

Country	Programmatic Area	Activity	Partner	Milestones			GPF Indicator code If applicable, enter the code to the Grant Performance Framework indicator to which this activity is linked	Expected Outcome	TOTAL
				Jun-20	Nov-20	Jun-21			
Tajikistan	Supply Chain & Procurement	Scaling up operationalization of supply chain data management and vaccine forecasting initiative through: i) further capacity building on use of supply chain data (dashboard) for management decisions, ii) strengthening supportive supervision and monitoring of dashboard utilisation, iii) supporting EPI center with the implementation of the pilot assessment recommendations	UNICEF	In 5 additional districts, more than 80% of district EPI managers and PHC workers have capacities to implement the revised supply chain data management system;	In three more district, more than 80% of EPI managers and PHC workers have capacities to implement the revised supply chain data management system.	n/a	IR-C 2.0 Occurrence of stock-out at national or district level for any Gavi-supported vaccine	Supply data use capacity of regional / district EPI increased to prevent stock outs.	\$ 110,700
Tajikistan	Supply Chain & Procurement	Enhance capacity of national, oblast and district managers on vaccine stock management (review of the existing system, capacity development, etc)	UNICEF	Assessment of the effectiveness of the existing vaccine stock management conducted and training materials developed	50% of national oblast and district managers/warehouse staff trained on stock management	>95% of national oblast and district managers/warehouse staff trained on stock management	IR-C 2.0 Occurrence of stock-out at national or district level for any Gavi-supported vaccine	The efficient supply chain system is in place and functional at the national, regional and district levels to deliver immunization services to every child with at least waste of resources.	
Tajikistan	Supply Chain & Procurement	Technical Assistance in implementation of operational deployment plan for cold chain equipment	UNICEF	n/a	At least 50% of ODP for the current year implemented	More than 90% of ODP for the current year implemented	IR-T 1 Percentage of districts and cities with functional cold chain stores	Cold chain capacity and functionality strengthened in alignment with HSS and CCEOP plans and priorities	
Tajikistan	Programme Implementation/Coverage & Equity	Grants performance tracking, implementation monitoring	UNICEF	n/a	At least 75% of planned activities carries out on time	n/a	PR-C 1.0.1 Percent utilisation of GAVI HSS budget during the reporting period	Grant performance on track	
Tajikistan	Programme Management - General	Staff position (Regional prorated) and travel to support the implementation of HSS 2	WHO	Operational plan for HSS activities applied and followed	Quarterly monitoring of the HSS implementation is performed		IR-T 2 Percentage of districts with a functional waste management system IR-T 7 Percentage of districts with timely immunization reporting PR-T 1 Number of staff trained on MLM, VPD, AEFI, EVM, WM and Safe Injection training	Activities implemented in accordance with the plans	
Tajikistan	Programme Management - General	Staff position (International) to support programme management, coordination and effective implementation of the Programme, including HSS	WHO	n/a	n/a	n/a	n/a	Country is supported to implement the annual plans	
Tajikistan	Programme Management - General	Staff position (national) to support programme management, coordination and effective implementation of the Programme, including HSS	WHO	n/a	n/a	n/a	n/a	Country is supported to implement the annual plans	
Tajikistan	Health Financing & Sustainability	Annual update and documentation of vaccine expenditures and vaccine resource requirement projections to be used as an input for continued resource mobilization efforts	WHO	n/a	Updated vaccine expenditures and incorporated to used in resource mobilization activities	n/a	IR-C 5-0: Timely fulfillment of co-financing commitment for all Gavi-supported vaccines	Improved financial sustainability of the immunization programme demonstrated through an increase in expenditure in routine immunization per child	
Tajikistan	Programme Management - General	Monitoring of Grant Performance and Immunization Programme Performance	WHO	n/a	At least one monitoring visit per staff performed, including submission of JA and grant implementation reports	n/a	Efficient and timely implementation of planned activities. Grant performance on track	Funds are managed in a transparent and accountable manner and donated funds are used for the intended purpose	

