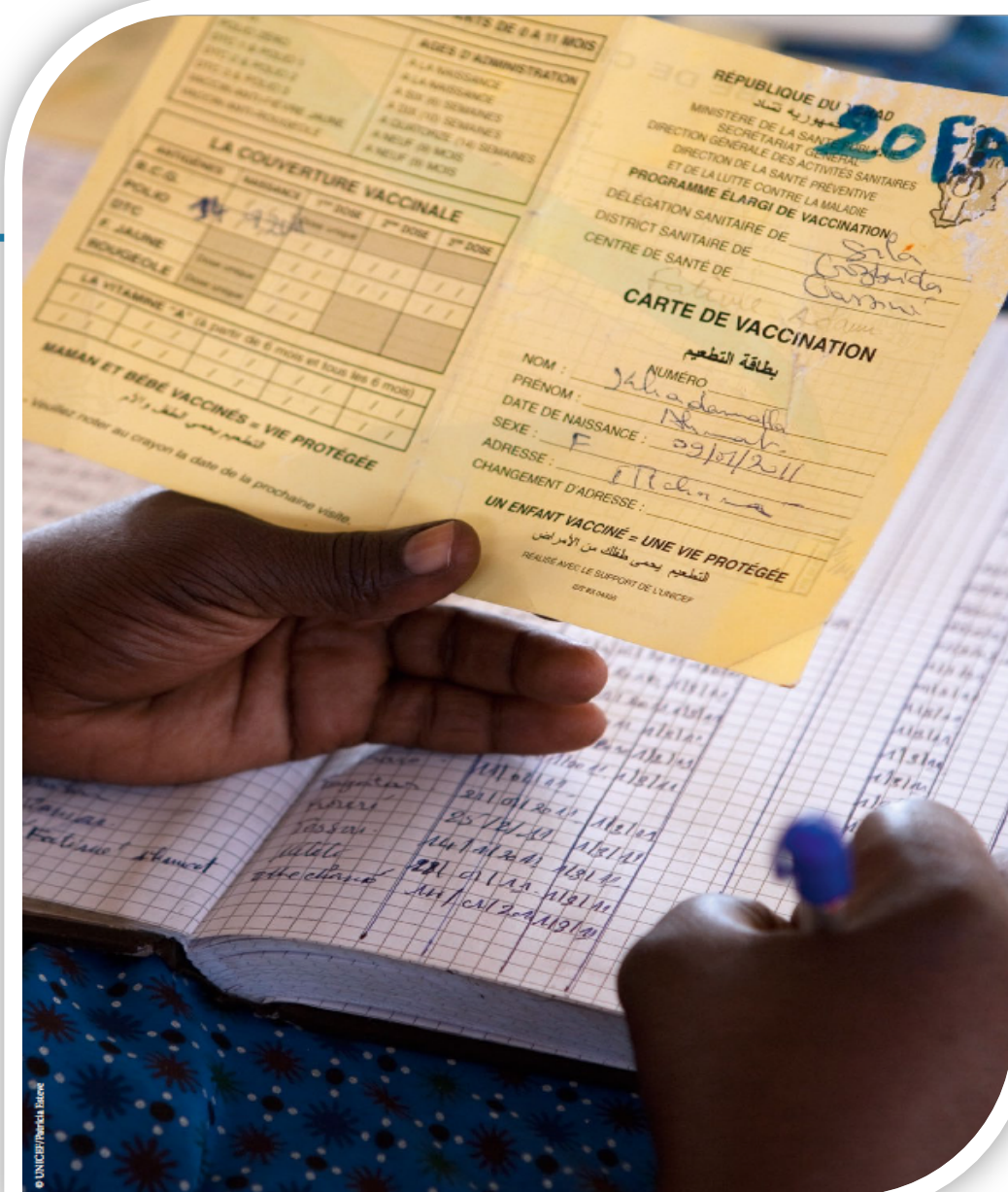


4. What are the next steps to scale up the MOV strategy? (I. Ogbuanu)



From “Proof-of-concept” to Scale-up

Developed and field-tested the tools

Assessments completed in
Dominican Republic, Panama, Peru,
Colombia, Chad and Malawi

