

INDIA COVAX TA PLAN				Milestones						Budget for 2020	
Country	Programmatic Area	Activity	Partner	January 2021	March 2021	June 2021	November 2021	Expected Duration of Activity	Expected Outcome	Please specify detailed budget assumptions including 1. FTE/# of proposed consultants, where applicable - this should reconcile with the HR profile on the next page	TOTAL
India	Vaccine, Cold Chain & Logistics	Procuring cloud server for hosting CoWIN system	UNDP	Contract with CoWIN hosting Infrastructure service provider is in place	Servers are functional	Servers are functional	Servers are functional	more than 3 months	CoWIN system is functional and working at optimal capacity	A one time annual contract with the Infrastructure cloud service provider. PSC @ 8%.	\$4,662,750.00
India	Vaccine, Cold Chain & Logistics	Procuring SMS gateway services for text messages to Beneficiaries and CoWIN users	UNDP	Contract with SMS gateway service provider is in place	SMS gateway is functional	SMS gateway is functional	SMS gateway is functional	more than 3 months	CoWIN system is functional and working at optimal capacity	Contract for SMS gateway to be signed. 5 SMSs will go out to every estimated 600,000 CoWIN users - vaccinators and surveyors. 8 SMSs will go out to an estimated 300 million beneficiaries covering two rounds of the vaccine doses given. PSC @ 8%.	
India	Vaccine, Cold Chain & Logistics	Procuring 10,000 temperature loggers for additional Cold Chain Equipment and their installation	UNDP	10,000 Loggers procured	10,000 Loggers installed	Loggers functional	Loggers functional	more than 3 months	CoWIN system is functional and working at optimal capacity	Estimated for 10,000 additional loggers needed for COVID vaccine @ \$150 each along with installation costs. PSC @ 8%.	
India	Vaccine, Cold Chain & Logistics	Procuring 10,000 SIM cards for for the Temp loggers	UNDP	Contract with Mobile Service provider is in place	SIM cards are functional	SIM cards are functional	SIM cards are functional	more than 3 months	CoWIN system is functional and working at optimal capacity	Estimated for 10,000 SIM cards for 12 months. PSC @ 8%.	\$6,449,362.80
India	Service Delivery	E.2 Identify potential COVID-19 vaccine delivery strategies leveraging both existing vaccination platforms and non-vaccination delivery approaches to best reach identified target groups.	UNICEF			Master list and strategy of service providers for effectively delivering COVID-19 vaccine to various target populations defined.		more than 3 months	COVID-19 vaccination for Health care providers and Frontline workers completed.	* Support UNICEF supported State Govt. in organization of immunization session is selected geographies for COVID-19 vaccination of healthcare and frontline health care workers. Deployment of vaccinator team and other session logistics, communication and associated management at session site in selected locations as per local need, support need based training and supervision.	
India	Training & Supervision	F.1 Develop a training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual). WHO will provide a template for guidance.	UNICEF		Training materials developed by WHO adapted and translated, as well as additional training materials developed as required.			more than 3 months	Training material updated after every phase based on learning, modification and new updates.	* Development, Translation, printing and distribution of training material related to cold chain and communication.	
India	Vaccine, Cold Chain & Logistics	H.5 Establish contractual agreements to prepare for vaccine introduction (e.g., vaccine warehousing, transport, waste management, cold chain capacity, etc) where applicable are established.	UNICEF		Contractual agreements to prepare for vaccine introduction (e.g., vaccine warehousing, transport, waste management, cold chain capacity, etc) where applicable are established.			more than 3 months	Technical assistance to National Cell in planning and implementation of a vaccine storage and transportation plan.	* Technical assistance through dedicated consultants at COVID-19 cell at MoHFW: Two Consultants for COVID-19 vaccine logistics specialist, Two consultants logistic associates.	
India	Demand Generation & Communication	J.1 Design a demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) to generate confidence, acceptance and demand for COVID-19 vaccines. Must include a crisis communications preparedness planning.	UNICEF			Demand plan (includes advocacy, communications, social mobilization, risk and safety comms, community engagement, and training) designed.		more than 3 months	A communication plan developed, implemented and updated based on learning from every phase of COVID-19 vaccine rollout.	* Partnership with Radio - TV - academic institution - CSOs - faith leaders at national and state level (media, health, vaccine engagement, capacity building workshops, Media monitoring).	
