

Country	Investment Areas (select from dropdown)	Objectives (select from dropdown)	Activities (describe the activity)	Key Results (mandatory for multi-year activities)	Primary Partner (directly contracted organization)	Implementing Partner (primary partner or subcontractor # any)	MULTI-YEAR TOTAL
Nigeria	5. Vaccine Preventable Disease Surveillance	5.2 Increase timely detection of and response to vaccine-preventable disease outbreaks	Continued support to NCDC in developing national surveillance and lab network for measles, rubella and yellow fever diagnostic testing to include: 1) Conduct of refresher training for lab staff to build their capacity on the testing for various vaccine preventable diseases to include measles, rubella, and yellow fever 2) Epidemiologist consultant to develop case investigation and classification and outbreak response for measles, meningitis, yellow fever and other vaccine preventable diseases. 3) laboratory/ epi data cleaning, harmonization, analysis, and management, 4) information strategy support for laboratory information management system 5) Outbreak investigation and root cause analysis for measles, rubella, yellow fever, and other vaccine preventable diseases	1) Adequately trained staff for testing of VPDs 2) Timely detection and response to VPD outbreaks 3) Linkage between data collected and detection of outbreaks before they become wide spread	CDC	CDC	\$ 525,314.40
Nigeria	5. Vaccine Preventable Disease Surveillance	5.1 Improve the availability and use of timely and accurate data for decisions on vaccine introduction and preventive campaign targeting	1) Provide epidemiological support and tools to ensure efficient data/specimen collection, management, and country-level analysis to accurately assess the burden of bacterial meningitis in the context of vaccine implementation and integration into broader health information systems; 2) integrate with other national disease priorities to ensure data triangulation between immunization and disease surveillance; 3) reinforce the country's capacity for epidemic detection and response. Efforts will be harmonized and coordinated with other regional/global activities and partners (i.e. MenAfriNet, WHO ICG Vaccine Stockpile), 4) technical support for preparation and participation in Annual Meeting of Meningitis Belt Countries	Strengthened collection, management, and analysis of bacterial meningitis surveillance data and timely dissemination of information with other countries in the region	CDC Foundation	CDC Foundation	
Nigeria	5. Vaccine Preventable Disease Surveillance	5.4 Use surveillance data to identify ways to improve immunisation programme effectiveness in preventing disease	1) Continue to support laboratory based surveillance for rapid/timely detection and characterization of bacterial meningitis pathogens at national and regional levels; 2) strengthen nation-wide lab network through reinforcing proper specimen management and lab testing flows; 3) implement effective measures to improve laboratory quality, personnel proficiency and data quality. 4) provide technical support for preparation and participation in scientific meetings	Laboratory-based meningitis surveillance and outbreak response	CDC Foundation	CDC Foundation	
Nigeria	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	In line with the NSIPSS 2.0, design tailored strategies to reach Zero dose children and missed communities	1. Operational plan to reach zero-dose children developed 2. M&E Framework to track the status of implementation of operational plan to reach zero dose, recommendations from EPI review and Multi-Stakeholder Dialogue (MSD) developed 3. Country's target met on percentage decrease of zero-dose children	CHAI	CHAI	\$ 925,397.40
Nigeria	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	* Provide technical assistance for continued visibility, analytics and learnings on immunization data with specific focus on zero-dose to guide decision making	1. Continuous analysis of zero-dose reduction trends in identified 100 priority LGAs 2. Data driven decision for improved immunization performance in priority LGAs	CHAI	CHAI	
Nigeria	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	Provide TA to the National government to equitably increase capacity and quality of vaccine storage across levels through data analytics and use.	1. Sufficient cold chain capacity and quality to meet current RI and future NVI needs across supply chain levels.	CHAI	CHAI	
Nigeria	3. Supply Chain	3.1 Improve design of immunisation supply chain system to improve efficiency and vaccine availability, especially in the last mile	Provide technical assistance to the NPHCDA through the NLWG on quarterly performance review linking this closely with agile data-driven supply planning drawing lessons from JSI's ongoing C-19 Collaborative Supply Planning	1. Inclusion of forecast figures into the National Budget 2. Forecast performance reviewed quarterly for supply planning	CHAI	CHAI	
Nigeria	3. Supply Chain	3.4 Strengthen Logistics Management Information Systems to assure real-time monitoring at all immunisation supply chain levels	Provide TA to the government to minimize vaccines wastage and optimize the use of program resources for efficiency	1. With proxies from the LMIS, vaccines wastage analysis across all subnational level routinised 2.Reduction in vaccines wastage through novel strategies for instituting MDVP 3. Strengthened immunization data review systems	CHAI	CHAI	
Nigeria	6. Health Financing	6.2 Support the budgeting and targeting of domestic resources for immunisation and/or primary healthcare based on equity considerations	Provide technical assistance to the Government to mobilise domestic resources for vaccine financing and ensure timely release of funds.	The Federal Government of Nigeria meets its financial commitment as laid out in the GAVI transition plan.	CHAI	CHAI	
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.2 Strengthen programme performance monitoring and management systems at all levels	Provide TA to the National Government through the VFATT to strengthen program performance through periodic monitoring and tracking of the AF 2.0 indicators and recommend cross-corrective actions as necessary	1. Country remains on track to achieve commitments as detailed in the AF 2.0 through data analytics and visibility	CHAI	CHAI	
Nigeria	3. Supply Chain	3.6 Strengthen waste management to reduce infection risk and/or environmental impact	- Monitor the implementation of wastage study findings - Strengthen vaccine management and accountability in ensuring reduction in wastages - Address and promote minimization of vaccines wastages - Strengthen Immunization data review systems and community intensification efforts and strategies to minimize vaccine wastages	Routinise Vaccines wastage analysis across all levels; nation and subnational	DR DIENG	Independent Consultant for NPSIA work/advisor to NPHCDA	\$ 153,247.50
