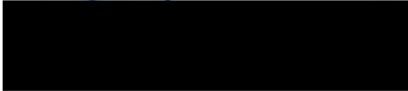


**UN ROAD SAFETY FUND CALL FOR PROPOSALS 2019
APPLICATION FORM**

Read the [Application Guidelines](#) carefully before filling in the Application Form. Do not modify the form's original format. Modified forms will not be accepted. Submission deadline is 4 Dec. 2019 (23:59 CET)

1. COVER PAGE

Project title	<i>Strengthening national capacity for the coordinated delivery of emergency medical services for victims of road traffic injuries in Azerbaijan</i>
Implementation organization(s)	<i>World Health Organization, Azerbaijan Country Office National Parliament Ministry of Internal Affairs Ministry of Health, Public Health and Reforms Center Azerbaijan Medical University The State Agency for Mandatory Health Insurance</i>
Participating UN Organization(s)	<i>UNDP World Bank</i>
Other partner(s)	<i>The State Transport Agency The National Automobile Club of Azerbaijan International Federation of Red Cross and Red Crescent Societies International Committee of the Red Cross National Red Crescent Society Fire Aid (UK)</i>
Beneficiary country(ies)	<i>Azerbaijan</i>
Country category	<input checked="" type="checkbox"/> Middle-Income <i>indicate % of total cost: _____</i>
Total budget including co-financing (in USD)	<i>550,000</i>

Budget to be funded by UNRSF (in USD)	<i>500,000</i>
Estimated start date	<i>October 2020</i>
Estimated end date	<i>March 2024</i>
Duration (in months)	<i>36</i>
Primary contact person <i>Name, title, e-mail and telephone</i>	Dr. Hande Harmanci, WHO Representative and the Head of WHO Country Office in Azerbaijan Telephone: +994 12 498 9888 e-mail: harmancih@who.int
Submitted by	Name and title: Dr. Hande Harmanci, WHO Representative and the Head of WHO Country Office in Azerbaijan.  Signature: F. Hande Harmanci Date: 4 December 2019

2. EXECUTIVE SUMMARY

Provide a summary of the project by including the following: background and problem statement, proposed solution and approach, its intended impact, linkages/synergies with ongoing initiatives, implementation arrangements and finally possible scale-up/replication and noteworthy innovations (max 750 words).

Road traffic crashes are a leading cause of death, serious injury and disability in Azerbaijan. Official figures as reported by the State Statistical Committee, indicates that between 2010-2018, more than 8500 people were killed and a further 22,000 were seriously injured on Azerbaijan's roads.

Road Safety is a national priority and the current national program of work for 2019-2023 was adopted by the President of the Republic of Azerbaijan in December 2018.

Under a Safe Systems approach to road safety, the evidence-based and data driven framework which is central to all WHO recommendations, road traffic injuries and deaths are preventable, both from occurring in the first place and secondarily and tertiarily through the provision of timely and appropriate post-crash care (PCC).

Post crash care has been identified as a priority under the national programme for road safety. This project is aligned to the objectives of the National Programme and will support the achievement of PCC specific objectives.

An **in-depth situational analysis** using WHO's Emergency Care Systems Assessment Tool (ECSAT) will be conducted to analyse the current protocols and procedures for post-crash care covering scene management, system activation and communication, transportation, human resources and facility. This assessment will identify gaps in the current processes and generate recommendations and action plans to address required actions.

The project will form and convene a **Technical Advisory Group**, made of representatives of national and international stakeholders and experts. Working groups will be established to implement the various work streams of the project.

An **advocacy meeting within the National Parliament** will be convened to inform the Parliamentarians of the proposed changes to the legislation and to obtain their support. National and international experts will address the National Parliament.

Curriculum development and responder training will take place in the Azerbaijan Medical University, for qualifying post-crash responders/paramedics, a cadre that does not yet exist in Azerbaijan and emergency care/trauma doctors.

