18 Months Rolling Work Plan (Jan. 2011 - June 2012) UN support to Health, Bhutan

UNDAF Outcome:

2. By 2012, increased access and utilization of quality health services with emphasis on reproductive health, maternal and child health and nutrition, HIV/AIDS, TB, malaria and other noncommunicable disease. (MDG 4, 5,6)

- Expected CT Outcome: 1. Capacity of RGOB to formulate and implement results oriented policies and strategies that create an enabling environment for reproductive health, maternal and child health, STI, HIV/AIDS, TB and malaria programmes strengthened.
 - 2. Capacity of RGOB strengthened to increase access to and delivery of guality health services for all including reproductive health, maternal and child health and nutrition, TB, malaria and other non-communicable diseases
 - 3. Capacity of government to respond to prevention, care and treatment of HIV/AIDS and STI through multi-sectoral approach strengthened
 - 4. RGOB and community partnerships enhanced to promote utilization of health services

Expected CT Output (s): 1.1,1.2,1.3, 1.4, 2..1, 2..1,2..2, 2.3, 2.4, 3.1,3.2 and 4.1.

Implementing partner: Department of Public Health and Department of Medical Services, Ministry of Health, RIHS, Royal University of Bhutan, National statistical Bureau, National Commission for Women and Children, Respect Educate Nurture and Empower women.

- 1. The AWP aims to: A) Assess RH and Maternal and Newborn Care; Develop strategic & communication plan for RH, RHCS, MCH and Nutrition. B) Strengthen capacity of health workers to deliver EmONC, family planning services, IMNCI and PMTCT. C) Improve skills of service providers on RH, cervical cancer screening and management, EPI, gender based violence management and growth monitoring. D) Improve exclusive breast feeding and IYCF practices through establishment of Baby Friendly Hospitals and Community Initiatives, E) Capacity of communities on Maternal and Child Health enhanced and their participation promoted through focused IEC interventions, F) Support gender mainstreaming into key plans, policies and programs, G) Produce quality reports on the implementation of the ratified international treaties and conventions submitted by the government. G) strengthen capacity of RBP and judiciary on women and children friendly procedures. H) expand the prevention and protection system for gender based violence. I) strengthen capacity to formulate gender relevant national laws. J) to improve the statistical analysis and use of data source for dzongkhag/geog planning and sector profiling. K) application of evidence and result based systems for development, planning and monitoring. L) Development of population policy based on the population perspective plan. N) Provide quality assurance of activities through programme monitoring and self assessments., M) Support institutional strengthening of Lhaksam NGO.
- 2. In collaboration with implementing partner (IP) & UN agencies, GNHC coordinates overall AWP implementation & progress review through quarterly, mid-year and annual review meetings. The IP is responsible for ensuring achievement of AWP results through day-to-day management, implementation, monitoring of activities, proper use of funds and submission of guarterly financial and progress reports. The UN agencies are responsible for monitoring, timely release of funds, and technical support.
- 3. The partners adopt HACT procedures for fund request, release and reporting. Quarterly Direct Cash Transfer modality is applied and Reimbursements or Direct Payment when necessary with prior agreement between all the parties. Assurance activities such as joint field monitoring, spot checks and scheduled audits will be conducted after agreement with the GNH Commission and the IP based on the micro-assessment recommendations.

Programme Period: 2008-2012

Programme Titles: 1. Health & Nutrition Programme; 2. Enabling Environment for Gender Mainstreaming, 3. Result based planning and M&E for MDGs and GNH; 4. Gender Equality and Women's Empowerment AWP Title: UN Support to Health

Budget Code: Duration-18 Months (January 2011-June 2012)

Estimated 18 months budget: US\$ Allocated resources:

- UNAIDS: US\$ 89,000
- UNFPA: US\$ 887,300
- UNICEF: US\$ 1,228,164
- UNDP : US\$ 70,000

Estimated 12 months budget (2011): US\$ Allocated resources:

UNAIDS: US\$ FIC # 2537 59,000

UNFPA : US\$ 830,800 FIC # 2293, 2586,2320,2295.

Agreed by UN Agencies

UNICEF: US\$ 1,037,506 FIC # 2302 : US\$ 70,000 FIC# 2680

Agreed by Implementing Partners

Dasho (Dr.) Gado Tshering Secret

f Health Date:

Dasho (Dr.) Pema Thinley Vice Chancellor

Royal University of Bhutan Date:

Mr. Kuenga Tshering

National Statistic Bureau

Executive Director

NCWC Date:

Executive Directo

RENEW Date:

Executive Director

Date

Agreed by the Royal Government of Bhutan:

Dr. Gepke Hingst Mr. Karma Tshiteem Secretary Representative UNICEF GNH Commission Date: Date:

14/01/2011

Mr. Yeshey Dorji Asst. Representative UNFPA

Date: 13/01/2011

Ms. Claire Van der Vaeren Resident Representative UNDP

Date: 1 7/01/11

EXPECTED OF OUTPUTS				ge i	ylas	RAW		200				2/25/35/35		file and	
and indicators including 18 months' targets		Planned Activities	Q1	202	03		20 Q1	02	Implementing Partner	UN	Source of funds	Budget Description	2011 Ar	2012	l) Total
CT Outcome 1: Capacity of RGC	OB to fo	ormulate and implement evidence-based p					_				g envir	onment for I	reproductive	health, mo	aternal and
		child, STI, HIV/AIDs, TB	an	d m	aları	ia pr	rogi	am	mes strengthe	ened.					
CT Output 1.1. Maternal, Newborn and Child health (MNCH) and Nutrition policies, strategies and guidelines developed and		Design and Printing of 400 EPI Policy and strategy, Q and A booklet for HW and community, EPI posters, immunization schedule and Guide books.	×	x					VPDP	UNICEF	OR	Supplies	18,585		18,585
implemented based on analysis of disaggregated data	1.1.2	Develop and print post natal card and register	Х	х					RH	UNICEF	OR	Supplies	12,000		12,000
Indicators: 1. Nutrition policies and strategies,		TA for RH review and monitoring of project activities	х	х					RH/UNFPA	UNFPA	RR	ITA	15,000		15,000
Target 2011 Nutrition Strategy and Action Plan endorsed 2. MNCH guidelines	1.1.4	Dissemination and sensitization of RH review findings at National and district level		X					RH	UNFPA	RR	Cash	5,000		5,000
developed Target 2011: National perinatal health care	1.1,5	TA for development of Reproductive Health Strategy.	х	X	X				RH/UNFPA	UNFPA	OR	ITA	18,000		18,000
concept and plan of action is endorsed by MoH	1.1.6	Development of Reproductive Health Commodity Security Strategy	х	х					RH/UNFPA	UNFPA	RR	ITA/cash	10,000		10,000
	1.1.7	Thematic analysis using BMIS data for Health, Education and Gender.	х	×					NSB	UNFPA	RR	Cash	15,000		15,000
	1.1.8	Observation of world Population Day and World Statistics Day			х	х			NSB	UNFPA	RR	Cash	5,000		5,000
	1.1.9	Cascade training for sector heads in 3 regions on data use		х	х	х			NSB	UNFPA	RR	Cash	20,000		20,000
	1.1.10	TA for development of population policy 3 days in country consultative workshop printing and dissemination of population perspective plan	x	х					GNH/NSB	UNFPA	OR	Cash	30,000		30,000
	1.1.11	Masters course on population and development with specialization in gender	×	×	×	х			GNHC/NSB	UNFPA	RR	cash	20,000		20,000
	1.1.12	Midway Rapid assessment of IMNCI program	x	х	х				IMNCI	UNICEF	OR	ITA/cash	6,000		6,000
	1.1.13	Develop five year communication plan on RH, MCH, Nutrition and Immunization	х						ICB	UNICEF	OR	ITA/cash	20,000		20,000

	1.1.14	Publish reports and data	Х	X	Х	X	X	Х	PPD	UNICEF	unfunde	cash	3,000	3,000
	1.1.15	Design, layout and printing of 1000 EPI manual	х						VPDP	UNICEF	OR	supplies	5,000	5,000
	1.1.16	Technical assistance for RH Review	Х						RH	UNICEF	OR		10,000	10,000
T Output 1.2. Reproductive Health and Safe Motherhood policies and strategies reviewed and revised.	1.2.1	Revision and printing of IUD insertion manual.	х	х					RH	UNFPA	RR	Cash	5,000	5,000
ndicator: ItH standards , protocols, guidelines Target 2011: Revised IUD insertion nanual in place	1.2.2	National EmONC workshop- EmONC focal person			х				RH	UNICEF	unfunde d	cash	9,000	9,000
ndicator: Jpdated and disaggregated MNCH and Nutrition data based on DHS, WICS, Nutrition Survey Farget 2011:Disaggregated data	1.2.3	Conduct Maternal and Neonatal Death Review Meeting												
ncluding Nutrition by districts obtained indicator Number of district with functional MNDI Committee. Target 2011: 14			x						RH	UNICEF		cash	1,500	1,500
TO Output 1.3. Capacity of national and local institutions of health to formulate, update and implement evidence based policies, strategies	1.3.1	in country training for 30 staffs in 2 batches from program, district, research and HMIS on use/analysis of BHMIS or BMIS data for 1 week		x	x				RH/HMIS	UNFPA	RR	Cash	8,000	8,000
and guidelines strengthened	1.3.2	Media advocacy for reintroduction of pentavalent vaccine	х	x					VPDP	UNICEF		Cash	4,400	4,400
Indicator: Number of operational research	1.3.3	Iron and worm infestation prevalence study in schools					x	x	Nutrition	UNICEF	unfunde d	Cash	18,700	18,700
undertaken related to RH and MNH Target 2011: 2	1.3.4	M and E training for 3 participants		x					PPD	UNICEF	Unfunde d	cash	9,000	9,000
	1.3.5	Provision of essential health services to unreached and vulnerable children and women through strategies identified by MBB tools	X	X	×				PPD	UNICEF	RR	Cash	50,000	50,000
	1.3.6	Development of database for EPI	X	X	X				VPDP/JDWNRH	UNICEF	OR	Cash	1,200	1,200
CT Output1.4. Programme monitoring & management systems		Printing of VPD reporting forms	-	Х					VPDP	UNICEF	OR	supplies	3,000	3,000
strengthened. Indicator:	1.4.2	Supportive supervision of IMNCI implementation in health facilities	X	X	X	×	х	x	IMNCI	UNICEF	OR	Cash	19,000	19,000