Establishment of a partner coordination framework to scale up the impact

Interventions planned for
countries that completed the
assessments

**Post-intervention
evaluation**

Assessments planned in Burkina
Faso, DRC, TLS, Kenya, Indonesia,
Mauritania, BVI, Costa Rica, Ecuador

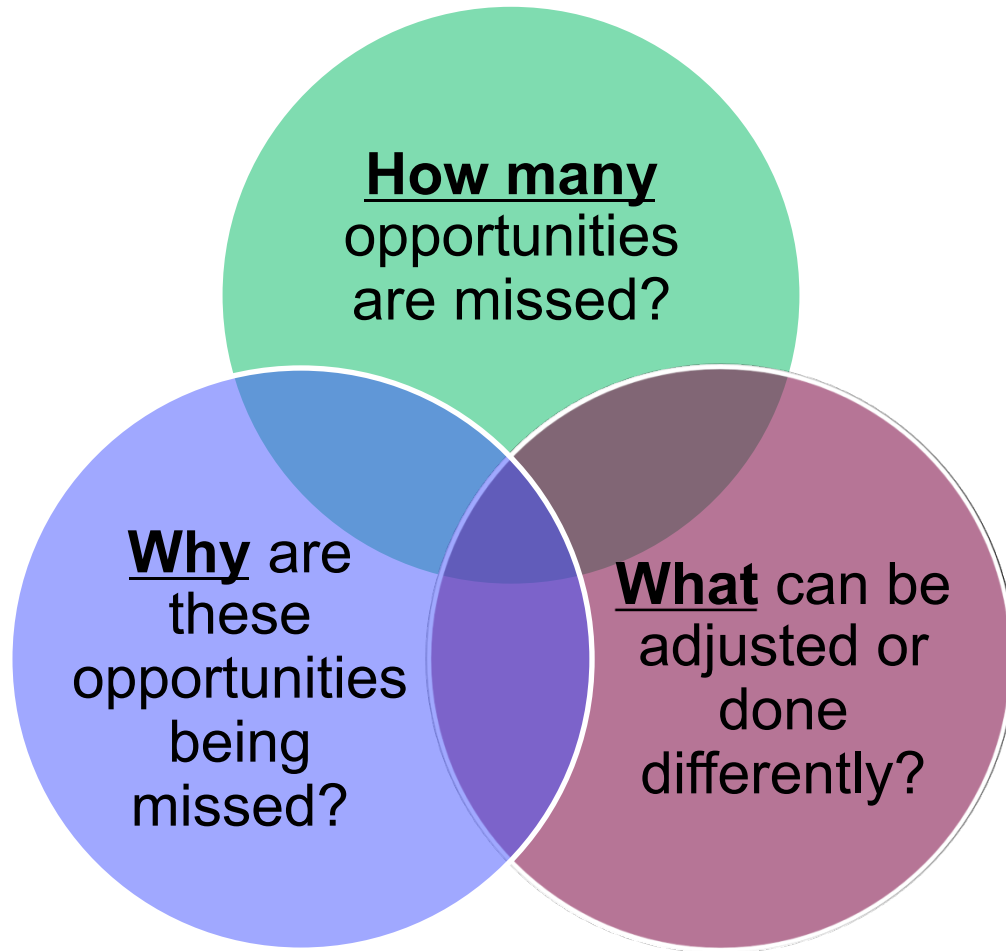
Interventions

Expressed interest:
Madagascar, Mozambique,
Myanmar, Nigeria, South Sudan

2015

2016/2017

The new MOV strategy answers three key questions



What are the components of the new strategy to reduce missed opportunities?