Technical meetings, workshops and other training will take place for strengthening post-crash response including strengthening the system, starting in major national populations centers

3. PROJECT DESCRIPTION

3.1 PROBLEM STATEMENT

Explain how this project addresses a core road safety problem in the beneficiary country(ies) through the following questions: "what is the problem", "why does this problem exist?", "what effects does this problem have in terms of road fatalities and injuries?", "who is affected by the problem (including vulnerable groups such as children and women)?", and "why do beneficiary country(ies) need help in solving this problem?" (max 500 words).

The problem

10 people are killed or seriously injured on Azerbaijan's roads each day

The cause of the problem

Whilst a national road safety program has been developed, there are gaps in national approaches and opportunities to adopt best practice measures under the different pillars of a safe systems approach, including post crash care and the treatment of victims of road traffic injuries

Effects of the problem and the affected populations

Between 2010 and 2018, more than 22,000 people were seriously injured in road traffic crashes in Azerbaijan. This places an enormous burden on all aspects of the national health system including emergency and definitive facilities care as well as long term rehabilitation.

Why we should support Azerbaijan

Even though the activities around road safety have been in existence since 2009, the national strategy has come into effect only in December 2018. The implementation of the national strategy could be facilitated especially in the areas of norms and standards for post crash care.

The proposed project addresses the gaps in legislation, standards, systems and competencies to make implementation more rapid and feasible in Azerbaijan.

Such an intervention would also be beneficial to ensure that the action plan based on the national strategy is in line with the Global Framework Plan of Action for Road Safety. This project will help the country identify and address gaps based on international experience and best practice.

3.2 PAST, ONGOING AND PLANNED PROJECTS

List the past, ongoing and planned projects that have been designed to address this or related problem(s). Justify the need for this project by explaining their gaps and shortcomings, as well as potential synergies with the proposed project (max 500 words).

As part of a USAID project, 8 professionals from Azerbaijan participated in a "Traffic Safety" exchange program, a three-week cultural exchange and practical training opportunity in the USA, in 2009. This

exchange allowed participants to learn more about developing a culture of safe driving, based on US experiences; develop networks with US institutions/auto-motor unions; and learn how to improve public awareness campaigns and advocacy for traffic safety, based on international best practices.

In May 2011, The Public Health and Reforms Center (PHRC), in collaboration with WHO Country Office, launched the Decade of Action for Road Safety in Azerbaijan. The launch was well covered by the national media and was supported by national and international organizations, government bodies, and representatives of the civil society.

Azerbaijan participated in 2009, 2011 and 2015 WHO Global Status Reports on road safety. Studies were conducted by PHRC in collaboration with WHO Country Office.

Each year PHRC commemorates the World Day of Remembrance for Road Traffic Victims (WDOR) with partnership of different organizations.

Despite a number of activities over the years, none of the above projects have done the analysis and implemented the interventions put forth by the current proposal. The newly adopted national program on road safety has set the stage for development of the national strategy and action plans. Hence it is now the right time to do the in-depth analysis of the current legislative environment.

None of the above projects addressed the accessibility and quality of post-crash response either. The emergency care system in the country has some weaknesses. One of which is that there is no formal certification of health care providers working in hospitals for emergency care. There are also issues in accessibility of mobile emergency care units.

3.3 PROJECT OBJECTIVE

In one sentence, state the objective (i.e., the overall intention) to be achieved at the end of the defined period through this proposed project.

To support the government of Azerbaijan in developing a model for an operational emergency management system for providing timely and effective post-crash care to victims of road traffic injury

3.4 PROJECT STRATEGY AND RESULTS

Explain the overall project approach and strategy. List expected project results (i.e., expected outcomes and outputs). These results must be measurable and directly derive from project activities. Highlight population target groups as well as any innovative approaches. Briefly describe the implementation plan coherent with proposed activities with estimated time schedule (max 800 words).

The proposed project aims to enhance specific capacities in Azerbaijan to improve the implementation of the actions proposed in global normative documents.

1. The first step will be an **in-depth situational analysis** in terms of the legislative environment and the post-crash response structure and system. This will identify the areas that need further action and strengthening.

