



Evaluating Grenada's Immunization Information System (IIS) with Data Quality Self-Assessment (DQS) Plus

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Location	St George's, Grenada
Dates	22 May-1 June 2018
Participants	Nineteen participants representing Cayman Islands, Grenada, St. Kitts and Nevis, the U.S. Centers for Disease Control and Prevention (CDC), WPRO and PAHO/WHO. <ul style="list-style-type: none">• Evaluate the EPI IIS, and provide recommendations for improvement• Promote data analysis and use at different levels• Evaluate aspects of data quality, including integrity, timeliness of reporting, and accuracy• Identify challenges and obstacles in transitioning from a paper-based reporting system to an electronic immunization registry (EIR)• Evaluate user acceptability of the EIR system
Purpose	

The Grenada ministry of health (MOH) started the process of electronically recording immunization data in 2015. Using grants from the CDC and PAHO, the national EIR was introduced to help improve immunization data quality and use.

In 2017, the Grenada EPI, with technical assistance from PAHO/WHO and the CDC, began planning for an assessment with the intention of

introducing improvements to have more accurate, reliable and timely data and strengthen the information system. The methodology combined data quality assessment (DQA) from WHO, DQS-plus used previously by PAHO, IIS assessment procedures used by CDC, and a newly developed user acceptability component.



Participants from the evaluation of Grenada's IIS with DQS Plus, May-June 2018, St. George's, Grenada. Credit: PAHO/WHO.

National and international participants completed a two-day training before splitting into smaller teams to conduct fieldwork. After data collection, field teams analyzed and presented their preliminary results to the larger group for discussion and refinement. The overall conclusions and recommendations were presented to the MOH and included in an official report.

Grenada is pioneering the implementation of EIR in the Caribbean sub-region and represents an excellent example for the Americas and beyond. Grenada presents a favorable environment to put into practice innovations that allow the EPI to face future challenges. The report from this

evaluation will be an important tool that will support Grenada in achieving immunization goals.

Regional Meeting to Share Lessons Learned to Improve Immunization Rates in Urban and Peri-Urban Populations

Robin Mowson, Marcela Contreras, Martha Velandia (PAHO)

Location	Buenos Aires, Argentina
Dates	6-8 June 2018
Participants	64 participants representing eleven countries (Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Haiti, Honduras, Mexico, Paraguay and Peru), CDC, GAVI and PAHO/WHO.
Purpose	<ul style="list-style-type: none"> • Share lessons learned to improve immunization rates in urban and peri-urban populations and develop strategies to improve access and use of vaccines • Review, share and document the experiences and strategies related to vaccination in urban and peri-urban populations of the Region of the Americas • Identify effective vaccination strategies targeted at disadvantaged slum populations in the Region of the Americas.

Since 2009, the world population has become more urban than rural. Accelerated urbanization is overcoming the ability of the public sector to build infrastructure and systems for the provision of health services. These trends are particularly important for vaccine-preventable diseases, due to their high transmission potential in urban areas of high population concentration. The traditional model of immunization in rural areas must, therefore, adapt to this demographic reality.



Participants from the Regional Meeting to Share Lessons Learned to Improve Immunization Rates in Urban and Peri-Urban Populations in Buenos Aires, Argentina, June 2018. Credit: PAHO/WHO.

In this framework, PAHO conducted a regional workshop to analyze and discuss vaccination strategies in urban and peri-urban areas and agree on national and regional interventions to address the problems identified. The perspectives gained at the meeting were particularly relevant because invitees included all levels, with national EPI managers, subnational implementers and local vaccinators.

It was concluded that there is a need for greater understanding and characterization of target populations with low coverage in large urban areas. The countries expressed desire to share experiences and strategies to address these target populations, they want to know what has worked and how they can implement it. The country managers and vaccinators showed a strong commitment to address the inequities in the big cities and were able to share the context of their work.

Polio Outbreak Simulation Exercise Workshop

Rodríguez-Martínez JC, Jiménez-Corona ME, Luna-Guzmán NI, Ruiz-Matus C

Location	Mexico City, Mexico
Dates	3-10 August 2018
Participants	64 participants representing eleven countries (Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Haiti, Honduras, Mexico, Paraguay and Peru), CDC, GAVI and PAHO/WHO.
Purpose	<p>General objective</p> <ul style="list-style-type: none"> • Maintain healthcare worker capacity when responding to a polio outbreak, to prevent the reintroduction and dispersion of poliovirus in Mexico. <p>Specific objectives</p> <ul style="list-style-type: none"> • Evaluate the knowledge of healthcare workers on responding to a polio occurrence or outbreak • Identify opportunity areas to strengthen the response capacity of operative personnel • Ensure that the workers in charge of surveillance and the immunization program have the capacities to respond to a poliovirus event or outbreak

Mexico was declared free of polio in 1994. Since then, the country has maintained an adequate surveillance system and high vaccination coverage. Having the capacity to respond to a polio outbreak is important for global eradication. Simulation exercises are a valuable tool for capacity building.

The national workshop was coordinated by the Joint General Directorate of Epidemiology (DGAE for its name in Spanish), the Institute of Epidemiological Diagnosis and Reference (InDRE for its name in Spanish), and the Center for Infant and Adolescent Health (CeNSIA for its name in Spanish).

The polio situation, the National Response Plan, and laboratory algorithms were presented.

Eight tables were formed. Each table received a questionnaire with a simulation exercise to be responded during the workshop. The exercise included the following:

1. Case notification
2. Case investigation
3. Report preparation
4. Discussion and agreements

Each table had a coordinator and a reporter. The rest of the people participated as established in the National Outbreak Response Plan. Federal level coordinators were responsible of presenting the results and conclusions at the end of the exercise.

The workshop was concluded successfully, and participants agreed to replicate the exercise in their States.



Haiti's National Expanded Program on Immunization's (EPI) Historic Transition towards Vaccine Sustainability

John Fitzsimmons, Eduardo Rivero, Jennifer Sanwogou, Edmond Gue – PAHO

Monday, 27 August 2018 marked a special moment in the history of Haiti's EPI. For the first time after three decades, the Haitian government has allocated national funds for the purchase of routine vaccines and syringes through the Pan American Health Organization's Revolving Fund.

This key step was taken by national authorities, led by the Minister of Health, Dr. Marie Gretá Roy Clement, and demonstrates the high value that the Haitian government places on preventing childhood morbidity and mortality through vaccination.



Dr. Marie Gretá Roy Clement, Haiti's Minister of Health. Credit: E. Rivero, PAHO/WHO.

The decision to self-finance routine vaccines in the country will make it possible for some 250,000 children born each year to have access to vaccines prequalified by the World Health Organization or by internationally recognized regulatory authorities. For 2018, the Haitian government paid PAHO's Revolving Fund nearly 90 million Haitian gourdes (89,994.872 HTI) for the purchase of traditional and new vaccines.

This national effort is remarkable, considering the economic conditions in a country where 65% of the population lives below the poverty line. The road to promote the commitment of self-financing was not easy and required careful technical processes and continuous negotiation with participation from multiple partners, mainly that of the Gavi Alliance, World Bank and PAHO/WHO.

Haiti has taken an important step in decreasing future risks of vaccine shortages due to lack of financial resources, in progressing towards vaccine sustainability and saving thousands of lives. This historic political commitment deserves praise and applause.