<table>
<thead>
<tr>
<th>Country</th>
<th>Programmatic Area</th>
<th>Activity</th>
<th>Partner</th>
<th>Jun-30</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tajikistan</td>
<td>Supply Chain &amp; Procurement</td>
<td>Scaling up surveillance of supply chain data management and vaccine forecasting initiative through: 1) further capacity building on use of supply chain data (dashboard) for management decision; 2) strengthening supportive supervision and monitoring of dashboard utilization; 3) supporting EPI center with the implementation of the pilot assessment recommendations</td>
<td>UNICEF</td>
<td>n/a</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>Supply Chain &amp; Procurement</td>
<td>Enhance capacity of national, oblast and district managers on vaccine stock management (review of the existing system, capacity development, etc)</td>
<td>UNICEF</td>
<td>n/a</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>Programme Management - General</td>
<td>Staff position (Regional projected) and travel to support the implementation of HSS 2</td>
<td>WY®</td>
<td>n/a</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>Programme Management - General</td>
<td>Staff position (International) to support programme management, coordination and effective implementation of the Programme, including HSS</td>
<td>WY®</td>
<td>n/a</td>
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<tr>
<td>Tajikistan</td>
<td>Programme Management - General</td>
<td>Staff position (national) to support programme management, coordination and effective implementation of the Programme, including HSS</td>
<td>WY®</td>
<td>n/a</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>Programme Management - General</td>
<td>Staff position (national) to support programme management, coordination and effective implementation of the Programme, including HSS</td>
<td>WY®</td>
<td>n/a</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>Health Financing &amp; Sustainability</td>
<td>Annual update and documentation of vaccine expenditure and vaccine resource requirement projections to be used as an input for continued resource mobilization efforts</td>
<td>WY®</td>
<td>n/a</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>Programme Management - General</td>
<td>Monitoring of Grant Performance and Immunization Programme Performance</td>
<td>WY®</td>
<td>n/a</td>
</tr>
</tbody>
</table>

**Expected Outcome**

- Cold chain capacity and functionality strengthened in line with IBD and OCSDP plans and priorities.
- Grant performance on track.
- All activities are implemented in accordance with the plans.
- Security is supported to implement the annual plans.
- Security is supported to implement the annual plans.
- Improved financial sustainability of the immunization program demonstrated through an increase in expenditure in routine immunization per child.
- Funds are managed in a transparent and accountable manner and donated funds are used for the intended purpose.
- Funds are managed in a transparent and accountable manner and donated funds are used for the intended purpose.
- Occurrence of stock-out at national or district level for any Gavi-supported vaccine.
- Occurrence of stock-out at national or district level for any Gavi-supported vaccine.
- Funds are used for the intended purpose and accountable manner and donated funds are used for the intended purpose.
| Tajikistan | Health Financing & Sustainability | Development of MYP on immunization | 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: (i) C.1.5 Rotavirus containing vaccine coverage at national level (ROTA Last) (ii) C.2.5 Drop-out between RV1 and RV2 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. |
| Tajikistan | Health Information Systems (Data) | Continue rotavirus surveillance & rotavirus vaccine effectiveness (VE) evaluation | WHO | Data triangulation using rotavirus surveillance and rotavirus VE data to assess immunization data quality. |
| Tajikistan | Supply Chain & Procurement | EVM SOPs dissemination | WHO | | | |
| Tajikistan | Supply Chain & Procurement | CCEOP follow up – deployment & maintenance | WHO | | 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 | | 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 about methods and tools 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 |
| 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 |

$582,820
Tajikistan Vaccine-Specific Support

Continuing support in establishing typhoid surveillance to obtain evidence to support decision making on introduction of typhoid vaccine. 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. A 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.

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.

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

Concept note, with workplan and timeline, for discussion with RCIP and Gavi. Roadmaps to optimal staffing at PHC level with steps, timelines and costs of following the roadmap. Final roadmap to optimal staffing at PHC level with steps, timelines and costs of following the roadmap. ID 7-2a. policy dialogue regarding opportunities to improve efficiency of resource allocation; ID 2-2b. TA provided to countries to improve efficiency of resource allocation, incl. return to public finance

Roadmap to optimal staffing at PHC level, with steps, timeline and costs of following this roadmap.

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

Tajikistan Health Financing & Sustainability

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 draw upon existing work by the World Bank (WB) on 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.

World Bank

Concept note, with workplan and timeline, for discussion with RCIP and Gavi. Roadmaps to optimal staffing at PHC level with steps, timelines and costs of following the roadmap. Final roadmap to optimal staffing at PHC level with steps, timelines and costs of following the roadmap.

Roadmap to optimal staffing at PHC level, with steps, timeline and costs of following this roadmap.

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.

$ 562,820

$ 100,000