The *analysis of the post-crash response* will be based on the WHO Emergency Care System Assessment Tool. The components will be comprised of the following: first response (including system activation

and universal access number), prehospital injury care, transport, in-facility injury care (including triage, resuscitation and management), rehabilitation, management of disabilities and workplace integration.

2. The analysis will be shared in a **national stakeholder meeting** involving all sectors; governmental agencies, non-governmental groups, international organizations, the civil society, UN, the academia and others.

3. A technical advisory group (TAG) and **task force** will be created as a result of this meeting for prioritizing, implementing and follow-up. Activities and responsible parties will be assigned within a timeline. Monitoring indicators will be defined and adapted.

4. The task force will be supported by **international experts** to ensure that the best international standards are utilized in strengthening the system.

5. An **advocacy meeting within the National Parliament** will be convened to inform the Parliamentarians of the proposed changes to the legislation and to obtain their support. National and international experts will address the National Parliament.

6. **Technical meetings, workshops and trainings** will take place for strengthening post-crash response including strengthening the system and individual competencies, starting with the most densely populated areas in the country. Technical meetings will aim to improve management of systems of post-crash care. Workshops and trainings will be for policemen, firefighters and teachers at the community level; ambulance staff (drivers, doctors and nurses) at transport level; and emergency ward doctors and nurses at the treatment facility level.

7. **Curriculum development and/or strengthening** will take place in the Azerbaijan Medical University, for producing post-crash responders/paramedics, a cadre that does not yet exist in Azerbaijan and emergency care/trauma doctors.

8. A **second national stakeholder meeting** will be convened one year after the start of the project to report on the progress. It will be organized in conjunction with UN Global Road Safety Week, which is expected to be held in 2021.

9. Throughout the project, **public communication** will be a priority to raise public awareness of road safety and to inform the public of the project activities. This will sensitize the public as well as the medical community and the politicians, will help build trust and will contribute to the overall accountability of the project.

10. The project will end with an **international knowledge dissemination meeting** for the CIS countries where the project methodology and results will be reported.

INSERT EXPECTED RESULTS

3.5 COMPARATIVE ADVANTAGE

Describe your comparative advantage relative to other actors. Use key results and lessons learned from other projects that you have implemented to explain how you have added value so far. What is the unique solution that is being proposed by your organization? (max 500 words).

World Health Organization, Azerbaijan Country Office will be the lead agency of this project. The core functions of WHO are 1) providing leadership on matters crucial to health engaging in partnerships; 2) shaping the research agenda to generate, translate and disseminate knowledge; 3) setting norms and standards and promoting their implementation; 4) articulating ethical and evidence-based policy options; 5) providing technical support catalyzing change and building sustainable institutional capacity; and 6) monitoring the health situation and assessing health trends. Due to its cross-sectional and multi-sectoral character, this project covers four out of these six core functions (1, 3, 4 and 5). The WHO Country Office, Azerbaijan was established in June 1994 in Baku and has since served the country mainly via its collaboration with the Ministry of Health. Since its conversion into an international office in 2018, it has doubled its staff capacity and extended its sphere of influence to other sectors and ministries within and outside of the government. WHO has worked with the National Parliament in a number of issues like reproductive health, tuberculosis, and HIV/AIDS. In all these areas, the National Parliament decided to form working groups, make use of WHO expertise in technical aspects and revised the current legislation. This has been a productive and useful partnership which we will be able to build upon for this project. The Ministry of Internal Affairs is the main responsible party for Road Safety Issues. WHO has traditionally had good working relations with this Ministry.

The main government implementing partner of WHO in issues related to public health is the Public Health and Reforms Center (PHRC). Established in 2006, the PHRC defines the main directions for the development and implementation of health programs, regulates reforms in health care and collaborates with the local and international organizations. PHRC has a history of successful cooperation with WHO, CDC, UNICEF, World Bank, USAID and other major partners in various areas of public health. Moreover, PHRC is an implementation agency of the new “Azerbaijan State Program on Road Safety (2019-2023)” and the national action plan. WHO-PHRC partnership has produced successful results in tobacco control, NCD assessment and control, quantification of public health risks, public and risk communication in many areas including road safety.

