steps to develop an actionable 2YL policy/guidelines, and 2) dissemination workshop to share outputs from 2YL guideline development	Expanded Partner (JSI)	Prioritization workshop conducted	Dissemination workshop conducted			2YL guidelines developed and shared
Ethiopia	Reach	National	Vaccine-Specific Support	Improved HR for immunization	Conduct pre-testing of revised MCV2 job aid, print job aid, and develop and share distribution plan template for RHBs to support job aid distribution	Expanded Partner (JSI)			Printed job aids and distribution plan template shared to all RHBs		MCV2 job aid developed in multiple languages, printed, and shared along with distribution planning template	$131,005.00
Ethiopia	Reach	Subnational	Human Resources for Health	Improved program management & data for action	Provide Supportive Supervision (SS) to poor performing woredas in Afar and Somali regions on PIRI/MCV2 (Oct/Nov 2021)	Expanded Partner (JSI)			SS visits conducted to priority areas in Afar and Somali region		Feedback and coaching provided to poor performing health facilities on improved recording and reporting, microplanning, cold chain management, and community engagement; feedback from SS fed up to higher levels (e.g. regional) for further planning and follow-up
Ethiopia	Advocate	Subnational	Demand	Improved service demand for vaccine	Conduct regional advocacy and social mobilization meeting on PIRI and MCV2 at regional level	Expanded Partner (JSI)			Advocacy and social mobilization meeting with community leaders conducted in Afar and Somali regions		Community leaders informed and mobilized to play a role in increasing immunization uptake in their communities
Ethiopia	Identify	National & Subnational	Service Delivery	Improved service delivery	Develop and implement integrated refresher training on MCV2, PIRI and RED-Microplanning, focusing on woredas having high proportion of unimmunized (zero dose) children and families created recently (new woredas) and adapt training content for digital/social sharing	Expanded Partner (JSI)			Refresher trainings conducted in Afar and Somali regions; training content adapted for online/social sharing and disseminated		Poor performing woredas have knowledge and skills to develop and implement microplans
Ethiopia		National & Subnation;	LMC		Support to improve leadership, management and coordination of the immunisation programme	Acasus	"Presentations from National and Regional stocktakes (three regions) Description of results from light support to other regions Results and analysis from the second household survey Final report from the project "					$578,781.00
Ethiopia		National & Subnational	Data		Provide monthly data quality follow up in 8 woredas, 20 HCs and 110 HPs of Afar & Somali regions to monitor over reporting or under reporting by using simple DQAS tool at facility and community levels.	CCRDA	8 woredas, 10 HCs and 20 HP to be visited for the improved data management and utilization for decision making at health facility and woreda health office				Improved completeness, timeliness and VF of routine immunization reported data at HF and woreda level. Improved HMIS, EPI focal and data validation team technical capacity of data quality starting form health post up to woreda health office by using WHO DQS tools.
Ethiopia		National & Subnational	Data		Conduct Routine data quality self-assessment in 8 woredas and 32 HFs twice a year in collaboration with Afar and Somali Regional Bureaus.	CCRDA	Monitor and evaluate the states of EPI data completeness and timeliness and increase by 40% from the baseline. Monitor and evaluate the states of EPI data and increase by 50% from the baseline. Monitor and evaluate the availability of monthly report and increase to 100% from the baseline.				Routine reporting data quality improvement. Improved technical capacity of data quality starting at community
Ethiopia		National & Subnational	Demand		Conduct two days immunization advocacy meeting at zonal level with political, clan and religious leaders of Afar & Somali region.	CCRDA	Conducted immunization advocacy meeting in two zonal level of Afar & Somali region				Increase level of knowledge on immunization and VPDs to more than 10%. Improve smoothen implementation of the planned community based interventions.
