



National Health Mission
SDA Complex, Kasumpti, Shimla-9
Himachal Pradesh

Dated: Shimla-171009, the April 2020

MISSION DIRECTOR (NHM)

28 APR 2020

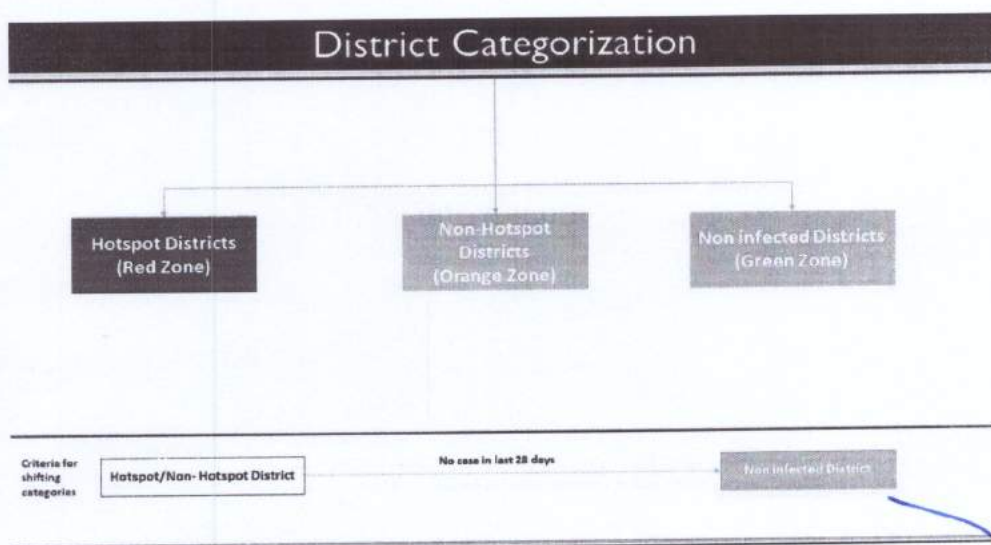
New Shimla-9 (H.P.)

Guidelines regarding Immunization services during and post COVID-19 outbreak

All health services are deemed essential and need to be functional across the state. **Immunization** is one of the essential health services to be continued during COVID-19 outbreak to protect children and pregnant women from Vaccine Preventable Diseases (VPD). **An increasing cohort of unimmunized children poses a risk of VPD outbreak and need to be immediately addressed.** In continuation to letter No. NHMHP-IDSP/1/2020-2981 dated 15th April 2020 and further revised on 18th April 2020, the following guidelines are laid down for the immunization during and post COVID-19 outbreak.

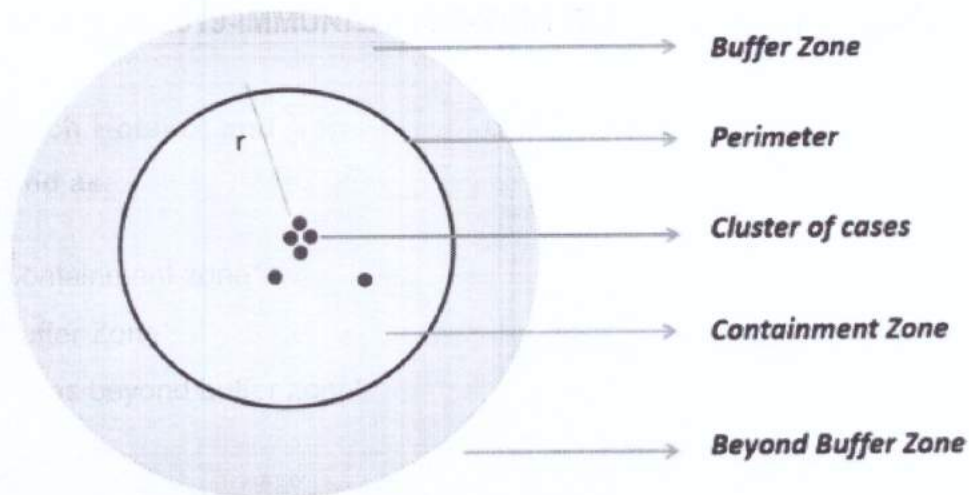
MoHFW has categorized districts into (Figure-1):

