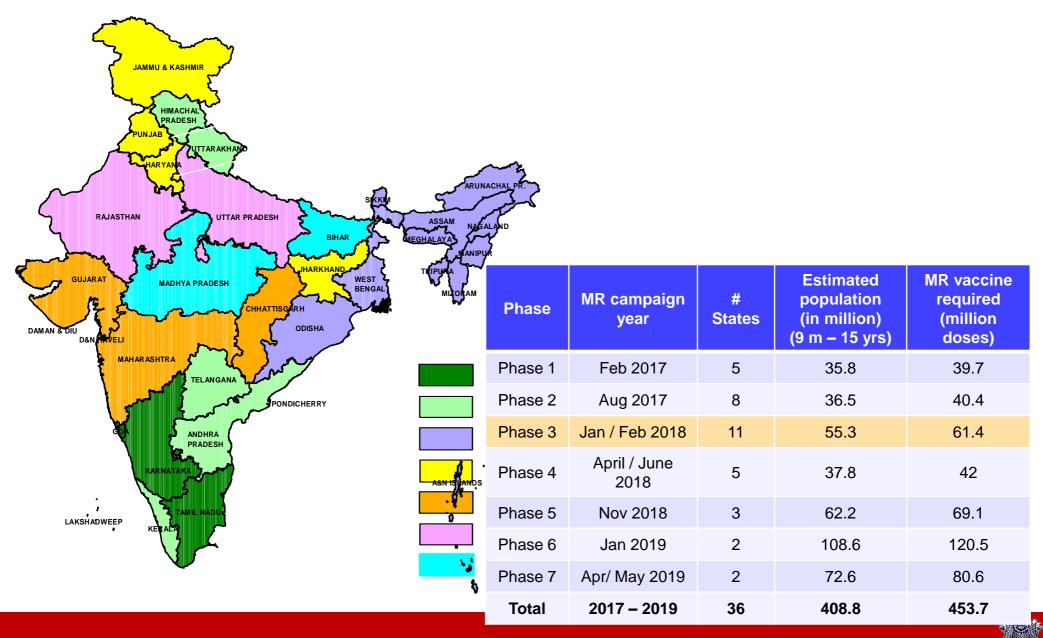


Strategic and Operational Framework for MR Vaccination Campaign





Proposed Measles-Rubella vaccine introduction plan, India





State wise children vaccinated in Phase-1

MR campaign report (Phase – I) as on 7th February, 2017

SNo	State	Target (in Lakhs)	Achievement (in Lakhs)	Percent	Remarks
1	Tamil Nadu	176.05	169.53	96	Activity completed.
2	Karnataka	160.33	158.45	99	Activity completed.
3	Puducherry	3.04	2.66	87	Activity completed.
4	Goa	3.20	3.12	97	Activity completed.
5	Lakshadweep	0.16	0.12	77	Activity completed





State wise children vaccinated in Phase-2

MR campaign report (Phase – II)					
SNo	State	Target (in Lakhs)	Achievement (In Lakhs)	Percent	Remarks
1	Andhra Pradesh	118.54	114.58	97	Activity completed.
2	Chandigarh	3.10	3.01	97	Activity completed.
3	Daman & Diu	0.58	0.62	107	Activity completed.
4	Dadra & Nagar H	1.14	1.15	101	Activity completed.
5	Telangana	90.01	91.48	102	Activity completed
6	Himachal Pr.	17.74	18.08	102	Activity completed.
7	Uttarakhand	28.36	28.76	101	Activity completed
8	Kerala	76.55	64.76	85	Activity ongoing





State wise children vaccinated in Phase-2

MR campaign report (Phase – II)					
SNo	State	Target (in Lakhs)	Achievement (In Lakhs)	Percent	Remarks
9	Arunachal Pradesh	4.38	4.43	101	Activity completed.
10	Odisha	112.25	110.34	98	Activity Completed





MR campaign: Core vaccination strategy

Target age group: 9 months to <15 years (regardless of prior M/R immunization status or Measles/Rubella disease history)

