



# EPI Surveillance Bulletin



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## EPI Micro planning for 2006: A pragmatic approach to implement RED Strategy

Bangladesh is committed to provide immunization services to all children under one year and women of reproductive age. Bangladesh developed a comprehensive micro planning in order to attain RED (Reaching Every District) strategic goals of fully vaccinating at least 90% of the children and women in all upazilas. This micro planning includes: regular qualitative session plan, supportive supervision, community involvement, monitoring /data analysis and maximizing utilization of human and other resources.

EPI Micro planning in Bangladesh evolved through different stages and to date achieved the following remarkable milestones:

- 2001: Joint review identified the need for development of a comprehensive strategy for strengthening routine EPI
- 2002: Guidelines and forms developed and micro-planning piloted in 8 upazilas.
- 2003: Workshop reviewed findings of pilot and suggested to incorporate RED strategy in micro-planning
- 2003: Local level workshops conducted to orient managers on micro planning process and to develop micro plans for 2004
- 2004: Further review of Guidelines and forms
- 2004: Improved micro planning done for 2005
- 2005: Immunization Service Strengthening (ISS) fund disbursed based on the micro planning

In 2005 various steps were adopted to enhance micro planning. This exercise allowed management to plan for better supervision and higher quality service delivery. Some important steps were:

- Updating the existing Geographical Reconnaissance (GR) maps with location of fixed sites, outreach sites and hard to reach areas.
- Preparation of the annual session plan along with its management plan.
- Preparation of supportive supervision plan for the year along with development of supervisory tools.
- Formulation of an action plan based on quantitative and qualitative analysis.

Critical review of 2005 micro planning in the later part of the year revealed some strengths and weaknesses in the process. Involvement of concerned managers, identification of weak areas and needed activities along with appropriate support and formulation of annual session plan were the strengths. On the other hand it took a long time to finalize and disburse budget from Head Quarters to upazila, municipality and City Corporation. The

lack of review of micro planning at the district level by district GAVI committee and a periodic review of micro planning were not done which was also a weakness. Finally, forms 5 and 6 needed more work to make them user friendly.

Taking all those factors into consideration, a one day pre Micro planning workshop was held on 29 October with field managers and workers, national level representatives of government agencies related to EPI, NGOs and development partners. The objective of the workshop was to revise the forms in order to prepare a pragmatic micro plan for the year 2006. As per the decision of the workshop, this year EPI sessions will be conducted five days in a week with a minimum interval of two days between sub block vaccinations. In urban areas, EPI session plan should aim to bring all target people with reduction of vaccine wastage. Form 6.1 to 6.5 should be filled up taking right input from form 1 and forms 5.1 to 5.3. Upazila managers are advised to influence upazila development committee to allocate fund under upazila development activities of ADB (Asian Development Bank) for implementing some of their activities. Likewise City Corporation and Municipality health managers should maximize the allocated fund for health related activities from ministry of local government and rural development for the cause of vaccination.

This year a new form has been introduced with micro planning. This is form number 7, which is used to disburse fund under GAVI envelop budget. It is instructed that form 7 should be filled up using information from forms 6.1 to 6.5. Upazila/Municipality/Zone level micro planning should be prepared in two copies. One copy should reach respective district and City Corporation by 6 November. Micro planning forms should be reviewed by GAVI committee at district and City Corporation level. This committee will hand over an advance copy of form 7 after thorough review of micro planning forms to DIMO/SMOs. In turn DIMO/SMOs will send the electronic copy of this form to the EPI HQ. It is planned that the final copy of micro plan will reach EPI HQ by 24 November. After reviewing the micro plan EPI HQ is scheduled to send the envelop budget by 18 December to the respective upazila, Municipality or City Corporation.

It is evident that the micro planning process in Bangladesh opens new opportunities to reach every child and woman by using the RED strategy approaches and this year attempts have been taken to maximize the opportunity.

