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		Ministry of Health			

Provincial Directors of Health Services,

Regional Directors of Health Services,

Heads/ Directors of Health Institutions,

Directors of National Hospital/Teaching Hospitals/Provincial & District General Hospitals, Base Hospitals,

All Medical Superintends of other Hospitals,

All Regional Epidemiologists/ Medical Officers (Maternal and Child Health),

All Medical Officers of Health,

MMR Supplementary Immunization Activity (SIA) on 6th January 2024

Following decline in global and regional measles vaccination coverages due to the COVID pandemic in 2020-2022, measles cases have subsequently increased globally and regionally. Amid this global and regional threat – the country started reporting transmission of measles, with cases initially being reported predominantly among vaccine refusal communities and subsequently spreading to those who were partially vaccinated (between 9 months to 3 years) or not eligible for vaccination via routine immunization services (< 9 months of age). Sri Lanka reached measles elimination status in 2019 and has maintained the measles free status till May 2023. In this background, the country needs to take measures to mitigate the ongoing outbreak and interrupt the transmission cycle. The Advisory Committee on Communicable Diseases and Certification Committee on Measles-Rubella /CRS elimination discussed this issue in depth and recommended to carry out a Supplementary Immunization Activity (SIA) targeting vulnerable children (6 – 9 months of age) in selected high-risk districts based on ongoing measles outbreak epidemiology and eligible children who have missed or refused the routine two doses of Measles Containing Vaccines (MCV) throughout the country.

1. MMR Supplementary Immunization Activity - date/s and place:

MMR SIA will be carried out on 6th January 2024, in selected nine high-risk districts in all immunization clinic centers. Eligible Children who have missed the opportunity of getting the MMR vaccination on the 6th of January 2024 (SIA day) will be given the opportunity to get the vaccination

in the MOH office central immunization clinics on 4 consecutive Saturdays following the SIA date (13th, 20th, 27th of January & 3rd February 2024)

The vaccination in the Central clinic on following consecutive 4 Saturdays is an opportunity for those who have missed vaccination on SIA day for any unavoidable reasons (e.g. sick on SIA day, parents' unavailability due to an essential reason, live vaccine received within last 4 weeks)

2. Target age group

All children in the age group of completed 6 months and up to 9 months of age, as of 6th January 2024 will be given a dose of Measles Containing Vaccine (MCV) irrespective of the past history of clinical measles. Eligible children are infants born between **7th April 2023 to 5th July 2023** including those two dates. For the details pertaining to calculation of District/MOH level target population, follow the guide on MMR SIA - January 2024 issued by the Epidemiology unit.

Supplementary Immunization of the MMR vaccination should be considered as an additional vaccination dose and routine MMR vaccination should be given to all children who have received SIA-MMR vaccination, on completion of 9 months and 3 years in accordance with the National Immunization schedule. However, ensure a minimum of 8 weeks-time interval between SIA MMR vaccination and due routine MMR vaccination.

3. Measles Containing Vaccine (MCV)

During the SIA, all the eligible children will be immunized against measles using the **Measles**-**Mumps-Rubella (MMR) vaccine.**

Dosage and administration

A single dose of 0.5 ml of MMR vaccine should be administered by deep subcutaneous route in to the outer part of child's upper arm preferably on the left side.

Storage

MMR vaccine should be stored at +2^o C to +8^o C temperature. Reconstituted vaccines should be kept in a foam pad to maintain the cold chain (+2^o C to +8^o C) and should be protected from direct sunlight. Reconstituted vaccine should be discarded after 6 hours of reconstitution or at the end of the clinic session, whichever comes first.

Contraindications

The following conditions are considered as contraindications for the use of MMR vaccine:

• Presence of any of the general contraindications for any vaccine;

- History of an allergy to neomycin, gelatin or other vaccine components;
- Those who are severely immunocompromised as a result of congenital disease, HIV infection, advanced leukaemia or lymphoma, serious malignant disease, or treatment with high-dose steroids, alkylating agents or antimetabolites, or infants who are receiving immunosuppressive therapeutic radiation.