Target 100% coverage

Evaluated coverage should be more than 95 %

- One village per teams per day, one team one site per day
- Concurrent monitoring for campaign quality and safety
- Campaign duration: 4 + 1 weeks = ~ 30 working days
 - Initial weeks: School based campaign (<15 years children in schools)
 - Subsequent weeks: Community based campaign for non-school going/ missed children
 - 5 week: Sweeping/repeat activity based on supervision & monitoring





MR campaign: Basic vaccination strategy

- Immunizations from fixed-static posts (No HTH vaccination)
- Types of session sites
 - Session at Educational Institutes: All types of schools where <15 years children attend, will be used as vaccination session sites.
 These sites will be covered in the initial weeks of the campaign.
 - Outreach sites (regular RI sites and additional sites in village/urban mohalla / wards): Ideally in a central location where whole community can participate easily, from all corners of the village.
 - Mobile/Special team: For high-risk areas / population / groups
 - Facility based session site: All health facilities PHC level and above to function as fixed session-sites, (throughout campaign - 5 weeks)





MR campaign: Core vaccination strategy

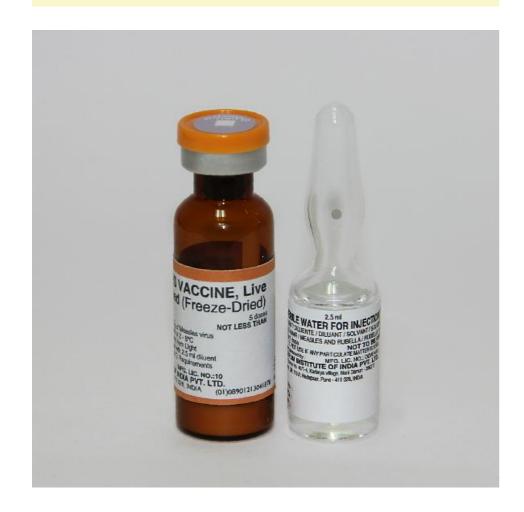
- During campaign, regular routine immunization sessions will be conducted without interruption
 - No campaign on RI days
- Measles containing vaccine will NOT be used on RI days during the campaign
- After MR campaign is over Measles vaccine will be replaced by MR vaccine
- In case entire measles vaccine stock not consumed by start of campaign, then measles vaccine + diluents are to be kept sealed during the campaign period.
 - This measles vaccine will later be used as first dose (at 9-12 months) in RI





Measles 5 dose vial and 2.5 ml diluent

Measles-Rubella 10 dose vial and 5 ml diluent









Age Vaccination schedule before MR introduction		Vaccination schedule after MR introduction	
At birth	BCG, bOPV-zero dose, Hep B-birth dose	BCG, bOPV-zero dose, Hep B-birth dose	
6 weeks	bOPV-1, Pentavalent-1, Rota-1, fIPV-1 and PCV-1 (if applicable)	bOPV-1, Pentavalent-1, Rota-1, fIPV-1 and PCV-1 (if applicable)	
10 weeks	bOPV-2, Pentavalent-2, Rota-2	bOPV-2, Pentavalent-2, Rota-2	
14 weeks	bOPV-3, Pentavalent-3, Rota-3, fIPV-2 and PCV-2 (as applicable)	bOPV-3, Pentavalent-3, Rota-3, fIPV-2 and PCV-2 (if applicable)	
9-12 months	Measles-1, Vit A, JE-1 (where applicable), PCV-Booster (if applicable)	MR-1, Vit A, JE-1 (where applicable), PCV-Booster (if applicable)	
16-24 months	DPT 1 st booster dose, bOPV-booster dose, Measles-2, JE-2 (where applicable)	DPT 1 st booster dose, bOPV-booster dose, MR-2. JE-2 (where applicable)	
5-6 years	DPT 2 nd booster dose	DPT 2 nd booster dose	
10 years	TT	TT	
16 years	ТТ	TT	
N HEALTH ,	Training Workshop for Mossles Rubolla	Vessination Compaigns	