## Surveillance Summary for 1999-2005 (through Epidemiologic Week 45, Oct 30-Nov 5, 2005)

	1999	2000	2001	2002	2003	2004	2005 <sup>1</sup>
Number of AFP cases	761	1138	1287	1365	1128	1301	1245
No. of clinically confirmed polio cases	322	197	NA	NA	NA	NA	NA
No. of compatible cases according to virologic classification system	NA	NA	36	0	0	2	0
<b>No. of cases with isolation of wild poliovirus</b>	29	1	0	0	0	0	0
No. of discarded polio cases (i.e., non-polio AFP)	439	941	1251	1365	1128	1299	1162
No. of cases pending classification	0	0	0	0	0	0	83
Expected annual number of non-polio AFP cases (2/100,000 children <15 yr)*	505	515	533	549	556	563	1094

## AFP Surveillance Performance Indicators:

Indicator	Target	1999	2000	2001	2002	2003	2004	2005
1. Annual Non-Polio AFP rate in children < 15 years old	≥ 2.0	0.87	1.82	2.34	2.49	2.03	2.31	2.45
2. Completeness of passive reporting from facilities	≥ 90%	66%	83%	65%	62%	67%	82%	91%
3. Timeliness of passive reporting from facilities	≥ 80%	30%	58%	38%	36%	62%	75%	83%
4. Suspected AFP cases investigated within 48 hours of notification	≥ 80%	83%	93%	96%	96%	98%	98%	99%
5. Confirmed AFP cases with 2 stool specimens collected ≤ 14 days after paralysis onset	≥ 80%	49%	68%	80%	89%	90%	90%	92%
6. Stool specimens arriving at laboratory ≤ 3 days after collection	≥ 80%	81%	92%	97%	98%	99%	99%	99%
7. Stool specimens arriving at laboratory in "good" condition "good" = 1. Presence of unmelted ice or temperature <8°C 2. Adequate volume (≥ 8 grams or size of ½ thumb) 3. No evidence of leakage 4. No evidence of desiccation (drying)	≥ 90%	97%	100%	100%	99%	100%	100%	100%
8. Confirmed AFP cases receiving a follow-up exam at least 60 days after paralysis onset	≥ 80%	97%	95%	93%	99%	100%	98%	97% <sup>2</sup>
9. Stool specimens with laboratory results ≤ 28 days after specimen receipt	≥ 80%	58%	94%	99%	100%	100%	100%	99% <sup>3</sup>
10. Stool specimens from which non-polio enterovirus (NPEV) was isolated	≥ 10%	13%	21%	29%	28%	23%	20%	21%

<sup>1</sup> Data as of Nov 5, 2005; <sup>2</sup> among cases occurring up to Aug 22, 2005; <sup>3</sup> as of Oct 8, 2005. \* Prior to 2005 NPAFP rate calculated as 1/100,000 children