4. Immunization Clinic functions during SIA days

- All immunization clinics in the area should be functioning from 9.00 am to 4.00 pm on 6th January 2024 in the selected high-risk districts, to provide additional MMR vaccine dose for the eligible children.
- Central clinics of the MOOH will provide an opportunity for the eligible children (6 to 9 months of age) who have missed the opportunity of getting the MMR vaccination on the 6th January 2024 (SIA day), to get the vaccination on 4 consecutive Saturdays following the SIA date (13th, 20th and 27th of January & February 3rd 2024).
- Ensure the services of at least 1-2 competent, trained vaccinators to function a single clinic centre.
- Ensure the availability of a Medical Officer to all Immunization clinics on the SIA day by mobilizing staff from other health institutions.
- Volunteer support can be obtained for assistance in directing, registration, recording or tallying.
- All eligible children coming for the SIA should be adequately screened to identify possible contra-indications or any other high-risk conditions by health care workers and refer to the Central clinic on the next Saturday if any high risk identified.
- Any eligible child if identified as not healthy and suffering from an acute infection, should not be vaccinated and should be referred to the Central clinic on Saturday of the following week for completion of SIA MMR vaccination.
- If a history of administration of a live vaccine (except Oral Polio Vaccine) within the preceding 4 weeks or currently suffering from any acute illness (Immunization Handbook guidelines, Epidemiology Unit, 2012), the vaccination should be postponed.
- MOH or a Medical Officer/RMO should be available for Central clinic functioning on 13th, 20th, 27th January & 3rd February to advise special or high-risk cases.
- All clinic attendees for SIA and vaccine recipients' details are needed to be entered correctly in the clinic Registration sheet (Epid/M/S/Record 2).
- Once the child is selected as eligible for vaccination, he/she needs to be marked in the Clinic tally sheet provided (Epid/M/S/Record 3).
- Special documentation of MMR SIA vaccination has to be entered in the child's Child Health Development Record (CHDR), in a row for "Other Vaccines", and indicate as 'MMR SIA'. Same procedure should be applied if any child is found with a private sector vaccination card.
- Vaccine safety in Immunization clinics should be maintained and managed according to the circular "Initial Management of Anaphylaxis at Field level" (circular number 01-20/2001, dated 23/08/2011) and National guidelines given in the Immunization Handbook (3rd Edition), Epidemiology Unit, Ministry of Health.

- After administration of the MMR vaccine, all children should be observed for a minimum of 20 minutes in the clinic for Adverse Events Following Immunization (AEFI).
- Administration of MMR vaccine during the SIA will be done using AD syringes. Adequate amount of AD syringes and safety boxes for the SIA will be provided by the Medical Supplies Division (MSD) in coordination with the Epidemiology Unit. RDHS, RE, MOMCH and MOH will be responsible to ensure the availability and use of injection safety items at all immunization clinics in their respective areas.
- Any reported AEFI identified at the clinic needs to be entered in the 'Clinic Registration Sheet' (Epid/M/S/Record 2), compiled into the 'Clinic Return' (Epid/M/S/ Form 2) and also entered in the 'Clinic AEFI Register' at the end of the clinic.
- All AEFI reported during or after the SIA, needs to follow the routine AEFI reporting and investigation procedure (Refer the Guidelines on reporting and investigation of AEFI by Chief Epidemiologist in the Epid/75/2012 dated 01/04/2013).
- At the end of the clinic, compile all the data and complete 'MMR SIA, January 2024 Immunization Clinic Return' (Epid/M/S/Form 2) in two copies.
- Duly completed one copy of 'MMR SIA Immunization Clinic Return' (Epid/M/S/Form 2) has to be returned to MOH on the same day once remaining vaccines will be returned with the 'Clinic Vaccine Stock Return' (Epid/M/S/Form 3).
- The second copy of 'MMR SIA, Immunization Clinic Return' (Epid/M/S/Form 2) has to be filed with 'MMR SIA Clinic Registration Form' (Epid/M/S/Record 2) and with 'Clinic tally sheet' (Epid/M/S/Record 3) with the PHM responsible for the clinic.
- Disposal of sharps in safety boxes and waste bins should be done according to the standard accepted practices applied in the routine Immunization clinics.

