

**DIRECTORATE OF FAMILY WELFARE (GOVT. OF NCT OF DELHI)  
B & C WING, 7<sup>TH</sup> LEVEL, VIKAS BHAWAN-II  
NEAR METCALF HOUSE, CIVIL LINES, NEW DELHI- 110054**

**F.No. 6(1135) /CH/DFW/2020-21/ 8255- 73**

**Dated: 09/10/23**

**Minutes of Meeting**

Meeting of **State Task Force For Immunization** was held under the **Chairmanship of Special Secretary(H&FW) & MD, NHM, GNCTD, in the Conference Room No. 3, Level 2, Delhi Secretariat at 12:00 pm on 04<sup>th</sup> October 2023.** The meeting was attended by, Director DFW, Immunization Section, DIOs, Representatives from CGHS, NDMC, MCD and WHO. There was no representation from Education Department, ICDS and ESIC.

Director, DFW welcomed all participants and briefed them regarding the objective of the meeting. It was followed by a comprehensive PowerPoint presentation by PO Imm. sharing Key Points of IMI 5.0, Coverage of Round 1 & Round 2, implementation of U-WIN and status of MR elimination activities.

Following actionable points were discussed:

**A) IMI 5.0**

1. The achievement of IMI 5.0 round II were satisfactory however, as pointed out by WHO the children left out during the previous rounds must be included in the due list of final round. **(Action: DIOs)**
2. All health facilities should do an extensive combing activity to accurately update their due list and strictly plan the sessions according to due list. **(Action: MO I/Cs & ANMs)**
3. ICDS has been a constant support to immunization program and should continue to provide their valuable support. However, as informed by the DIOs that some coordination issues are being faced due to absence of any formal orders from ICDS to its worker regarding the comprehensively supporting immunization activities and the same to be issued for the next round. **(Action: ICDS)**
4. Better ongoing state level IEC (Metro-slides, Auto wraps Hoardings etc.) should yield positive impact on coverage. The impact of IEC in increasing Immunization shall be evaluated by State IEC officers (DSHM).
5. The concern expressed by WHO regarding eligible children not received any vaccine during IMI was raised in front of all the districts. It was directed that WHO should regularly share the list of left out children to all the concerned health facilities and DIOs to ensure the gap closure at the earliest possible by special team of vaccinators. **(Action: WHO/DIOs)**
6. Special Secretary H&FW reiterated that there should not be any Tracking Compromised Area (TCA) and all areas should be mapped in the micro-plan and followed up for all due beneficiaries. **(Action: DIOs)**
7. Addressing the issue of ANM shortage in South East, North East & East district, it was by directed Special Secretary H&FW that of the 54 ANMS posted in various

Govt. hospitals, 10 ANMs each shall be detailed in North-East and East district and remaining in South-East district to cover uncatered/untagged areas for the final round of IMI 5.0 from 09 Oct to 16 Oct 2023. **(Action: SPO, DSHM)**

## **B) ASHA related Issues**

1. The situation arising due to strike by ASHAs as reported by various districts was reviewed very seriously by Special Secretary, H&FW, GNCTD. It was directed that a communication needs to be immediately shared with ASHAs that their representation is under consideration, hence no ASHA should hamper the work and continue to facilitate the immunization activities on priority so that the final round of IMI 5.0 is fruitful. **(Action: State ASHA Cell, DHSM)**
2. District & State ASHA coordinators see review the ASHA performance closely and must coordinate and address any issues to ensure that there is no interruption of activities during the final round of IMI 5.0. **(Action: District ASHA Coordinators)**
3. It was desired to identify ASHA who are not performing or hindering services. At the same time, good performing ASHAs need to be felicitated & acknowledged at various forum including during DTFIs. **(Action: DTFI)**
4. ASHA should be directed to ensure pre-registration of eligible beneficiaries on U-WIN whenever they are conducting field visits/survey. **(Action: District ASHA Coordinators)**
5. It was reiterated that head count and due list preparation should be of utmost quality as it is a prerequisite to ensure 100% coverage of eligible children & beneficiaries.
6. Details of all the ASHAs on strike must be available with State ASHA Cell and duly be shared with the DIOs. **(Action: State ASHA Cell, DHSM)**

## **C) U-WIN implementation:**

It was highly appreciated that IMI 5.0, round II has been totally captured on U-WIN. It was heartening to see that State has been doing well and most indicators of state are placed ahead of national levels. However, the following gaps need to be address urgently with suitable remedial actions:

1. U-WIN team & DIOs to repeatedly engage the health staff in training, hand holding to reiterate the important points & updates to improve field level implementation of UWIN. **(Action: DIOs/UWIN team)**
2. Other stakeholders like Hospital, CGHS, MCD, ESI & Cantonment Board should also actively implement U-WIN and capture all the immunization events on the portal. **(Action: Nodal Officers from all Stakeholders)**
3. The dismal performance of delivery points in U-WIN registration as well as capturing deliveries was reviewed in bad light. It was directed that necessary instructions need to be issued to all private Health Care Facilities to report and upload data regularly on U-WIN without fail. **(Action: Nursing Home Cell, DHS)**
4. CDMOs & DIOs should personally monitor and review performance of all private hospitals and take necessary actions against defaulting Health Centres through DTFIs. **(Action: District Administration)**