India	Demand Generation & Communication	J.2 Establish data collection systems, including 1) social media listening and rumor management, and 2) assessing behavioral and social data.	UNICEF		Data collection systems, including 1) social media listening and rumor management, and 2) assessing behavioral and social data established.			more than 3 months	* Technical assistance through dedicated consultants at COVID-19 cell at MoHFW: Two Consultants for COVID-19 vaccine logistics specialist, Two consultants logistic associates.	* Partnership with Radio - TV - academic institution - CSOs - faith leaders at national and state level (media, health, vaccine engagement, capacity building workshops, Media monitoring).	
India	Demand Generation & Communication	J.3 Develop key messages and materials for public communications and advocacy, in alignment with demand plan.	UNICEF		Key messages and materials for public communications and advocacy, in alignment with demand plan developed.		materials for public communications and advocacy, in alignment with demand plan	more than 3 months	* Advocacy and communication plan finalized and relevant material developed.	* Subscription to social listening tool and one consultant for 12 months.	
India	Service Delivery	E.2 Identify potential COVID-19 vaccine delivery strategies leveraging both existing vaccination platforms and non-vaccination delivery approaches to best reach identified target groups.	UNICEF				Potential COVID-19 vaccine delivery strategy identified to best reach target groups.	more than 3 months	Technical assistance to MoHFW at National & States in planning, implementation and monitoring of COVID-19 vaccination in accordance with the guidance from MoHFW.	* Technical assistance through dedicated consultants at COVID-19 cell at MoHFW: Two Consultants for COVID-19 vaccine logistics specialist, Two consultants logistic associates.	\$10,181,363.51
India	Training & Supervision	F.3 Conduct virtual and/or in person trainings as outlined in the training plan.	WHO			Training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual) developed.	Trainings conducted as per the training plan.	1-2 months	Quality of state trainings of trainers on COVID-19 vaccination among population at higher risk (after HCW and FLW vaccination) maintained.	Technical assistance provided by WHO/NPSP to state governments in organising state training of trainers / review workshops following completion of health care workers and front line workers vaccination and prior to vaccination of population at high risk. Cost has been included for 25% trainings based on assumption that 25% of these trainings will be face to face while others will be using virtual platforms. District level programme.	
India	Training & Supervision	F.3 Conduct virtual and/or in person trainings as outlined in the training plan.	WHO			Training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual) developed.	Trainings conducted as per the training plan.	1-2 months	Quality of district training of trainers on COVID-19 vaccination among population at higher risk (after HCW and FLW vaccination) maintained.	Technical assistance provided by WHO/NPSP to district governments in organising district training of trainers / review workshops following completion of health care workers and front line workers vaccination and prior to vaccination of population at high risk. These meetings are planned face to face using adequate infection prevention measures. Cost has been included for 50% trainings based on assumption that cost of 50% of these trainings will be born by state government. Sub-district level programme.	
India	Training & Supervision	F.2 Adapt and translate training materials developed by WHO and develop additional training materials as outlined in the training plan.	WHO			Training materials developed by WHO adapted and translated, as well as additional training materials developed as required.		1-2 months	Training material updated based on learning from HCW and FLW vaccination.	Training package will be created based on learnings from health care workers and front line workers vaccination and prior to vaccination of population and high risks.	
India	Monitoring & Evaluation	G.3 Produce and distribute monitoring tools to enable vaccination providers, develop, test and roll-out any changes to electronic systems, provide training for use of these tools and processes to traditional and new providers.	WHO			Necessary monitoring tools developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adapted and analytical tools to monitor progress and coverage among different at-risk categories developed.	Monitoring tools produced and distributed to eligible vaccination providers.	more than 3 months	Quality training ensured.	Technical assistance will be provided by the WHO/NPSP SMOs (Surveillance Medical Officers) to support trainings, preparedness assessment and monitoring of vaccination prior to vaccination of population and high risks. This technical assistance will be provided in limited districts with this presence of partners and weak government accountability mechanisms only.	