Number of district with functional MNDI Committee.	1.4.3	Monitoring on vaccine management and AEFI at hospitals, BHUs and ORCs	Х	X	х	х	х	×	VPDP	UNICEF	367	Cash	2,500	2,500	5,000
Target 2011: 14 Indicator: No of dzongkhag with	1.4.4	Monitoring at district level using IYCF indicators		X	x				Nutrition	UNICEF	OR	cash	6,000		6,000
100% AFP reporting Target 2011: 20	1.4.5	Monitoring and supervision of VHW activities	Х	Х	х	х			VHW	UNICEF	OR	Cash	1,700		1,700
	1.4.6	Monitoring, supervision and evaluation	Х	Х	х	Х	х	х	PPD	UNICEF	Unfunde d	Cash	15,000	5,000	20,000
	1.4.7	Continuum of care operational monitoring tool introduced	Х						DoPH	UNICEF	OR	ITA/cash	6,000		6,000
	1.4.8	Evaluation of IMNCI program						x	IMNCI	UNICEF	OR	ITA/cash		2,000	2,000
Subtotal for CT Outcome 1	科尼		150		2		意	No.	15 THE	造級	1480	Total	372,585	9,500	382,08
。其他是其一句的重要的但是	無数	是是自己的 医皮肤 经证明	14	18	7	ů.	148	25				UNICEF	221,585	9,500	231,085
	885	Etalia de la Santa de la Carta	930	13.3	100	8	3	悪	With Table	建设长等	de la	UNFPA	151,000		151,000

CT Outcome 2: Capacity of RGoB strengthened to increase access to and delivery of quality health services for all including reproductive health, maternal and child health and nutrition, TB, malaria and other non-communicable diseases

CT Output 2.1. Improved availability	2.1.1	Ongoing training support for 4 OBGYN and one	X	Х	Х	Х	х		RH/HRD	UNFPA	RR	Cash	44,500	-	44,500
of essential commodities, equipment and modification of facilities for RH	2.1.2	new OBGYN in Thailand Purchase of RH service and teaching equipments		_					307-1907-100			supplies/cas			
and MCH programmes.	21212	or are are and teaching equipments	X	х					RH/UNFPA	UNFPA	OR	h	30,000		30,000
Indicators: Number of health facilities upgraded as comprehensive	2.1.3	Train 30 district nurses on neonatal care at JDWNRH	х	Х	х	х	х	х	RH	UNICEF			16,000	8,000	24,000
emergency obstetric and neonatal centers.	2.1.4	Train 5 nurses on critical newborn care ex country		Х	х				HRD	UNICEF	Unfunded	Cash	20,000	-	20,000
Target 2011: 8 Indicators: Contraceptive Prevalence	2.1.5	Train 4 nurses on critical pediatric care outside the country		Х	х				HRD	UNICEF	unfunde d	cash	15,000		15,000
rate Target 2011:50% CT Output 2.1.a Hospitals and BHUs have qualified staff, equipment,	2.1.6	Train 30 BHWs on safe delivery at labour room in three regions	х	х	x	×	x	X	RH	UNICEF	0820 and 9902	Cash	8,000		8,000
modified infrastructure and sufficient supplies to deliver quality Maternal and Newborn Care services	2.1.7	Cascade training of health workers on revised Midwifery standards and PPH guideline	X	x					RH	UNICEF	0820 and 9902	Cash	22,000	-	22,000
and upgraded as emergency obstetric and neonatal centers	2.1.8	Piloting of PNC visit in one District	x	x	x				RH	UNICEF	OR	Cash	15,000		15,000