WHO has been working with the Azerbaijan Medical University in strengthening its medical undergraduate and postgraduate education. Curriculum analysis has been carried out with recommendations and working groups are currently in action to make improvements. A high-level policy dialogue has been on-going to produce new cadres needed for improving the health outcomes of the population. Plans are under way to create three new cadres of health professionals. The State Agency for Mandatory Health Insurance (SAMHI) is mandated to create a public health insurance system and also to improve the quality of health services in the country. WHO has been working with SAMHI since its establishment in the areas of health financing and quality assurance. Another project underway is developing a model primary health care system for Azerbaijan including emergency healthcare.

WHO's added value in this project is its unique ability as a trusted partner to bring together multiple agencies and sectors both from within and outside of the government for high level policy-dialogue and action; propose evidence-based policy and technical guidance; and provide expertise for direct technical assistance.

3.6 CONSISTENCY WITH GLOBAL FRAMEWORK PLAN OF ACTION FOR ROAD SAFETY

Indicate the following:

- Road Safety Management
- Safe User
- Safe Vehicle
- Safe Road
- Post-Crash Response

I. Shade the relevant cell(s) of the figure below in gray to indicate which aspects the project will focus on:

Area \ Pillar	Legislation	Enforcement	Education	Technology	International Regulatory Support
Road safety management					
Safe user	Traffic rules Drivers Cyclists Pedestrians	Lawful behavior ensured by police and inspectors	Awareness raising, training and examination	Supportive technology and equipment, rules reminders	UN RS legal instruments and resolutions, WP.1, SC.1, WP.15
Safe vehicle	Rules and standards for admission of vehicles to traffic	Certification and inspections by qualified inspectors	Awareness raising for users, training for inspectors	Supportive technology and equipment, compliance reminders	UN RS legal instruments and resolutions, WP.1, WP.29
Safe road	Standards for design, construction, maintenance and signage	Audit, assessment and inspection by qualified teams	Awareness raising for road managers, users, and for inspectors	Forgiving and self-explaining road design, intelligent road systems	UN RS legal instruments and resolutions, int. standards WP.1, SC.1
Effective post-crash response	Standards for data collection post-crash response and investigation	Oversight of rescue services, investigators investigating crashes	First aid and rescue service training, investigators training	Supportive technology and equipment	Consolidated resolution, int. standards, WP.1, SC.1

I. Explain how this project integrates the safety system principles and provides sustainable solutions to the root causes of the problem (max 300 words)

The project seeks to implement various actions in Azerbaijan with the objective to improve road safety as identified by the General Assembly in its resolutions and by the Secretary-General's biennial reports on improving global road safety.

Recommended actions will include developing and implementing ambitious, but realistic road safety measures within the framework of the new "Azerbaijan State Program on Road Safety (2019-2023)" to ensure safe speeds, safe roads and roadsides, safe vehicles and safe road users.

The legislation review and revision part of the project will directly contribute to improving the gaps within the legal framework of the country, and will cover mainly the road user behaviour of the safety system principles.

The public communication component will raise awareness and aim to mobilize the public to change own safety behaviour and also to solicit safer roads, vehicles and road users.

Sustainability will be ensured by supporting the government ownership of the issue, which is already in place. PHRC will continue to be the main public health implementing body of the government in such areas. The legislative environment will have been improved. With the involvement of other partners in the project, there will have been adequate impetus in the country to create an overall change that will be beneficial to the systems and the population.

Sustainability of the post-crash component will be ensured through the changes in the curriculum of the Azerbaijan Medical University and via production of well-trained cadres.

3.7 BENEFICIARY GOVERNMENT(S) ENDORSEMENT

Please confirm, if the project was requested and/or discussed with beneficiary government(s). If there is an explicit request or endorsement by the beneficiary government(s), please attach to the application

Received

Under discussion

Comments: PHRC is the main implementing partner that reports directly to the Ministry of Health.

