



Government of Karnataka



NATIONAL HEALTH MISSION

Karnataka State Health and Family Welfare Society
New Building, Anand Rao Circle, Bangalore-560009

No.NHM/DD/IMM/02/2020-21

Dated: 22.04.2020

Circular

Urgent

Sub: Enabling delivery of immunization services during the COVID-19 outbreak.

Ref: GoI letter dated 14.04.2020 regarding Enabling delivery of essential health services during the COVID-19 outbreak.

In view of ongoing COVID-19 pandemic, all immunization services except birth dose vaccination were suspended in the State. As per the directions from GoI it has been decided to resume immunization services at health facilities except containment zones following strict infection prevention and control measures and social distancing.

Advisory for vaccination of Pregnant women and children during COVID-19 pandemic

PLANNING OF SESSIONS AND SELECTION OF THE CHILD FOR IMMUNIZATION

1. Pregnant women should be vaccinated with two doses of Td vaccine compulsorily.
2. All children delivered at health facilities should be immunized with BCG, Hep-B birth dose and OPV-0.
3. Immunization sessions on weekly once basis (Thursdays) should be conducted at sub centers, PHCs, CHCs, MCH blocks of Taluka and District hospitals and Medical colleges.
4. Anganwadi workers and helpers can be utilized for mobilization of children to the immunization sessions.
5. **No sessions shall be held in notified containment zones*.**
6. **Teams involved in COVID-19 containment zone surveillance activities should not be involved for immunization activity.**
7. Separate entry and exit access to immunization room may be explored.
8. RCHOs and THOs to explore any suitable well ventilated place near the Taluka hospital, for example Schools, Taluka office, Meeting halls, Samudhaya bhavan etc where immunization session sites can be conducted where immunization session at the MCH block is not feasible.
9. In BBMP and other urban areas, **hospitals which are functioning as fever clinics to be strictly avoided.** Where UPHCs are functioning as fever clinic immunization sessions can be held at another suitable facility which may be a school, maternity hospitals, etc.
10. Immunization sessions **should not be held at** designated COVID-19 hospitals (DCH)
11. ASHA has to prepare the due list of beneficiaries in her area including missed out and dropped out children.
12. Slums, vulnerable population and migratory population should be prioritized.

13. ASHA should telephonically communicate with mother / caregiver of the child regarding timing and venue of immunization session and inform that **only one Healthy Caregiver/attender should accompany the child to Immunization session in a particular time slot. The accompanying person may be advise to wear a face cover.** Session timings can be flexible as per district convenience and same to be intimated to the parents/caregivers.
14. Plan to immunize only around 15-20 beneficiaries per session. Children with parents shall wait at the facility duly following distancing norms. If more number of children are anticipated as per duelist weekly twice sessions can be planned and the dates shall be communicated well in advance. **Children should be brought to the immunization session in staggered timings.**
15. All Vaccine and logistics should be planned as per due list.
16. Cold chain maintenance and disposal of immunization waste generated during sessions should be strictly managed as per protocol.
17. Standard guidelines of Routine immunization from GoI should be strictly adhered to.

*Containment zone is a well defined area around the residence of a COVID positive person or more than 10 contacts are living where the most intensive measures to prevent the spread of viral infection is being implemented. Notification of containment zones should be obtain from Commissioner BBMP in respect of BBMP jurisdiction or deputy commissioner in all other cases.

PRELIMINARY SCREENING BY HEALTH CARE WORKERS

1. **Defer vaccination to the child if either the caregiver or the child are having influenza like illness (ILI) (fever, cough, cold).**
2. If any Junior Health assistant has influenza like illness he or she should not conduct immunization session until complete recovery. Such Health care workers with ILI symptoms should be immediately refer for COVID testing
3. Take a brief history of child's health and well being and then decide to vaccinate the child ensuring infection prevention and control practices.
4. If in case of any slightest doubt of child's well being, Junior Health Assistants should postpone the immunization of such child until child recovers.

SAFE IMMUNIZATION PRACTICES

1. Immunization session site should be sanitized with 1% hypochlorite solution before and after every immunization session.
2. Soap and Water for hand washing should be made available at session site.
3. Chalk piece for marking of circles and seating of caregivers to be made available while they wait before and after vaccination.
4. Vaccinators should wear triple layered surgical mask during immunization session.
5. All attenders should be educated to follow cough etiquette and hand hygiene
6. Educate the attenders not to touch eyes, nose, mouth of self or child after touching any inanimate objects or surfaces without washing the hands or sanitizing the hands.
7. Vaccinator must compulsorily sanitize their hands before and after vaccinating each child.
8. The Caregiver of the child also must ensure that they wash their hands before entering the session room.



9. At session site and Outside the session room ensure distance of 1 metre(3feet) between beneficiaries.
10. Vaccines to be handled by only one health worker maintaining standards of hygiene. One staff or ASHA or anganwadi worker to support in making entries into Thai card, RCH register, management of social distancing and conveying four key messages. Awareness messages on COVID-19 may also be disseminated
11. After immunization, every child should be observed for 30 minutes at the session site.
12. Every child receiving Pentavalent/DPT vaccination should be given paracetamol syrup with dosage instructions.
13. Contact number of ASHA/ANM/MO should be shared with caregivers and instruct them to inform them immediately in case of any mild, severe and serious adverse events (AEFI) for immediate attention.
14. ASHA/AWW should visit the immunized children the next day to check their well being

COMMUTING BENEFICIARIES TO IMMUNIZATION SESSIONS

1. As per MHA order No. 40-3/2020-DM-I(A) dated 24.3.2020 and further modified on 25.3.2020, 27.3.2020, 2.4.2020 and 3.4.2020 (https://mha.gov.in/sites/default/files/PR_Consolidated%20Guidelines%20of%20MHA_28032020%20%281%29_0.PDF), Essential health services are exempted and list is given in the letter.
2. RI beneficiaries with Thai card/ Immunization card should be facilitated to reach the immunization session site. DHOs and RCHOs shall give prior information to the police department and request to facilitate.
3. 108, Nagu Magu, MMU, RBSK vehicles available in the districts can be utilized to mobilize the beneficiaries to session site and drop them back if feasible
4. AWW/ AWH/ link workers can be engaged to accompany the children and pregnant women to the session site.

SUPERVISION AND MONITORING OF RI SESSIONS

1. All RI sessions during this COVID-19 pandemic should be supervised and monitored by Supervisory staff/ medical officers/THOs
2. Immunization Field Volunteers (IFVs) should support in PHC wise planning of sessions and monitoring of immunization sessions to ensure quality immunization session and also infection prevention and control and social distancing measures. RCHOs to provide identity cards to IFVs.
3. RCHOs and DHOs of districts will be overall incharge of the immunization programme.
4. All immunization services should be updated regularly on HMIS portal, RCH portal and eVIN.


(Ramachandran. R)

Mission Director
National Health Mission

To:

1. All District Commissioners
2. All District Chief Executive Officers
3. Commissioner, BBMP
4. Special commissioner, BBMP

Copy to:

1. Additional Chief Secretary, Department of Health and Family Welfare, Bengaluru
2. Commissioner, Health and Family Welfare Services, Bengaluru
3. Director, Health and Family Welfare Services, Bengaluru
4. Project Director(RCH), Bengaluru
5. All District Health Officers, District surgeons, RCHOs,
6. State STFI members, AEFI members
7. IAP, IMA, WHO, UNICEF and UNDP