5. Role of RDHS in MMR SIA

- Coordinate, monitor and evaluate all the activities related to the MMR SIA within the district.
- Ensure smooth functioning of all the MMR SIA related activities in the district according to the instructions issued by the Epidemiology unit.
- Ensure the availability of a medical officer to all Immunization clinics on SIA day by mobilizing staff from other health institutions within the district.
- Ensure the availability of adequate number of trained vaccinators to all Immunization clinics on SIA day by mobilizing staff from other health institutions within the district.
- Ensure availability of adequate transport facilities on SIA day for efficient and timely distribution of vaccines and other logistics to the clinic centers.

6. Role of Regional Epidemiologist /MO-MCH in MMR SIA

- Conducting district training programmes for MOH and active participation, co-ordination, supervision of training programmes at MOH level.
- Estimation of required stocks of MMR vaccines and other logistics for the district.
- Close monitoring of requisition of MMR vaccine & other logistics, vaccine storage and maintenance of cold chain at Regional Drug Stores and at MOH level.

- Close supervision of vaccine, AD syringes and other logistic supply & timely distribution in the district.
- Overall supervision of mechanisms developed in the region for disposal of AD syringes and sharp waste.
- Close monitoring and supervision of all SIA related activities and immunization coverage during the MMR SIA.
- Compile and report district level MMR SIA performance to the Epidemiology unit (Epid/M/S/Form 5).

7. Role of MOH in MMR SIA

- Identify a line list of all Immunization Clinic Centers in the area with the responsible PHM, designated supervisory officer and assistant staff.
- Identification and estimation of eligible population and estimated details of MMR vaccine stocks & other logistic needs for the MOH area.
- Training of MOH staff on MMR SIA.
- Motivate all PHMM/ PHII and other supervisory staff to get 100% coverage in the target age group.
- Motivate to get assistance from non-health staff in the area and mobilize all to get down all target group children to the clinics in achieving coverage.
- All possible efforts towards local advocacy to make the campaign a success.
- If volunteer support is expected, make them properly trained on documentation and registration procedure.
- Plan and make available adequate vaccines, proper storage, maintenance of cold chain, adequate vaccine carriers and formed ice packs, documentation formats and all other logistics to make the MMR SIA a successful programme.
- Ensure timely availability of adequate stocks of MMR Vaccine and other logistics in the clinics.
- Make an MMR vaccine transportation plan with an appropriate network to make sure timely receipt of the vaccine to the clinics. Same transportation plan can be used for post clinic vaccine and return collection.
- At the end of the clinic, completed clinic return (Epid/M/S/ Form 2) of all clinics should be received by the MOH.
- Need to conduct Central clinic for 4 consecutive Saturdays (13th, 20st and 27th of January & February 3rd 2024) and need to provide MMR vaccination for all missed children for the SIA.
- At the end of all 5 clinics days, compile all data in 3 copies of MOH return (Form 4) and send one copy to Epidemiology Unit, one copy to Regional Epidemiologist and file the other as an office copy before 15th February 2024.
- Immunization data entry for children who have missed their routine MCV

During the proposed SIA campaign, children who have missed their routine MCV (9 months to 15 years), and have taken MMR vaccination during the catch-up campaign, should be marked in the MMR section of the CHDR. In this category, data needs to be entered into the routine immunization clinic registers and relevant PHMM needs to enter the data into their BI registers.

 Private sector institutions, which routinely receive vaccines from MOH and provide immunization services may be requested to conduct measles SIA immunization post on the SIA day for providing services for their regular eligible clients free of charge. For the consented private sector institutions, required vaccines, AD syringes, safety boxes, records and returns could be provided free of charge. End of the SIA day records and balance vaccines should be collected by the MOH.

8. Role of heads of Health care Institutions

- Ensure provision of efficient health care services for the children who develop AEFI during the MMR SIA campaign.
- Timely notification of all reported AEFI to the relevant authorities.
- Assist district level health authorities to carry out SIA by providing additional health manpower, cold chain facilities and transport facilities whenever possible.

If you need further clarification or additional information, please contact the Epidemiology Unit. Please be kind enough to bring the contents of this circular to the notice of all concerned in your province/district/ institution/unit.

Thank You

Dr Asela Gunawardene Director General of Health Services

Cc: Secretary, Health DDG (PHS) I & II DDG (MS) I & II Chief Epidemiologist Director MCH Director HPB Dr. ASELA GUNAWARDENA Director General of Health Services Ministry of Health "Suwasiripaya" 385, Rev. Baddegama Wimalawansa Thero Mawatha, 'Colombo 10.