

SECRET

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MEMORANDUM OF THE HONOURABLE MINISTER OF HEALTH ON THE STATUS OF ESTABLISHMENT OF THE NATIONAL/STATES/LGAs ROUTINE IMMUNIZATION COORDINATION CENTRES AND THE ADOPTION OF THE OPTIMIZED INTEGRATED ROUTINE IMMUNIZATION SESSIONS (OIRIS) APPROACH TO RAPIDLY REVAMP ROUTINE IMMUNIZATION PERFORMANCE IN THE COUNTRY

1. PURPOSE:

The purpose of this memorandum is to inform Council Members on the progress made in the establishment of the National/States/LGAs Emergency Routine Immunization Coordination Centres (NERICC/SERICC/LERRIC) and the adoption of the Optimized Integrated Routine Immunization Sessions (OIRIS) in the eighteen (18) very poor performing states following the release of the 2016/2017 Multiple Cluster Indicator/National Immunization Cluster Surveys (MICS/NICS) to rapidly revamp routine immunization performance in the country.

2. BACKGROUND:

It is universally acknowledged that vaccination is the most significant public health intervention, saving over 3 million deaths annually. In Nigeria, vaccine preventable diseases account for over 40% of the deaths of children under five years of age with the 2016/2017 NICS/MICS results indicating that over 4.3 million children are unimmunized. In response to this dire situation, the National Primary Health Care Development Agency (NPHCDA) declared a state of Public Health Concern on routine immunization on the 17th of June 2017. The National Emergency Routine Immunization Coordination Centre (NERICC) was immediately established and inaugurated on the 4th of July 2017 to lead the efforts to rapidly revamp routine immunization performance nationwide.

Since inception, NERICC, which comprises of key government staff (NPHCA) and all partners on routine immunization (RI) in the country, has worked in an emergency mode in the design and implementation of key strategies and targeted support to the eighteen (18) poor performing states with MICS/NICS results <50%. These States included: Adamawa, Bauchi, Bayelsa, Kaduna, Kano, Katsina, Kebbi, Kogi, Jigawa, Niger, Nasarawa, Sokoto, Zamfara, Borno, Yobe, Gombe, Taraba and Zamfara. The NERICC Centre has prioritized and supported these 8 states in the establishment of the State and LGA Emergency Routine Immunization Coordination Centres (SERICC/LERICC). The NERICC/SERICC/LERICC centres are established to improve detection and responsiveness in the resolution of RI gaps; strengthen leadership and accountability; strengthen coordination; increase data visibility, quality and use for action at all levels; and increase fixed and outreach services for immunization especially in the very low performing States.

NERICC has also launched the Optimized Integrated Routine Immunization Session (OIRIS) in the 18 lowest performing States to change the work culture and approach to rapidly improve routine immunization service delivery. OIRIS emphasizes the harmonization and synergy of efforts by all stakeholders at all levels to action. It is hinged on a strengthened coordination, improved planning and resource management, monitoring and use of data for action, an improved, better aligned and stronger community engagement for RI with integration and an overall strengthened PHC system. OIRIS strengthens the operationalization of the Reach Every Ward (REW) Strategy with the integration of Primary Health Care (PHC) services, interventions and commodities with immunization services.

3. CONTENT:

- i. The NERICC/SERICC/LERICC structure elaborates practical approaches to strengthen coordination mechanism at national/state/LGA with a “business unusual” approach to driving improvements in routine immunization. A strong coordination mechanism between NERICC, SERICC, LERICC and also between government, partner and donors.
- ii. NERICC and SERICCs are led by a Program Manager, selected through a rigorous recruitment process and assisted by Deputy Program Managers who work through well-defined coordination structures (working groups) to strengthen leadership and improve detection and responsiveness in the resolution of routine immunization gaps.
- iii. A stronger accountability mechanism with defined roles for government and partner teams to increase data visibility, quality and use for action. NERICC has deployed the use of quarterly Lots Quality Assurance Sampling (LQAS) as a tool to measure improvements in RI at State and LGA levels. Similarly, NERICC has initiated the SMS project in Nasarawa, Zamfara and Adamawa to improve data quality and last mile visibility on the conduct of RI sessions. SERICC/LERICC are to ensure accurate reporting of all immunization related data for acceptability of the wide country RI data. Reward and sanction (for falsification of data and other offences) is being enforced at all levels.
- iv. Routine immunization service delivery has been strengthened through the initiation of the Optimized Integrated Routine Immunization Sessions (OIRIS), as a strategy to increase the number of immunization sessions and children immunized in focal communities integrating with other PHC services and health related commodities. The OIRIS approach involves a change in the culture of work for RI service delivery; a call for urgency to prioritize routine immunization; optimization of the REW strategy; sustaining ownership and drive for implementing quality RI programs at all levels; and the integration of RI with other PHC services and health related commodities. The urban PHC facilities, secondary / tertiary health facilities are expected to conduct daily fixed sessions and the rural PHCs at least one fixed session and one outreach per week, as per the REW micro-plan. OIRIS also involves targeted high level advocacy visits; standardization of RI supportive supervision visits to health facilities and an improved community engagement strategy for RI, which is at various levels of implementation in the northern states.

PRAYERS:

Council is invited to note that:

- i. Vaccine preventable diseases account for over 40% of the deaths of children under five years of age in the country; and 2016/2017 NICS/MICS results indicated that 4.3 million children were unimmunized in 2015 alone;
- ii. The National Primary Health Care Development Agency (NPHCDA) declared a state of Public Health Concern on routine immunization on the 17th of June 2017. The NERIC Centre was immediately established and inaugurated on the 4th of July 2017 to lead the efforts to rapidly revamp routine immunization performance nationwide;
- iii. NERICC Centre has prioritized and supported 18 States in the establishment of the State and LGA Emergency Routine Immunization Coordination Centres (SERICC/LERICC);
- iv. The NPHCA and partners at NERICC in collaboration with the States have defined clear activities to further improve routine immunization in 2018 and beyond;

- v. NERICC has also launched the Optimized Integrated Routine Immunization Session (OIRIS) in the 18 lowest performing states to change the work culture and approach to improve service delivery and rapidly improve routine immunization performance;
- vi. All States have been supplied first and second quarter vaccines and devices for routine immunization based on forecast for the two quarters; and
- vii. There is need for close monitoring of the OIRIS approach to ensure it is appropriately implemented in the 18 poor performing States (and later scaled up to the medium and high performing states).

Honourable Minister of Health

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