1

A **planning guide** to assess and address missed opportunities for vaccination

2

Revised **assessment protocol** to conduct assessments of missed opportunities for vaccination

3

An **intervention handbook** to support health facility-level actions to reduce missed opportunities

A framework to facilitate coordination among partners and countries to scale up and maximize impact

Component 1: Planning Guide

1

A planning guide to
assess and address
missed opportunities
for vaccination

- For policy makers, programme managers and partners
- Guidance to decide what steps
 - Full MOV strategy (assessment , followed by interventions)
 - Direct deployment of interventions
- Draft in the SAGE Yellow Book
- An over-view of the entire MOV strategy
 - A 10-step process

The 10-step process of the MOV strategy

Plan and prepare for the MOV strategy

- 1.** Plan for the assessment
- 2.** Prepare for field work and secure funding

Conduct the field work

- 3.** Collect field data (including qualitative data)
- 4.** Analyse data
- 5.** Debrief to partners
- 6.** Brainstorm on potential interventions (draft a work-plan)

Implement and monitor interventions

- 7.** Implement agreed-on interventions
- 8.** Provide on-going supportive supervision
- 9.** Rapid outcome assessments
- 10.** Incorporate into long-term health (immunization) system improvement plans

Component 2: Assessment protocol

- For the field team
- Includes:
 - Detailed guidance for the field work
 - Training materials
 - Sample questionnaires
 - Other field tools
- Data for action
 - Links directly to the intervention work plan



Component 3: Intervention Handbook

- Separate chapters, for **different levels**
 - National, district, sub-district or health facility
- Can be used in **two different ways**:
 1. Next step following an MOV assessment
 2. Stand-alone handbook to deploy interventions without an MOV assessment
- Proposed interventions
 - Macro-level (e.g. policy changes)
 - Micro-level (e.g. training, job aids)

3

An **intervention handbook** to support health facility-level actions to reduce missed opportunities

Successful MOV interventions:

Actions at the health facility level



- Actions and proposals generated by local staff
 - All categories of staff
- Clear supervisory and monitoring plan
 - Most MOVs are due to failures to execute procedures already in place
- Re-evaluation after three months
 - Impact on coverage and timeliness

Interventions:

Small actions can make a big difference!

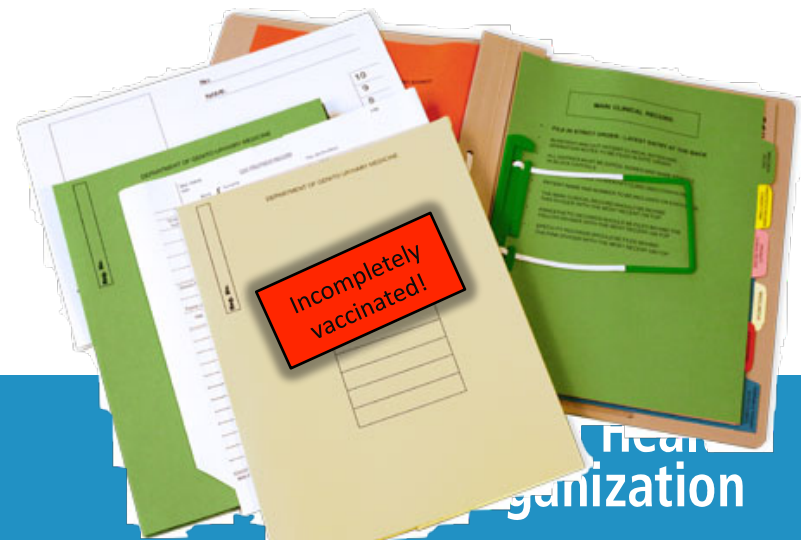
- Relocate the vaccination room
- Screen and triage all visitors at intake
- Paint floor directions to the vaccination area
- Stickers or other visual aids


PARENTS!
**Take your children for Immunisation
5 times before their first birthday**

CONTACT	AGE OF CHILD	DISEASE PREVENTED	HOW AND WHERE VACCINATION IS GIVEN
1 st	AT BIRTH	Polio Tuberculosis	Drops in the mouth Injection on the right upper arm
2 nd	AT 6 WEEKS (ONE & HALF MONTHS)	Polio Diphtheria, Whooping Cough, Tetanus, Hepatitis B, Haemophilus influenza type b, Measles, Pneumonia	Drops in the mouth Injection on the left thigh Injection on right thigh
3 rd	AT 10 WEEKS (TWO & HALF MONTHS)	Polio Diphtheria, Whooping Cough, Tetanus, Hepatitis B, Haemophilus influenza type b, Measles, Pneumonia	Drops in the mouth Injection on the left thigh Injection on right thigh
4 th	AT 14 WEEKS (THREE & HALF MONTHS)	Polio Diphtheria, Whooping cough, Tetanus, Hepatitis B, Haemophilus influenza type b, Measles, Pneumonia	Drops in the mouth Injection on the left thigh Injection on the right thigh
5 th	AT 9 MONTHS	Measles	Injection on the Left arm