Nigeria	5. Vaccine Preventable Disease Surveillance	5.3 Sustainably integrate vaccine-preventable disease surveillance, which meets immunisation programme needs, into a resilient national disease surveillance system	- Support the GoN to respond effectively and efficiently to any emerging vaccine preventable disease threat (this may include epi analyses and coordination of activities between GoN, partners and NGOs).	- Efficient and effective prevention of VPDs	DR DIENG	Independent Consultant for NPSIA work/advisor to NPHCDA	
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	- Support the implementation of Gavi's strategy of support to the Government of Nigeria (GON) for strengthening immunisation and primary health care. - Provide technical support to the FGON and State Governments through NPHCDA to assess the current needs in the primary health care system including immunisation and develop strategies to increase immunization coverage with special focus on reaching zero-dose children. -Assist NPHCDA with developing proposals for Gavi support and addressing issues raised by the IRC	Assess needs and develop strategies to increase immunization coverage in PHCs with special focus on reaching zero-dose children.	DR DIENG	Independent Consultant for NPSIA work/advisor to NPHCDA	

Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	<p>1. Provide technical documents to support NCI-TAG Committee functions for NCI etc</p> <p>2. Provide technical support to develop AEFI investigation reports to support NEC on AEFI'</p>	<p>1. Support the NCI-TAG with literature reviews</p> <p>2. Provide secretariat support to the NCI-TAG for meeting organization,</p>	<p>NCI-TAG supported to undertake literature review and evidence synthesis to inform their recommendations on new vaccine introduction and immunization program implementation strategies</p>	IVAC	Direct Consulting and Logistics	\$ 586,884.00
Nigeria	8. Health Financing	<p>1. Provide technical assistance for the development of the vaccine financing plan</p> <p>2. Provide technical assistance for the analysis of government and partner's performance against vaccine financing targets in the Accountability Framework</p>	<p>1. Work with government and partners, particularly WB to develop the vaccine financing plan in line with the NSIPPs 2.0</p> <p>2. Provide analytic support for the generation of performance results to assess against vaccine financing targets in the Accountability Framework</p>	<p>1. Vaccine financing plan and agreed with stakeholders on an annual basis developed</p> <p>2. Report on the performance of health finance indicators of the AF developed</p> <p>3. Progress report on strategic vaccine financing and discussed with stakeholders developed</p>	IVAC	Direct Consulting and Logistics	
Nigeria	4. Health Information Systems and Monitoring & Learning	<p>4.2 Improve data use-related capacity, tools, evidence generation and/or systems for programme monitoring and learning, especially at the subnational level</p>	<p>1. Provide support the design of indicators and the monitoring of RI performance in the prioritized zero dose LGAs across the country.</p> <p>2. Support the NERICC data team to conduct capacity building of state immunization officers in 6 states (one per geopolitical zone) on analytic skills to be used during monthly data validation meetings to prompt action by the LGA team. 3. Advocate to state commissioners of health in 6 states to establish centrally located dashboard for routine immunization data at state (pulling data from DHIS2) for immunization program performance management.</p> <p>4 Support the NERICC data team to develop and populate the monitoring dashboard to inform decision making and planning</p> <p>5. Support the planning and implementation of the quarterly immunization surveys.</p>	<p>1. Monthly progress report on the zero dose children in the 6 identified states conducted.</p> <p>2. Report on capacity building on data analytics for immunization officers &amp; state M&amp;E officers in 6 identified states. 3. High level advocacy to commissioners of health in 6 identified states for establishment of routine immunization dashboard.</p> <p>4. Quality NERICC data monitoring dashboard to inform decision making and planning developed</p> <p>5. Data Quality Improvement Plan (DQIP) implemented</p> <p>6. Geospatial mapping, documentation, validation of urban slum locations in the country completed</p> <p>7. Immunization surveys conducted</p>	IVAC	IVAC	
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	<p>To strengthen the coordinating structures at national and subnational levels, and ensure the monitoring and use of data for action</p>	<p>1. Provide technical support to strengthen planning and coordination at National and state Emergency Routine Immunization Coordination Center (NERICC &amp; SERICC).</p> <p>2. Support the development of annual workplan on routine immunization for NERICC and SERICC.</p> <p>3. Provide technical support in the planning and conduct of periodic reviews on immunization: country joint appraisal, multi-stakeholder dialogue etc.</p>	<p>1. Periodic review of immunization programs including JA, MSD conducted</p> <p>2. Implementation of recommendations from review meetings done</p> <p>3. Annual workplans developed</p>	IVAC	IVAC	
Nigeria	1. Service Delivery	<p>1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities</p>	<p>Because service delivery is a critical component of immunization services, we are engaging a TA on service delivery in addition to TA on ACSM to support NERICC to design and implement strategies to reach zero dose children in selected high priority states. IVAC will, through the TA, build the capacity (through on-the-job guidance and mentoring) of government staff at NERICC to provide the following support: 1. Technical support for developing key strategies to reach zero dose children in states and LGAs prioritized for zero dose burden and concentration. 2. Support the high-priority LGAs to use the zero-dose reduction operational plan (ZDROP) to prioritize zero-dose communities for focused attention.</p> <p>3. Monitor and track the implementation of zero dose reduction interventions in the states/LGAs with a high number of zero dose children using administrative coverage and survey findings.</p>	<p>1. ZDROP to reach zero-dose children developed</p> <p>2. Guideline on reaching zero dose children in high priority LGAs. 3. M&amp;E framework to track the status of implementation of operational plan to reach zero dose children.</p>	IVAC	IVAC	
