



Guidance note: how to develop a continuous improvement plan (CIP)

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# Supplemental resources

- SUPPLEMENT 1:** *Establishing or strengthening a National Logistics Working Group*  
[www.technet-21.org/en/library/explore/supply-chain-and-logistics/3735](http://www.technet-21.org/en/library/explore/supply-chain-and-logistics/3735)
- SUPPLEMENT 2:** *Situation analysis*  
[www.technet-21.org/en/?option=com\\_sobipro&sid=4800&pid=57&Itemid=2586](http://www.technet-21.org/en/?option=com_sobipro&sid=4800&pid=57&Itemid=2586)
- SUPPLEMENT 3:** *cIP workshop agenda repository*  
[www.technet-21.org/en/?option=com\\_sobipro&sid=4819&pid=57&Itemid=2586](http://www.technet-21.org/en/?option=com_sobipro&sid=4819&pid=57&Itemid=2586)
- SUPPLEMENT 4:** *Collaborative workshop techniques*  
[www.technet-21.org/en/?option=com\\_sobipro&sid=4801&pid=57&Itemid=2586](http://www.technet-21.org/en/?option=com_sobipro&sid=4801&pid=57&Itemid=2586)
- SUPPLEMENT 5:** *WHO Framework for National Health Policies, Strategies and Plans*  
[www.who.int/nationalpolicies/FrameworkNHSP\\_final\\_en.pdf](http://www.who.int/nationalpolicies/FrameworkNHSP_final_en.pdf)
- SUPPLEMENT 6:** *Root-cause analysis*  
[www.technet-21.org/en/?option=com\\_sobipro&sid=4802&pid=57&Itemid=2586](http://www.technet-21.org/en/?option=com_sobipro&sid=4802&pid=57&Itemid=2586)
- SUPPLEMENT 7:** *Human-centred design methodologies and toolkit*  
[www.hcd4i.org](http://www.hcd4i.org)
- SUPPLEMENT 8:** *Guidance on Dashboards for Immunization Supply Chain*  
[www.technet-21.org/iscstrengthening/index.php/en/data-for-management-documents-and-downloads/guidance-on-dashboards](http://www.technet-21.org/iscstrengthening/index.php/en/data-for-management-documents-and-downloads/guidance-on-dashboards)
- SUPPLEMENT 9:** *Activity and monitoring plan template (cMYP Guidelines, page 69)*  
[apps.who.int/iris/bitstream/10665/100618/1/WHO\\_IVB\\_14.01\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/100618/1/WHO_IVB_14.01_eng.pdf)
- SUPPLEMENT 10:** *cMYP costing tool*  
[www.who.int/immunization/programmes\\_systems/financing/tools/cmyp/en/](http://www.who.int/immunization/programmes_systems/financing/tools/cmyp/en/)
- SUPPLEMENT 11:** *WHO/UNICEF Joint Statement: Achieving immunization targets with the comprehensive Effective Vaccine Management (EVM) framework*  
[www.who.int/immunization/programmes\\_systems/supply\\_chain/EVM-JS\\_final.pdf](http://www.who.int/immunization/programmes_systems/supply_chain/EVM-JS_final.pdf)

# Acronyms and abbreviations

|                |  |
|----------------|--|
| <b>CCE</b>     | Cold Chain Equipment                                 |
| <b>CCE OP</b>  | Cold Chain Equipment Optimization Platform           |
| <b>cIP</b>     | Continuous Improvement Plan                          |
| <b>cMYP</b>    | Comprehensive Multi-Year Plan                        |
| <b>DISC</b>    | Dashboard for Immunization Supply Chain              |
| <b>EPI</b>     | Expanded Programme on Immunization                   |
| <b>EVM</b>     | Effective Vaccine Management                         |
| <b>EVMA</b>    | Effective Vaccine Management Assessment              |
| <b>GAVI</b>    | Gavi, The Vaccine Alliance                           |
| <b>GF</b>      | Global Fund  |
| <b>GFF</b>     | Global Financing Facility                            |
| <b>GVAP</b>    | Global Vaccine Action Plan                           |
| <b>HR</b>      | Human Resources                                      |
| <b>HSIS</b>    | Health Sector Improvement Strategy                   |
| <b>HSS</b>     | Health System Strengthening                          |
| <b>HSSP</b>    | Health Sector Strategic Programme                    |
| <b>ICC</b>     | Inter-agency Coordinating Committee for immunization |
| <b>IP</b>      | Improvement Plan                                     |
| <b>iSC</b>     | Immunization Supply Chain                            |
| <b>KPI</b>     | Key Performance Indicator                            |
| <b>LMIS</b>    | Logistics Management and Information System          |
| <b>M&amp;E</b> | Monitoring and Evaluation                            |
| <b>MoH</b>     | Ministry of Health                                   |
| <b>NGO</b>     | Nongovernmental Organization                         |
| <b>NHSP</b>    | National Health Sector Plan                          |
| <b>NITAG</b>   | National Immunization Technical Advisory Group       |
| <b>NLWG</b>    | National Logistics Working Group                     |
| <b>SOP</b>     | Standard Operating Procedure                         |
| <b>TA</b>      | Technical Assistance                                 |
| <b>UNICEF</b>  | United Nation Children's Fund                        |
| <b>WHO</b>     | World Health Organization                            |