1. Hotspot Districts (**Red Zone**)
2. Non-Hotspot Districts (**Orange Zone**)
3. Non-Infected Districts (**Green Zone**)



Within each Hotspot and Non-Hotspot district, areas with COVID-19 cases will be defined as:

- Containment zone*
- Buffer Zone*
- Areas beyond buffer zone*



Immunization Services in the Three District Categories:

Guiding Principles:

- Guidelines from Ministry of Home Affairs, MOHFW and the State pertaining to COVID-19 and related updates will be the primary reference points and no district should violate any COVID-19 guidance.
- Practices of social distancing, hand washing, and respiratory hygiene need to be maintained at all immunization sessions, irrespective of district categorization by all (i.e. beneficiaries and service providers) in all sessions.
- Birth dose vaccination at health facilities would continue irrespective of district categorization.
- The categorization of districts into Hotspot, Non-Hotspot & Non-Infected districts is a dynamic process which is updated on a weekly basis and hence immunization service guidelines are to be implemented as per the updated category.

[Handwritten signature]

Immunization services are delivered through three platforms:

- I. **Birth dose vaccination:** Birth dose vaccinations at delivery points in health facilities.
- II. **Health Facility based sessions:** Immunization sessions at fixed health facilities like DH, SDH, CH, CHC, PHC, SC etc.
- III. **Outreach sessions:** As part of Urban/Village Health Sanitation and Nutrition Days (UHSND/VHSND) services.

1. **Hotspot Districts (Red Zone) and Non-Hotspot Districts (Orange Zone)**

All districts under 'Hotspot' and 'Non-Hotspot' categories will follow the same guidelines also shown in below given table.

		Birth Dose	Health Facility based session	Outreach session
1	Containment Zone & Buffer Zone	Continued	No*	No
2	Beyond Buffer Zone	Continued	YES	Modified

**Every opportunity is to be utilized for vaccinating beneficiaries if they have already reported at facilities, No active mobilization to the health facility is to be carried out.*

Modified outreach Session:

- One outreach session for <500 population to limit the total beneficiaries to 10 to 15/session.
- Staggered approach for each session to avoid crowding.
- At any a given time during session, not more than 5 persons be present at a session site with at least 1 meter distance between each.
- Organization of such session will be at the discretion of district administration with clear planning for social distancing and hand washing.

Any area exiting a 'containment/ buffer zone' can start facility based and outreach immunization activities as in 'areas beyond buffer zone' after a gap of minimum 14 days following delisting.

However, the District administration should make a local assessment of COVID risk before starting the outreach or health facility based immunization with mobilization of beneficiaries.

Similarly, **an area enlisted as a 'containment/ buffer zone' should stop facility based sessions and outreach sessions.**