Their endorsement is obtained. Road Safety is a government priority as evidenced by the national strategy on road safety. Discussions with various government agencies have taken place and all endorse this application. Written endorsements will be provided at a later stage.

3.8 EXPECTED IMPACT

Outline the likely quantitative impact of this project in the immediately following project conclusion and in the long-term towards reducing road fatalities and serious injuries.

IMMEDIATE IMPACT: reducing the number of road fatalities by 10%;

The national impact targets are listed below. This project will contribute to the attainment of these targets.

POTENTIAL LONGER-TERM IMPACT:

Targeted number of lives saved: 30%

Other targeted road safety impact(s) (please describe):

Reducing the number of child and adolescent death by 50%.

3.9 REPLICATION AND SCALE-UP

Describe how the project intends to sustain any achievements beyond the completion of the project. Specify the arrangements to scale-up and replicate results, as relevant (max 500 words).

The WHO Country Office will lead this project in close collaboration with PHRC, ATU and SAMHI. Thus, all project activities will be incorporated into the annual work plan of these organizations. The Technical Advisory Group (TAG) will continue to work as an inter-sectoral working group to establish its own plan of actions, which includes the joint programming related to the road safety issues, including further strengthening of an effective national road safety management system, focusing on post-crash response, as well as issues of cooperation with international organizations and civil society. The TAG will continue to meet on a regular basis and provide its feedback to the government on various issues of road safety. Upon completion of this project, it is expected that WHO, TAG, PHRC and others could undertake further fundraising efforts both from within and outside of the government. The project website which will be created by PHRC will continue to provide up-to-date information on road safety in the country.

This project will reinforce the experience and collaborations on road safety of all individuals and organizations that have participated in the project.

The documents developed by the Project will allow the government and other stakeholders to build their activities in line with the up-to-date international requirements.

3.10 INDICATIVE BUDGET

See Annex I of Application Guidelines for description of UNDG budget categories

Object of expenditure	Notes	Requested from UNRSF (US\$)	Co-financing (US\$)
1. Staff and other personnel costs	A National Professional Officer for 3 years	100,000	35,000

2.	Supplies, commodities, materials		10,000	5,000
3.	Equipment, vehicles and furniture including depreciation		12,290	
4.	Contractual services		125,000	5,000
5.	Travel		60,000	
6.	Transfers and grants counterparts		135,000	
7.	General operating and other direct costs		25,000	
Total project direct costs				
8.	Indirect support costs (7%)		USD 32,710	
Grand total			USD 500,000	

4. PROJECT MANAGEMENT

4.1 IMPLEMENTATION ARRANGEMENTS

Explain roles and responsibilities of the parties involved in governing and managing the project, for example, the number of full-time and part-time staff. Outline any governance mechanisms that will be utilized or established.

In order to reach main objectives, the project will incorporate knowledge and expertise of the representatives of WHO country office, PHRC, Technical Advisory Group (TAG), international experts, civil society partners. Bringing together the organizations representing the Azerbaijani Government, local NGO and academic institutions we weave the local experience, promise of sustainability and internationally recognized expertise in one communication thread.

WHO country office will have responsibility for organizing the missions and workshops to be held in Azerbaijan and adjusting the workshop programs to the specific needs of its country. They will also be responsible for hiring the national staff and consultants, to do the legislative review and coordinating with the national Ministries to organize the advisory missions.

WHO country office will be responsible for all reporting pertaining to the project.

PHRC will be responsible for all activities on raising public awareness including creating a web-page, creating and implementing a three-year communication strategy.

4.2 PARTNERSHIPS

Specify the roles of implementation partners in the project and how they will be engaged. Will the project utilize the existing cooperation platform(s) to achieve and sustain results?

WHO will be the leading UN agency in the project with the responsibility of overall management of all activities and reporting.

WHO will also be responsible for quality assurance by ensuring the use of ethical and evidence-based policies and guidelines at the legislative and technical areas.

Technical Advisory Group will assign priorities, coordinate and oversee the implementation.