**AFP Surveillance Performance Indicators - 2005**

Epiweek 45, 2005

District	Minimum operational target of non-polio AFP	Total # AFP <sup>1</sup>	Wild polio-virus isolated	# Compatible cases	Non-Polio AFP cases <sup>1</sup>	Pending final classif. <sup>1</sup>	Annualized Non-polio AFP Rate <sup>1</sup>	Notification within 10 d after paralysis onset <sup>1</sup>	Investigation within 48 h after notification <sup>1</sup>	% with 2 stools within 14 days <sup>1</sup>	Stool sample arriving to lab within 72 hrs <sup>1</sup>	% with 60-day follow-up <sup>2</sup>
<b>Dhaka Division</b>												
DCC only	61	47		46	1	1.74	96%	98%	92%	100%	88%	
Dhaka (non DCC)	25	38		37	1	3.48	97%	100%	95%	97%	96%	
Faridpur	15	21		21	0	3.17	95%	100%	95%	100%	95%	
Gazipur	18	16		14	2	1.83	100%	100%	94%	100%	100%	
Gopalganj	10	21		21	0	4.93	100%	100%	100%	100%	100%	
Jamalpur	18	26		25	1	3.14	89%	100%	85%	100%	100%	
Kishoreganj	22	26		24	2	2.52	92%	100%	92%	100%	100%	
Madaripur	10	20		19	1	4.58	90%	100%	95%	100%	100%	
Manikganj	11	14		13	1	2.68	79%	100%	86%	100%	92%	
Munshiganj	11	27		24	3	5.04	96%	100%	96%	100%	100%	
Mymensingh	39	41		35	6	2.09	81%	100%	83%	100%	93%	
Narayanganj	19	13		12	1	1.44	100%	100%	100%	100%	100%	
Narsingdi	17	18		18	0	2.45	89%	100%	89%	100%	100%	
Netrokona	17	18		18	0	2.42	100%	100%	94%	100%	100%	
Rajbari	8	11		10	1	2.79	100%	100%	100%	100%	100%	
Shariatpur	9	21		18	3	4.42	95%	95%	91%	100%	100%	
Sherpur	11	12		12	0	2.53	100%	100%	100%	100%	100%	
Tangail	28	24		20	4	1.66	92%	100%	92%	100%	95%	
<b>Total-DHAKA</b>	<b>349</b>	<b>414</b>	<b>0</b>	<b>387</b>	<b>27</b>	<b>2.56</b>	<b>93%</b>	<b>100%</b>	<b>92%</b>	<b>100%</b>	<b>97%</b>	
<b>CTG Division</b>												
CCC only	20	21		20	1	2.28	100%	100%	95%	100%	100%	
Chittagong (non CCC)	38	41		38	3	2.32	98%	100%	95%	100%	97%	
Bandarban	3	3		3	0	2.53	100%	100%	100%	100%	100%	
Brahmanbaria	21	22		21	1	2.36	91%	91%	86%	100%	100%	
Chandpur	20	14		13	1	1.47	100%	93%	86%	100%	90%	
Comilla	40	43		37	6	2.14	98%	98%	88%	100%	100%	
Cox's Bazar	16	14		13	1	1.89	93%	100%	93%	100%	100%	
Feni	10	25		22	3	4.85	96%	100%	92%	100%	100%	
Khagrachari	5	7		6	1	2.72	86%	100%	86%	100%	86%	
Laxmipur	13	17		16	1	2.86	88%	100%	88%	100%	100%	
Noakhali	23	36		35	1	3.58	97%	100%	97%	100%	84%	
Rangamati	5	5		5	0	2.38	60%	100%	80%	100%	80%	
<b>Total-CTG</b>	<b>214</b>	<b>248</b>	<b>0</b>	<b>229</b>	<b>19</b>	<b>2.48</b>	<b>95%</b>	<b>98%</b>	<b>92%</b>	<b>100%</b>	<b>95%</b>	
<b>Sylhet Division</b>												
SCC	4	3		3	0	1.81	100%	100%	100%	100%	100%	
Sylhet (non SCC)	19	21		19	2	2.26	91%	100%	91%	100%	100%	
Habiganj	15	12		10	2	1.51	75%	100%	92%	100%	100%	
Maulvibazar	14	10		9	1	1.46	100%	100%	100%	100%	100%	
Sunamganj	18	12		12	0	1.58	100%	100%	92%	91%	88%	
<b>Total-SYL</b>	<b>70</b>	<b>58</b>	<b>0</b>	<b>53</b>	<b>5</b>	<b>1.74</b>	<b>91%</b>	<b>100%</b>	<b>93%</b>	<b>98%</b>	<b>98%</b>	
<b>Raj Division</b>												
RCC only	3	5		4	1	2.66	100%	100%	100%	100%	100%	
Rajshahi (non RCC)	17	12		12	0	1.66	67%	100%	58%	100%	100%	
Bogra	26	10		9	1	0.79	80%	100%	90%	100%	100%	
Dinajpur	23	19		16	3	1.59	90%	100%	95%	100%	100%	
Gaibandha	18	18		18	0	2.28	94%	100%	89%	88%	100%	
Joypurhat	7	11		11	0	3.44	82%	100%	91%	100%	100%	
Kurigram	15	16		15	1	2.28	81%	100%	88%	100%	100%	
Lalmonirhat	10	13		11	2	2.62	85%	100%	77%	100%	100%	
Natore	13	12		12	0	2.13	100%	100%	100%	100%	82%	
Nilphamari	14	12		11	1	1.85	100%	100%	100%	100%	100%	
Noagoan	21	27		25	2	2.81	100%	96%	85%	96%	100%	
Nowabganj	13	18		17	1	3.09	89%	100%	83%	100%	100%	
Pabna	19	21		21	0	2.58	100%	100%	100%	100%	100%	
Panchagarh	7	10		8	2	2.50	100%	100%	100%	100%	100%	
Rangpur	22	11		10	1	1.04	100%	100%	91%	90%	90%	
Sirajganj	24	21		21	0	2.05	91%	100%	95%	100%	100%	
Thakurgaon	11	7		7	0	1.51	100%	100%	100%	100%	100%	
<b>Total-RAJ</b>	<b>263</b>	<b>243</b>	<b>0</b>	<b>228</b>	<b>15</b>	<b>2.00</b>	<b>92%</b>	<b>100%</b>	<b>90%</b>	<b>98%</b>	<b>99%</b>	
<b>Khulna Division</b>												
KCC only	8	5		4	1	1.17	100%	100%	100%	80%	100%	
Khulna (non KCC)	13	13		13	0	2.39	92%	100%	92%	100%	100%	
Bagerhat	13	22		20	2	3.60	100%	96%	100%	100%	100%	
Chuadanga	9	10		10	0	2.54	80%	100%	70%	100%	100%	
Jessore	22	28		27	1	2.87	96%	100%	93%	100%	96%	
Jhenaidah	14	18		15	3	2.52	94%	100%	94%	100%	100%	
Kushtia	15	14		13	1	1.97	86%	100%	86%	100%	100%	
Magura	7	8		8	0	2.56	100%	100%	100%	88%	100%	
Meherpur	5	7		7	0	3.10	100%	100%	100%	100%	100%	
Narail	6	10		8	2	3.14	90%	90%	80%	100%	100%	
Satkhira	16	13		12	1	1.72	85%	92%	85%	100%	100%	
<b>Total-KHU</b>	<b>128</b>	<b>148</b>	<b>0</b>	<b>137</b>	<b>11</b>	<b>2.48</b>	<b>93%</b>	<b>98%</b>	<b>91%</b>	<b>99%</b>	<b>99%</b>	
<b>Barisal Division</b>												
BCC	2	4		4	0	4.64	100%	100%	100%	100%	100%	
Barisal (non BCC)	18	30		29	1	3.74	90%	100%	97%	97%	85%	
Barguna	7	23		23	0	7.35	100%	100%	100%	100%	94%	
Bhola	15	25		23	2	3.56	88%	100%	96%	100%	100%	
Jhalakhati	6	19		18	1	7.16	100%	100%	100%	100%	100%	
Patuakhali	13	14		13	1	2.34	93%	100%	86%	100%	83%	
Pirojpur	9	19		18	1	4.46	100%	100%	100%	100%	100%	
<b>Total BAR</b>	<b>70</b>	<b>134</b>	<b>0</b>	<b>128</b>	<b>6</b>	<b>4.23</b>	<b>95%</b>	<b>100%</b>	<b>97%</b>	<b>99%</b>	<b>94%</b>	
<b>National</b>	<b>1094</b>	<b>1245</b>	<b>0</b>	<b>1162</b>	<b>83</b>	<b>2.45</b>	<b>93%</b>	<b>99%</b>	<b>92%</b>	<b>99%</b>	<b>97%</b>	

