



**DIRECTORATE OF FAMILY WELFARE, GOVT. OF NCT OF DELHI**  
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F.NO. 6(959)/CH/DFW/ 2020-21 /7852-81

DATE 25/9/23

### **Minutes of State Steering Committee Meeting**

Meeting of the State Steering Committee (SCC) to review the status of implementation of Intensified Mission Indradhanush (IMI) 5.0 was held under **the Chairmanship of Worthy Chief Secretary GNCT on 8th August 2023 at 04:00 PM at Conference Hall 3, Level-2, Delhi Secretariat, Delhi.** The District Magistrate and CDMOs joined the meeting in online mode

After welcoming the participants Secretary, Health & Family Welfare, GNCT briefly explained the agenda of the State Steering Committee meeting was to review the implementation of IMI 5.0 to ensure all the objectives of conducting the campaign are achieved and right thrust and momentum is given to the intensified immunization activity through effective inter-sectoral and interdepartmental coordination.

This was followed by a brief presentation by Director, DFW updating the worthy Chief Secretary GNCT and the committee members regarding the rationale, modality and preparatory activities completed by the Department for conducting the IMI 5.0.

It was informed that as per GOI mandate State Steering Committee under the chairmanship of worthy Chief Secretary is the highest overarching body to supervise review and mentor immunization program through seamless inter-sectoral and interdepartmental coordination.

Intensified Mission Indradhanush is a flagship program of Govt. of India, conducted in an intensive mode with the aim to strengthen and improve immunization coverage specially by reaching out to Left Out Drop Out & Refusal Children (LODOR). Many rounds of IMI have been successfully conducted in the past (beginning from 2015).

The key highlights of IMI 5.0 are as below:-

- IMI 5.0 will cover children from birth up to 5 years of age.
- IMI 5.0 will be rolled out in all districts.
- IMI 5.0 will be recorded and reported on U-WIN portal.
- **Schedule for 3 IMI rounds:**
  - Round 1 - 07<sup>th</sup> to 12<sup>th</sup> Aug 2023
  - Round 2 - 11<sup>th</sup> to 16<sup>th</sup> Sep 2023
  - Round 3 - 09<sup>th</sup> to 14<sup>th</sup> Oct 2023

- Each round will be conducted for 6 working days including RI days.
- Timings: Flexible timing based on community need.
- Focus will be on Left Out Drop Out Refusal - LODOR children.

Director, DFW requested all the Committee members to proactively advocate and endorse IMI 5.0 at all levels to promote immunization seeking behavior and improve vaccination coverage.

Seeking inputs from WHO team, Worthy Chief Secretary asked WHO, Regional Team Lead (RTL-North) to share their feedback. It was informed by RTL that preparations for upcoming IMI 5.0 rounds have been completed by the State. The efforts put in despite flood like situation were appreciated. He emphasized that the success of IMI 5.0 would rely on the quality of HCS & due list.

Following important directives were issued by worthy Chief Secretary:

1. The success of Co-WIN portal exemplifies the effectiveness of digital platforms for accurate and real time capturing of data. The digitalization of Routine Immunization through roll out of U-WIN is an extremely welcome step. Record Registers need to be phased out through effective implementation of U-WIN. The new birth cohort must be registered on U-WIN henceforth. **All the health facilities irrespective of agencies including private health facilities should record and report immunization related activities only on U-WIN portal.**
2. For seamless institutionalization of U-WIN in the system, the registration of all eligible children should be made mandatory and the U-WIN vaccination certificate to be made compulsory for admission into schools.
3. Awareness generation and IEC should be further enhanced through **regular advocacy of all preventive health programmes through FM radio advertisement** for better penetration and reach to masses.
4. ASHA workers are the last mile link between health services and beneficiaries. It is crucial that ASHAs are doing their field duties. **Accountability needs to be at the level of ASHAs to ensure that all the mandated services are provided.** ASHAs should be provided with mobile phones and geo-tracking of their field activities needs to be initiated for monitoring their activity.
5. It was directed that after completion of three rounds of IMI 5.0 which aims to bring the LODOR children under the ambit of immunization services, 100 % coverage needs to be ensured. **Any substantial gap and presence of Left out children after IMI 5.0 is non-negotiable and accountability needs to be fixed for covering the children.**
6. It was directed that at least one Immunization session must be held during the upcoming IMI 5.0 rounds in 675 cluster of un-catered population the list of which will be taken from Chief Secretary office.



7. **Concerted efforts from ICDS** to ensure that at least one outreach immunization session is planned in each Aaganwadi in the state (approximately 10,000 Aaganwadis). Full cooperation in terms of due listing eligible beneficiaries, mobilization, facilitation of session (on every holiday) to be continued by the Department.
8. Delhi should not have any un-served population when it comes to provision of health services. Health facilities should be established in pockets where they do not exist.
9. There is an urgent need to develop and institutionalize concrete measures to achieve 100% institutional deliveries. **No pregnant women are to be returned back by any hospital or delivery points.** All hospitals/delivery points to ensure that any pregnant women reporting to them receives appropriate management and referral.
10. To achieve the goal of MR elimination by December 2023 and achieve 100% immunization coverage, **the crux is to be able to trace, track and timely vaccinate each and every eligible child.**
11. Aim of routine immunization program should be to vaccinate each and every child in jurisdiction of the State. **The state should aim at 100% vaccination of 0-5 years' children.**

He reiterated that it is the responsibility of all allied departments to work towards improving delivery of services especially immunization as it is the most cost effective strategy to reduce morbidity and mortality among children and eliminate diseases.

The meeting ended with thanks to the Chair

This issues with Prior Approval of Competent Authority.



**Dr. Vandana Bagga**  
**DIRECTOR, DFW**

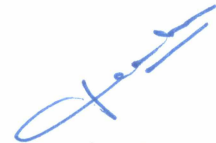
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**Copy to:**

1. PS to Chief Secretary, GNCTD.
2. PS to Pr. Secretary, Health & Family Welfare
3. PS to Pr. Secretary Home
4. PS to Divisional Commissioner
5. PS to Commissioner (MCD)
6. PS to Secretary- Finance
7. PS to Secretary -Planning

8. PS to Chairman NDMC
9. PS to Chief Executive Officer- Cantonment Board (Defence)
10. PS to Pr. Secretary Transport, GNCTD
11. PS to Secretary Social Welfare and WCI)
12. PS to Secretary-Department of SC/ST/OBCs and minorities
13. PS to Secretary- Labour and Employment
14. PS to Secretary- Urban Development
15. PS to Secretary - Information and Publicity
16. PS to Secretary -Health & Family Welfare, GNCTD.
17. PS to Spl. Secretary(H&FW) and Mission Director (DSIIM)
18. PS to Director General Health Services, GNCTD
19. PS to Secretary- Education
20. PS to Director NSS
21. PS to Director General NYKS
22. PS to Secretary- Sports and Youth Affairs (Under Directorate of Education)
23. SPO(RCH), DFW, GNCTD, Vikas Bhawan-II, Delhi
24. Representative of WHO,
25. Representative of UNICEF,
26. Representative of UNDP,
27. Representative of Rotary International,
28. Representative of Lions Club.
29. District Magistrate (All 11 Districts- Online Mode)
30. CDMOs (All 11 Districts- Online Mode)



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**DIRECTOR, DFW**