Ethiopia		National & Subnational	Demand		Conduct community Conversation (CC) on immunization at village ('Got') level with the involvement of community leaders and Mothers/Caretakers on monthly bases in selected low coverage kebeles in 8 woredas of Afar & Somali region	CCRDA	Conducted 96 immunization community Conversation (CC) cession in selected low coverage kebeles of Afar & Somali region				Increased level of knowledge of mothers/care takers on immunization and VPDs by 80% from baseline
Ethiopia		National & Subnational	Financial/General Management		Support woreda EPI task force for local committee composed of Woreda Administration, Woreda Health Officer, Women and Children Affairs Officer, Religious and Clan Leaders, Immunization Partners and other relevant stake holders to monitor and evaluate the EPI program in 8 woredas of Afar and Somali region.	CCRDA	At least 15 meetings held as per work plan and recommendations followed				Improve the EPI program and propose local solution based on identified gaps.	$215,287.00
Ethiopia		National & Subnational	Financial/General Management		Technically support and facilitate bottom up and doable RED/C micro planning at woreda level with the involvement of HEWs and Kebele administration and community representatives in 8 woredas and 80 percent of Micro planned activities implementation of Afar and Somali region.	CCRDA	60 percent of Micro planned activities implemented				Improve standard bottom up micro plaining and utilization at lower levels. Design local sound strategies to reach these communities
Ethiopia		National & Subnational	Financial/General Management		Conduct joint supportive supervision to the health facility and community levels jointly with CGPP secretariat, PIPs and respective woreda health offices with the adopted Integrated supervision checklists and WHO QI tools.	CCRDA	Conducted joint supportive supervision and follow up				Improve data quality and immunization service delivery supervision feedback at health facility level to record major findings for further reference and action
Ethiopia		National & Subnational	Financial/General Management		Conduct joint supportive supervision to the health facility and community levels jointly with PIPs filed officers and respective woreda health offices with the adopted Integrated supervision checklists and WHO QI tools.	CCRDA	Conducted technical support on jobs and monitoring the states of Demand and data quality activity				Improve data quality and immunization service delivery supervision feedback at health facility level to record major findings for further reference and action
Ethiopia		National & Subnational	Demand		Conduct Review meeting on EPI religious mainstreaming at woreda levels of Afar and Somali regions.	CCRDA	Conduct review meetings with religious leaders				Increase the attitude of immunization on Muslim dominant community

Country	Level	Category		Activity	Partner	Result/Output			Outcome	Budget
Ethiopia	National & Subnational	Demand		Organize Mid and annual review meeting with the project implementing partners and government staffs from each implementing region, zone and wordas to implementation progress, experience sharing and understand common concerns on the project activity.	CCRDA	Organized Mid and annual review meeting			Improve partnership b/n project partners and government staffs from each implementing region, zone and wordas to implementation progress, experience sharing and understand common concerns on the project activity.	
Ethiopia		Vaccine-Specific Support		Develop detailed HPV Vaccine introduction plan/micro-plan with timelines and clear responsibilities	CHAI	Detailed HPV Micro plan developed and utilised for new HPV cohort administration				
Ethiopia		Vaccine-Specific Support		Facilitate partners and different technical working group meetings in preparation and timely distribution of training manuals, guidelines, job-aids, and communication tools on HPV	CHAI	Strengthened coordination contributed to timely HPV implementation as per plan				
Ethiopia		Vaccine-Specific Support		Conducted preliminary supportive supervision and report the findings to the FMOH on different preparatory activities of the HPV and other NVI introduction, including support to any necessary analysis of data	CHAI	Readiness assessment for HPV Implementation for new cohort implementation conducted, recommendations for mitigating any bottlenecks or challenges made				
Ethiopia		Vaccine-Specific Support		Support EPI taskforce and technical working groups (EPI Logistics, Communication and monitoring and evaluation) in planning adequate Cold Chain and Supply, developing appropriate communication materials and monitoring of the planned activities implementation	CHAI	All preparation, implementation and monitoring of the NVI/HPV activities implemented as per the chronogram developed				
Ethiopia		Vaccine-Specific Support		Organize sub-national microplanning –exercise and collect and compile MPs at the central level	CHAI	Subnational MP developed and utilised				