2. Non-infected Districts:

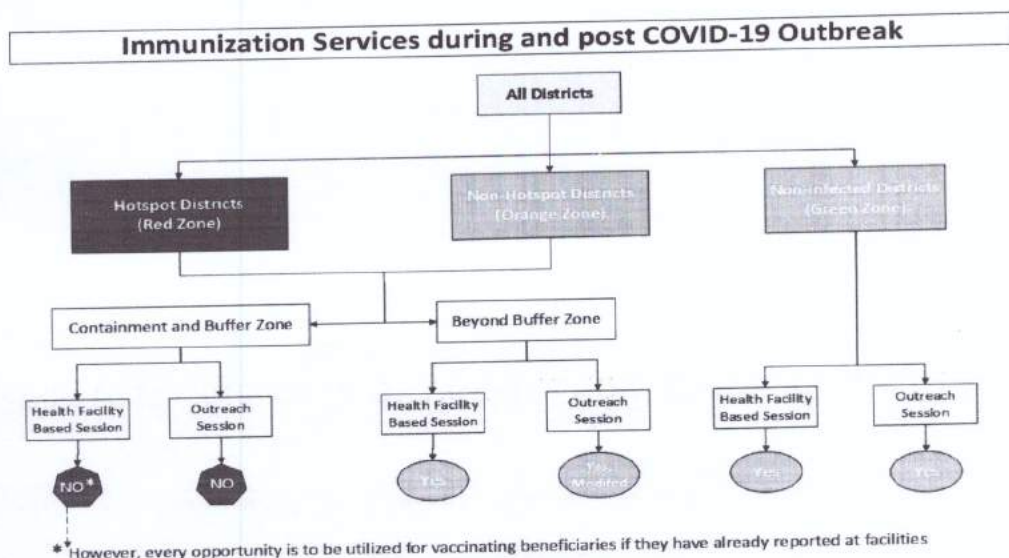
All remaining districts in the state other than the districts in Hotspot & Non-hotspot category as shown below in table.

Non Infected Districts	Birth Dose	Health Facility Based Session	Outreach Session
All areas	Continued	YES	YES

Standard Guidelines for all Outreach Sessions irrespective of district categorization:

- Universal prevention and control principles for COVID-19 to be followed for each session.
- All outreach sessions to follow staggered approach and community mobilization strategy to be adapted accordingly to prevent overcrowding at session site.
- Pre-identification of session site with adequate seating space for beneficiaries and caregivers while maintaining social distancing (at least 1-meter gap) with clear area of demarcation for incoming beneficiaries, post vaccination waiting area and a reserve zone if gathering increases.
- Support from Panchayat/Urban Local Body to be sought for identification of appropriate session site with space to practice social distancing (at least 1 meter).
- Various 'session' approaches to be adopted in all districts for immunization services.





Birth dose vaccination at health facilities continues across the country irrespective of zones and categories

Schematic flow chart depicting Immunization services during and post COVID-19 Outbreak, HP

Immunization services at Health Facility:

A health facility should continue immunization services with below mentioned prerequisite arrangements:

- Pre-identification of a well-ventilated seating area with demarcated seating location 1 meter apart.
- An adequate number of pre identified, fixed vaccination staff depending on the injection load and the required documentation.
- Staff conducting vaccination should wear a three-layered surgical mask and gloves and sanitize their hands after vaccinating every child.
- Support staff to manage seating arrangement, queue management etc. for the pregnant women and care givers.
- Ensure hand sanitizer or hand washing units available for public use at the entrance to the health facility.
- Disinfect the seating space after completion of the immunization session.
- Adequate availability of MCP card and due updating of records.
- Adequate availability of vaccines and logistics for the uninterrupted immunization session.
- Display visual alerts in clinics, such as posters, with information about COVID-19 disease and reminders on individual prevention strategies.

VHSNDs/UHSNDs/ Outreach Immunization:

Plan for multiple small sessions in missed areas through a catch-up approach and initiate VHSND/UHSND/RI sessions as per micro-plan.

Session Organization:

- A. **Staggered Approach:** To avoid crowding at immunization session/VHND, a staggered approach needs to be practiced.
- For each session, divide all children and pregnant mothers in due list into hourly slots so that 4-5 beneficiaries are allocated per hour.
 - Additional doses of reconstituted vaccines to be supplied for staggered sessions.
 - **Identify Alternate Session Sites:** In case of space constraints to maintain social/physical distancing and lack of adequate provision for hand washing with soap and water. Schools, Panchayat Ghars, community centers etc. may be explored as alternate sites.
- B. **Break-up Session:** One village session is divided into two sessions to reduce crowding if staggered approach does not suffice.
- C. **Additional Session:** Conducted by Hired Vaccinator (retired ANM, Staff Nurse etc. can be hired) or trained Male Health Worker at SC/LHV at PHC.
- D. **Immunization services through mobile teams:** Identified HRAs and hard to reach areas can be considered for mobile team approach.