Nigeria	4. Health Information Systems and Monitoring & Learning	<p>To document immunization knowledge generated from implementation activities and share learning with a broader national, regional and global audience through peer-reviewed publications</p>	<p>IVAC technical assistant will build the capacities of government focal points (through on the job mentoring) to conduct the following activities: 1. Support NERICC develop a learning agenda from the Gavi funded learning hub.</p> <p>2. Identify a writing team from NERICC to work on developing manuscripts from the learning agenda</p> <p>3. Provide mentorship and guidance to the NERICC writing team to develop their manuscripts</p> <p>4. Design and facilitate a writing workshop to guide the NERICC writing team on developing their manuscripts</p> <p>5. Provide feedback to manuscript drafts developed by the NERICC writing team</p> <p>6. Provide guidance to NERICC writing team on manuscript submission to selected journals</p>	<p>1. NERICC writing team established</p> <p>2. Learning agenda developed</p> <p>3. Learning products defined</p> <p>4. Manuscript topics identified</p> <p>5. NERICC writing team guided on writing for peer-review publication</p> <p>6. Documentation workshop conducted</p> <p>7. Draft manuscripts produced</p>	IVAC	Direct Consulting and Logistics	
Nigeria	1. Service Delivery	<p>* To review of current scorecard (especially to some standard PHC/RI-related indicators) * To monitor and access current implementation across all states * Identify states with low levels of implementation, create action plans with regular follow up * Assess impact of robust PHCUOR implementation on immunization (and other health) outcomes * Ensure donor/partners support is aligned with country plans with regular follow up to ensure support continues to be aligned</p>	<p>The TA on integration of immunization and PHC services will foster connection between PHC department and NERICC to identify opportunities for integration. The TA will provide technical guidance that will encourage synergy in planning, coordination and implementation by both departments. The TA will provide on the job mentoring of identified government focal persons at NERICC &amp; PHC department to carry out the following activities: 1. Provide technical support in the implementation of primary health care under one roof (PHCUOR) at national level and in 6 states (one state per geopolitical zone). 2. Technical support to strengthen existing indicators for scorecard for PHC/RI. 3. Support to monitor the status of implementation PHCUOR across 6 states. 4. Collaborate with other partners in the states develop routine immunization includes all planned activities for PHCUOR.</p>	<p>1. Implementation of PHCUOR in all states in Nigeria done 2. State development of an annual operational plan which includes all planned activities in states in collaboration with partners developed</p>	IVAC	IVAC	
Nigeria	1. Service Delivery	<p>1.8 Other service delivery objective</p>	<p>The TA service delivery, working with other partners, will provide technical support to NERICC in the roll-out and evaluation of Rotavirus and HPV vaccines into the country's routine immunization schedule by carrying out the following activities:</p> <p>1. Development of training materials for health workers' training on HPV vaccine roll-out.</p> <p>2. Support training, implementation, and monitoring of HPV and Rota vaccines at the state and LGA levels.</p> <p>3. Provide technical support in the design and conduct of post-introduction evaluation (PIE) following the introduction of Rotavirus and HPV vaccines</p>	<p>1. HPV introduction training materials developed. 2. Rota vaccine introduction training materials developed. 3. PIE report for HPV introduction produced. 4. PIE report for Rota vaccine introduction produced.</p>	IVAC	IVAC	

Nigeria	6. Demand Generation and Community Engagement	6.6 Other Demand Generation and Community Engagement objective	A consultant will be recruited and embedded in the ACSM working group. S/he will work closely and in coordination with other partners in the WG to ensure strong alignment on activities across partners to create synergies and avoid duplication. Specifically IVAC will provide technical support to implementation of the following activities: 1. Assess the adoption of HCD approach by the health facility service providers in 12 LGAs from six states, that were trained in 2021 on the use of HCD for microplanning and developing targeted strategies for service delivery for zero dose. 2. Identify lessons learnt from those HFs that have adopted the HCD approach in their planning, for possible scaling up to other states. 3. Support the development of step-by-step operational guidelines for facility-based providers in the use of HCD approach for planning demand-generation activities to increase vaccination uptake. 4. Provide TA to NERICC ACSM working group to support states develop implementation plans and strategies for behavior change communication to address zero dose	1. Report on assessment of HCD implementation in the 12 LGAs from six states. 2. Lessons learnt from HCD implementation in 12 LGAs from six states. 3. Operational guideline for facility-based providers in the use of HCD approach for planning demand generation activities.	IVAC	IVAC	
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	<ul style="list-style-type: none"> <li>- Advocate and co-ordinate government's efforts to strengthen primary health care systems</li> <li>- Design policy framework to legislate the increase in government spending in the health sector</li> <li>- Provide and oversee government's support to NPHCDA and FMOH's efforts to harmonize and integrate RI activities with other health campaigns at the PHC level</li> </ul>	<ul style="list-style-type: none"> <li>- Favourable policies that strengthen health care systems developed</li> <li>- Increased government spending on health programs/sector</li> <li>- Integration of RI activities with other health campaigns</li> </ul>	NGF	NGF	\$ 108,350.00