Ethiopia		Vaccine-Specific Support		Timely Collection and Compilation of reports at National and subnational level and develop comprehensive technical report	CHAI	HPV data captured, compiled and report narrated and shared				
Ethiopia		Vaccine-Specific Support		Support the FMOH to implement coordinated and cascaded post introduction monitoring activities such as supportive supervisions, review meetings, regular reporting of the HPV immunisation status	CHAI	HPV implementation quarterly monitored and reviewed, and actions taken				
Ethiopia		Vaccine-Specific Support		Support the national post introduction follow-up through the monitoring and evaluation system uptake assessment, bottleneck analysis and mitigation plan and etc., with particular attention to first 0-2 months post-launch and conduct PIE.	CHAI	Global PIE recommendations integrated into H2 2021 activities for subsequent cohorts"				
Ethiopia		Vaccine-Specific Support		Review and analyze monitoring and implementation data to identify challenges and take corrective actions	CHAI	Mitigations identified are implemented on a timely manner for H2 2021 vaccination cohort, with sustainability plans defined				$239,527.00
Ethiopia		Vaccine-Specific Support		Provide all rounded TA to other NVIs in pipeline	CHAI	Technical Support provided for MoH on NVI at all levels				
Ethiopia		Vaccine-Specific Support		Support the documentation of lessons learnt to be shared as best practices from the introduction of new vaccine	CHAI	NVI decision making best practices and Lessons learned identified and documented for subsequent reviews				
Ethiopia		Financial/General Management		Support Guideline development for engaging private facilities in EPI services	CHAI	Guideline developed and validated by MOH				
Ethiopia		Financial/General Management		Identify bottlenecks and gaps in RI service delivery by private health facilities and based on the need assessment provide mitigating annual plan to improve the quality of the service being provided.	CHAI	Identified bottlenecks and gaps in RI service delivery by private health facilities. Based on bottleneck assessment action plan developed and shared with MOH				
Ethiopia		Financial/General Management		Technical support to Addis Ababa regional Health Bureau in strengthening optimizing, monitoring and capacity building activities to private routine immunisation delivering health facilities	CHAI	Regular Support to AARHB provided				
Ethiopia		Financial/General Management		Support coordination of optimisation of the necessary service delivery components in private health facilities (such as make sure they are using optimal cold chain equipment, temperature monitoring devices, injection safety measures, proper recording and reporting system, effective vaccine management etc.).	CHAI	Recommendations shared and action plan developed with FMOH for optimizing RI service at private HFs				
Ethiopia		Financial/General Management		Support capacity building activities by providing the required training such as Vaccine management, IIP, MLM, preventive maintenance, including on job training.	CHAI	50 Private HFs EPI Focal/Vaccinators trained on standard IIP and EVMA training				
Ethiopia		Financial/General Management		Experience sharing with government health facilities with long time experience of RI service delivery will also be conducted.	CHAI	Experience sharing and sensitisation workshop conducted				
Ethiopia		Financial/General Management		Conduct continuous supportive supervision, monitoring and evaluation	CHAI	quarterly SS and Mentoring to selected Private HFs conducted				
Ethiopia		Financial/General Management		Support establishment of routine reporting system	CHAI	Any bottlenecks w/ novel routine RI data reporting system identified, and mitigation recommendations developed				
Ethiopia		Financial/General Management		Facilitate review meeting to evaluate the outcomes as per the plan and document the lesson learnt and share.	CHAI	Annual Review meeting conducted, challenges identified, and action plan developed				
Ethiopia		Financial/General Management		Provide a national level technical advisor to support MOH efforts in PIRI equity zones and developing regional states (DRS) with planning, implementation and monitoring of PIRI and MCV2, including strengthening links between MOH and DRS RHBs and developing guidance documents as needed.	JSI	Document on partners mapping by geography and specific areas of support. MOH develops or adapts a simplified tool/checklist used to monitor and follow up implementation as per PIRI protocol and MCV2 rollout.	MOH convenes partners to review progress to date on PIRI implementation, completion/timeliness of reporting, and other implementation issues. Coordination/support visits conducted to priority RHBs.		Prioritized zones and DRS have PIRI/MCV2 implementation plans, carry out those plans, and have documented improved performance.	