<sup>1</sup>Data as of Epidemiologic Week 45 November 5, 2005, <sup>2</sup> for cases occurring upto August 22, 2005

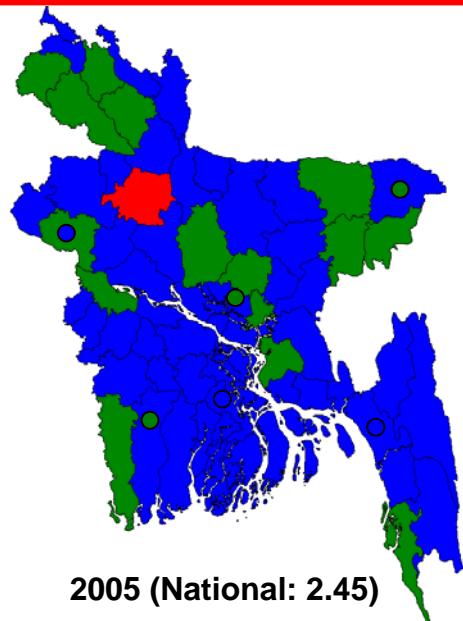
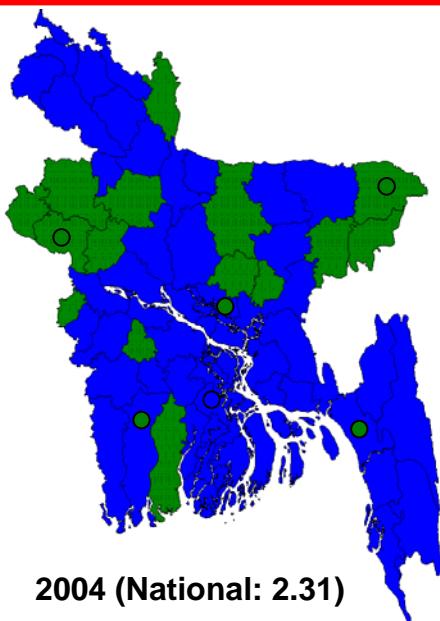
**Disease Surveillance - 2005**