VITAMIN A SUPPLEMENTATION

IMMUNISE NOW	6 MONTHS + EVERY 6 MONTHS	Prevent blindness and strengthen resistance against other diseases	Drops in the mouth
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Recap of the new MOV strategy

1. **Less intensive**, consultant-based outputs
2. Focus on 0-23 month old children
3. Inclusion of **private providers** (~30%)
4. Alternate implementation pathways
5. Promotes **direct link** between the issues discovered and the actions needed



Component 4: Partner coordination

- Joint selection of priority countries
- Joint or collaborative implementation
- Leveraging funding and resources
- Regular communication
- Impact amplification

A framework to facilitate coordination among partners and countries to scale up and maximize impact

Current MOV partners



BILL & MELINDA
GATES *foundation*



In collaboration with ministries of health in 18 countries in the Americas, sub-Saharan Africa and South-East Asia

In summary

- The MOV strategy has been well-accepted
- Seen as “innovative”
- Data useful for advocacy and for funding applications
- Cost is not large considering the potential impact
 - \$25,000 – \$50,000 for national assessments
 - \$40,000 catalytic funding for interventions



Challenges



Time

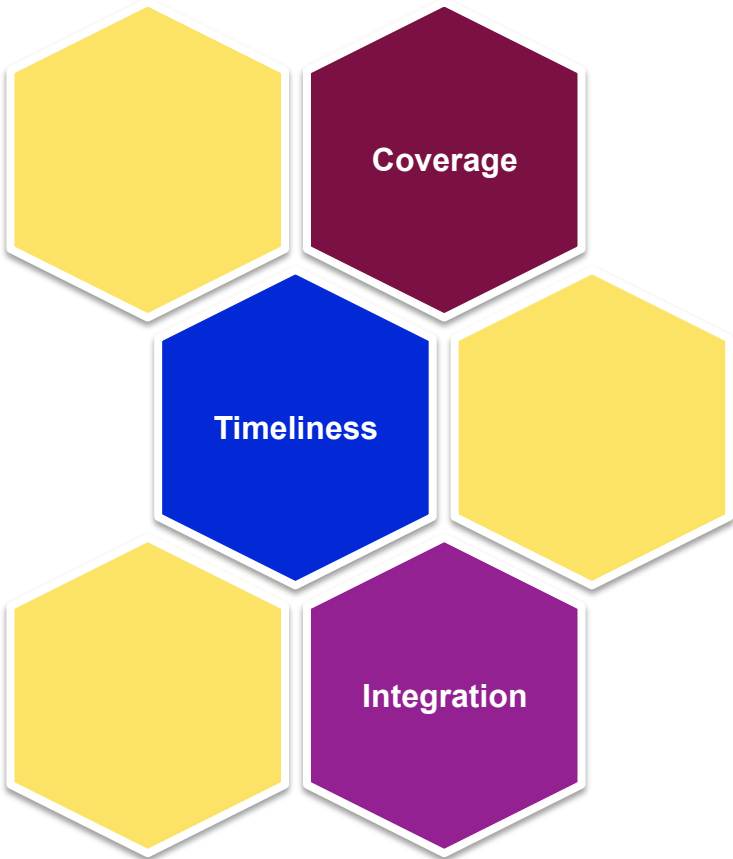


Resources



Sustainability

The benefits



- Increasing vaccination **coverage**
- Improving **timeliness of vaccination**
- Promoting **integration between programmes**
 - Curative services
 - Other preventive services
 - e.g. well-baby, nutritional services, ANC

What is requested from SAGE?

A decision:

To endorse the current strategy for reducing missed opportunities

Also asked:

To advise on the proposed partner coordination mechanism for scaling up the MOV strategy





Thank you!



World Health
Organization