PHRC is the main partner for the public communication component of the project.

UNDP will be doing the contractual arrangements and procurements.

4.3 RISK ASSESSMENT MATRIX

Please specify the key risks that can threaten the achievement of results through the chosen strategy and its assumptions. Describe how project risks will be mitigated, especially how potential adverse operational, social and environmental impacts will be avoided where possible and otherwise managed. Complete the table using the Risk Scoring Table in Annex II of Application Guidelines). Add additional rows, as needed.

Risk Assessment Matrix

Key Risk	Likelihood (2-5, see Annex II in Guidelines)	Impact (1-5 see Annex II in Guidelines)	Score (L x I)	Control/Mitigation Measure ¹	Mitigation Timeline
Lack of political will	2	1	3	These risks will be mitigated by close cooperation with Government and involvement of national road safety advocates.	During project timeline
Stakeholders will not be able to agree to follow-up recommendations in the national review	2	1	3		
Possible delays in the	3	1	4	These risks will be mitigated by a careful	

¹ Where risk factors are scored "high" or "very high" (score 9 to 25), mitigation measures must be addressed through actions that are planned and costed in the project budget, with immediate actions for risks scored at "Very High" (score 20 to 25).

implementation of activities				planning of all activities in consultation with the Government	During project timeline
Unavailability of local road safety experts	2	1	3		
Poor coordination / participation of the stakeholders.	2	1	3		

3.3 MONITORING AND EVALUATION

In this section please outline the project's monitoring and evaluation plans. Provide information on when monitoring and evaluation will occur. Specify the type of evaluation that will take place.

The capacity building component of the project will be evaluated using Kirkpatrick's Model, which considers the style of training to determine aptitude based on four levels. Level 1 Reaction measures how participants react to the training (e.g., satisfaction?). Level 2 Learning analyzes if they truly understood the training (e.g., increase in knowledge, skills or experience?). Level 3 Behavior looks at whether they are utilizing what they learned at work (e.g., change in behaviors?), and Level 4 Results determines if the material had a positive impact on the business / organization.

The awareness raising component will be assessed by using methods for social reach on social and traditional media; by doing search volume on web platforms (like Google) on road safety; and by doing website traffic analyses. Change in attitudes, norms and beliefs will be assessed through analysis of primary and secondary data.

The impact analysis will be done by using quantitative data collected by the government. Based on the inter-regional analyses and taking into consideration the local circumstances, comparative analyses will be performed to predict the possible outcomes of the interventions. These would cover the regulation of roads and traffic rules, as well as the timely and effective post-crash interventions.

5. STATEMENT OF COMPLIANCE

The undersigned certifies, following diligent inquiry, as follows:

1. Project Personnel² have not engaged in any activity which would violate Sections III (Special Provisions Regarding Financing of Terrorism) or VII (Fraud, Corruption and Unethical Behavior) of the Fund MOU, nor do there exist any circumstances which could reasonably be perceived to present a potential or actual conflict of interest³ on the part of the Applicant or its Implementing Partner(s), or any contractors, vendors or suppliers.

² "Project Personnel" shall mean any person or entity employed or engaged in any capacity with respect to the Project, including without limitation, employees, interns, volunteers, contractors, or vendors, whether engaged directly or through third parties including Implementing Partners.

³ "Conflict of interest" shall refer to circumstances where, by act or omission, a party's private interests or those of his or her family members, such as outside professional relationships or personal financial assets, interfere or appear to interfere with the proper performance of his or her professional functions or obligations to the contracting organization.

