

Performance Monitoring Tool for  
the National Expanded Program  
on Immunization

**PHASE 2**

**Annex 15:**

**Gold standard for  
all components  
included in the tool**

**PAHO**



Pan American  
Health  
Organization



World Health  
Organization  
regional office for the Americas



In partnership with

**Canada**

## Performance Management Tool for National EPI teams in the Latin American and Caribbean

### Annex 15. Gold standard for all components included in the tool

\*Gold standard refers to the standards/criteria required to score a five in the overall component

Component number	Component name	Gold standard
1	Political priority	The country has a comprehensive legal framework for EPI, including a life-course vaccination policy. There is a feedback mechanisms from the Ministry of Health to the legislative assembly. The budget policy for EPI includes COVID-19 vaccination operations and EPI plays an active role in decision-making for vaccines in the country. Additionally, the country also participates in international discussions on EPI
2	Planning and scheduling	The country has long-term plan for the national EPI and implementation is underway. Annual activities are supported by a comprehensive action plan that is currently being executed systematically and is monitored. This includes funded strategies aimed at reaching both unvaccinated and under-vaccinated populations and either expanding the target group for existing vaccines or introducing a new vaccine. To effectively conduct these activities, they have accurately estimated the denominator for the target populations, and have defined geographical boundaries to identify areas of responsibility for each health facility. All health facilities have also received micro planning guidelines from national EPI and are implementing it. Additionally, COVID-19 vaccination has been integrated into routine vaccination activities, high-risk groups have been identified and vaccination coverage rates for this group has been increasing.
3	Organization and coordination	The country's organizational structure of the EPI is designed comprehensively, encompassing all departments that perform management functions. There is internal coordination through the National Technical Committee, which convenes on a regular schedule, fostering coordination and communication among various EPI domains. Similarly, the National Immunization Technical Advisory Group (NITAG) provides technical support to EPI and has a defined terms of reference (TORs) and a dedicated budget to support its activities. There is also an external coordination mechanism for EPI which engages different sectors to provide support for immunization activities. Bordering countries also coordinate their vaccination, surveillance, and emergency activities to ensure increased coverage and effective diseases management in the region. Additionally, there is a formal cross-sectoral working group that manages the integration of EPI with routine vaccination. There are also established strategies to increase COVID-19 vaccination coverage in high-risk groups and these have been implemented across the country and are monitored.
4	Epidemiological surveillance	The country has defined protocols and a national training plan for VPD surveillance. There is also a trained Rapid Response Team for outbreak management. The country has met the notification rates and surveillance indicators for measles/rubella and polio cases and conducted a risk assessment in the last 3 years. Additionally, the national bacteriology and virology laboratories have sufficient supplies for testing and share results timely.
5	HR and financial management	The country self-finances the purchases of all vaccines and supplies (including COVID-19), has a policy for financing all vaccine operations and has a comprehensive planning and follow-up mechanism to procure vaccine and supplies. EPI is also actively involved in communicating financial needs to the Ministry of Health and all funds are distributed in a timely manner across all levels The country has sufficient human resources (HR) for all EPI components, back-up strategy to deal with a shortage if needed, and a HR plan that has been implemented and is being monitored.

6	Training and supervision	<p>The country has an annual national training plan for all components of EPI which has been implemented and is being monitored. This also includes training on the introduction of new vaccines, administering the COVID-19 vaccine and the integration of COVID-19 vaccination into routine immunization.</p> <p>The country also has a national supervision plan which has been implemented and monitored. Integrated supportive supervision visits for routine immunization and COVID-19 were carried out across the country according to a predefined scheduled. All supervisors provided feedback and actionable recommendations to health facilities and these recommendations were implemented.</p>
7	Information system	<p>The country has established standards and guidelines governing the organization and operation of vaccination information systems, and these protocols have been implemented nationwide. The electronic nominal immunization record information system seamlessly interoperates with other immunization record information systems and health information systems. Furthermore, all levels across the country conduct an annual diagnosis of the Information Communication Technology infrastructure.</p> <p>The country also conducts regular analyses of COVID-19 and routine immunization coverage data, along with an equity analysis, to develop targeted vaccination activities. All health facilities also consistently submit complete data in a timely manner. Additionally, the country conducts a comprehensive data quality assessment every five years, incorporating feedback from this assessment to continually improve data quality standards.</p>
8	Cold chain	<p>The country has comprehensive standards and guidelines for the organization and management of cold chains, and these protocols have been implemented across the nation. There is an electronic information system to manage cold chain inventory and this is consistently updated at all levels. The country has the storage capacity for all vaccines, including those that require ultra-low temperatures.</p> <p>A funded plan is in place for the maintenance and replacement of equipment and a strategic plan is in place for the efficient distribution of vaccines throughout the country.</p> <p>To enhance operational efficiency, latest technology is used for monitoring cold chain and the management of vaccines within the cold chain is regularly reviewed through supportive supervision activities conducted throughout the country.</p> <p>Additionally, vaccines arriving into the country are promptly cleared from customs within 24 hours. Any damages to the vaccines are diligently reported to the supplier within three days through official mechanisms.</p>
9	Supply of vaccines	<p>The country has established documented procedures for scheduling the annual demand for vaccines and supplies, which are utilized across all levels. The National Regulatory Authority is actively engaged in activities related to the EPI.</p> <p>Additionally, the country adheres to updated regulatory procedures for authorizing the introduction of vaccines under the WHO Emergency Use List (EUL) or Prequalification (PQ), as well as the official procedures for batch release of vaccines, with systematic monitoring in place.</p> <p>There have been no vaccine shortages in the last 12 months, and the vaccine wastage rates have consistently remained below the national guidelines for each vaccine.</p>
10	Evaluation and research	<p>The national EPI has conducted at least one comprehensive evaluation and monitoring meeting in the last year and a vaccination coverage survey in the last five years. Results from both were used to develop of an action plan aimed at addressing priority areas, and this action plan has been/is being implemented.</p> <p>Additionally, within the last five years, the EPI has undertaken two studies (i) a systematic operational research study aligned with official guidelines and standards has been conducted, prioritizing most important EPI topics. The identified gaps were used to inform actions to enhance program efficacy (ii) at least one comprehensive post-introduction or evaluation study of new vaccines</p>

