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PREFACE

It gives me immense pleasure to present the revised Immunization Handbook for Medical Officers, 2016. This unique handbook has been the mainstay for Immunization-specific training of medical officers since 2006 and continues to contribute to improving the capacity of medical officers to lead their teams in increasing the reach and quality of the routine immunization program in the country.

Improving equity and quality of service is a goal that is achievable by using techniques to strengthen systems, build capacity of health staff and ensure the confidence of the community in the services provided.

While the existing infrastructure of manpower and material continues to be effective, it is necessary to focus on enhanced efficiency through systematic development of micro plans and management of immunization services. Towards this aim, the unit on microplanning has been enhanced with a detailed description of the process and formats needed for developing and maintaining high quality RI microplans and beneficiary due lists. The unit on high risk populations and urban areas defines such areas as well as describes area demarcation and identification of vulnerable populations with the objective of ensuring that beneficiaries in such areas are less likely to be missed. This will make medical officers and health workers to bring about equity of services.

The units on cold chain, supervision and monitoring, and use of data will improve the capacity of medical officers to interpret data, better manage storage and handling of vaccines, and provide supportive supervision to health staff at the field level. As team leaders, medical officers will benefit from the unit on capacity building which provides agendas as well as the key messages to be disseminated during trainings and review meetings. This will contribute to enhancing knowledge and skill of frontline health workers, which in turn will improve the quality of services.

The success of the routine immunization program is also influenced by the confidence the community holds in the services. Safety of injections administered as well as safety of health staff is detailed

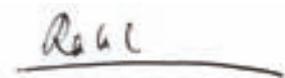


in the unit on safe injections and waste management which will help to build staff and community confidence. The unit on communication for behavior change focuses on how to strategically use information as well as innovative methods to tackle vaccine hesitancy and bring in community support for the program.

Surveillance for Vaccine Preventable Diseases (VPD) and Adverse Events Following Immunization (AEFI) are critical to the immunization program as timely investigation will provide information for program managers and field staff to address community concerns. The units on VPDs and AEFI are aimed to sensitize readers to the importance of timely reporting with reference to the operational guidelines.

With the introduction of newer vaccines such as Inactivated Polio Vaccine (IPV), Rotavirus vaccine and Pneumococcal vaccine (PCV), it is an opportune time to regularly review immunization services in order to identify gaps and determine local actions necessary to address them. These activities will ensure rational use of manpower and logistics thus strengthening systems and reducing avoidable wastage of valuable vaccines.

I am confident that this edition of the Handbook will continue to be an effective guide for immunization training and a reference book for medical officers to address immunization issues in the field. I commend the efforts of all those who have contributed to making this a much valuable document.



(Dr. Rakesh Kumar)