

Services Delivery Improvement Action Plan: Proposal Format

The following checklist is a guide to the "Services Delivery Improvement Action Plan (SDIAP) Proposals. Although this structure is not compulsory, it should be adhered to as closely as possible in order to facilitate the assessment of the SDIAP.

Proposal Structure Checklist for Service Delivery Improvement Action Plan (SDIAP)

- ❖ TITLE OF SDIAP:
- ❖ FOCUS AREA/SUB-THEME OF SDIAP: **Health Systems Preparedness**
- ❖ RELATED TOPIC/SUB-TOPIC REFORM ISSUE: (identify the topic/sub-topic which the SDIAP is targeting)
- ❖ IDENTIFICATION OF SDIAP TEAM: **Team Padma** (Fill in the table below for other necessary information)

Sl. No.	Full Name of the Participant	Designation	Address of Work Station	Email ID	Mobile Number
1	REZWANA CHOWDHURY	Sr. Research Monitoring & Evaluation Advisor	Ipas Bangladesh	chowdhuryr@ipas.org	01712105652
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5	SREE ARUP RATAN DAS	CARE Bangladesh	Project Officer - COVID-19 Vaccine Initiative Project	arupratan.das@care.org	01712375867
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8	DR. SUBRATA DAS	General Hospital Bagerhat, DGHS, MoHFW	Medical Officer	itsarydjmc@gmail.com	01742827712

❖ KEY REFORM RESULTS OF SDIAP:

- OUTPUTS/KEY RESULTS ACHIEVED: (Indicate the major outcomes/achievements of the SDIAP which contribute to the improvement of the health service delivery systems prevailing in the country)
- OUTLINE PLAN OF ACTIVITIES: (showing Timeline, List of Locations of the activities and Team members responsible for each activity. Ideally, this should be in a matrix format as follows:)

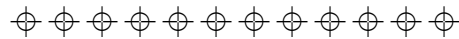
Action Plan Format

#	Actions Required	Targeted Result(s)	Roles (Who will do What)		Timeline	
			Primary	Supportive	From	To
1.						
2.						
3.						
4.						

5.						
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REMEMBER: THIS IS A PRACTICAL CONSULTANCY, NOT A RESEARCH PROJECT. THE HEALTHCARE SERVICE PROVIDERS, THE BRAC SCHOOL OF PUBLIC HEALTH ARE LOOKING FOR PRACTICAL ACTIONS AND ACHIEVABLE OUTCOMES, NOT JUST THEORETICAL ACTION PLAN PROPOSALS/CONCLUSIONS.

Your Proposal will be reviewed by the Lead Facilitator and Training Team. If they consider it acceptable, it will be approved for implementation. UNLESS YOU HEAR TO THE CONTRARY within one week of the end of this First Phase of the Program, you should assume that your Proposal has been approved, and you should proceed with implementation.



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- ❖ IDENTIFICATION OF SDIAP TEAM: **Team Meghna** (Fill in the table below for other necessary information)

Sl. No.	Full Name of the Participant	Designation	Address of Work Station	Email ID	Mobile Number
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3	JINNAT ARA	Research Director	Universal Research Care Ltd	jinnat.mkt@gmail.com	01711482930
4	DR. MONIDIPA DAS	Assistant Surgeon	Civil Surgeon Office, Sunamganj, MoHFW	lutimoni55@gmail.com	01781053603
5	S. A. M MONZUR KADER	Project Officer (Eye Health)	RDRS Bangladesh	poeyehealth.rdrs@gmail.com; sammonzur@gmail.com	01834044674; 01730328313
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9	Nishat Tasnim Promi	Research Associate	Universal Research Care Ltd. (URC)	nishattasnim39@gmail.com	01849656013

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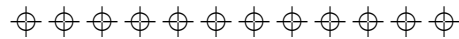
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- ❖ IDENTIFICATION OF SDIAP TEAM: **Team Jamuna** (Fill in the table below for other necessary information)

Sl. No.	Full Name of the Participant	Designation	Address of Work Station	Email ID	Mobile Number
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6	MUKIT AKRAM	Coordinator, Health R&D	SAJIDA Foundation	Mukit28@gmail.com	01676166506

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