Key components of a VHSND/UHSND/RI session:

A. Beneficiary Mobilization:

- Based on the agreed hourly slot, ASHA should mobilize the beneficiaries/family of beneficiaries by phone at least one day prior to the session.
- On session day, ASHA and AWW to mobilize beneficiaries as per hourly plan while taking due precautions of social distancing and hand washing/sanitization, respiratory hygiene and using homemade face cover during house visit.



- Request for only one caregiver to accompany with the beneficiary to avoid overcrowding and maintain effective social distancing.
- Any child, caregiver and/or pregnant woman suffering from flu like symptoms (fever, cough or shortness of breath) should be asked not to come to the session site and seek services as per existing guidelines related to COVID-19.

B. Session Site:

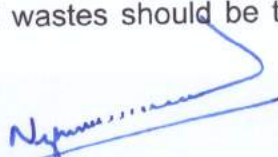
- ANM should wash hands with soap and water for at least 20 seconds before start of session and sanitize hands with an alcohol-based sanitizer before and after vaccinating every beneficiary.
- Adequate arrangement for soap and water and other necessary equipment.
- ANM should wear a triple layered surgical mask and gloves.
- All care givers should be advised to use homemade face cover during their visit to the session site.
- Ensure adequate availability and appropriate distribution of ORS, Zinc, IFA and Calcium, MCP card and other items as per VHSND guidelines.

C. Waiting Area, Group Counseling and COVID-19 Related Awareness Generation:

- Ensure that beneficiaries and caregivers maintain the social distancing during the 30-minute waiting period.
- This 30-minute waiting period to be used for group counseling and avoid individual counseling. Provide key preventive messages related to COVID-19, (hand washing technique, nutrition of pregnant women, breastfeeding etc.)

D. After the session:

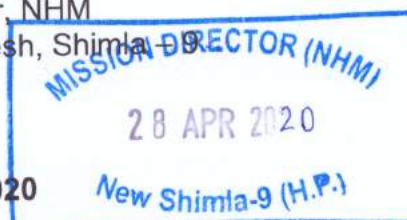
- After all the beneficiaries are gone, the site should be sanitized properly (tables, chairs, weighing machine and other equipment used during the session) and Gloves and masks should be properly disposed as per the guideline of COVID-19.
- All the vaccines and logistics along with biomedical wastes should be taken back by AVD.



Other Related Components:

- **Capacity building of Front-Line Health Workers:** Instead of in-person trainings, existing digital health platforms (if any) may be leveraged for training and capacity building.
- **Vaccines and logistics availability:** Review vaccines availability, near expiry and stock refilling (e-VIN).
- **Ensure VPD surveillance to continue.**
- **Expand Supportive Supervision of session and add COVID-19 related indicators like ILI/flu in monitoring checklist.**

N. Kumar 28/4/20
Special Secretary (Health) cum
Mission Director, NHM
Himachal Pradesh, Shimla-9



Endst. No. As above, Dated Shimla-9 the 28th April 2020
Copy for information and necessary action to:

1. The Additional Chief Secretary (Health) to the Government of Himachal Pradesh.
2. All Deputy Commissioners, Himachal Pradesh
3. The Director Health Services, Himachal Pradesh
4. The Director of Medical Education and Research, H.P.
5. All the Chief Medical Officers, H.P.
6. All the Medical Superintendents, H.P.
7. All District Immunisation Officers, Himachal Pradesh

N. Kumar 28/4/20
Special Secretary (Health) cum
Mission Director, NHM
Himachal Pradesh, Shimla - 9