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Indicators: Number of hospitals and BHU I delivering basic EmONC services	2.1.9	In country training for 20 health workers on the use of ultrasound for gynea/obs screening at JDWNRH		×					RH	UNFPA	RR	Cash	5,000	5,000	10,000
Target 2011: 27 Indicator: Proportion of births attended by	2.1.10	Refresher training for 16 nurse anesthesia at JDWNRH for 1 week	х	х			х	x	RH	UNFPA	RR	Cash	3,000	3,000	6,000
skilled health personnel and institutional delivery	2.1.11	Ongoing training for two technicians on sonography		х	х	х	х	x	RH/HRD	UNFPA	RR	cash	15,000		15,000
Target 2011: 73%	2.1.12	Ongoing training of one technician on mammography	Х	Х	х	Х			RH	UNFPA	RR	Cash	5,000	-	5,000
Proportion of health staff trained to	2.1.13	Support to initiate breast cancer screening				х	х	х	RH	UNFPA	RR	Cash	5,000	5,000	10,000
provide Pap Smear and VIA services Target: 60	2.1.14	CTG training for 15 labour room nurses at JDWNRH for one month.	x	x					RH	UNFPA	RR	Cash	5,000	5,000	10,000
	2.1.15	Attachment of 15 GDMOs at regional referral hospitals to train on basic EmONC skills	×	×	x	×	×	x	RH	UNFPA	RR	Cash	8,000	-	8,000
	2.1.16	Workshop for 35 medical doctors on infertility management during annual clinical conference		×	x				RH	UNFPA	RR	Cash	5,000		5,000
	2.1.17	Printing of forms and cards for RH	Х	Х					RH	UNFPA	RR	Cash	10,000		10,000
	2.1.18	Procurement of contraceptive	Х	Х	X				RH/UNFPA	UNFPA	RR	Cash	150,000		150,000
	2.1.19	Support mobile clinics for family planning and cervical cancer screening	x		х	×	×	x	RH	UNFPA	RR	Cash	15,000	10,000	25,000
,	2.1.20	Assessment of trained IUD insertion health workers on their service delivery and utilization		x	X	х			RH/CHU	UNFPA	RR	Cash	5,000	-	5,000
	2.1.21	Ongoing training for two technicians on cytology	×	×	x	x			RH/HRD	UNFPA	RR	Cash	15,000		15,000
	2.1.22	Excountry train of 1 gynecologist on LEEP and cryotheraphy in Bkk for 2 months	x	X					RH/HRD	UNFPA	RR	cash	5,500		5,500
	2.1.23	Excountry training of 1 doctor and 3 nurses for 2 weeks on VIA/cryotheraphy and specialized management of VIA positive organ used by JHIPACO	x	X	x	х			RH/HRD	UNFPA	RR	Cash	10,000		10,000
	2.1.24	attachment for 4 technicians on cytology for 6 months at JDWNRH	x	X	X				RH	UNFPA	RR	Cash	5,000	5,000	10,000

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	2.1.25	Support to strengthen YFHS unit at JDWNRH: Review and development of SoPs. Training of 1 staff of YFHS in counseling	х						RH/CHS	UNFPA	RR	Cash	6,000	Н	6,000
CT Output 2.2. Capacity of health	2.2.1	Development and printing of IMNCI modules for RIHS and Doctors	х	x					IMNCI	UNICEF	OR	ITA/supplies	6,500		6,500
managers and providers enhanced to deliver comprehensive and client-	2.2.2	Mop-up Training for Health workers on IMNCI from 20 Districts	х	x					IMNCI	UNICEF	9902	cash	10,300		10,300
oriented services on RH, MCH and youth friendly services.	2.2.3	Development and printing of Hospital based IMNCI Modules.		x	х				IMNCI ARI/CDD	UNICEF	OR	ITA/Supplies	6,500		6,500
CT Output 2.2.a All hospital and BHU health workers provide quality	2.2.4	Training of Doctors, ACOs and Nurses from 6 Hospitals on IMNCI (2 Hospitals from each region, pilot basis)		x	х				HRD	UNICEF	OR	ITA/Cash	15,000		15,000
IMNCI, immunization services and nutrition package (vitamin A, Iron & folic acid, supplements, deworming,	2.2.5	Development and incorporation of ECD parenting modules into IMNCI for Health Workers and RIHS			х	x			IMNCI ARI/CDD/PHL	UNICEF	unfunde d	ITA/Cash	10,000		10,000
growth monitoring, IYCF). Indicators:	2.2.6	Training of Trainers (ToT) on ECD modules for districts and RIHS					Х	Х	IMNCI/HRD	UNICEF	OR	Cash	-	7,300	7,300
Proportion of districts providing IMNCI services at BHU level	2.2.7	Training of selected HWs on ECD modules from district hospitals and BHUs					Х	X	IMNCI ARI/CDD	UNICEF	OR	cash	2/	7,400	7,400
Target 2011: 100%	2.2.8	Edition and Printing of IMNCI Treatment Chart Booklet		х	Х				IMNCI ARI/CDD	UNICEF		Supplies	2,500		2,500
CT Output 2.2.b Increased number of infants receive exclusive	2.2.9	Procurement of Traditional Vaccines, BCG, MR, OPV, DT and Hep.B	X	×					VPDP	UNICEF	OR		53,000		53,000
breastfeeding and proper feeding	2.2.10	Procurement of 1 EPI refrigerated Van					Χ	Х	VPDP	UNICEF	unfunde	supplies		73,900	73,900
practices. Indicator:	2.2.11		х	x					VPDP	UNICEF	OR		2,000		2,000
Ter the mot six months	2.2.12	Assessment of cold chain and valid immunization coverage					Х		VPDP	UNICEF	OR		-	12,000	12,000
Target 2011: 27%	2.2.13	Support for renovation of EPI regional cold store, Gelephu	х	x					VPDP	UNICEF	unfunde d	cash	12,026		12,026
CT Output 2.2.c Selected hospitals and BHUs deliver youth friendly	2.2.14	Training of BHUs and MCH staffs on revised EPI manual	Х	x					VPDP	UNICEF	9902	cash	35,000		35,000
services (IPC/Counseling) Indicator:	2.2.15	Strengthening programme management capacity of programme personnel			X	x			HRD	UNICEF	unfunde d	cash	5,100		5,100
Number of hospitals and BHUs that deliver youth friendly services(IPC/counseling)	2.2.16	Study visit to Thailand to learn AEFI, Vaccine and Cold chain Management (3 personnel's)				×			VPDP	UNICEF	unfunde d	cash	14,500		14,500
Target 2011: 4	2.2.17	Training of Trainers on immunization communication for health workers on pentavalent	X	x					VPDP	UNICEF	9902	cash	24,600		24,600

