

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
Zimbabwe			LMC		Optimize processes and tools for more effective planning and course-correction between national EPI and focal provinces.	CHAI			"Strong coordinated plans for EPI developed at national level and in focal provinces Regular progress reviews instituted"			Strengthened coordination & review of subnational and national plans	
Zimbabwe			LMC		Improve mechanisms for the coordination and accountability of government and immunization partners	CHAI			"Planning process enhanced to ensure adequate coordination of government, partners, and the ICC			Improved coordination with immunization partners & joint accountability of EPI Governance	
Zimbabwe			LMC		Strengthen awareness and coordination of EPI plans into MoH planning and funding processes	CHAI				EPI programmatic and financial plans are better reflected within MoH planning and funding processes (annual and multi-year)		"Increased synergies between EPI and other health programs. Greater support from MoH for EPI program."	
Zimbabwe			LMC		Develop mechanisms to improve data utilization and KPI-driven program performance management within focal province and districts	CHAI			Provincial-level dashboards created and incorporated into routine program performance reviews and coupled with supportive supervision			Improved program decision-making and accountability within focal province and districts	
Zimbabwe			LMC		Develop mechanisms to improve data utilization and KPI-driven program performance management within focal province and districts	CHAI			Tailored performance dashboard created to provide data and insight to coordinating committees (e.g. ICC)			Improved decision-making using data	
Zimbabwe			LMC		Ensure EPI financial plans for immunization acknowledge risks posed by foreign exchange variation and include prioritized contingency plans	CHAI		EPI financial plans developed, with strong contingency plans to manage the operational and programmatic risks posed by factors such as exchange rate variation and changing government fiscal policies				Key risks to EPI performance and sustainability mitigated through better financial planning	\$239,610.96
Zimbabwe			LMC		Devise strategies for sustainable financing for ZEPI	CHAI				Strong financial sustainability plan developed and endorsed by government		Key risks to EPI performance and sustainability mitigated through better financial planning	
Zimbabwe			LMC		Mitigate impact of delayed disbursement on program implementation	CHAI				"Assessment of process and bottlenecks for fund disbursement from national to subnational level conducted. Recommendations to prevent and/or better cope with the effects of delayed disbursements developed and priority recommendations implemented"		Key risks to EPI performance and sustainability mitigated through better financial planning	
Zimbabwe			LMC		Map national-level EPI's workload against staffing	CHAI		National level EPI optimal staffing model developed				Greater capacity of national team to manage ZEPI	
Zimbabwe			Service Delivery		Conduct situational analysis in 4 cities (Harare, Bulawayo, Chitungwiza, and Kwekwe), in collaboration with the MOHCC/ZEPI National and City Health Departments.	JSI		Situational analysis methodology and tools using quantitative and qualitative methods developed for addressing inequities in routine immunization in urban poor communities.				Adaptable methodology and tools developed and applied through implementation of the situational analyses (in 4 cities)	
Zimbabwe			Service Delivery		Conduct situational analysis in 4 cities (Harare, Bulawayo, Chitungwiza, and Kwekwe), in collaboration with the MOHCC/ZEPI National and City Health Departments.	JSI		Situational analysis conducted in 4 cities with support from representatives from the MOHCC and City Health Department.				"* Gaps and challenges to access and utilization of routine immunization services identified for each priority city. * Recommendations on policy, strategy, service delivery, and other changes required to sustainably increase immunization coverage for the urban poor developed based on situational analysis findings."	
Zimbabwe			Service Delivery		In collaboration with the MOHCC/ZEPI, City Health Departments, and other partners (i.e., private sector, nonhealth stakeholders, CBOs), develop 12-month city-specific action plans that address observed equity gaps in each of the 4 cities (Harare, Bulawayo, Chitungwiza, and Kwekwe).	JSI		Urban immunization action planning co-creation workshops conducted with the MOHCC/ZEPI, technical partners, and civil society organizations in 2 cities.	Urban immunization action planning co-creation workshops conducted with the MOHCC/ZEPI, technical partners, and civil society organizations in 2 cities.			Planning and capacity building co-creation workshops conducted in 2 cities	
Zimbabwe			Service Delivery		In collaboration with the MOHCC/ZEPI, City Health Departments, and other partners (i.e., private sector, nonhealth stakeholders, CBOs), develop 12-month city-specific action plans that address observed equity gaps in each of the 4 cities (Harare, Bulawayo, Chitungwiza, and Kwekwe).	JSI		Urban immunization action plans developed for 2 cities, with technical support from JSI and partners in collaboration with ZEPI.	Urban immunization action plans developed for 2 cities, with technical support from JSI and partners in collaboration with ZEPI.			Each city will develop a comprehensive costed action plan of strategies for reaching children in priority urban areas with routine immunization services, with commitments by MoHCC and stakeholders.	