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.2 Strengthen programme performance monitoring and management systems at all levels	<ul style="list-style-type: none"> <li>- Proactively monitor the execution of activities and utilization of Gavi funds by the RI and SIA teams, for NPHCDA and partners and provide weekly reports to the Gavi SCM and NPHCDA leadership</li> <li>- Support NERICC and other teams (where necessary) in the development of appropriate workplans and budgets for Gavi-funded activities</li> <li>- Track utilization of Gavi funds for the intended purposes and flag any potential issues related to execution of Gavi funds to Gavi teams.</li> <li>- Strengthen cross-communication and collaboration among Gavi-funded organizations (WHO, UNICEF, US-CDC, etc)</li> <li>- Provide systematic support in optimization of planned activities to eliminate/minimize wastage of resources</li> <li>- Proactively flag any delays in implementation or release of funds and provide options to address the bottlenecks and improve the absorption of funds.</li> <li>- Support NERICC and the National Measles Technical Coordinating Committee (NMTCC) to report on execution of activities, Gavi grants and fund utilization and absorption to the Core Group, the Inter Agency Coordinating Committee (ICC) and the Gavi Secretariat.</li> </ul>	<ul style="list-style-type: none"> <li>- Provided strategic efforts that harmonised, integrated, and ensured complementarities across the multiple programmes and/or projects funded by Gavi and by other partners.</li> <li>- Implemented synergistic approaches that delivered maximum impact and value for money in the roll-out of health system strengthening plans in line with the accountability framework</li> </ul>	SYDANI	SYDANI	\$ 1,358,181.73
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	<ul style="list-style-type: none"> <li>- Provide critical technical support (as may be required) on all Gavi-funded interventions</li> <li>- Lead the development of state-specific plans for improving RI and PHC, in line with the NSIPSS as well as support states to develop Local Government Area (LGA)-specific plans to improve RI and PHC</li> <li>- Support the development and costing of annual/quarterly operational plans in line with the HSS proposal and NSIPSS</li> <li>- Monitor and track progress on the accountability framework</li> <li>- Provide support to the New Vaccines Strategic Task Team (NVSTT) in the development of requisite documents for new vaccines introductions</li> <li>- Support the Supplementary Immunization Activities (SIA) team in the development and submission of required documents for planned campaigns (Yellow fever, Measles, Meningitis A, Maternal and Neonatal Tetanus Eliminator)</li> <li>- Monthly reporting to Gavi and proactive reporting on specific issues and/or identified risks</li> </ul>	<ul style="list-style-type: none"> <li>- Annual quarterly state-specific plans for improving RI and PHC as well as operational plans in line with HSS proposal and NSIPSS developed and costed</li> <li>- Technical assistance provided to NPHCDA in line with guidance by GAVI SCM for harmonious execution of strategies agreed-upon</li> <li>- Timely submission of relevant data and documents from NPHCDA to Gavi as may be required</li> </ul>	SYDANI	SYDANI	
Nigeria	8. Health Financing	8.2 Support the budgeting and targeting of domestic resources for immunisation and/or primary healthcare based on equity considerations	<ul style="list-style-type: none"> <li>- Design crosspartnership strategy for harmonious implementation of 100% of recommendations in the improvement plan developed</li> <li>- Collaborate with partners on the development of operational workplan to ensure targets for AF indicators are met</li> <li>- Review of indicators on the AF by Sydani and partners</li> <li>- Development and monitoring of AF at the subnational levels</li> </ul>	<ul style="list-style-type: none"> <li>- Trained and mentored NPHCDA staff on vaccines and financial forecasting concluded</li> <li>- Annual review of 2021 vaccines and device forecast completed</li> <li>- Funds released for Q1 &amp; Q2 2022 vaccines</li> </ul>	SYDANI	SYDANI	
Nigeria	8. Health Financing	8.3 Improve the efficient use and tracking of domestic fund flows going to the frontline, including for reaching zero-dose children	<ul style="list-style-type: none"> <li>- Monitor implementation progress and improvement of financial management system, timely financial reporting, and implementation of the accountability framework at all levels.</li> <li>- Provide continuous support for the country's review of budgetary allocations to BHCPF and other PHC services such as immunization</li> <li>- Assess and address challenges linked to gender-related and other barriers</li> <li>- Provide TA to ensure the financial commitments as laid out in the Gavi transition plan are met and build a sustainability plan</li> </ul>	<ul style="list-style-type: none"> <li>- Budget compliance and consistency (e.g. need assessment for budget increase to Gavi's ceiling for provision of more support in the identification and addressing of gender-related and other barriers, based on outcome of assessments) improved</li> </ul>	SYDANI	SYDANI	

Nigeria	8. Health Financing	8.1 Support planning of Gavi and non-Gavi-supported vaccine procurement costs based on quality vaccine forecasts as part of national and subnational health budgets	<ul style="list-style-type: none"> <li>- Leverage PFM analysis by CHAI on identifying gaps in the analysis and developing solutions to the challenges raised</li> <li>- Costing of 2023 vaccine resource requirement following development of State-specific and national vaccines and devices forecast for 36 states</li> <li>- Development of 2023 – 2025 Vaccines Finance outlook strategies to address challenges in vaccine finance</li> <li>- Support targeted advocacy for adequate budgetary allocation for vaccines in the approved 2023 FGoN budget</li> <li>- Partner with CHAI to support key stakeholder and decision makers to oversee the release of funds for Q3 &amp; Q4 2022 &amp; Q1 &amp; Q2 2023 vaccines</li> <li>- Conduct of immunisation funding sensitization workshops for National Assembly, MOPB and MoF</li> </ul>	<ul style="list-style-type: none"> <li>- 100% implementation of operational plan activities for Q4 2022</li> <li>- Adequate budget allocation for vaccines approved by the FGoN</li> <li>- Funds for H2 2022 and H1 2023 released and utilized</li> <li>- Operational plan developed to ensure targets for AF indicators are met</li> <li>- State level AF developed and used to track</li> </ul>	SYDANI	SYDANI
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	<ul style="list-style-type: none"> <li>- Strengthen data analysis and analytics for poor performing states to ensure accurate and timely data aggregation, dissemination and use for action</li> <li>- Support the design and implementation of an approach to promote the integration and optimal functionality of health campaigns to strengthen RI at national and subnational levels</li> <li>- Facilitate use of partner presence in states to enhance and strengthen supportive supervision and tracking of progress</li> </ul>	<ul style="list-style-type: none"> <li>- PHC data aggregation, dissemination and analytics strengthened</li> <li>- Framework for integration of health programs to strengthen RI performance developed</li> <li>- RI performance increased and strengthened through health campaigns in various communities</li> </ul>	SYDANI	SYDANI
