

Country	IRMA 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 which this activity is linked	Expected Outcome	TOTAL
Nepal	Monitor	National	Supply Chain	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	Technical assistance to develop and support the implementation and monitoring of National Immunization Supply and Cold Chain Road map. Capacity building of Central Cold Room Cold Chain Key Persons and pool of cold chain training facilitators as well as development of simplified job aids for cold chain and effective vaccine management improvement plan implementation (Central, Karami, Sudurpaschim, Province 2 and Province 4)	UNICEF	PPP for HR management of CCL contractors		[Y/N] Strategic planning documentation (EVM/MP, CIP, cold chain rehabilitation plan) supported and submitted to MoH, incorporating VIM, sustainability and zero-dose considerations (as applicable)	% of target sites achieving readiness to receive cold chain (e.g. equipment on site, ready and w/ trained staff)		Developed/updated strategies, tools and guidance on Cold Chain Logistics (CCL) policies, procedures, systems, and activities according to National COVID-19 Vaccine Introduction and Deployment Plan as well as CCEOP year 2. Partners are supported on warehouse and logistics management and technical assistance delivered to national facilities to plan EVM/MP. Their needs and meet minimum standards in relation to equipment use in the CCL system, vaccine stock management to prevent stockouts and expiring and optimize vaccine usage/transport and temperature monitoring. National capacity is developed for DoH/EMD in charge of CCL on warehouse management and proper transactions registration. Partners are supported on warehouse and logistics management and activities	
Nepal	Reach	Subnational	Data	Health Systems Strengthening in 4 provinces for improved immunization coverage and equity	Technical Assistance to implementation of Use of Geospatial data and Technologies for EPI microplanning, monitoring of GIS project & Assessment	UNICEF				Master facility list platform implemented		Strengthening GIS-based EPI microplanning and monitoring and addressing effective intervention or special strategy for the zero-dose communities including peri-urban, slum, migratory population, geographically hard-to-reach as well as ethnic communities.	\$244,080.00
Nepal	Advocate	National & Subnational	Demand	Improve coverage and equity in priority areas	Implementation and monitoring of National Communication and Social Mobilization Strategy for Routine Immunization Nation-wide and at sub-national level	UNICEF			Plan to overcome vaccine demand-related barriers in high risk communities developed	NOQ/CSO mapping developed		Strengthening government-led multi-sector coordination for immunization demand generation, risk communication and community engagement; established Advocacy Communication and Social Mobilization Committee and improved capacity in managing crisis communication; established Behavioural and Social Data (BeSD) for Listening to people and communities on COVID-19 vaccination; a national vaccine misinformation management strategy is developed, that is integrated into the vaccine demand and communications plan	
Nepal			Data		Assessment of impact and effectiveness of rotavirus vaccine in Nepal	CDC Foundation		Complete first round of data cleaning	Complete second round of data cleaning	Preliminary summary of year's data		Data on vaccine effectiveness and impact will generate continued confidence in and support of routine vaccination program. Vaccine preventable disease cases are identified and reported to inform immunization program planning, implementation, monitoring, and risk mitigation.	\$62,960.00
Nepal	Reach	National & Subnational	Vaccine-Specific Support	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	1. Technical support for new vaccines introduction (TCV, HPV, PIE for IPV and RV) in National Immunization Program	WHO			1.1 Preparatory work for introduction of TCV completed (guidelines etc.)	1.2 TCV SIA completed / TCV introduced in routine immunization; 1.3 Application for HPV vaccine prepared.		Application submission, preparation, and implementation of new and underutilized vaccines both in routine immunization and supplementary immunization will be conducted effectively.	
Nepal	Advocate	National	Vaccine-Specific Support	Strengthening Routine Immunization Service Delivery and Quality of Services (nationalwide activity+4 province specific activities)	2. Technical support to national immunization committees (NICP, ICC and AEFI committee, etc) and VPDs surveillance committees (NCCPE, ERC, NVMCARE, etc)	WHO		2.1 Timely committee meetings will be held with technical support to make policy recommendations and monitoring on immunization, surveillance and vaccine safety	2.2 Timely committee meetings will be held with technical support to make policy recommendations and monitoring on immunization, surveillance and vaccine safety	2.23 Timely committee meetings will be held with technical support to make policy recommendations and monitoring on immunization, surveillance and vaccine safety		2.1 A Immunization and VPD surveillance committees will be strengthened to support National Immunization Program	
Nepal	Measure	National & Subnational	Data	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	3. Technical support to strengthen RI and surveillance data for risk assessment to drive high coverage and equity by triangulating data from HMIS, VPD surveillance, concurrent RI monitoring etc.	WHO		3.1 SMART label based tool developed and deployed for immunization monitoring	3.2 Data triangulation between surveillance and immunization data (HMIS and concurrent immunization monitoring) done systematically and palka level risk matrix updated and shared	3.3 HMIS and data management training completed for 2 provinces		3.1 Immunization and VPD data monitoring system at sub-national levels will be strengthened with data prioritization for action; 3.2 Recording and reporting of data, verification and validation of data with the use of HMIS and DHS tools will be strengthened; 3.3 Electronic tool developed for concurrent RI monitoring	
Nepal	Monitor	National & Subnational	Financial/General Management	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	4. Technical support for Joint supervision and monitoring of immunization program at province, district, health facility and immunization session levels to drive high coverage and equity	WHO			4.1 Monitoring and evaluation central core group formed and standardization of monitoring formats prepared and adapted as per program needs (e.g. including IPC practice monitoring at RI sessions)	4.2 Joint supervision and monitoring completed in at least 7 districts (1 district per province)		4.1 Monitoring and evaluation core group is formed to monitor immunization program at central level including members from CHD, MD (LMS, HMIS), WHO, UNICEF, and other stakeholders and community level visits at province, district, health facility, immunization session and community levels are conducted by Government and partners in structured/standardized way with data feeding to central level	
Nepal	Advocate	National & Subnational	Service Delivery	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	5. Strengthening new vaccine introduction and routine immunization at sub-national level	WHO		5.1 Concurrent monitoring data is generated every quarter at sub-national/sub-province level and shared at sub-national and national levels for actions.	5.2 Concurrent monitoring data is generated every quarter at sub-national/sub-province level and shared at sub-national and national levels for actions.	5.3 Concurrent monitoring data is generated every quarter at sub-national/sub-province level and shared at sub-national and national levels for actions.		5.1 New vaccines introduction and implementation and routine immunization is strengthened at sub-national level throughout the country in the context of federalization by generating concurrent monitoring data every month/quarter and coordinating sub-national/sub-province level activities for routine immunization and all aspects of new vaccine introduction.	\$290,797.23
Nepal	Measure	National	Service Delivery	Improve coverage and equity in priority areas	6. Strengthening/support National Immunization Program through independent monitoring to improve immunization coverage and equity	WHO		6.1 Independent monitoring started at sub-district level with data feeding to central core group and to sub-national level for action	6.2 Independent monitoring completed in at least 15 districts with data provided to central core group for action	6.3 Independent monitoring completed in further at least 15 districts with data provided to central core group for action		6.1 Immunization program will be monitored independently/external monitoring at health facility, immunization session and community level in high priority districts and Palkas and provide hands-on support and data for action to improve immunization coverage and equity. Independent monitoring data will be available to core group to guide action and strategies, accountability for improving immunization coverage and equity throughout the year.	