11	Social communication	<p>Over the past five years, the country conducted at least one assessment to measure the acceptance and demand for routine immunization and COVID-19 vaccines respectively. The insights from these evaluations were used to develop communication plans for all levels. These communication plans were evaluated on their effectiveness and updated accordingly for the current year and are supplemented with financial and human resources for its execution. Additionally, comprehensive communication and local community engagement activities were implemented across all levels for both routine immunization and COVID-19 through all available mediums. There are defined plans to continue these communication activities in the next year.</p>
12	Safe vaccination	<p><b>Events Supposedly Attributable to Vaccination or Immunization (ESAVI):</b></p> <p>The country has three important documents relating to ESAVI which has been implemented nationwide and is being monitored (i) a manual for ESAVI which was updated in the last 3 years (ii) a strategic communication plan for vaccine safety which includes procedures for crisis response (iii) annual national training plan for ESAVI surveillance</p> <p>Additionally, ESAVI data is collected using an electronic investigation form incorporating all key variables of ESAVI surveillance. Data is stored on a national database of individual case notifications and all institutions involved in ESAVI surveillance have unrestricted access to it. There is also a programmatic error surveillance system that includes reporting, investigation, ongoing feedback (with documentation) and training of EPI staff.</p> <p>ESAVI data for COVID-19 is published quarterly with a simple descriptive analysis and a signal detection analysis occurring in the last 12 months.</p> <p>There is also a national vaccine safety committee, with independent members who have been trained in the WHO ESAVI causality analysis methodology.</p> <p><b>Safe injection:</b></p> <p>The national standards and guidelines for vaccine safety, safe injection, waste management and multi-dose vials have been fully implemented and monitored throughout the country. There is also a fully financed contract for waste collection &amp; disposal.</p> <p>Communications and educational material for safe injection and disposal of biological and sharp waste has also been implemented</p>
13	Execution	<p>The national EPI provided technical guidelines to the Provincial/State/Department level for defining boundaries at the health facility level, microplanning, developing a defaulter tracking strategy, identifying and reaching vulnerable populations for routine and COVID-19 immunization. The Provincial/State/Department level adapted these guidelines where necessary and implemented them across the level and the implementation is being monitored. They also maintain external coordination mechanisms with other sectors that offer vaccination services in the Province/State/Department.</p> <p>Additionally, all supervision visits (including Rapid Vaccination Monitoring) planned for the local level were conducted, actionable feedback was provided and implemented by health facilities.</p>
14	Health facility	<p>The health facility has access to the official technical manual for EPI, they have the denominator data available for the target population in their catchment area with an age-wise breakdown along with an updated micro plan and strategy to reach the target population. Case notification forms for measles/rubella and polio are available and the facility has consistently incorporated feedback received from all supportive supervision visits. There have been no vaccine and syringe shortages in the last 12 months and all vaccines are offered daily at the facility. The cold chain has no expired vaccines, and temperature control records have been maintained since the last 12 months with recording twice a day. All vaccines are stored and used vaccines are discarded according to WHO/PAHO guidelines.</p> <p>The facility staff has been trained in and have used the official measles/rubella and AFP definitions. The staff knows how to report and investigate an ESAVI and they record all required data for vaccination. The staff is aware of the sensitivity of different vaccines to heat and freezing, they store vials according to manufacturer's guidelines and they know how to handle open vaccine vials.</p>