Nigeria	4. Health Information Systems and Monitoring & Learning	4.2 Improve data use-related capacity, tools, evidence generation and/or systems for programme monitoring and learning, especially at the subnational level	<ul style="list-style-type: none"> <li>- Strengthen functionality and integration of RI at the sub-national levels with existing immunization/PHC working groups</li> <li>- Develop a cross-partnership monitoring and evaluation strategies for reaching zero dose children</li> <li>- Support NPHCDA in the design and deployment of approaches to routinely triangulate surveillance data with immunization and other health coverage data, with an overall objective of strengthening data use for action at national and sub-national levels and reducing the number of zero-dose children</li> </ul>	<ul style="list-style-type: none"> <li>- Improved evidence based decision making through periodic triangulation of data on RI, surveillance and other program</li> </ul>	SYDANI	SYDANI
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	1.2 Integrate delivery of services to improve efficiency, regularity and/or reliability of planned immunisation activities with a focus on zero-dose and underimmunised children and missed communities	<ul style="list-style-type: none"> <li>- Identify and engage relevant stakeholders for RI and PHC across NPHCDA and NCDC</li> <li>- Standardize and harmonize approach for the EOCs as approved by the Core Group (and/or ICC)</li> </ul>	<ul style="list-style-type: none"> <li>- Stakeholders across NPHCDA and NCDC mapped and engaged for effective integration of RI with other health interventions</li> <li>- Monitoring framework utilized to ensure integration</li> <li>- Approach for the operationalization of approved EOCs standardized and harmonized</li> </ul>	SYDANI	SYDANI
Nigeria	6. Demand Generation and Community Engagement	6.4 Increase advocacy for social and political commitment as well as increased accountability for equitable immunisation at all levels	<ul style="list-style-type: none"> <li>- Facilitate stakeholder town hall meeting by the LGA team with traditional leaders, partners, religious and WDCs to identify communities with high number of zero dose children</li> <li>- Facilitate engagement forum by Sydani and other partners to bolster community ownership of demand generation</li> <li>- Leveraging Sydani's social listening insights to develop and execute strategic Information, Advocacy, Education and Social Mobilization in order to properly inform mothers and primary caregivers on the benefits of immunization in collaboration with other partners for holistic action</li> <li>- Address reasons for hesitancy and challenges in accessing health care by organising occasional PIRI in order for teams to reach inaccessible communities</li> <li>- Develop strategies to Incentivise RI officers, PHCs and LGAs on reduction of immunization dropouts</li> </ul>	<ul style="list-style-type: none"> <li>- Wholistic intervention by partners and stakeholders to improve community driven mechanism for identification of zero dose children developed and implemented</li> <li>- Community ownership established for demand generation of RI and other PHC services</li> <li>- ACSM conducted and PIRI campaigns executed</li> </ul>	SYDANI	SYDANI
Nigeria	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	<ul style="list-style-type: none"> <li>- Support cold chain expansion planning, state CCE optimization, equitable distribution, and functionality of CCE under CCEOP</li> <li>- Support capacity gap assessment for optimal and equitable distribution of CCE at all levels to address zero-dose children in non-vaccinating wards, support deployment, and installation</li> </ul>	<ul style="list-style-type: none"> <li>- CCE Optimized for timely installation of COVAX CCEs (Walk-In-Cold-Rooms) (WICRs)</li> <li>- CCE gap identified and filled to optimize CCE saturation level</li> <li>- CCE maintenance plan and/or post-COVID-19 reallocation plan for CCE procured for COVID-19 needs development and implemented</li> </ul>	SYDANI	SYDANI
Nigeria	1. Service Delivery	1.2 Integrate delivery of services to improve efficiency, regularity and/or reliability of planned immunisation activities with a focus on zero-dose and underimmunised children and missed communities	<ul style="list-style-type: none"> <li>- Develop harmonized operational plan to reach zero-dose children in collaboration with other partners</li> <li>- Develop monthly plan for the effective integration of RI with other PHC services</li> <li>- Develop M&amp;E Framework to track the status of implementation of operational plan to reach zero dose, recommendations from EPI review and Multi-Stakeholder Dialogue (MSD)</li> <li>- Support the development, implementation, and supervision of location-specific strategies to reach zero-dose children</li> </ul>	<ul style="list-style-type: none"> <li>- State specific strategy developed for reaching zero dose children</li> <li>- Proportion of targeted LGAs with at least 15% annual reduction in number of zero-dose children</li> <li>- Proportion of states that achieved projected coverage rates ( Penta1 &amp; 3, IPV2, MCV1 &amp; 2, ANC4, SBA)</li> <li>- Operational plan for integration of RI with other PHC services developed</li> <li>- Monthly plan developed for the integration of RI and other PHC services</li> <li>- M&amp;E Framework to track the status of implementation of operational plan to reach zero doses developed</li> </ul>	SYDANI	SYDANI

Nigeria	1. Service Delivery	1.3 Improve service quality and user experience of immunisation services, including bringing a strong gender lens	<ul style="list-style-type: none"> <li>- Support the NERICC and EPI team in the design, development and deployment of multi-sectoral interventions targeted at reaching zero dose children and missed communities, in collaboration with other partners</li> <li>- Conduct mapping of health sector stakeholders in Nigeria that are relevant in rolling out an integrated multisectoral approach for reaching zero dose and missed communities</li> <li>- Strengthen the functionality of PHC system for integration RI with other PHC services at the sub-national level through NERICC</li> </ul>	<ul style="list-style-type: none"> <li>- Multi-sectoral interventions developed towards reaching zero-dose children and missed communities</li> <li>- % of NERICC prioritized states with microplan to reduce zero-dose in hard to reach communities</li> <li>- Proportion of targeted LGAs with at least 15% annual reduction in number of zero-dose children</li> </ul>	SYDANI	SYDANI	
