



PAHO Immunization GIN Articles

(GLOBAL IMMUNIZATION NEWSLETTER)

March 2017

EPI Management Workshop with a Focus on Analyzing and Monitoring Administrative Coverage and Data Quality

Martha Velandia, Marcela Contreras-PAHO, Washington DC; Carlos Torres-PWR, Venezuela

Location	Caracas, Venezuela
Dates	20 – 24 February 2017
Participants	Representatives from the Expanded Program on Immunization from the national and state levels, professionals from the areas of Statistics, Epidemiology and Situation Room at the national level, as well as facilitators from PAHO.
Purpose	Train teams from Venezuela's immunization program on using concepts and tools to manage the program, monitoring indicators to measure the program's performance and data quality, applying the steps from rapid vaccination coverage monitoring through door-to-door visits, applying the concepts and tools used for the data quality analysis for vaccination coverage and identifying actions to improve the tools to monitor vaccination coverage in Venezuela.

In the first part of the workshop, PAHO and Venezuela worked together to develop technical content related to vaccine-preventable diseases, Venezuela's vaccination schedule and the main vaccination and epidemiological surveillance strategies to control, eliminate and eradicate immune-preventable diseases.



Participants at the Venezuela EPI management workshop.
Credit: PAHO-Venezuela.

Various components of the immunization program were reviewed as part of evaluating the managerial content, with an emphasis made on planning and programming by developing practical exercises to calculate and monitor the susceptible population, as well as calculate vaccination, syringe and other vaccination supply needs, all at various management levels.

PAHO's Immunization Unit and Neglected Diseases Unit have developed a Toolkit for Monitoring the Coverage of Integrated Public Health Interventions, which includes modules on topics including the analysis of administrative coverage, rapid coverage monitoring and the evaluation of data quality, among others. The tools can be applied in an integrated way or individually, facilitating coverage analysis and monitoring for any health program.

This methodology for analysis was implemented as part



Participants at the Venezuela EPI management workshop. Credit: PAHO-Venezuela.



PAHO Immunization GIN Articles

(GLOBAL IMMUNIZATION NEWSLETTER)

of a workshop on management in Venezuela, where approximately 50 EPI professionals from national and state levels, as well as professionals from other data quality units, such as Statistics, Epidemiology and Situation Room, as well as units related to teaching public health, like the Institute of Higher Learning “Dr. Arnoldo Gabaldón.” During the training workshop, participants used a combined methodology with conceptual presentations, working groups and field visits, where the door-to-door rapid coverage monitoring tools could be applied and data quality evaluations among health establishments could be made.

PAHO/WHO Collaborates with GAVI to Review the Achievements and Challenges of Guyana's EPI

Dr. Janice Woolford

Location	Guyana, South America
Dates	20-23 March 2017
Participants	Participants included Dr. William Adu-Krow, PWR, and Dr. Janice Woolford, Specialist, from PAHO/WHO Guyana; Dr. Cuauhtemoc Ruiz, Unit Chief of the Comprehensive Family Immunization Unit and Ms. Maria Soledad, HSS Advisor, from PAHO/WHO WDC; the Honorable First Lady of Guyana, Ms. Sandra Granger; Minister within the of Ministry of Finance, Mr. Jaipaul Sharma and Budget Director of the Ministry of Finance, Ms. Sonia Roopnauth. The Global Alliance for Vaccines and Immunization (GAVI) was represented by the Deputy Chief Executive Officer, Ms. Anuradha Gupta, and Mr. Homero Hernandez, Senior Country Manager, Latin America and Guyana. UNICEF country representative Ms Sylvie Fouet also participated in the meetings and field visit. Chief Medical Officer, Dr. Shamdeo Persaud and Dr. Ertenisa Hamilton, MCH Officer (ag) and Mr. Glendon Fogenay- Deputy Permanent Secretary, along with nine other staff from the Ministry of Public Health, participated in the meeting and field visits.
Purpose	The purpose of this visit was to review the country achievement and current challenges related to coverage and equity of immunization; learn from the country experiences of the GAVI transition process and model; exchange on sustainability over the short and long term of the immunization program in the wider context of the health sector and country's development.

A GAVI mission visit was conducted from 20-23 March in collaboration with PAHO/WHO, UNICEF and the Ministry of Public Health. Representatives met with key stakeholders to discuss the achievements and challenges of the immunization program. Field visits were made to the National Vaccine Cold Room, Aishalton District Health facility, Awarewaunau Health Post and Lethem Regional Hospital in Region 9 near the Brazil border to review the inequities in the EPI in the remote hinterland region.

Guyana is regarded as one of the high performing countries for GAVI, attaining 95% immunization coverage under two



Team at the Aishalton, Awarewaunau health post in Guyana (remote hinterland community), 21 March 2017. Credit: PAHO/WHO.



PAHO Immunization GIN Articles

(GLOBAL IMMUNIZATION NEWSLETTER)

years old since 2001 from the inception of the GAVI support. In addition, the EPI received third place in 2014 for the Effective Vaccine Management (EVM) in the Americas and was one of the first countries to take over the financing of new vaccines – pentavalent and rotavirus.

Current challenges include:

- Difficult-to-access communities with a high cost of transportation,
- scattered populations in rural villages,
- lack of communication,
- inadequate cold chain and
- the high cost of vaccination of one child versus the coastal communities.



Community health worker (Awarewaunau) and Ms. A. Gupta, Deputy CEO for GAVI discussing the challenges in the EPI. Credit: PAHO/WHO.

Highlights noted that PAHO/WHO is a strong supporter for the EPI and the country needed to go the extra mile to reach the additional 5% of the children who are not vaccinated. Equity in immunization exists in the hinterland versus the coastal communities. The current situation of yellow fever and the strategies necessary for yellow fever prevention were also among the topics discussed.

All partners pledge to continue to support the immunization program for the country to achieve its goals and objectives.