Ethiopia		Financial/General Management		Review of PIRI and MCV2 performance status and situation analysis in Afar and Somali regions	JSI	Afar and Somali RHBs have PIRI and MCV2 status reviewed and situation analysed and summarized into one report per region.			"Afar and Somali RHBs have the overall status and picture of PIRI and MCV2 performance "	
Ethiopia		Financial/General Management		Mapping of partners and harmonization of implementation plans for PIRI/MCV2 in Afar and Somali regions.	JSI	"Afar and Somali RHBs have mapped partners working on MCV2 and PIRI, and list partners by area of support and geography. Afar and Somali RHBs will organize a partners meeting and/or use existing coordination platforms to share situational analysis findings and develop a coordinated regional plan of action. "			Afar and Somali RHBs have a complete map of partner inputs and areas of operation related to PIRI/MCV2	$210,145.00
Ethiopia		Financial/General Management		Provide technical assistance to Afar and Somali RHBs in developing and monitoring a capacity building plan for woredas/PHCUs on PIRI/MCV2.	JSI	Afar and Somali RHBs develop a capacity building plan utilizing findings of status review in coordination with partners	Afar and Somali RHBs monitor capacity building plans and assess status using existing coordination and discussion mechanisms (e.g., technical working group meetings)		"Afar and Somali RHBs have a complete map of partner inputs and areas of operation related to PIRI/MCV2 Afar and Somali RHBs capacity to monitor and address gaps in qualified human resources for PIRI and MCV2 using standardized tools is improved "	
Ethiopia		Financial/General Management		Assist Afar and Somali RHBs in coordination and support regarding prep and follow-up of review meetings and provide technical assistance to select woredas conducting immunization (including PIRI/MCV2) review meetings.	JSI		Afar and Somali RHBs have a list of woredas with planned review meetings (incl PIRI/MCV2). Technical assistance provided to priority woredas for the preparation of PIRI/MCV2 related review meetings, including coaching/on-job support and guidance documents or templates as needed		"Afar and Somali RHBs can track and monitor the implementation of PIRI/MCV2 review meetings and special support is given to priority woredas for review meeting preparation "	
Ethiopia		Data		"Add new features to mBrana to comply with TSS "	John Snow Inc	All live sites have system with new features			Fully functional LMIS at all sites that also captures service data	$203,650.00
Ethiopia		Data		Deploy new system to 75 new sites	John Snow Inc	75 new sites with live data visibility, and ordering electronically			"Live last mile data available for decision making "	
Ethiopia		Service Delivery		"Support RED micro-planning in 8 project woredas Afar and Somali regions - Provide orientation on RED approach, PIRI strategy and RED microplan development processes - Support development of RED microplanning - Support monitoring of RED microplan utilization - Support revision of RED microplan "	PATH	"1. Implementation of monthly session plan monitored monthly 2. Plan versus achievement monitored on quarterly basis 2. 80% of the project woredas revised their RED microplan bi-annually "			RED micro-plan developed and utilized in 8 project woredas	
Ethiopia		Service Delivery		"Support the planning and implementation of PIRI in 8 project woredas of Afar and Somali regions - Identify and register unreached children under 2 years of age and pregnant women and register - Support PIRI implementation to vaccinate identified targets - Support monitoring of PIRI implementation status "	PATH	80% of unreached children and pregnant women vaccinated in 8 project woredas			80% of unreached children and pregnant women vaccinated in 8 project woredas	
Ethiopia		Service Delivery		"Conduct program specific SS & on Job Training(OJT) on EPI program in 8 project woredas of Afar and Somali regions - Develop comprhensive EPI checklist together with regional and woreda EPI team - Conduct supportive supervision using checklist - Provide onsite and written feedback "	PATH	"1. One round supportive supervision conducted to health facilities and woreda health offices using checklist in all project woredas 2. Onsite and written feedback provided to all project woredas "			Performance reviewed, challenges/gaps identified, feedback provided and corrective action taken based on provided feedback	