2. The Project (including related projects within a larger project or programme) shall not directly or indirectly (e.g., through Implementing Partners or third parties) engage or provide financial or personal benefit to, whether individually or by corporate ownership, participation or benefit, members of the Fund's governing bodies.
3. The Project (including related projects within a larger project or programme) is not currently engaged, nor shall it engage, in any relationship or arrangement, financial or otherwise, which may constitute a conflict of interest or a violation of Sections III or VII of the Fund MOU.
4. In managing and implementing Project activities, Project Personnel shall not seek or receive instructions from any Government or from any other authority external to the Applicant except as otherwise provided in the Project Documents and Governing Agreements.
5. It has disclosed all pertinent facts surrounding Project Personnel, and any relationship or arrangement, financial or otherwise, which may constitute a conflict of interest or a violation of the Fund MOU Sections III and VII [Attachment 1].
6. It has disclosed all complementary funding received, pledged or sought with respect to Project activities in item V. of the Project Proposal.

[Signature Block of Executive Officer or designate]

F. Hande Harmanci
4 December 2019, Baku

Attachment 1: Disclosure of Pertinent Facts

6. PROJECT SUBMISSION

ARE ALL THE FOLLOWING ELEMENTS INCLUDED AND COMPLETED IN YOUR APPLICATION?	
Section 1. Proposal Cover Page	<input checked="" type="checkbox"/> Yes
Section 2. Executive Summary	<input checked="" type="checkbox"/> Yes
Section 3. Project Description	<input checked="" type="checkbox"/> Yes
Section 4. Project Management	<input checked="" type="checkbox"/> Yes
Section 5: Statement of Compliance	<input checked="" type="checkbox"/> Yes
Letters of support from national counterparts	<input type="checkbox"/> Yes
Any other annexes (depending on application)	<input type="checkbox"/> Yes <input type="checkbox"/> N/A

Annex 1: Logical Framework and Workplan

Note – please ensure alignment to sections 3.3 and 3.8 in the Application Form

A. LOGICAL FRAMEWORK

PROJECT OBJECTIVE: *To support the government of Azerbaijan in developing a model for an operational emergency management system for providing timely and effective post-crash care to victims of road traffic injury*

Expected outcome 1	Indicators	Means of verification
Situational Assessment	Indicator 1: Formation of a high-level working group Baseline: No Target: Yes Indicator 2: Reports on gaps on legislation and post-crash response system Baseline: No Target: Yes	<i>Reports</i>

HOW DOES OUTCOME 1 CONTRIBUTE TOWARD ACHIEVING:

SDG 3.6: “By 2020, halve the number of global deaths and injuries from road traffic accidents”?

Situational assessment will produce a report containing gaps on legislation and post-crash response. The national stakeholder meeting, following the assessment will serve to produce a consensus statement on national priorities based on the analyses. These

two outputs would contribute to the development of an updated national action plan, including accountability framework in order to strengthen post-crash response.

Performance targets (project outputs that show progress towards achieving outcome 1)		Expected Milestone for each reporting period (annual)
Output 1.1 <i>Stakeholder engagement achieved</i>		April/2021
Output 1.2 <i>Emergency Care Situational Assessment (ECSA) conducted</i>		October/2021
Output 1.1	Indicators	Means of verification
<i>Stakeholder engagement, coordination and oversight</i>	Formation of a high-level working group	<i>Reports</i>
Project activities:		Expected Milestone for each reporting period (annual)
1.1.1 High level intersectorial coordination mechanism for road safety action formed and operationalized		April/2021
1.1.2 Project working group on ECS for road trauma formed and operationalized		April/2021
Output 1.2	Indicators	Means of verification
Emergency Care Systems Assessment (ECSA)	Emergency Care Systems Assessment conducted	<i>Reports</i>

Project activities:	Expected Milestone for each reporting period (annual)
1.2.1 Road safety situational assessment conducted, report disseminated	July/2021
1.2.2 ECS assessment conducted, report disseminated	October/2021

Expected outcome 2	Indicators	Means of verification
<i>ECS Protocol and Curriculum</i>	<p>Indicator 1: Policies and procedures for ECS for road trauma developed</p> <p>Baseline: No Target: Yes</p> <p>Indicator 2: Curriculum developed</p> <p>Baseline: No Target: Yes</p> <p>Indicator 3: Pilot testing done</p> <p>Baseline: No Target: Yes</p>	<i>Insert both the data source and the method for measuring progress against each indicator</i>

HOW DOES OUTCOME 2 CONTRIBUTE TOWARD ACHIEVING:

SDG 3.6: “By 2020, halve the number of global deaths and injuries from road traffic accidents”?

