



Validation of the Microplanning Guide for the Immunization Program in Cali, Colombia

Liliana Alarcon, Secretary of Health-Cali; Doris Revelo, Secretary of Health of the Cauca Valley; Sandra Mena, Secretary of Health-Choco; Diego Alejandro Garcia, Ministry of Health-Colombia; Viviana Calderon; Ana Morice; Bertha Capistran; Martha Velandia, PAHO

The Comprehensive Family Immunization Unit from PAHO/WHO developed a *Practical Guide for Microplanning the Permanent Immunization Program*, which was validated on 14 to 17 September 2015 in the municipality of Santiago de Cali, Colombia. Participants in the validation included members of different entities (public and private) responsible for the Expanded Program on Immunization (EPI), as well the EPI at municipal, departmental and national level and representatives from the National Department of Planning.

The participants indicated that the sequence of stages and steps that are established in the proposed methodology follow a logical and practical order upon linking the processes of situation analysis, programming, monitoring, supervision and evaluation.

They also declared that microplanning empowers the health unit, as it organizes and systematizes the processes, optimizes the use of resources and improves management of the program. Microplanning cannot be fragmented or isolated from national planning time, as it provides an opportunity to arrange the resources required to comply with the programming of all management levels.

Considering an increase in new vaccines and the transition from child immunization to family immunization, participants pointed out that upon having a territory-based approach that is managed from the bottom up, microplanning promotes the capturing of all of the target groups of the program in their own areas for responsibility.

Upon incorporating tools like easy-to-build figures and indicators, coverage monitoring and the search for “unvaccinated” people are facilitated. Thus, through the implementation of these tools, coverage gaps are reduced and program performance is improved.

In conjunction with this experience, a specific microplanning guide will be prepared for Colombia that will be applied through pilot testing, initially in two municipalities: Cali in Cauca Valley and Nuqui in Choco.



Participants at the validation of the microplanning guide in Cali, Colombia.

Credit: Secretary of Health-Cali.



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EVM Assessment in Nicaragua

Nora Lucia Rodriguez, PAHO-Washington, DC

Location	Nicaragua
Dates	28 May—12 June 2015
Participants	National health workers from the Ministry of Health-Nicaragua and international evaluators from the World Health Organization (WHO) and the Pan American Health Organization (PAHO) participated in the Effective Vaccine Management (EVM) assessment.
Purpose	The purpose of the evaluation was to analyze Nicaragua's Cold Chain, vaccine supply chain and vaccine management operations.

During the assessment, 47 randomly-selected storage and health facilities were visited and their records were assessed between 1 May 2014 and 30 April 2015. The 47 sites included 12 of the 19 Local Systems for Integral Health care (*SILAIS*) at the sub-national level, 17 vaccine stores from the lower distribution level and 17 service delivery points; furthermore, the evaluation included the National Vaccine Store (*CENABI*).

A total of eight teams were responsible for data collection. Each team included one international assessor and two to three national health workers. Before the evaluation, a review of the EVM tools and methodology was carried out in order to standardize the knowledge and management of 1) the EVM tool and 2) the structured questionnaires.

In its first EVM assessment, Nicaragua obtained an overall average score of 93%, a significant achievement considering that 80% is the minimum score established by EVM. This included the score reached for the 4 levels of the supply chain that is in place in the country and the 9 evaluated criteria of the EVM. With 93% as the average score achieved at the time of the assessment, Nicaragua ranked first among the top 80 EVM assessments performed worldwide since 2009. The primary level scored 92%, the sub-national level scored 96%, the lowest distribution level scored 93% and the service delivery level scored 93%.



National and international assessment team, Nicaragua, June 2015. Photo: Nora Rodriguez.

Health Care Worker Training in the Integrated Surveillance Information System

Dr. Shivon Lewis, Ministry of Public Health-Guyana and Dr. Janice Woolford, PAHO-Guyana

Location	Arthur Chung Convention Center, Georgetown, Guyana
Dates	15-16 September 2015
Participants	28 senior health visitors, maternal and child health supervisors and regional health officers from all ten health regions in Guyana
Purpose	The purpose of the training was to train relevant health care workers in surveillance for polio, measles and rubella and the use of the Integrated Surveillance Information Systems (ISIS) database including transmission of reports to the central system.



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The Integrated Surveillance Information System for vaccine-preventable diseases (VPDs) is a database which provides countries with a mechanism for data collection, data analysis and report generation of epidemiological information and surveillance indicators for poliomyelitis, measles and rubella. It also facilitates electronic transfer of surveillance information within and outside of the country.



1Participants at the Integrated Surveillance Information Systems (ISIS) training workshop in Guyana, September 2015. Credit: Ministry of Health-Guyana.

The methodologies used during the training were didactic lectures, computer trainings with the database, short quizzes and discussions. Presentations included an overview of the surveillance system for VPDs, review of the indicators for measles, rubella and Congenital Rubella Syndrome and review of acute flaccid paralysis surveillance and indicators. Computer training included demonstration of the data entry screens of the application, installation and configuration of the system, sample data entry for suspected measles, rubella and polio cases, entry of laboratory data, use of filters, generation of reports and uploading/downloading of data to other computers.

Discussions were also held regarding the streamlining of the surveillance system as well as the reporting requirements to the Caribbean Regional Public Health Agency (CARPHA) and to the sub-regional Expanded Program on Immunization (EPI) office.

Participants expressed gratitude for the training and the knowledge gained and pledged to improve the quality of surveillance for the VPDs in Guyana.