Zimbabwe			Service Delivery		In collaboration with the MOHCC/ZEPI, City Health Departments, and other partners (i.e., private sector, nonhealth stakeholders, CBOs) in Harare, Bulawayo, Masvingo, and Kwekwe, develop comprehensive microplans that reach all children living or seeking vaccination services in city.	JSI		Representatives from at least 10 cities receiving technical training on microplanning to reach priority communities and populations with RI in urban settings.				Urban immunization microplanning workshop conducted with representatives from at least 10 cities.	
Zimbabwe			Service Delivery		In collaboration with the MOHCC/ZEPI, City Health Departments, and other partners (i.e., private sector, nonhealth stakeholders, CBOs) in Harare, Bulawayo, Masvingo, and Kwekwe, develop comprehensive microplans that reach all children living or seeking vaccination services in city.	JSI		At least 80% of health facilities in each of the 4 cities (Harare, Bulawayo, Chitungwiza, and Kwekwe) receiving technical support have costed microplans that reach children living or seeking vaccination services in that catchment area, through technical support and skills transfer.				At least 80% of health facilities in priority cities receiving technical support have costed microplans that reach all urban poor communities.	\$279,999.99
Zimbabwe			Service Delivery		In collaboration with the MOHCC/ZEPI, City Health Departments, and other partners (i.e., private sector, nonhealth stakeholders, CBOs) in Harare, Bulawayo, Masvingo, and Kwekwe, develop comprehensive microplans that reach all children living or seeking vaccination services in city.	JSI		Through ongoing (remote) follow-up, monitor extent to which urban-specific activities have been implemented according to microplans.				"Anticipated long term outcomes are: * Increase in the number of health facilities providing routine immunization services; * Increase in number of children and pregnant women reached with routine immunization services (from those previously unvaccinated); * Reduction in missed opportunities for vaccination. "	
Zimbabwe			Service Delivery		Consolidation and documentation of best practices and lessons learned to support adaptation and scalability of urban immunization technical approaches to other urban areas in Zimbabwe and beyond.	JSI		Community of Practice (CoP) on urban immunization for EPI focal points and health workers established across 13 cities to share challenges, solutions, and lessons learned on conducting situational analyses and developing action plans in real time.	"Guidance (to independently conduct situational analysis and develop action plans that address observed equity gaps) developed and shared with the MOHCC and City Health Departments in 9 additional cities (notably Bulbridge, Epworth, Green, Hwange Urban, Kadoma City, Masvingo, Mutare, Plumtree, and Goromonzi Peri-urban). Best practices and lessons learned from situational analyses implementation, microplanning, and action plan development documented and shared with the ICC, immunization technical working groups, and urban technical committees and in planned regional/global urban immunization workshops, forums, publications, etc."			"As a result of the Community of Practice, districts MOHCC/ZEPI participants are anticipated to: a) Understand the challenges faced when conducting situational analyses and developing action plans in real time and practical steps to address them. b) Understand the importance of specific immunization strategies to target urban poor communities. "	
Zimbabwe			Service Delivery		Consolidation and documentation of best practices and lessons learned to support adaptation and scalability of urban immunization technical approaches to other urban areas in Zimbabwe and beyond.	JSI		Best practices and lessons learned from situational analyses implementation, microplanning, and action plan development documented and shared with the ICC, immunization technical working groups, and urban technical committees and in planned regional/global urban immunization workshops, forums, publications, etc.	Best practices and lessons learned from situational analyses implementation, microplanning, and action plan development documented and shared with the ICC, immunization technical working groups, and urban technical committees and in planned regional/global urban immunization workshops, forums, publications, etc.			As a result of the documentation, lessons learned and best practices will be adapted by the MOHCC/ZEPI, City Health Department and technical partners to support additional urban immunization strategies.	
Zimbabwe			Data		Support transitioning to DHIS2 for EPI	UNI OF OSLO		"3. EPI legacy data migrated 4. Training given"	Transition plan for EPI in place with agreed date for end of parallel system			Partially or completely transitioned to DHIS2 for EPI	\$32,128.00