Country			Category		Activity	Partner		Output	Additional notes		Outcome	Budget
Ethiopia			Service Delivery		"Provide interpersonal communication (IPC) training for healthcare providers from 8 project woredas of Afar and Somali regions - Developed tailored training materials - Provided IPC training for vacciantors - Evaluated impact of the training "	PATH		"1. IPC training provided for 80 participants from 8 project woreds 2. IPC training impact evaluated in 4 project woredas (2 from each region)"			80 healthcare providers trained on IPC from 8 project woredas,	
Ethiopia			Service Delivery		"Organize orientation workshop on immunization for public relation officers and media professionals in Afar and Somali regions - Identify local media professionals and public relation officers - Prepare training materials - Provide orientation for identified participants"	PATH		1. Orientation workshop for public relation officers and media professionals provided in Afar and Somali regions			"1. 60 Public relation officers and media professionals oriented on EPI program, 2. 4 local media outlets covered EPI and related issues "	
Ethiopia			Service Delivery		Assist in the planning, implementation and monitoring of national communication plan with participation in national CWG	PATH		Participated in national communication working group			SBCC skill transferred	$410,184.04
Ethiopia			Service Delivery		Assist in the planning, implementation and monitoring of regional communication plan with participation in regional CWG	PATH		Participated in regional communication working group			SBCC skill transferred	
Ethiopia			Data		"Support Afar and Somali RHBs and 8 project woredas EPI team to utilize DHIS2 for program monitoring - Provide onsite mentoring for Afar and Somali RHB and 8 project woreda health office EPI team on DHIS2 features - Assist Afar and Somali RHB and 8 project woreda health office EPI team to design EPI specific dashboards - Assit Afar and Somali RHB and 8 project woreda health office EPI team to monitor EPI using DHIS2 "	PATH		"1. One round onsite mentoring provided for Afar and Somali RHBs and 8 project woreda health offices 2. Afar and Somali RHBs and 8 project woreda health office EPI team assisted in designing EPI specific dashboard 3. Afar and Somali RHB and 8 project woreda health office EPI team have started monitoring EPI using DHIS2 "			EPI data analyzed and used to monitor EPI	
Ethiopia			Data		Conduct DQS in 8 project woredas of Afar and Somali regions	PATH		DQS conducted in all project woredas			DQS conducted in all project woredas at least bi-annually	
Ethiopia			Data		Conduct regional data driven annual EPI program review in Afar and Somali regions	PATH		Annual EPI program review meeting conducted in Afar and Somali regions			annual EPI program performance reviewed, priority set for the coming FY	
Ethiopia			Data		Assist in the planning, implementation and monitoring of national data quality improvement plan, program quality with participation in national M and E WG	PATH		Participated in national M&E technical working group			Assisted evidence based decision making	
Ethiopia			Data		Assist in the planning, implementation and monitoring of regional data quality improvement plan, program quality with participation in regional M and E WG	PATH		Participated in regional M&E technical working group			Assisted evidence based decision making	
Ethiopia			Demand		Organize higher level regional advocacy on immunization for Afar and Somali regions	PATH		Regional level advocacy organized in Afar and Somali regions			Higher level advocacy conducted	
Ethiopia			Demand		Support 2021 AVW planning and implementation	PATH		supported the planning and organization of 2021 AVW			2021 AVW planned and organized	
Ethiopia			Data		Support activities enhancing data analysis and use	UNI OF OSLO		"5. EPI Legacy data migrated (if fully transitioned) 8. Scorecard app installed "	"Core team trained on planned digital data package or app and know how to use it Costed scale up plan exist"		Various digital packages and apps supporting data analysis implemented	$50,726.00
Ethiopia			Data		Support planning, configuration and management of COVID-19 surveillance	UNI OF OSLO		Covid-19 digital package installed	"Core team trained on COVID-19 digital data package and know how to use it. "		Covid-19 digital package installed	