EPI week 45, 2005

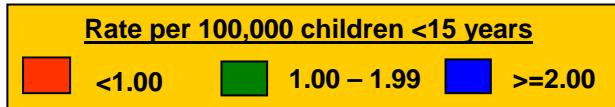
District	Neonatal Tetanus			Measles			AEFI # of case Reported	
	# of case reported by Active Surveillance	# of case reported by Passive Surveillance	# of case Investigated	# of case reported by Active Surveillance	# of case reported by Passive Surveillance	Outbreak		
						Number of Outbreak % Investigated)		
<b>Dhaka Division</b>								
DCC only	10	11	11	189	193	25(100%)	3270 2	
Dhaka (non DCC)	4	2	4	19	42	3(100%)	480 22	
Faridpur	2	4	4	3	50	3(100%)	283 52	
Gazipur	3	2	2	11	34	3(100%)	312 5	
Gopalganj	7	5	7	3	137	3(100%)	144 35	
Jamalpur		1		4	33	2(100%)	385 15	
Kishoreganj	22	20	11	47	136	9(100%)	856 20	
Madaripur		1		12	153	5(100%)	339 49	
Manikganj	2	1		1	24	4(100%)	860 35	
Munshiganj	2	3	2	3	282	9(100%)	921 16	
Mymensingh	13	5	11	33	184	6(100%)	576 72	
Narayanganj				68	65	2(100%)	102 20	
Narsinghdi				18	41	2(100%)	102 7	
Netrokona	2	7	7	6	170	8(100%)	946 23	
Rajbari		1	2		41	1(100%)	18 4	
Shariatpur	2	3	2	3	123	5(100%)	314 42	
Sherpur	3	7	6		67	2(100%)	325 19	
Tangail	3	3	5	12	25	2(100%)	322 23	
<b>Total-DHAKA</b>	<b>75</b>	<b>76</b>	<b>74</b>	<b>432</b>	<b>1800</b>	<b>94(100%)</b>	<b>10555 461</b>	
<b>CTG Division</b>								
CCC only	8	4	5	63	50	2(100%)	161 5	
Chittagong (non CCC)	1	5		10	67	1(100%)	17 4	
Bandarban				2	8		3	
Brahmanbaria	8	12	10	2	27	1(100%)	46 7	
Chandpur	4	4	3	5	82	3(100%)	57 41	
Comilla	4	4	2	8	194	12(100%)	1684 4	
Cox's Bazar	6	7	6	4	21	1(100%)	183 7	
Feni	2	3	2	2	196	8(100%)	688 8	
Khagrachari				2	28			
Laxmipur	6	7	6	3	64	1(100%)	15 48	
Noakhali	6	7	6	12	69	5(100%)	320 16	
Rangamati				1	49		3	
<b>Total-CTG</b>	<b>45</b>	<b>53</b>	<b>40</b>	<b>114</b>	<b>855</b>	<b>34(100%)</b>	<b>3171 146</b>	
<b>Sylhet Division</b>								
SCC	1		2	164	175		1	
Sylhet (non SCC)	4	4	2	159	285	1(100%)	26 16	
Habiganj	8	6	1	23	120	5(100%)	274 31	
Maulvibazar	4	3	1	23	145	3(100%)	107 14	
Sunamganj	7	11	5	277	324	2(100%)	731 25	
<b>Total-SYL</b>	<b>24</b>	<b>24</b>	<b>11</b>	<b>646</b>	<b>1049</b>	<b>11(100%)</b>	<b>1138 87</b>	
<b>Raj Division</b>								
RCC only				14	239	15(100%)	1085 41	
Rajshahi (non RCC)	4	5	5	4	10	1(100%)	266 10	
Bogra	2	3	2	7	22	2(100%)	75 147	
Dinajpur	6	6	6	1	14	5(100%)	559 52	
Gaibandha	1	5	7		27	3(100%)	272 40	
Joypurhat	1	1	1	4	26		23	
Kurigram		4	4		12	1(100%)	38 14	
Lalmonirhat	1	1	1		15	1(100%)	50 2	
Natore	4	4	4	15	178	8(100%)	805 22	
Nilphamari	3	1		2	10		28	
Noagoan	3	2	4	3	106	5(100%)	749 37	
Nowabganj	5	3	5	6	8	1(100%)	61 8	
Pabna	1	1	1	11	39		9	
Panchagarh	1	3	2	2	72	5(100%)	1078 3	
Rangpur	9	7	6	7	7	2(100%)	47 22	
Sirajganj	1	2	1	4	18	1(100%)	127 13	
Thakurgaon				18	22	7(100%)	810 5	
<b>Total-RAJ</b>	<b>42</b>	<b>48</b>	<b>49</b>	<b>98</b>	<b>825</b>	<b>57(100%)</b>	<b>6022 476</b>	
<b>Khulna Division</b>								
KCC only	1	1	1		121	21(100%)	1368 9	
Khulna (non KCC)	2	4	2	6	664	15(100%)	807 47	
Bagerhat	3	4	2	6	289	15(100%)	688 17	
Chuadanga	3	4	4	1	20		28	
Jessore	2	2	3	8	35		57	
Jhenaidah	3	2	2	3	19	2(100%)	99 31	
Kushtia	1		1	4	63	2(100%)	142 8	
Magura	1	2	1	2	15		15	
Meherpur	1	2		3	34	2(100%)	235 4	
Narail	11	7	10	1	18	2(100%)	137 14	
Satkhira	3	2	2		19	2(100%)	123 33	
<b>Total-KHU</b>	<b>31</b>	<b>30</b>	<b>28</b>	<b>34</b>	<b>1297</b>	<b>61(100%)</b>	<b>3599 263</b>	
<b>Barisal Division</b>								
BCC	2			22	17			
Barisal (non BCC)	4	5	2	30	61	1(100%)	48 10	
Barguna		1		9	70		5	
Bhola	4	5	5	3	68	1(100%)	108 22	
Jhalakhati	2	1	1	17	15	1(100%)	68 13	
Patuakhali	3	3	2	37	57	4(100%)	642 3	
Pirojpur	3	1	1	15	30	5(100%)	665 26	
<b>Total BAR</b>	<b>15</b>	<b>18</b>	<b>11</b>	<b>133</b>	<b>318</b>	<b>12(100%)</b>	<b>1531 79</b>	
<b>National</b>	<b>232</b>	<b>249</b>	<b>213</b>	<b>1457</b>	<b>6144</b>	<b>269(100%)</b>	<b>26016 1512</b>	