Nepal	Measure	National	Human Resources for Health	Surveillance & Immunization (SSA) - HR costs	7. HR (staff - SSA) Measles, VPD surveillance and RI support Officer	WHO		7.1 Progress towards measles elimination and rubella/CRS control are achieved timely and routine immunization is strengthened.	7.2 Progress towards measles elimination and rubella/CRS control are achieved timely and routine immunization is strengthened.	7.3 Progress towards measles elimination and rubella/CRS control are achieved timely and routine immunization is strengthened.		7.1 Routine immunization is strengthened and Progress towards measles elimination and rubella/CRS control is achieved and routine immunization is strengthened.	
Nepal	Measure	National	Human Resources for Health	Surveillance & Immunization (SSA) - HR costs	8. HR (staff SSA) for immunization program - Immunization Monitoring Officer	WHO		8.1 Activities supporting new vaccine introduction supported timely and with quality and serious AEFI cases fully investigated	8.2 Activities supporting new vaccine introduction supported timely and with quality and serious AEFI cases fully investigated	8.3 Activities supporting new vaccine introduction supported timely and with quality and serious AEFI cases fully investigated		8.1 Immunization program will be supported in areas of training, micro-planning, evaluation, monitoring and supervision, full immunization achievement to support NVI and serious AEFI cases investigated.	
Nepal	Measure	National	Human Resources for Health	Surveillance & Immunization (SSA) - HR costs	9. HR (staff -SSA) for immunization program - Immunization Program Assistant	WHO		9.1 New vaccine introduction, routine immunization, supplementary immunization, budgeting and financial implementation support is provided at central level and sustained in the context of federalization	9.2 New vaccine introduction, routine immunization, supplementary immunization, budgeting and financial implementation support is provided at central level and sustained in the context of federalization	9.3 New vaccine introduction, routine immunization, supplementary immunization, budgeting and financial implementation support is provided at central level and sustained in the context of federalization		9.1 New vaccine introduction, routine immunization, supplementary immunization, budgeting and financial implementation support is provided at central level and sustained in the context of federalization to support overall National Immunization Program.	
Nepal	Measure	National	Human Resources for Health	Surveillance & Immunization (SSA) - HR costs	10. HR (staff -SSA) for immunization program - Data assistant	WHO		10.1 Support in data management in immunization and surveillance is provided including achievement of all data related activities in TCA.	10.2 Support in data management in immunization and surveillance is provided including achievement of all data related activities in TCA.	10.2 Support in data management in immunization and surveillance is provided including achievement of all data related activities in TCA.		10.1 Overall data management is strengthened in immunization and surveillance including immunization supervision and monitoring and all TCA related data activities (HMIS training, joint supervision and monitoring, independent supervision and monitoring, measles/rubella/VPD surveillance, sentinel surveillance), as well as introduction of new technologies for data management.	
Nepal	Monitor	National & Subnational	Data	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	11. Technical support for rotavirus sentinel surveillance and preparation for post-vaccine introduction impact studies	WHO		12.1 All rotavirus sentinel surveillance sites including geographically representative expanded sites (total 3 clinical surveillance sites and one lab) fully conducting rotavirus sentinel surveillance.	12.2 Preparations for post-vaccine introduction surveillance and impact studies started			11.1 Pre-vaccine introduction surveillance will be strengthened including expansion of surveillance with full preparation for post-vaccine introduction surveillance and impact studies.	
Nepal	Monitor	National	Data	Maintain the EPI programme performance in the federated structure (mitigate risks to decline in coverage) by strengthening capacity and technical support	11. Support for Invasive Bacterial Diseases sentinel surveillance	WHO		11.1 Quality surveillance for iBD maintaining surveillance performance indicators continued to measure impact of PCV introduction	11.2 Quality surveillance for iBD maintaining surveillance performance indicators continued to measure impact of PCV introduction	11.3 Quality surveillance for iBD maintaining surveillance performance indicators continued to measure impact of PCV introduction		11.1 Impact of PCV introduction will be measured with data available from iBD sentinel surveillance	