			WHO	n/a	Endorsed MYP on immunization that provides strategic guidance	n/a		Strategic guidance provided to the MoH and NIP
Tajikistan	Health Financing & Sustainability	Development of MYP on immunization						
Tajikistan	Health Information Systems (Data)	Continue rotavirus surveillance & rotavirus vaccine effectiveness (VE) evaluation	WHO	Surveillance and evaluation data collected and submitted (Jan-May by 30 June)	Surveillance and evaluation data collected and submitted (June-Oct by 30 November)		Data triangulation using rotavirus surveillance and rotavirus vaccine effectiveness data to assess data quality of the following GPF codes: OI-C 1.5 Rotavirus containing vaccine coverage at national level (ROTA Last) OI-C 2.5 Drop-out between RV1 and RV last dose	-High-quality rotavirus surveillance and rotavirus vaccine effectiveness (VE) data on burden of rotavirus disease post-vaccine introduction to monitor rotavirus vaccine impact and VE to inform policy decision makers for program planning, monitoring, and risk mitigation. -Data triangulation using rotavirus surveillance and rotavirusVE data to assess immunization data quality.
Tajikistan	Supply Chain & Procurement	EVM SOPs dissemination	WHO		District level 1-day trainings for SOP implementation at immunization service delivery level (65 districts)		"PR-T 1 Number of staff trained on MLM, VPD, AEFI, EVM, WM and Safe Injection training"	EVM SOPs implemented down to immunization service delivery level
Tajikistan	Supply Chain & Procurement	CCEOP follow up – deployment & maintenance	WHO	Mission to review CCEOP performance monitoring framework & NLWG performance	Development of quality CCEOP deployment plans & guidance on HSS cold chain rehabilitation		"PR-T 1 Number of staff trained on MLM, VPD, AEFI, EVM, WM and Safe Injection training"	Recommendations to strengthen CCEOP performance monitoring & NLWG performance. TA to developing CCEOP deployment plans & guidance on HSS cold chain rehabilitation
Tajikistan	Health Information Systems (Data)	TA to support further operationalization of the national AEFI surveillance guidance to build minimum vaccine safety capacity	WHO	In-country advocacy mission to review and address causes of not reporting serious AEFIs	Training of the District level EPI and PHC managers (65 districts x 2 persons) on endorsed AEFI guideline	Training of the national committee on reviewing AEFI cases and conducting AEFI causality assessment	"PR-T 1 Number of staff trained on MLM, VPD, AEFI, EVM, WM and Safe Injection training"	Serious adverse events following immunization are reported and reviewed effectively by the National AEFI review Committee
Tajikistan	Policy & Regulatory Environment	Continuing support in building NITAG capacity through participation in ETAGE and Programme Managers meetings. The members of NITAGs and its secretariat participated in WHO regional training on Strengthening Evidence-based Decision Making in Immunization which was held in May 2018 in Copenhagen. The training provided an opportunity to increase awareness about WHO recommendations on NITAG composition and functioning, improve understanding of evidence-based approach in developing recommendations in the area of immunization, increase knowledge about tools and resources available for immunization advisory bodies and improve skills in communicating NITAG recommendations to policy and decision makers. The follow up technical support is being provided to NITAG in using a systematic approach to develop evidence-based recommendations for the introduction of pneumococcal vaccine. However, Tajikistan NITAG is in need of further improvement of its capacity through enhanced collaboration with well-functioning NITAGs and exchange of experiences and best practices. The NITAGs should also continue collaboration with regional advisory body to receive updated information about global and regional immunization priorities and provide input in developing recommendations at regional level.	WHO		NITAG members participated in ETAGE and WHO Regional Programme Managers meetings to enhance their skills and functional capacity as a NITAG			NITAG improves its capacity to make evidence-based recommendations on immunization policy and practice
Tajikistan	Policy & Regulatory Environment	Support in communicating NITAG recommendations on pneumococcal vaccine to policy and decision makers	WHO		NITAG policy brief is prepared and submitted to MoH			MoH is enabled to make informed decision on introduction of PCV

\$

562,820

Tajikistan	Vaccine-Specific Support	<p>Continuing support in establishing typhoid surveillance to obtain evidence to support decision making on introduction of typhoid vaccine.</p> <p>The Ministry of Health (MoH) plans to establish surveillance for typhoid fever to collect local data on disease burden and epidemiology to support decision making on the introduction of typhoid vaccine. In 2019 WHO Regional Office for Europe (Regional Office) has provided support to the MoH in assessing country capacity to implement surveillance for typhoid fever. The assessment mission will be conducted and recommendations on feasibility of surveillance implementation will be developed.</p> <p>In 2020 the Regional Office will continue support in establishing surveillance. The consultancy support will be provided in identifying sentinel hospitals, developing the surveillance protocol, and conducting trainings for surveillance staff.</p>	WHO		Sentinel sites are defined, SoPs are developed, staff is trained			The country is prepared to launch typhoid surveillance	
Tajikistan	Vaccine-Specific Support	Assess timeliness of hepatitis B birth dose and develop corrective measures	WHO		Assessment of timeliness of hepatitis B birth dose is conducted; action plan on its improvement is developed			Improved monitoring of timeliness of hepatitis B birth dose	
Tajikistan	Vaccine-Specific Support	Support in training medical workers on vaccine safety and contraindications	WHO		Training for leading clinicians is conducted; package of training materials is translated			Key confident trainers who will train front line medical workers, are prepared	
Tajikistan	Programme Management - General	Strengthening of Annual Work Planning	WHO					Detailed Annual Work Plan is developed and approved by MoH/RCIP	
Tajikistan	Health Financing & Sustainability	<p>The work during this six-month period will contribute to the health sector master plan, particularly the staffing norms at PHC level and the implementation plan (including costing) towards achieving this. This work will build upon findings of the WB's work under TCA2019: i.e. analytics assessing the efficiency of spending on human resources for health at PHC level, the sources of inefficiency, and how these inefficiencies might be overcome). The master plan will propose the optimal staffing (numbers of staff, by cadre) at each facility, and will assess the feasibility, the required steps and the associated costs of achieving optimal staffing. A deep dive will look at staffing for immunization.</p>	World Bank	Concept note, with workplan and timeline, for discussion with RCIP and Gavi.	Roadmap to optimal staffing at PHC level, with steps, timeline and costs of following this roadmap.	Final roadmap to optimal staffing at PHC level, with steps, timeline and costs of following this roadmap.	IO 1-2a: policy dialogue regarding opportunities to improve efficiency of resource allocation; IO 2-2b: TA provided to countries to improve efficiency of resource allocation, incl. reforms to public finance	Increased efficiency of spending on human resources for health, and given that HR expenditures are approximately 80% of THE, increased efficiency of spending on health.	\$ 100,000