Data as of Epidemiologic Week 45, November 5, 2005

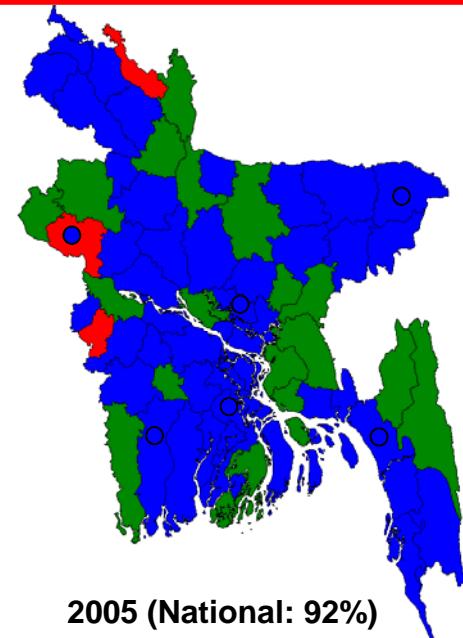
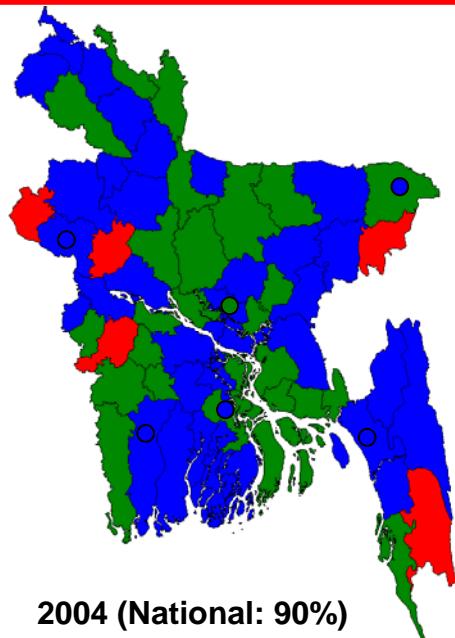
## Annualized Non-Polio AFP Rate, by District, Bangladesh 2004-2005\*



\*Data as of Epidemiologic Week 45, November 5, 2005



## Percentage of AFP Cases with Two Stool Samples Collected within 14 days of Paralysis Onset, by District, Bangladesh 2004-2005\*



\*Data as of Epidemiologic Week 45, November 5, 2005