## **Proposed Collection Instrument**

## Guidance

ADS 201 states that activities must have an approved Activity Monitoring, Evaluation, and Learning Plan (AMELP) and directs an OU's Program Office, Activity Planners, and COR/AOR/GATR to work with COs/AOs to ensure that the AMELP is a requirement in an award or agreement. AMELPs are intended to be updated periodically to reflect changes in activity design, implementation, context, or data needs.

The COVID-19 pandemic necessitated significant changes to existing activities and the designation of new performance indicators to account for these changes. The USAID COVID-19 Technical Working Group, working with the Interagency COVID MEL TWG and USAID implementing partners, developed the Global Health COVID-19 Indicators Package (Appendix A) (henceforth referred to as the "Package"). The Package contains a set of harmonized indicators for monitoring and results reporting for global health COVID-19 programming, in line with the U.S. Global Response and Recovery Framework (GRRF), the USAID COVID-19 Implementation Plan for the GRRF, the Agency Learning Agenda, and the Agency COVID-19 Monitoring, Evaluation and Learning Plan. These indicators were further adapted after the December 2021 announcement of the Initiative for Global Vaccine Access (Global VAX).

To streamline and centralize reporting on COVID-19 Global Health standard indicators, USAID developed a COVID-19 Global Health module in the Development Information Solution (DIS) web-based reporting system.

AOs and COs should work with OUs to ensure that applicable indicators from the Package are incorporated, as relevant, into the AMELPs of all applicable agreements and awards. AMELP revisions should specify that data be submitted at the frequency specified in their awards; either quarterly or semi-annually. Where these updates imply additional costs for IPs, agreements or awards, AOs and COs must work with COR/AORs and activity managers and the USAID COVID-19 Response Team to ensure sufficient funds are made available through CLIN realignments—to cover the costs.

Given the changing nature of the pandemic and evolving shape of the U.S. Government response, the Global Health COVID-19 Indicators Package may be updated to capture changing activity design. Any changes to the COVID-19 Global Health standard indicators below will be made by the Global Health COVID-19 Response Team. AOs and COs must ensure that all AMELPs are updated with any changes to the standard indicators.

## **Applicability**

This guidance applies to new and existing agreements and awards with NGOs and contractors in Global VAX surge and "significant investment" countries (those receiving at least \$4.275 million in COVID-19 Global VAX programming from CN239 and CN240): Angola, Côte d'Ivoire, Eswatini, Ghana, Lesotho, Nigeria, Senegal, South Africa, Tanzania, Uganda, and Zambia (Global VAX surge countries); Mozambique, Madagascar, Malawi, Liberia, and Ethiopia (CN240), and Haiti and the Philippines (CN239)

## Appendix A

Indicator	Indicator Type	Data Source	Reporting Responsibility	Frequency	Disaggregation
<b>Objective 1:</b> Accelerate w	19 vaccinations				
CV.1.1-1 Number of people reached through USG-supported mass media and social media with COVID-19 vaccine- related messaging	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Mass Media Type
CV.1.2-2 Number of vaccine doses delivered to designated in-country destinations with USG support	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Vaccine Brand
CV.1.3-3 Number of staff and volunteers trained on COVID-19 vaccine- related topics with USG support	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Sex Topic Area
CV.1.3-4 Number of health workers who are remunerated by USG to support workload required for COVID-19 vaccine delivery in the reporting period	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Cadre
CV.1.4-5 Number of vaccination sites supported by USG during the reporting period	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Types

CV.1.4-6 Number of people who received a first dose of an approved COVID-19 vaccine (COV-1) with USG direct support	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Sex Vaccine Brand
CV.1.4-7 Number of people who received a last recommended dose of primary series of an approved COVID-19 vaccine (COV-c) with USG direct support	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Sex Vaccine Brand
CV.1.4-8 Number of people who received a booster dose of an approved COVID-19 vaccine (COV-2,3,4) with USG direct support	Adaptive Management (Output)	Partner reports	Implementing Partners	Quarterly	Sex Vaccine Brand
CV.1.5-9 Number of adverse event following immunization (AEFI) reports reviewed by the appropriate responsible bodies with USG support among those submitted to	Adaptive				
country monitoring systems	Management (Output)	Partner reports	Implementing Partners	Quarterly	Type of USG Support Severity of event