Nigeria	3. Supply Chain	3.6 Strengthen waste management to reduce infection risk and/or environmental impact	<ul style="list-style-type: none"> <li>(1) Provide TA for the conduct of nation wide immunization waste management assessment</li> <li>(2) Provide Technical support in the development of waste management plans at subnational levels</li> <li>(3) Support tracking functionality and maintenance of incinerators</li> </ul>	<ul style="list-style-type: none"> <li>-Nationwide Immunization waste Management data for action and planning</li> <li>-State specific waste Management plans developed</li> <li>-waste Management SOPs and guidance documents developed</li> <li>-Up to date incinerators inventory and functionality status</li> </ul>	UNICEF	UNICEF	\$ 1,649,456.20
Nigeria	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	<ul style="list-style-type: none"> <li>(1) Provide TA for the operationalization of the redesigned supply chain system including 3 hubs (HR requirement and capacities, workflows, automation etc)</li> <li>(2) Provide technical assistance in the implementation of last mile vaccine delivery strategies in targetted states/high zero dose burden</li> </ul>	<ul style="list-style-type: none"> <li>-Analyses and implementation plan for operationalization of 3-Hub completed (internal workflows,HR etc)</li> <li>-Improved vaccine availability and reduction of vaccine stock out</li> <li>- Reduction of zero dose burden related to vaccine supplies</li> </ul>	UNICEF	UNICEF	
Nigeria	3. Supply Chain	3.4 Strengthen Logistics Management Information Systems to assure real-time monitoring at all immunisation supply chain levels	<ul style="list-style-type: none"> <li>1) Provide technical assistance for strengthening ZLWGs/SLWG and facilitate the use of stock data (LMIS, DHIS2, TRVST, Thrive 360) triangulation for decision making</li> <li>2) Provide technical assistance in the implementation and socialization of open LMIS at subnational levels.</li> <li>3). Provide Technical Assistance in the national traceability initiative (TRVST) at subnational level</li> <li>4). Provide technical assistance to ensure systematic wastage analysis, tracking and implementation of mitigation strategies</li> </ul>	<ul style="list-style-type: none"> <li>-Functional and efficient Zonal logistic working groups tracking and mentoring SLWG performance.</li> <li>-attainment of 100% reporting of stock data via open LMIS at state levels</li> <li>- Cold chain officers at state and LGA able to use trackgenic and TRVST app.</li> <li>- Vaccine product visibility, inventory management and pharmacovigilance improved</li> <li>- Site specific wastage rates monitored and tracked over time</li> <li>-Site specific interventions implemented and wastage rates reduced</li> </ul>	UNICEF	UNICEF	
Nigeria	3. Supply Chain	3.2 Improve stock management for vaccines and devices to avoid facility-level stock-outs	<ul style="list-style-type: none"> <li>1) Provide technical assistance to ensure up-to-date stock management data including on forecast/actual quantities, stock-on-hand, consumption rates, expiry dates, open and closed vial wastage, critical operational challenges and data use for action.</li> <li>2).Support the integration and deployment of Thrive360 and iDash providing visibility of stock and other immunization supply chain performance.</li> </ul>	<ul style="list-style-type: none"> <li>-Reduce stock out, wastage rates and availability of stock data and vaccine accountability for action</li> <li>-Monthly stock management data via Thrive 360 predictive analytic global dashboard generating action</li> </ul>	UNICEF	UNICEF	
Nigeria	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	<ul style="list-style-type: none"> <li>Technical support for the deployment, installation and maintenance of existing and newly deployed cold chain equipment, remote temperature monitoring system.</li> </ul>	<ul style="list-style-type: none"> <li>States have their CCE properly maintained. CCE inventory are updated every 3 monthly. States have their CCE equipment fitted with RTMD.</li> </ul>	UNICEF	UNICEF	
Nigeria	3. Supply Chain	3.5 Improve planning, coordination and monitoring of supply chain management at all levels	<ul style="list-style-type: none"> <li>(1) Provide technical support to NPHCDA for the development, implementation, monitoring and evaluation of NLWG strategic priorities and initiatives in line with GAVI Comprehensive Vaccine Management (CVM) strategy.</li> <li>2) Provide technical assistant for the conduct of vaccine and devices forecast and supply planning</li> <li>(3) Provide TA for the planning and conduct of quarterly targeted EVMA at national and subnational levels.</li> <li>(4) Facilitate monitoring and tracking the implementation of EVMcIP and GAVI audit report (60% level of implementation by 2024).</li> </ul>	<ul style="list-style-type: none"> <li>- NLWG multi year plans developed, monitored and evaluated based on GAVI Comprehensive Vaccine Management (CVM) approach</li> <li>-Annual vaccine requirement and shipment planning developed, quarterly forecast performance review data informed procurement and shipment</li> <li>- Level specific evaluation of vaccine supply chain conducted and performance improved via EVM supervisory visits.</li> <li>- Quarterly status update of EVMcIP implementation provided to guide interventions</li> </ul>	UNICEF	UNICEF	
Nigeria	6. Demand Generation and Community Engagement	6.2 Design and implement social and behaviour change interventions	<ul style="list-style-type: none"> <li>Provide overall technical support and guidance in the formulation and management of social and behaviour change strategies and plans at the national level in support of routine immunization program, focusing on zero dose reduction, and new vaccine introduction.</li> <li>Support coordination of communication and crisis communication task teams for inclusive and consultative stakeholder-centric approach adopted to strengthen demand of routine immunization, and new vaccines.</li> </ul>	<ul style="list-style-type: none"> <li>Evidence-based, community centred and integrated social and behaviour change strategy focusing on zero dose and new vaccine introduction is developed, implemented and monitored .</li> <li>Integrated social behaviour change and demand generation strategy for immunisation is developed at the national level and for states implementing NPSIA.</li> </ul>	UNICEF	UNICEF	
Nigeria	6. Demand Generation and Community Engagement	6.5 Strengthen partnerships with local and community actors to improve demand for immunisation	<ul style="list-style-type: none"> <li>Provide subnational level support to adoption of localised and context specific social and behaviour change strategies and plans in priority states and LGAs focusing on reduction of zero dose children and introduction of zero dose children</li> </ul>	<ul style="list-style-type: none"> <li>Localised and context specific social and behaviour change approaches are implemented in priority states and LGAs to address demand barriers to routine immunisation and reduction of zero dose children.</li> </ul>	UNICEF	UNICEF	