MR Campaign: Decision Letter

States/UTs intimated regarding Measles-Rubella campaign in February 2017

T-13020/44/2014-CC&V
Government of India
Ministry of Health & Family Welfare
Immunization Division

Nirman Bhawan, New Delhi Dated: 8th December, 2016

To,

The Principal Secretary, Health & Family Welfare, Government of Goa, Karnataka, Lakshadweep, Puducherry and Tamil Nadu

Subject: Measles-Rubella vaccination campaign in February 2017- reg.

Sir/Madam,

As you may be aware that as part of WHO-SEAR resolution, India has resolved to eliminate measles and control rubella and congenital rubella syndrome by 2020. In that direction, Government of India has planned Measles-Rubella (MR) vaccination campaign, targeting children in the age group of 9 months upto 15 years, in a phased manner, to rapidly build up population immunity to these diseases.

It may be informed that the MR campaign will be carried out in your State/UT starting in the first week of February 2017, for which the necessary training workshop and other activities will be carried out in due course of time. In addition, the Polio NID planned on 29th January 2017 is being postponed to 5th March 2017 so as to give sufficient time between these two campaigns for proper preparation of the activity.

You are, therefore, requested to direct the concerned officials and provide your support and personal oversight in the planning and implementation activities of the campaign to make it a success.

Yours faithfully,

(Vandana Gurnani) JS (RCH)

Copy to:

- 1) Mission Director (NHM), Goa, Karnataka, Lakshadweep, Puducherry and Tamil Nadu
- 2) State EPI Officer, Goa, Karnataka, Lakshadweep, Puducherry and Tamil Nadu
- 3) DC (I), MoHFW
- 4) DC (UIP), MoHFW
- 5) Mr. Raman Prasad, PO (AV), MoHFW
- 6) Dr. Pankaj Bhatnagar, WHO-NPSP, India
- 7) Dr. Satish Gupta, UNICEF, India
- 8) Mr. Lokesh Gupta, Rotary International, India





Convergence with Other Ministries

- Letters written to other Ministries:
 - Ministry of Home Affairs
 - Ministry of Human Resource Development
 - Ministry of WCD
 - Ministry of Defence
 - Ministry of Information and Broadcasting
 - Ministry of Urban Development
 - Railway Board
 - Ministry of Panchayati Raj
 - Ministry of Road Transport and Highways
 - Ministry of Civil Aviation
 - Ministry of Shipping
 - Ministry of Youth Affairs and Sports





भारत सरकार

स्वास्थ्य एवं परिवार कल्याण विभाग स्वास्थ्य एवं परिवार कल्याण मंत्रालय Government of India

Department of Health and Family Welfare Ministry of Health & Family Welfare

D.O. No. T-22020/09/2016-Imm 5th December, 2016

Dear Sir,

India, along with other WHO-SEAR countries, in September 2013, resolved to eliminate measles and control rubella/congenital rubella syndrome (CRS) by 2020. In alignment with that, Ministry of Health & Family Welfare is introducing Rubella vaccine in its Universal Immunization Programme (UIP) as Measles-Rubella (MR) vaccine. The vaccine will be introduced as Measles-Rubella Campaign, targeting children from 9 months upto 15 years, in a phased manner, followed by administration of the vaccine in routine immunization.

This campaign targets a large birth cohort of approximately 41 crore children, starting in 1st quarter of 2017. As the campaign targets such a large cohort, it will be phased across the country over a period of two to three years. The campaign aims to rapidly build up immunity for both measles and rubella, and also provides a second opportunity for children left out in routine immunization.

While undertaking such a mammoth task, I look forward to your support and firmly believe that together we will be able ensure a high quality MR Campaign. Your cooperation and sustained efforts towards the polio vaccination programme, since its inception, is sincerely appreciated. We solicit your unstinted support for MR campaign as well.