2.2.18 District level training for health worker on VPDP UNICEF 9902 17,400 cash 17,400 CT Output 2.2.d. Health facilities X X mmunization communication deliver quality comprehensive 2.2.19 Central level meeting on Pentavalent vaccine VPDP. UNICEF 9902 cash 900 900 reproductive health services X X reintroduction Indicator 2.2.20 Technical assistance for communication consultant In-service training unit for RH, MCH VPDP UNICEF 9902 10,600 for reintroduction of pentavalent vaccine ITA 10,600 and YFS at RIHS strengthened Target 2011: In-service training unit 2.2.21 Development and printing of IEC materials for VPDP UNICEF 20,000 at RIHS established for training of reintroduction of pentavalent vaccine OR supplies 20,000 health workers on RH, MCH and YFS 2.2.22 Support NCIP members meeting/expand to child and in-service training curriculum **VPDP** UNICEF 9902 cash 2,000 2,000 Health Advisory Committee (CHAC) X X developed... 2.2.23 Four days training for DHOs/ MoS on AEFI and unfunde UNICER VPDP cash 15,000 15,000 casualty assessment X d 2.2.24 Conduct biennium meeting to discuss AEFI cases, XX VPDP UNICEF OR 7,000 analyzing reports, investigation, management 7,000 2.2.25 Develop training package on supervision and XX management of immunization services for VPDP UNICEF OR 5,000 5.000 different categories of health workers 2.2.26 All mothers with newborns have MCH hand Nutrition UNICEF supplies 7,000 7,500 14.500 book(printing 10,000 copies). X X 2.2.27 All BHUs and CHUs sustain USI monitoring X UNICEF (procurement of MBI kits -1000) Nutrition supplies 2,000 2,500 4,500 X X 2.2.28 District level training of health workers on Nutrition UNICEF 10,645 management of malnutrition in five selected cash 10,645 X X districts 2.2.29 Assessment of IYCF in the hospitals and BHUs for unfunde the WBTi report which is updated every three UNICEF Nutrition 8,700 8,700 yearly (Attend One Asia Breastfeeding forum - 8 d X X 2.2.30 District level training on the use of New WHO UNICEF Nutrition 9902 cash 30,000 28,738 58,738 X X X growth standard and MUAC X X Training of 25 BAFRA food inspectors on the IDD unfunde Nutrition UNICEF 5,500 cash 5,500 monitoring and surveillance d 2.2.32 Development of IEC materials on Nutrition unfunde UNICEF Nutrition cash 27,000 5,320 32,320 education for communities.

2.	.2.33	Train volunteers (community support group) on IYCF/growth monitoring/kitchen garden					Х	Nutrition	UNICEF	unfunde	Cash	13,000	10,000	23,000
		promotion and Nutrition				х		14dericion	OTTICE	d	Cusir	13,000	10,000	23,000
2.	.2.34	Training of 2-3 HWs in each hospital on IYCF and lactation management	Х	х	X			Nutrition	UNICEF	RR	cash/ITA USD 5000	25,000		25,000
2.	.2.35	Develop and endorse Breast milk substitute marketing code in line with international/SAARC code	х	х	X			Nutrition	UNICEF			10,000		10,000
2	.2.36	Certify Hospitals and communities as BFHI and BFCI (TA)	х	X				Nutrition	UNICEF			7,000	-	7,000
2	2.2.37	Community (2, 250 mothers and caregivers) training on BFHI in selected districts.		X	x			Nutrition	UNICEF			24,000	12	24,000
2	2.2.38	Develop and endorse action plan on establishment of Nutrition Rehabilitation center	x	x				Nutrition	UNICEF	CR	cash	3,000		3,000
2	2.2.39	Supply of MUAC and CMV for management of SAM	х					Nutrition	UNICEF	9902	supplies	3,000		3,000
2	2.2.40	Meeting on promotion of maternal nutrition program to reduce low birth weight		×				Nutrition	UNICEF	OR	cash	3,000		3,000
2	2.2.41	Provision of one year zinc supplement for children under 5 years as per IMNCI guidelines	×					IMNCI	UNICEF	OR	supplies	3,000		3,000
2	2.2.42	Conduct audit of under 5 deaths to find the causes of child deaths and identify areas for programme focus			×	×		IMNCI	UNICEF	OR	LTA	10,000		10,000
2	2.2.43	IMNCI monitoring and evaluation training in SEARO for one programme personnel			х			IMNCI	UNICEF	unfunde d	cash	6,500		6,500
2	2.2.44	Training on project management and RBM for Program officers and DHOs	Х					PPD	UNICEF	OR	cash	20,000		20,000
		Continuation of PG Gynae course in Bangladesh	х	X				Magee, DMS	UNICEF	3407	cash	5,500		5,500
2	2.2.46	Attend International Conference on Maternal- Fetal Medicine		X				Magee, DMS	UNICEF	3407	cash	5,000		5,000
7	2.2.47	TA to assist RIHS for mapping and instituting in- service training programs.	Х	X	X	X		RIHS/UNFPA	UNFPA	OR	ITA/Cash	30,000		30,000
7	2.2.48	Development of in-service training modules		x	×	X		RIHS	UNFPA	RR	Cash	5,000	-	5,000