Nigeria	1. Service Delivery	1.8 Other service delivery objective	<ul style="list-style-type: none"> <li>Provide technical support to the NPHCDA and the SPHCB and states in the implementation of the supplementary immunization activities to boost population immunity against vaccine preventable disease outbreak.</li> <li>Support NPHCDA and states and coordinate with partners on integration of Non Polio Supplementary Immunization Activities (NPSIA) with routine immunization.</li> </ul>	<ul style="list-style-type: none"> <li>21 States conduct Measles SIA in 2022 to reach at least 90% coverage</li> <li>13 states integrated Measles SIA conducted in 2023 with at least 90% coverage.</li> <li>3 states integrated Yellow Fever SIA conducted in 2023 with at least 90% coverage.</li> <li>60 LGAs to integrate RI intensification. Measles campaign is integrated with routine immunization</li> </ul>	UNICEF	UNICEF	
Nigeria	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	<ul style="list-style-type: none"> <li>Provide technical support to the NPHCDA and SPHCB and states in improving RI coverage, identification of missed communities and zero dose children, implement strategies for reaching zero dose children, introduction of new vaccines, improvement of routine immunization information system.</li> </ul>	<ul style="list-style-type: none"> <li>Rotavirus vaccine is introduced in all states, Country is ready for HPV introduction, EMID piloting for RI is completed, Health Managers and Health workers technical capacity improved on digital immunization data management</li> <li>Zero dose strategies are available for high risk 100 LGAs.</li> </ul>	UNICEF	UNICEF	
Nigeria	3. Supply Chain	3.3 Increase capacity and quality of vaccine storage and distribution to improve vaccine availability, especially in the last mile	<ul style="list-style-type: none"> <li>(1) Technical support for the procurement, deployment, and maintenance of Cold Chain Equipment Optimization Platform (CCOEP), cold chain equipment surge for covid-19 vaccine deployment as well as facilitating the inventory management system.</li> <li>(2) Technical support for construction and outfitting of 3 cold chain hubs</li> <li>(3) Technical support for the procurement, deployment, and maintenance of remote temperature monitoring system, as well as facilitating the development of maintenance plans and operationalization of maintenance float assembly.</li> </ul>	<ul style="list-style-type: none"> <li>-States have functional CCE maintenance units/teams.</li> <li>-All states have 90% of the cold chain equipment are functioning.</li> <li>-Availability of quarterly CCE inventory gap analyses to guide maintenance and investment.</li> </ul>	UNICEF	UNICEF	

Nigeria	1. Service Delivery	1.2 Integrate delivery of services to improve efficiency, regularity and/or reliability of planned immunisation activities with a focus on zero-dose and underimmunised children and missed communities	1. Provide technical support in the national and state level leadership, management and coordination of the immunization program 1.1. Contribute to the national level planning, management and coordination meetings including TWGs, ICC, Core group, NERICC, NPS/AS, etc 1.2. Assist in the planning, monitoring and evaluation of the zero dose reach strategies, routine immunization program including OIRIS, new vaccines introductions such as Rota, HPV, Non polo SIAs etc	Zero-dose children analysis and identification of high risk LGAs for intervention to reduce zero dose. Strategies to reach zero dose children developed and finalized and anchored strategies identified for improving childhood immunization. Integrated routine immunization with supplementary immunization activities including Covid-19 vaccine deployment in 37 states completed. Immunization supply chain redesigning is completed Measles campaigns and outbreak responses are conducted	UNICEF	UNICEF	
Nigeria	4. Health Information Systems and Monitoring & Learning	4.1 Ensure timely, fit-for-purpose information is available at all levels of the system, and is used regularly and systematically to improve programmatic reach and performance	1. Conduct Data Quality Analysis, Reviews and Feedback to monitor the level of improvement of Data Quality in line with the DQIP. 2. Conduct HMIS/DHIS2 server utility and response gaps and make recommendations for improvement 3. Develop guidelines for the implementation and scale up of the RI SMS projects and eLMIS, and EMID for electronic management of immunization Data; 4. Support innovations aimed at addressing zero dose burden	1. Enhance DQIP implementation 2. Guidelines for Scale up of e-data platforms; 3. Effective, innovative and secure digital platforms	WHO	WHO	\$ 1,971,099.43
Nigeria	1. Service Delivery	1.7 Design and implement life-course immunisation approaches relevant to Gavi-supported vaccine programmes (HPV, MCV2)	1. Development of training and operational manuals for new vaccine introduction (HPV and Malaria). 2. Conduct of PIE/EPI Review 3. Develop Action plan for increasing MCV2, HPV and other New Vaccines uptake with due consideration to gender barriers 3. Develop regular feedback on updates of VPD surveillance 4. Develop an integrated strategy for using SIAs to improve Routine Immunisation. 5. Monitor impact of vaccines introduced (Rotavirus vaccine)	1. HPV vaccine introduction into Nigeria Immunization Schedule 2. Mitigation Plans for immunization systems improvement based on PIE/EPI review recommendations 2. Coverage improvements for New and underutilized vaccines	WHO	WHO	
Nigeria	4. Health Information Systems and Monitoring & Learning	4.3 Strengthen information systems relevant for the identification and reach of zero-dose and under-immunised children	1. Develop, compile and share monthly RI and Supportive Supervision feedback. 2. Develop and implement dashboards to monitor quality of preparedness and outputs of service delivery strategies for routine immunisation 3. Generate data for decision making on zero dose identification, reach, monitoring, measure and advocacy 4. Identify and develop data management related protocols for PAPA LQAS, MICS/NICS, EVMA etc. 5. Compile data elements for the eJRF; and Joint Appraisals 6. Develop dashboard for monitoring implementation of NPSIAs and evidence for decision making	1. Data for IRMMA 2. Data elements for eJRF	WHO	WHO	
Nigeria	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	To improve capacity of HCWs in improving quality of immunization services through training on the revised BGRISP, to mitigate identified challenges and reduce gender bias, waiting time for vaccination etc. 1. Conduct situation analysis for zero dose in different contexts to guide planning for zero dose reduction 2. Develop general framework to guide addressing zero dose in varying context 3. Assess the quality of REW microplans and its implementation in addressing the burden of zero dose. 4. Develop and implement guidelines for the identification of RI human resource gaps and capacity building of Immunization managers and health workers focusing on missed communities . 5. Develop/update technical guidelines for conduct of PAPA-LQAS and State level Immunization Coverage survey.	1. Tailored zero dose reduction Plan	WHO	WHO	