# About this Guidance Note

**This document provides guidance to countries on how to develop a continuous immunization supply chain (ISC) improvement plan.** Its purpose is to help countries build a case for supply chain investments and develop an improvement plan that engages relevant stakeholders, thus setting the immunization programme on a path for successful implementation.

This Guidance Note includes:

- An **OVERVIEW OF THE CONTINUOUS IMPROVEMENT PLAN (CIP) DEVELOPMENT PROCESS**, including who should be involved, when the plan should be drafted, and how best to gather the required inputs and feedback.
- **STRATEGIES FOR ALIGNING EFFECTIVE VACCINE MANAGEMENT (EVM) ASSESSMENT OUTPUTS** with national immunization and health sector planning and financing mechanisms, such as the comprehensive multi-year plan for immunization (cMYP); application for support from Gavi for health system strengthening (HSS); the national health sector improvement strategy (HSIS), and other health sector strategies and plans.
- **GUIDANCE ON PREPARING A CIP**, to include a five-year strategy and a yearly operational plan that can be used to allocate responsibilities and map progress towards a common vision.
- **SUGGESTIONS ON HOW TO DEVELOP A BUDGET** and finance the CIP to ensure sustainability and identify resource gaps.

Countries may be familiar with the previous EVM improvement plan process that immediately followed an EVM assessment (EVMA). Whereas the previous EVM improvement plan was designed to address certain short-term supply chain deficiencies, the new, continuous EVM improvement plan described here is designed to be more strategic and inclusive of a wider set of stakeholders who can help reveal the root causes of supply chain problems and mobilize human and financial resources to address them.

**SUPPLEMENTAL RESOURCES** for each step of the EVM improvement planning process are also provided.

# Foreword

In the context of renewed global efforts to increase immunization coverage and leave no child unvaccinated, the role of strong national immunization supply chains is hard to overstate. Supply chains are complex and include many elements – people, technologies, systems – that need to be brought together through a plan of continuous action. Such a plan can catalyse not only the immunization supply chain professionals working in the national Expanded Programme of Immunization (EPI), but also their colleagues from the ministries of finance, planning, human resource management departments, senior leadership, development assistance partners, funders and academia. Without this commitment and support, the immunization supply chain professionals are unlikely to succeed in addressing existing gaps in performance and setting up the programme on a path to a sustained, country-driven excellence in ensuring continued vaccine availability, quality and systems efficiency.

The purpose of this guidance is to help make the plan of action robust and credible. A robust plan is based on evidence and a strong programming logic, i.e. it focuses investments on activities that together add up to a defined set of objectives and thus help realize the vision of the future and address the deficiencies of the past. The plan is credible when it responds to country needs, and represents a shared vision of the stakeholders who have bought into the plan of action and have a way to track implementation progress against predefined performance targets.

These attributes elevate the plan to a powerful investment case for iSC improvement – an advocacy tool for ministries of finance to include and retain iSC activities in their national budget, and for partners to continuously support the cause. These are also the prerequisites of the “holy grail” of institutionalization: the programme putting iSC improvement activities on the radar of national leadership by linking them to the annual operational plans and budget performance metrics.

However, even a fully funded plan is at risk of remaining a piece of paper unless it touches the hearts and minds of those whose mission is its implementation. Aligning continuous growth – continuous learning – of the EPI workforce at all levels with the process of continuous improvement of the iSC system, is the essential element that makes the coalition for sustained excellence in iSC whole. The EPI workforce is the first to learn what does not work, and often has the clearest insights on how to make it work in the programme context. Participatory models that empower and give implementers a stake in the design and implementation of iSC improvement plans are being embraced increasingly by countries, centralized and devolved contexts alike.

The EVM initiative has progressed significantly from being associated with an assessment tool. It has been transformed to help national programmes make major health systems strengthening investments work as intended – to address the underlying systemic bottlenecks to iSC performance. WHO and UNICEF hope that this guidance can inspire and equip you with the knowledge and skills on how to make this initiative work for you.

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_25731](https://www.yunbaogao.cn/report/index/report?reportId=5_25731)