	2.2.49	Learning best practices from the region on provision of in-service training programs		х	×			RIHS	UNFPA	RR	Cash	10,000		10,000
	2.2.50	Workshop on youth friendly health services for final year students of RIHS		х			X	RIHS	UNFPA	RR	Cash	5,000	6,000	11,000
	2.2.51	Training of 7 faculty members on facilitation skills, BCCI and IEC for in-service training program.		x		х	Х	RIHS	UNFPA	RR	Cash	25,000	10,000	35,000
CT Output 2.3 Capacity of RGoB and targeted communities strengthened to expand coverage of water and sanitation project Indicator: Proportion of targeted communities with expanded coverage of water and sanitation Target 2011:														
CT Output 2.4. Key government agencies are prepared to respond to public health emergencies enhanced	2.4.1	Sensitization of Disaster task force members at National and district level on MISP		x	X			RH/CHU	UNFPA	RR	Cash	8,000	-	8,000
Indicator: Number of districts with Health/ Nutrition/ WASH/RH emergency preparedness and response plan Target 2011: 15 districts Number of districts sensitized to respond to public health emergencies.	2.4.2	Development of SoP for MISP during emergency			x	x		RH/CHU	UNFPA	RR	Cash	3,000	5)	3,000
CT Output 2.5. Strengthened capacity of relevant institutions at	2.5.1	Development and printing of SoP on management of victims of GBV			х	х		Forensic Unit, JDW	UNFPA	RR	Cash	5,000		5,000
national and local levels to develop and deliver information, counseling and targeted health interventions	2.5.2	Publication and dissemination of forensics database information on GBV	х	×				Forensic Unit, JDW	UNFPA	RR	Cash	4,000		4,000
on victims of violence against women and children.	2.5.3	Short term training course for 3 forensic staffs as ToT on counseling of victims of GBV		X	X	x		Forensic Unit, JDW	UNFPA	RR	Cash	9,000		9,000

Indicator: Key national agencies and law enforcement personnel trained on	2.5.4	Attachment of two health workers each from regional referral hospitals at Forensic Unit for one month	x	x			x	×	Forensic Unit, JDWNRH	UNFPA	RR	Cash	5,000	5,000	10,000
aender-based-violence	2.5.5	Project support cost	_	Х	Х	Х			RENEW	UNFPA	RR	Cash	11,800		11,800
Number of facilities providing services to address gender-based- violence		Follow up to the recommendations of CBSS assessment:		х	x	х			UNFPA/ RENEW	UNFPA	RR	Cash	3,000		3,000
Target 2011: 20 districts Protection related policies and legislations implemented	2.5.7	Training of volunteers on IPC skills on GBV/DV for 30 volunteers from eastern, western and southern region for 5 days		x	x	х	х	х	RENEW	UNFPA	OR	Cash	35,000		35,000
Target 2011: 1 (domestic voilence	2.5.8	Sensitization of Police personal at various levels on GBV in 20 districts	х	х	х	х			RENEW	UNFPA	RR	Cash	11,000		11,000
protection bill)	2.5.9	Community outreach programme on GBV by the volunteers in 20 districts	х	х	х				RENEW	UNFPA	RR	Cash	13,500		13,500
	2.5.10	Training of Parliamentary committee on gender equality and women's empowerment	х	х	x	х			NCWC/ Parliamentarian / UNFPA	UNFPA	OR	Cash	10,000		10,000
	2.5.11	Training of Project Manager in implementation of	×	x	x	х		x	NCWC	UNFPA	RR	Cash	8,000		8,000
		RBM	^	^	^	^		^	RENEW	UNFPA	RR	Cash	8,000		8,000
	2.5.12	Follow up on Domestic violence Bill:-Consultation among Parliamentarians on draft DVB(2000)- Printing of DVB(5000)-dissemination through workshops (3000)	x		x	x			NCWC	UNFPA	RR	Cash	10,000		10,000
	2.5.13	Capacity development of NCWC/GFPs in sex disaggregated data analysis and planning using BMIS 2010		х	x	х			NCWC	UNFPA	RR	Cash	10,000		10,000
	2.5.14	Supply of safety equipments for women police personnel while dealing with GBV cases	х						NCWC	UNFPA	RR	Cash	5,000		5,000
	2.5.15	High level sensitization workshop among the parliamentarians and decision makers on the situation of GBV in Bhutan		х	x				NCWC	UNFPA	RR	Cash	7,000		7,000
	2.5.16	Counseling and therapeutic activities for victims of DV	х	х	x	х	х	х	RENEW	UNFPA	RR	Cash	5,000		5,000
Subtotal for CT Outcome	-		OF S		94	200	1%	-30	al carrier	2000	- Maries	Total	1,181,071	228,658	1,409,729
	1000		100	-	10	SVE	013		A PERMIT	india		UNICEF	587,771	174,658	762,429
		Control of the contro	-			1	38	-		4656000	THE LOCAL PROPERTY OF THE PARTY	UNFPA	593,300	54,000	647,300