5. North-East & Shahdara were performing better in terms of registration on U-WIN. However, all districts need to expedite the process particularly children 1-5 yrs & Pregnant Women. **(Action: DIOs)**
6. Status of vaccination of beneficiaries on U-WIN was relatively lagging in some districts like North, North-West, South-East should look into the quality of data and operational issues so that pace of registration starts improving. **(Action: DIOs)**
7. DIOs were directed to ensure that instead of cancellation of sessions all the ANMs must be directed to reschedule the sessions for improving percentage of sessions held vs planned on UWIN and sessions shall start on U-WIN as soon as the vaccinators reaches the session site without waiting for the first beneficiary. **(Action: DIOs/UWIN team)**
8. All the Frontline Workers (ASHAs, AWWs) must ensure that pre-registration of all the beneficiaries is done in the field. Any technical issue (Nokia handset/service package) must be immediately resolved by DSHM.

#### **D) MR Elimination**

MR elimination activities were critically reviewed and it was appreciated that the NMNR has increased to 3.84 and MCV 1 & MCV 2 coverage have increased to above 95% for period of April to August 2023. Following actionable points were highlighted to be urgently followed up for attainment of MR Elimination:

1. The achievement of NMNR of 3.84 was appreciated with a cautious approach that it is a dynamic indicator and all round effects by each health facility including hospitals needs to be continuously made for reporting, investigating and sampling each 'Fever with Rash' case. Communication in this regards are being regularly shared by Programme Division with all Districts. DIOs & DSOs should liaison with hospitals for 100% reporting. **(Action: DIOs/DSOs)**
2. The issue of poor quality samples should be addressed by training and supportive supervision of Lab Technicians. The State has already conducted training of identified lab technicians. District Level Training of Lab Assistants must be conducted with support of WHO to improve this indicator. **(Action: DIOs/DSOs)**
3. Coverage analysis must be done after each round so that effective measures are taken.
4. The MCV 1 & MCV 2 coverage  $\geq 95\%$  must be maintained. Districts deviating hugely from expected value either on lower side (e.g. New Delhi & South-West) or higher side should evaluate the data.
5. More focus needs to be given for MCV 2 coverage as there has been a consistent lag between MCV1 & MCV 2 coverage.
6. The surveillance system must be sensitive enough to be above to catch each 'fever with rash' case and as seasonal upsurge in MR cases is expected in winter months, public health response needs to be prompt and well planned.

#### **E) Td Coverage**

As the Td10 and Td16 coverage in the state is progressing at a slow pace, Td vaccination at age of 10 & 16 years can be done through observance of dedicated "Td vaccination days", herein, dedicated Td vaccination activities can be carried out in

schools by deputing vaccination teams. Considering the availability of Td vaccine supplied by GOI and human resource, it was suggested to explore and plan district wise observance of Td vaccination days and do relevant planning. School health Scheme & Directorate of Education will be playing a crucial role in improving Td 10 & Td 16 coverages.

Meeting ended with vote of thanks to the chair.

This issues with prior approval of Competent authority.

  
**Dr. Vandana Bagga**  
**Director, DFW**

**F.No. 6(1135) /CH/DFW/2023-24 / 8255-73**

**Dated: 09/10/23**

**Copy to:**

1. P.S. to Secretary (H&FW), Govt. of NCT of Delhi, 9<sup>th</sup> Level, Delhi Secretariat, IP Estate, New Delhi.
2. P.A. to Special Secretary (DFW)/Mission Director-DSHM, Govt. of NCT of Delhi.
3. Director, Directorate of Health Services, F-17, Karkardooma, Shahdara, Delhi-54.
4. Director-Women and Child Development(WCD), 1, Canning Lane (Pandit Ravi Shankar Shukla Lane), Kasturba Gandhi Marg, New Delhi - 110 001
5. Representative from MCD.
6. Representative from CGHS
7. Representative from ESI.
8. Representative from NDMC.
9. Director- Education, GNCTD.
10. President (DMA), DMA-House, Medical Association Rd, Daryaganj, Delhi 110002.
11. President (IAP), Indian Academy of Pediatrics, 113-114, First Floor, (Punjab & Sind Bank Building), 21 Rajendra Place, New Delhi-110 008.
12. SPO, IDSP, F-17, Karkardooma, Shahdara New Delhi-34.
13. SPO- Store, DFW, B& C wing, 7<sup>th</sup> floor, Vikas Bhawan, Civil lines, Delhi-54.
14. MS Nursing Home, DGHS.
15. State MIS officer, DFW, B& C wing, 7<sup>th</sup> floor, Vikas Bhawan, Civil lines, Delhi-54.
16. State community processes officers, DSHM, 6<sup>th</sup> floor, Vikas Bhawan, Civil lines, Delhi-54.
17. OSA & State Regional Team Leader, WHO, NPSP, 7<sup>th</sup> floor, DFW, Vikas Bhawan, Civil lines, Delhi-54.
18. UNDP, 55 Lodhi Estate PO box no. 5059, New Delhi 11003 (e-VIN Representative).
19. DIOs (All 11 Districts)
20. Guard file.

  
**Dr. Vandana Bagga**  
**Director, DFW**