[insert response]

As a result of the 1 st outcome, curricula for implementation by the Azerbaijan Medical University for formally training post-crash respondents will be adopted, along with improved post-crash systems management including functions, equipment, supplies and information technologies. This would lead to competent post-crash respondents (doctors, nurses and ambulance drivers/paramedics) being trained through formal education and consequently at work at all three levels.		
Performance targets (project outputs that show progress towards achieving outcome 2)		Expected Milestone for each reporting period (annual)
Output 2.1 ⁴ Policies and procedures for ECS for road trauma developed		April/2022
Output 2.2 Curriculum developed		April/2023
Output 2.3 Pilot testing done		January/2024
Output 2.1	Indicators	Means of verification
Policies and procedures for ECS for road trauma	<i>Policies and procedures for ECS for road trauma developed</i>	<i>Reports</i>
Project activities:		Expected Milestone for each reporting period (annual)
2.1.1 Protocol for systematic intersectorial road safety management		January/2022
2.1.2 Policy and procedures for ECS		April/2022

⁴ **Performance Targets / Milestones:** Are benchmarks (not activities) that represent attainment of a project stage or project achievement that show progress towards project outcomes and outputs. Milestone attainment should be strictly answerable with a “yes” or “No” answer. Outcome milestone will often show progress on a particular outcome indicator target, but can also be a major significance benchmark, believed to lead to the outcome

Output 2.2	Indicators	Means of verification
Curriculum development	<i>Competency-based, quality assured curricula developed</i>	<i>Reports/curriculum</i>
Project activities:		Expected Milestone for each reporting period (annual)
2.2.1 Curriculum development		April/2023
2.2.2 Capacity development and training		April/2023
Output 2.3	Indicators	Means of verification
Pilot testing	<i>Competency-based, quality assured curricula piloted</i>	<i>Reports/MOH sources</i>
Project activities:		Expected Milestone for each reporting period (annual)
2.3.1 Pilot testing and finalisation		February/2024

Annex 2: Contact details

PARTICIPATING UN ORGANIZATION (S) - PUNOs	
PUNO(s)	World Health Organization
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Primary contact person (name) Dr. Hande Harmanci
Functional Title	WHO Representative and the Head of WHO Country Office in Azerbaijan
Section / Department	Country Office
Address	UN House, UN 50 th anniversary str., 3, Baku, Azerbaijan
Telephone	+994 12 498 9888
E-Mail	harmancih@who.int
OTHER PARTNERS (AS APPLICABLE) (ADD ROWS FOR EACH PARTNER)	
For <u>each participating project partner</u> , please provide the following information	
Name of organization	Azerbaijan Medical University
Contact person	Rector Prof. Garay Garaybayli
E-Mail	geraybeyli@psychiatry.az
Organization's role in the project:	<i>Piloting of the curriculum</i>

For <u>each participating project partner</u> , please provide the following information	
Name of organization	Public Health and Reforms Center

Contact person	Director Gahraman Hagverdiyev
E-Mail	gahraman.hagverdiyev@isim.az
Organization's role in the project:	<i>Public communication to raise awareness of road safety and to inform the public of the project activities</i>

Annex 3: Past, ongoing and planned projects

Please refer to the information provided on section 3.2 in the Application Form.

<u>PAST PROJECTS</u>	
Project Name	
Duration/Dates	
Budget	
How does the project proposal build on the lessons learned and achievements from this project?	

<u>ONGOING PROJECTS</u>	
Project Name	World Day of Remembrance for Road Traffic Victims
Duration/Dates	Date not announced due to COVID-19
Budget	
How will the project proposal be aligned with this project?	Each year PHRC commemorates the World Day of Remembrance for Road Traffic Victims (WDOR) with partnership of different organizations.

PLANNED PROJECTS

Project Name	
Duration/Dates	
Budget	
How will the project proposal be aligned with this project?	