

Polio Eradication Initiative, Bihar

**KOSI OPERATIONAL PLAN, BIHAR**

Standard Operating Procedures

Updated on February 2009

## **Introduction**

The first Kosi Operational Group meeting was held on March 2008 to develop strategies for overcoming the challenges in the access-compromised area of the Kosi river basin. The meeting developed the first SOP for operations in the area. Since then Bihar has been able to implement the plan successfully in Kosi areas for several supplementary immunization rounds (SIAs). The outcome has been very encouraging and with an increased frequency of intensified SIAs, Bihar has significantly reduced transmission of WPV type 1 in the high season of 2008 and may even be close to stopping it. The main polio reservoir is silent with the last case reported in June 2008. The polio team has learnt many lessons while overcoming the numerous challenges in the Kosi area during the last one year. Hence, the Bihar team felt the need to revise the SOPs and make them more suitable for the present time and users friendly.

## **Process of revision**

A Kosi Operational Group Meeting held on 18 February 2009 at Patna. There was an interactive participation by national, regional, sub regional and district level delegates (Kosi riverine area) from WHO & UNICEF. The meeting was attended by a total of 38 participants (Annexure-2). Data, issues and case presentations were reviewed and agreed points are taken for incorporation in the SOPs.

## **Restructuring the grids<sup>1</sup>**

There are 29 grids functioning at present in Bihar. Total 15 grids have been identified for restructuring. Their geography was demarcated in the group work in the meeting. The other details such as micro-planning will be done at district level. The identified grids for restructuring are G-01, 03, 04 to10, 12 to16, 18, 19, 23 & 27. Of these G-16 would be closed. List of grids is annexed (Annexure-1).

The new grids will be operational from April 2009 round. Participants will field validate and finalize information such as villages to be included or excluded and share the information and micro-plans with concerned districts and finally with the RTL-NPSP Bihar. This activity will be completed by end of third week of March (21-March 2009) upon which RTL Bihar will circulate the final list of grids to all participants and partners.

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<sup>1</sup> Grid is a cluster of villages within access-compromised area that are easily accessible from a grid station without regard to administrative boundaries.

## **Planning**

- Each grid is attached to one mother NPSP unit as agreed by the team for planning and implementation support.
- Usually a SMO assigned for blocks will take care of the grids of his blocks. One designated SMO will be given charge of few or all the grids of the district as decided by SRTL
- SMO who is the NPSP unit in-charge will be responsible for tracking of SIA activities in all blocks of the district including the grid activities.
- Compiled micro-plans, contact details of concerned supervisors/ MOICs/ CDPO/LS/BDOs must be available with SMO in-charge for the grid(s).
- Appropriate mobility support will be ensured by the NPSP office.
- SMC/ASMC of concerned districts will provide a list of social mobilizers (ICDS/PRI/others) to be incorporated in micro-plans.

## **Micro planning:**

### *Area identification;*

- After field verification and mapping, the areas to be identified for a grid. The areas in a grid should fit with the grid definition.
- CMC/BMC will support in identification of Melas and other religious congregations

### *Manpower identification;*

- Local community specific female vaccinator need to be identified. BMC/CMC of UNICEF will assist in identification of local female vaccinators in those areas where no ICDS & ASHA is available. In addition, CDPO, BDO can help to identify local female vaccinators.
- SMO/FV shall take the lead for inclusion of appropriate manpower in the micro-plan with the MOIC concerned.

### *Workload;*

- Vaccinator team: Flexible according to the geography between 40-80 houses. No team to be allotted more than 100 houses for a day's work.
- Supervisor: Flexible and maximum 3 house to house teams with adjacent transit team.

**Vaccine & Logistic delivery: In grids where in there is a delay in delivery of vaccine and logistics:**

- Alternate and innovative ways of vaccine & logistic distribution to the sub-depot need to be explored.
- Dropping points, where required should be identified and implemented.
- Any new initiative of vaccine delivery should be followed from the PHC to the sub-depot and team level to ensure the timely vaccine delivery
- Alternate manpower may be assigned for helping vaccine transportation from PHC to ACA areas.
- A route chart with time is to be introduced in vaccine deliver/transportation
- Vaccine and logistic should be planned to send first to the most distant areas.
- CMC/BMC will mobilize local resource such as local vehicle, boats, head loaders, other means of transportation required for vaccine-logistic delivery.