Nigeria	1. Service Delivery	1.2 Integrate delivery of services to improve efficiency, regularity and/or reliability of planned immunisation activities with a focus on zero-dose and underimmunised children and missed communities	1. Provide Technical support to development of costed RI workplan that include integrated intervention (IMOP, RI Intensification, Urban vaccination, OIRIS) to reach zero dose children. 2. Develop roadmap for continuing integration of RI and PHC services and integration with COVID -19 vaccination 3. Coordinate and develop M&E framework to track implementation of action points from EPI Review/Multi-Stakeholders Dialogue. 4. Coordinate the planning and the conduct of Health worker capacity building 5. Plan and Coordinate technical engagements with professionals for RI Coverage improvements, zero dose reduction in aligning with other PHC services PHC 6. Integrate activities to improve RI and reduce zero dose such as RI intensification as part of NVI Plans	11. Integrated plans that addresses RI coverage improvement, zero dose reduction with PHC as vehicle. 2. Capacity Building for 80% of State/LGA RI managers (LICs/RICs) to drive RI integration within the immunization programme and broader PHC for Optimal resource management and zero dose reduction	WHO	WHO	
Nigeria	7. Governance, Policy, Strategic Planning, and Programme Management	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	. To build the leadership and governance capacity, institutionalize accountability for policy makers at federal, states to improve coverage and equity for immunization and reduce zero dose immunization status in the priority states and country at large Provide routine technical support to strengthen partnership, coordination and immunisation programme planning and implementation at national and sub-national levels focusing on : - strengthening functionality of ICC, NGI-TAG and others to strengthening broader monitoring of Immunisation performance and tracking implementation of the accountability framework - Develop and monitor priority strategies to reach zero-dose children and missed communities and underimmunized in the 8 Gavi Focus states and other states	Strengthen Leadership management and coordination 1. Evidence Based Guidance for decision making 2. 1. RI/PHC integration roadmap	WHO	WHO	
Nigeria	5. Vaccine Preventable Disease Surveillance	5.5 Other objective related to VPD surveillance	1. Training for paediatric surgeons and radiologists 2. Recruitment of Enrollment Field Assistants 3. Conduct quarterly data harmonization meetings with intussusception data officers from all 6 sentinel sites. 4. Quarterly reviews meetings to evaluate performance and inform decisions. 5. Salary top-up for research assistants and team members. 6. An annual site symposium for the hospital community to discuss data. 7. Publication: Produce scientific papers from generated data.	1. Institution of intussusception surveillance	WHO	WHO	
Nigeria	8. Health Financing	8.2 Support the budgeting and targeting of domestic resources for immunisation and/or primary healthcare based on equity considerations	provide continuous support for the country's review of budgetary allocations to BHCPF and other PHC services such as immunization through monitoring of the National Health Accounts Study	National Health Account Study conducted, and monitored with allocation for Immunization and PHC tracked	WHO	WHO	

Nigeria	1. Service Delivery	1.2 Integrate delivery of services to improve efficiency, regularity and/or reliability of planned immunisation activities with a focus on zero-dose and underimmunised children and missed communities	<ol style="list-style-type: none"> <li>1. Technical support in work plan development for Integration of EPI and PHC services toward strengthening Health Systems and reach for zero dose, under immunized and missed communities in the 8 Gavi Focus States (Kebbi, Zamfara, Katsina, Gombe, Jigawa, Taraba, Niger and Bayelsa).</li> <li>2. Technical support to map Human Resource providing routine immunization in high priority LGAs in (Kebbi, Zamfara, Katsina, Gombe, Jigawa, Taraba, Niger and Bayelsa) so as to support government to develop mitigation plan.</li> <li>3. Technical Support for introduction of new vaccines (HPV, Malaria [in selected States] ).</li> </ol>	1. AOPs for RI and ZERO dose reduction	WHO	WHO	
Nigeria	8. Health Financing	8.1 Support planning of Gavi and non-Gavi-supported vaccine procurement costs based on quality vaccine forecasts as part of national and subnational health budgets	<ol style="list-style-type: none"> <li>1. Multiyear vaccine financing plan developed and agreed with stakeholders</li> <li>2. Monitoring the execution of VF financing through multi-partner engagement.</li> <li>3. Continues monitoring and analysis of the performance of Health Financing Indicators in the Accountability Framework</li> </ol>	<ol style="list-style-type: none"> <li>1. Multiyear vaccine financing plan reviewed and revalidated with stakeholders on annual basis.</li> <li>2. AF progress report developed and reviewed with stateholders on annual basis</li> </ol>	World Bank	World Bank	\$ 611,000.00
Nigeria	8. Health Financing	8.3 Improve the efficient use and tracking of domestic fund flows going to the frontline, including for reaching zero-dose children	<ol style="list-style-type: none"> <li>1. Provide technical support to the implementation of the BHCPF to improve ability of the states to receive, utilize and account for resources for primary healthcare.</li> </ol>	<ol style="list-style-type: none"> <li>1. Increased number of accredited facilities receive and account for funds through BHCPF and state programs</li> <li>2. Increased enrollment of under the social health insurance program</li> </ol>	World Bank	World Bank	
Nigeria	8. Health Financing	8.2 Support the budgeting and targeting of domestic resources for immunisation and/or primary healthcare based on equity considerations	<ol style="list-style-type: none"> <li>1. Conduct coordinated advocacy for increased public resources for primary health care and the immunisation programme, including vaccine procurement.</li> </ol>	<ol style="list-style-type: none"> <li>1. Increased allocation for BHCPF in the Federal Govt budget.</li> <li>2. Domestic vaccine financing needs fully allocated in Govt Budget</li> </ol>	World Bank	World Bank	