India	Monitoring & Evaluation	G.2 Develop or adapt necessary monitoring tools or adapt existing tools: vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic) and analytical tools to monitor progress and coverage among different at-risk categories.	WHO			Necessary monitoring tools developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adapted and analytical tools to monitor progress and coverage among different at-risk categories developed.	Monitoring tools produced and distributed to eligible vaccination providers.	more than 3 months	Quality of activity maintained.	WHO/NPSP will provide technical assistance to government through External Monitors in districts where field monitors are not deployed. The monitoring will help to identify gaps in training and implementation of vaccination and feedback will be shared to guide corrective actions through evening review meetings and task forces at various levels.	
India	Monitoring & Evaluation	G.1 Develop or adapt existing surveillance and monitoring framework with a set of recommended indicators (coverage, acceptability, disease surveillance etc.) for COVID-19 vaccine. Determine whether registration and reporting will be individual or aggregate, and to what extent existing tools and systems can be re-used.	WHO			Necessary monitoring tools developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adapted and analytical tools to monitor progress and coverage among different at-risk categories developed.	Existing surveillance and monitoring framework with a set of recommended indicators (coverage, acceptability, disease surveillance etc.) for COVID-19 vaccine developed or adapted.	more than 3 months	Quality of activity maintained.	WHO/NPSP will provide technical assistance to districts and subdistricts through 900 field monitors in states where these field monitors are not supported through state government funding. Cost of 5 months included.	
India	Monitoring & Evaluation	G.3 Produce and distribute monitoring tools to enable vaccination providers, develop, test and roll-out any changes to electronic systems, provide training for use of these tools and processes to traditional and new providers.	WHO			Necessary monitoring tools developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adapted and analytical tools to monitor progress and coverage among different at-risk categories developed.	Existing surveillance and monitoring framework with a set of recommended indicators (coverage, acceptability, disease surveillance etc.) for COVID-19 vaccine developed or adapted.	more than 3 months	Support provided in areas with limited NPSP staff such as north eastern state.	150 RRTs will be deployed to support capacity building - planning and monitoring of activity for three months for vaccine introduction beyond health care and front line workers.	

India	Monitoring & Evaluation	G.3 Produce and distribute monitoring tools to eligible vaccination providers, develop, test and roll-out any changes to electronic systems, provide training for use of these tools and processes to traditional and new providers	WHO			Necessary monitoring tools developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adapted and analytical tools to monitor progress and coverage among different at-risk categories developed.	Monitoring tools produced and distributed to eligible vaccination providers.	more than 3 months	Preparedness assessed for vaccination	WHO NPSP will support government with preparedness assessment reviews in 10 critical states prior to start of vaccination. This will help to identify key gaps in planning and facilitate develop improvement plan. This will also be used as an opportunity to document best practices for replication in other areas.
India	Training & Supervision	F.1 Develop a training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual). WHO will provide a template for guidance	WHO			Training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual) developed.	Trainings conducted as per the training plan.	more than 3 months	Technical support provided	One Technical Officer at national level (NOC for one year) to assist government with development of technical materials, tracking trainings, task forces and provide feedback to facilitate corrective actions.
India	Training & Supervision	F.2 Adapt and translate training materials developed by WHO and develop additional training materials as outlined in the training plan	WHO			Training plan to prepare for COVID-19 vaccine introduction that includes key groups of participants, content topic areas, key training partners and training methods (in-person or virtual) developed.	Trainings conducted as per the training plan.	more than 3 months	Technical assistance provided	One Data Assistant at national level (DG-4 for one year) to assist technical officer on data management
India	Monitoring & Evaluation	G.3 Produce and distribute monitoring tools to eligible vaccination providers, develop, test and roll-out any changes to electronic systems, provide training for use of these tools and processes to traditional and new providers	WHO	developed or existing tools (vaccination card/certificate - facility-based nominal registers and/or tally sheets, vaccination reports (paper and/or electronic)) adapted and analytical tools to monitor progress and	Monitoring tools produced and distributed to eligible vaccination providers.	Monitoring tools produced and distributed to eligible vaccination providers.		more than 3 months	Technical assistance provided to districts in capacity building, monitoring of training sessions and vaccination sessions. Feedback provided to task forces for corrective actions	SMO unit support cost @ USD 95000 per year for 272 units to support COVID-19 vaccine introduction (2 months cost included)