CT Output 3.1 National capacity strengthened for multi sectoral	3.1.1.	Programming to empower adolescent girls-addressing gender/SRH/HIV "Connections"	x	х					RENEW/ UNFPA	UNFPA	OR	Cash	5,000		5,000
planning, coordination, management and monitoring of effective integrated HIV prevention, treatment				^					NCWC/ UNFPA	UNITA		Casii	5,000		5,000
and care strategies and plans. indicators:	3.1.2	Advocacy on ICPD agenda and UNFPA visibility in the Eastern District and development of advocacy package							RENEW/ UNFPA	UNFPA	RR	Cash	30,000		30,000
CT Output 3.1.a HIV/AIDS information advocated to all and quality HIV/AIDS services accessible through capacity strengthening at all levels. Indicator:	3.1.3	Observation of international events: World Aids Day observation (1st Dec) - \$2500 International Women's Day (8th march) - \$ 2500 Elimination of Violence against Women (25th Nov) - \$ 2500	x				х	х	RENEW	UNFPA	RR	Cash	7,500	2,500	10,000
Number of Dzongkhags with HIV/AIDS awareness and advocacy events	3.1.4	Monitoring of NPAG recommendation and 7th CEDAW concluding observation	х	х	х	х	х	х	NCWC	UNFPA	RR	Cash	7,000		7,000
undertaken Target 2011:15	3.1.5	Three months public health management and M&E course for 2 District health officer and one program officer					X		HIV/AIDs	UNAIDS		Cash		30,000	30,000
CT Output 3.2. Convergence amongst key national partners facilitated &	3.2.1	Office running expense including communication and utilities	х	x	х	х			RENEW/ LHAKSAM	UNAIDS			4,500		4,500
strengthened to implement multi- sectoral National AIDS Strategic Plan	3.2.2	Purchase of office supplies	х	х	х	х			RENEW/	UNAIDS			1,200		1,200
through capacity building on HIV	3.2.3	Travel within Bhutan for project staff	х	х	х	х			RENEW/ LHAKSAM	UNAIDS			1,300		1,300
prevention, treatment, care and support including PMTCT,	3.2.4	Participation in meetings workshop to enhance the capacity of project staff	х	х	х	х			RENEW/ LHAKSAM	UNAIDS			1,500		1,500
monitoring of epidemic through surveillance system and deliver	3.2.5	Printing of advocacy materials	х	х	х	х			RENEW/ LHAKSAM	UNAIDS			500		500
quality HIV/AIDS information and education, particularly to vulnerable	3.2.6	Procurement of Viral load testing Machine					х		PHL/DVED	UNICEF	unfunde	supplies		6,500	6,500
groups.	3.2.7	Strengthening PMTCT program in JDWNRH(training, recording, reporting, follow up, referrals.	X	Х	Х	Х			JDWNRH/MCH	UNICEF		cash	10,000		10,000