As the campaign targets children from 9 months upto 15 years, the involvement of schools, teachers and the Principals play a crucial role in the success of the vaccination campaign. Therefore, the schools may kindly be advised to support and coordinate with local Health Authorities and State Governments and ensure that vaccination sites are set up in all schools wherever requested by the state governments, extend their support in carrying out the vaccination activity, and messages are sent to the community through the school children for mobilization of the children 9 months to 15 years of age to the vaccination sites during the MR campaign.

I look forward for your unstinted support for the upcoming MR campaign.

Yours sincerely,

(C.K. Mishra)

Shri Anil Swarup, Secretary, Department of School Education & Literacy, Ministry of Human Resource Development, New Delhi.

> Tele : (O) 011-23061863, Fax : 011-23061252, E-mail : secyhfw@nic.in Room No. 156, A-Wing, Nirman Bhawan, New Delhi-110011





Convergence with Professional Bodies

- Letters written to Professional Bodies & other Organization:
 - Indian Academy of Paediatrician (IAP)
 - Indian Medical Association (IMA)
 - Indian Public Health Association (IPHA)
 - Indian Association of Preventive & Social Medicine (IAPSM)
 - Indian Red Cross Society (IRCS)
 - Lions Clubs

वन्दना गुरनानी,भा.प्र.से. संयुक्त सचिव VANDANA GURNANI, IAS JOINT SECRETARY Tel.: 011-23061706 E-mail: vandana.g@ias.nic.in



भारत सरकार स्वास्थ्य एवं परिवार कल्याण मंत्रालय निर्माण भवन, नई दिल्ली - 110011

Government of India Ministry of Health & Family Welfare Nirman Bhavan, New Delhi - 110011

D.O. No. T-22020/09/2016-Imm 30th November, 2016

Dear De Premod

India, along with other WHO-SEAR countries, in September 2013, resolved to eliminate measles and control rubella/congenital rubella syndrome (CRS) by 2020. Accordingly, Ministry of Health & Family Welfare is introducing Rubella vaccine in its Universal Immunization Programme (UIP) as Measles-Rubella (MR) vaccine. The vaccine will be introduced as MR Campaign, targeting children from 9 months upto 15 years, in a phased manner over two to three years, followed by inclusion of the vaccine in routine immunization (RI).

This campaign targets a large birth cohort of approximately 41 crore children, starting in 1st quarter of 2017. The campaign will be conducted over a period of 3-4 weeks, where vaccination will first be conducted in schools and later in community through outreach. The campaign aims to rapidly build up immunity against measles and rubella, and also provides a second opportunity for vaccination against measles for children left out in RI.

I request you to communicate to all the members regarding the upcoming MR campaign and provide support in coordination with the Government as follows:

- 1. Sensitization and mobilization of their clients for the campaign
- Sensitize members to manage Adverse Events Following Immunization (AEFI) at their facilities, whenever required
- 3. Assist in training and monitoring activities of the campaign
- 4. Providing their clinics as site for vaccination session

I look forward to your support and firmly believe that together we will be able ensure high quality MR Campaign.

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Yours sincerely.

(Vancana Gurnani)

Dr. Pramod Jog, President- IAP, Indian Academy of Pediatrics, Kamdhenu Business Bay, 5th Floor, Plot No. 51, Sector 1, Juinagar East, (Near Juinagar Railway Station), Nerul, Navi Mumbai-400706.





Intersectoral coordination and improved school planning were key in phase 2 & 3 MR campaign



Joint Ministerial support for MR campaign at state level









Summary

- Key objective is 100% coverage with MR vaccination of children between 9 months to < 15 years of age
 - Vaccination for four types of static posts
- State macro planning to start 8-10 weeks prior to the campaign followed by district macro-planning
- Communication and Intersectoral coordination is the key to success— specially schools, including leading private pediatricians
- Pre-campaign monitoring for preparedness and Intra-campaign monitoring and supervision through out the MR campaign implementation will determine high-quality coverage with safety







.....Thank You.....