**Training:**

- Decentralized venues within the grid or adjacent to the grids need to be identified (Panchyat Bhavan, School).
- SMO should be the first choice as a trainer.
- Trainer from concern PHC/District should provide training.  
CMC/BMC/FV/SMC/SMO should be present and assist in training organization
- Participation by vaccinators should be closely tracked during each round and over multiple rounds.

**Monitoring:**

- Monitoring Plan: NPSP's SRTL will guide for the development of monitoring plan in the grids. All grid teams and at least 50% of team days in grids must be planned for monitoring.
- All deployed monitors will continue to be briefed a day or two before the round.
- Staying inside or close to the grid areas: All monitors from NPSP-WHO and UNICEF will stay inside or close to the grid areas, at grid points or stay points<sup>2</sup>.
- Selection of monitors: Experienced and best monitors should be selected for monitoring grid areas on two wheelers. Since many monitors have left or are unwilling to continue monitoring in grid areas after one or two rounds NPSU should consider hardship allowance for monitors. RTL Bihar shall inform SIA

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<sup>2</sup> Grid point/stay point is a place from where a better access and vaccine delivery is possible to the vaccination areas.

Team Leader of the number of monitors (EMs & FVs) working in the grid areas. SIA Team Leader will take up the issue of hardship allowance with NPSU management.

- Local guide for monitors other than grid FV or EM: Since monitors such as SMOs, SRTLs and others do not have two wheeler support for monitoring inside the grids they frequently seek the assistance of the grid FV or EM. Thus the grid FV/EM are unable to follow their monitoring plan. Therefore, NPSU may allow hiring of a local guide with two wheeler for such monitors. This will ensure that FVs/EMs and other monitors follow their own plan.
- Logistic support for monitors: In case additional logistics such as sleeping bags or lanterns etc are, required SRTLs will forward the request to RTL Bihar & SIA team leader for appropriate actions.
- Monitoring methodology: Each monitor will strictly adhere to the NPSP's guidelines for monitoring.

### **Monitoring feedback and sharing protocol:**

- All monitors to follow the proposed flow chart given below.
- Even when no issues are found and quality of activity is good the findings will be shared as in "Nil reporting" under AFP surveillance.
- Grid SMO will be the final decision maker with inputs from grid FV.
- SMC/ASMC will share feedback to SMO in the evening so that a joint feedback is prepared for the district.

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At each level in the above flow chart, the responsible person from mother district will daily call his counterpart in other districts to give feedback of the grid.

### **Monitoring format sending to SRTL, RTL & NPSU:**

1. Monitoring format of the grids is to be sent in original to NPSU with the **block/district** monitoring format
2. Monitoring format of grids not to be sent to NPSU "grid wise"
3. A copy of the grid monitoring formats **Grid wise** is to be sent to RTL & concerned SRTL office.
4. The data entry software package will be provided by NPSU Delhi

### **Coverage data flow:**

Following three steps of procedures are recommended for smooth flow of the coverage data of the grids.

Step 1: Resident FV of the block will collect & compile team-wise & grid-wise data of his/her block during evening briefing and transmit daily/next day to the AA of his district.

Step 2: AA will collect and compile block & grid-wise data of his district on a daily basis and send the data directly to DA of RTL office daily/ after completion of activity with a copy of the same to SRTL office.

Step 3: DA of RTL office will compile and analyze the data accordingly and share with all concerned.

### **Plans during flood:**

NPSP and UNICEF will jointly conduct the assessment of flood situation, accessibility, availability of boat and alternate transportation for vaccine delivery and for the team.

A Detailed micro-plan for flood season is crucial in flood situation.

### **IEC and Social Mobilization:**

- CMC/BMC/ASMC/SMC will conduct and coordinate mobilization and communication activities prior to every round, such as Mothers meeting, PRI involvement, mobilization by ICDS, Interface meeting, IEC display, Rally organization, Inauguration etc to make the community aware about the Polio Round.
- **CMC/BMC will provide support in;**
  - Social mobilization and community participation for better vaccine acceptance through mothers meeting, PRI involvement, mobilization by ICDS, Interface meeting, Inauguration etc
  - Improved IEC display, organize rallies for development of general awareness
  - Timely information dissemination for training and motivate vaccinators for attending the training session.

**AFP Surveillance during Flood:**

All polio workers including partners are to be sensitized for AFP case reporting in flood-affected areas.

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