CT Output 3.2.a. Multiyear operation	3.2.8	Attend meeting and conference related to PMTCT		X	Х						unfunde				
plan on HIV/AIDS developed &		and infant feeding counseling for Doctors and program personnel							HRD/HIV AIDS	UNICEF	d	Cash	20,000		20,00
operationalized with focus on prevention among young people and	2 2 0	Rapid test Kits for PCR	\vdash	X	\vdash	\vdash	-	-	1101/1100/-0-1-	_					
PMTCT	3.2.5	machine		^					HIV/AIDS/clinic al lab	UNICEF	unfunde	Cash	40,000		40,00
Indicators:	3.2.10	Train doctors and health workers to provide		X		\vdash			dilab		- 0				
-No. of health centers implementing		PMTCT services and Pediatric HIV care and							RIHS/ HIV AIDS	UNICEF	unfunde	cash	24,000		24,00
PMTCT guidelines		support(in -country									d	1000000	2 1,000		24,00
Target: All 30 hospitals plus 140 BHUs	3.2.11	Printing of New Pediatric and PMTCT guideline	Х	X					Luciano			2.3			
Indicator: National strategic Plan for									HIV/AIDS	UNICEF		Cash	4,000		4,00
prevention and control on STIs and	3.2.12	Technical Support in development and		Х					200000000000000000000000000000000000000						
HIV/AIDS operational		implementation of GF grants							HIV/AIDS	UNAIDS		kind	20,000		20,00
Target 2011:	2 2 4 2	Advanta de anticolo de la colonida del colonida del colonida de la colonida del colonida del colonida de la colonida de la colonida de la colonida de la colonida del	-		-										
	3.2.13	Advocate at a national and local levels on MSM,	Х	X	X	X			200						
Output 3.2.b. NFE Learners in all		TG and HIV related issues							HIV/AIDS/UNDP	UNDP		Kind	20,000		20,00
centers informed on reproductive	2244				-	-									30.001.001.00
health, MCH, prevention of STI and	3.2.14	Study on stigma/discrimination and barriers to		X	Х										
HIV/AIDS		access, as well as private practitioners on MSM							HIV/UNDP	UNDP		Kind	40,000		40,00
Indicator:													18		
Number of NFE learners informed on	3.2.15	Supporting UNGASS reporting on MSM and TG per			X										
RH, MCH, prevention of STI and HIV		outcome and impact indicators Assessment								James State		*********			
Target 2011: 4500		No. 1, Carrest C 1							HIV/UNDP	UNDP		kind	10,000		10,00
CT Output 3.2.c. Capacity of religious	3.2.16	TA in Development of Research Agenda (including			Х										
practitioners strengthened to		printing and dissemination)							HIV/AIDS	UNAIDS		ITA/Kind	6,000		C 000
increase knowledge on HIV/AIDS							ш		1114/11100	OTTALOS		Traykillu	0,000		6,000
prevention among communities	3.2.17	Provision/mobilization of technical support to		X	\vdash										
unrough religious perspective.		review NACP and National operational plan 2010-		~			ш								
Indicator		2011					ш		HIV/AIDS	UNAIDS		ITA/kind	10,000		10,000
No. of monks and nuns trained on															
HIV/AIDS prevention and services	3.2.18	Provision of TA in collection ,analysis and	Х	Χ											
available.		dissemination of data on HIV/AIDS (fact sheet,		200			H								
Target 2011: 2000		estimation and projection)					ll								
									HIV/AIDS	UNAIDS		ITA	14,000		14,000
Subtotal for CT Outcome 3								509		1000		Total	281,500	39,000	320,50
									MINISTER OF THE PARTY OF THE PA			UNICEF	98,000		
														6,500	104,50
											-7	UNFPA	54,500	2,500	57,00
												UNAIDS	59,000	30,000	89,00
	-17					-						UNDP	70,000	-	70,00

CT Output4.1 Village health workers,	4.1.1			Т							T		1		
DYT and GYT members and religious personnel undertake health communication activities among selected communities.		Comprehensive review of the Village Health Workers Program (Community support/roles/responsibilities/TOR/ sustainability) in Primary Health Care initiative	x	х					VHW	UNICEF	unfunde d	ITA/cash	16,000		16,000
ndicator: Proportion of DYT sensitized on	4.1.2	Training of 750 VHWs in 14 Dzongkhags on community IMNCO, IYCF and measuring MUAC		x	х	х			vhw	UNICEF	OR	Cash	63,900		63,900
health issues and advocated communication activities	4.1.3	Training of 75 new VHWs from 20 Dzongkhags (replacement, gap filling)	x						VHW	UNICEF	unfunde d	Cash	15,000		15,000
Farget 2011: 10 ndicator: Proportion of VHW and religious personnel implementing nealth communication activities	4.1.4	Develop innovative communication programme in community level in 4 selected Dzongkhags (DHO, DE, NFE, HW and VHW)			x	x			VHW	UNICEF	OR	Cash	8,000		8,000
Target 2011: 75 TOutput 4.2 District level managers and health workers apply effectively interpersonal communication skills to elected communities.	4.1.5	Training of 200 local traditional healers on utilization of health services	x	x					VHW/RHP	UNICEF	explore with Religion and Health	Cash	12,250		12,250
Vorkers service in the community, arget 2011: 92%	4.1.6	Illustration, Design, layout and printing of IMNCI flip chart	х						IMNCI	UNICEF		supplies	4,000		4,000
ndicator: Global health days elebrated in districts arget 2011: At least 1 global day in all districts	4.1.7	Design, layout and printing of community IMNCI modules	×						IMNCI	UNICEF	OR	supplies	6,000		6,000
Subtotal for CT Outcome 4			^				263	54				Total	125,150		125,150
										9 55 55		UNICEF	125,150		125,150
		Assurance Activities													
										UNICEF	OR	Cash	5,000	0	5,000
	5.1	Quarterly, mid year and annual review meetings	Х	Х	Х	Х	Х	Х	PPD	UNFPA	RR	cash	2,000	0	2,000
		On-site Reviews			Χ		_								
rand Total			20.5	5/8/	THE R	Apply .	SHE					TOTAL	1,960,306	277,158	2,237,464
												UNICEF	1,037,506	190,658	1,228,164
												UNFPA	800,800	56,500	857,300
												UNAIDS	59,000	30,000	89,000
											1	UNDP	70,000		70,000