

# EPI and VPD Review

## 2025



## Guidelines for Data Collection



Epidemiology Unit



## Purpose

The Expanded Programme on Immunization (EPI) is one of the most successful and impactful public health initiatives implemented by the Ministry of Health, Sri Lanka. Its sustained effectiveness is driven by the dedicated efforts of grassroots-level Primary Health Care workers, along with divisional, regional, provincial, and national-level health managers and technical staff.

Regular monitoring has played a pivotal role in strengthening and optimizing the programme since its inception. One of the key monitoring mechanisms is the annual EPI and Vaccine-Preventable Disease (VPD) Review, which systematically evaluates immunization coverage at the Public Health Midwife (PHM) area level. This review assesses the proportion of registered children vaccinated in accordance with the National Immunization Schedule.

In addition to coverage assessment, the review examines selected quality and performance indicators of the EPI programme, thereby promoting continuous improvement in immunization service delivery, surveillance, and programme management.

These reviews are conducted annually across all districts. Under the leadership of the Regional Director of Health Services, the process is coordinated by Regional Epidemiologists, Medical Officers of Epidemiology, and Medical Officers of Maternal and Child Health. Medical Officers of Health (MOHs), supported by their respective teams, are responsible for collecting, compiling, analyzing, and presenting EPI data during the district review meetings.

The EPI and VPD reviews generate critical evidence that informs decision-making at MOH, district, and national levels. The findings are utilized to refine strategies, address identified gaps, strengthen programme implementation, and ultimately enhance immunization coverage, equity, and overall programme effectiveness.

## Aims of the EPI and VPD Review 2025

1. To assess the completeness of age-appropriate immunization of children who are eligible to have BCG, PVV1/OPV1/FIPV1, PVV2/OPV2/FIPV2, PVV3/OPV3, MMR1, LJEV, DPT4/OPV4, MMR2, DT/OPV5 in the year **2025** according to the national immunization schedule based on the recordings of the Immunization records and returns.
2. To assess the coverage of aTd, HPV1 & HPV2 among school children who are eligible to have aTd and HPV in the year **2025** according to the national immunization schedule based on the immunization records & returns.
3. To assess the coverage of tetanus and rubella immunizations among mothers who have given a birth during the year **2025** according to the national immunization schedule based on the recordings of the pregnant mothers' registers and mothers' pregnancy cards.
4. To compare the number of immunizations carried out using each antigen (except, aTd, HPV1 and HPV2) against the estimated births for the relevant birth cohort.
5. To determine the level of vaccine wastage by different antigen.
6. To assess the status of adverse events following immunization surveillance.
7. To assess the quality of cold chain maintenance
8. To determine the notifications, routine & special investigation rates of Vaccine Preventable Diseases
9. To evaluate the adequacy of selected resource and logistical inputs required for the EPI programme

## Preliminary preparation for the EPI and VPD review

The Medical Officer of Health (MOH) holds primary responsibility for the collection, compilation, analysis, and presentation of EPI data, with the support of other members of the health team.

The following documents must be properly maintained and used for data collection. The MOH is responsible for ensuring data accuracy by conducting appropriate cross-checks among the relevant source documents.

<b>Registers</b>	Eligible family registers
	Pregnant mothers' registers
	Birth and immunization registers
	Clinic immunization registers
	School Immunization Registers
	MOH office AEFI register
	MOH office Stock ledger
	MOH office vaccine movement register
	Clinic vaccine movement registers
	MOH office notification register
	MOH office Infectious Disease register
<b>Records</b>	Pregnancy records of the mothers who have delivered during the year -2025
	CHDR B portions
	School health survey reports – 2025
	AEFI Investigation forms- 2025
	Infant death investigation reports- 2025
<b>Returns/ Monthly summaries</b>	Quarterly MCH clinic returns- 2025
	Monthly statement of school health activities - 2025
	Summary of School Medical Inspection - 2025
	Monthly vaccine stock returns
<b>Web based systems</b>	EPINET data for the year 2025

## EPI and VPD Review cohorts (2025)

The overall aim of the review is to assess the immunization coverage of infants, children and their mothers who were eligible to obtain particular vaccine/s according to the national immunization schedule **during the year 2025**. Therefore, the relevant birth cohorts will differ according to the vaccine. The following figure presents the birth cohorts that should be reviewed to evaluate the different vaccines.

### Birth cohorts to be evaluated by respective vaccine

Vaccine	Eligible Birth Cohort
BCG	Children born between <b>01 January 2025 – 31 December 2025</b>
Tetanus Toxoid / Rubella	Mothers who delivered live births between <b>01 January 2025 – 31 December 2025</b>
PVV1 / OPV1 / fIPV1	Children born between <b>01 November 2024 – 31 October 2025</b>
PVV2 / OPV2 / fIPV2	Children born between <b>01 September 2024 – 31 August 2025</b>
PVV3 / OPV3	Children born between <b>01 July 2024 – 30 June 2025</b>
MMR 1	Children born between <b>01 April 2024 – 31 March 2025</b>
LJE	Children born between <b>01 January 2024 – 31 December 2024</b>
DPT4/OPV4	Children born between <b>01 July 2023 – 30 June 2024</b>
MMR 2	Children born between <b>01 January 2022 – 31 December 2022</b>
DT/OPV5	Children born between <b>01 January 2020 – 31 December 2020</b>
aTd	Children who were in <b>grade 7 during the year 2025</b>
HPV1	Female children who were in <b>grade 6 during the year 2025</b>
HPV2	Female children who were in <b>grade 6 during the year 2025</b>

## Sources of data to complete the EPI and VPD review format

Slide No	Variable	Data Source
2. Background Information	3- Estimated population for the year 2025	Department of Census and Statistics
	4-Actual population for the year 2025	Population surveys conducted by the PHHM
	6-Crude Birth Rate for District	EPI and VPD Review 2024- Annexure 4 District Birth Rate
	7-Crude Birth Rate for Province	EPI and VPD Review 2024 - Annexure 4 Provincial Birth Rate
	9-Number of Immunizations performed in the year	EPINET
	10-Number of pregnant mothers registered for the area in 2024	Eligible Family Register (H526)/ Pregnant Mother Register (H 513)/ Pregnancy record B card (H 512-B)
	11-Number of live births reported for the area	Eligible Family Register (H 526)/ Pregnant Mother Register (H 513)/ Pregnancy record B card (H 512-B)
	12- Number of infants registered for the area	Birth and Immunization Register (EPI/3/79)
3.	<b>A, B, C, D, and E</b>	Pregnant Mother Register (H 513)/ Pregnancy record B card (H 512-B)
	Number of pregnant mothers who registered in 2025 and delivered <b>a live birth</b> within the same year (F)	Pregnant Mother Register (H 513)/ Pregnancy record B card (H 512-B)
	Number of pregnant mothers who have registered in another MOH area and delivered <b>a live birth</b> in 2025, but had come <b>permanently</b> to the MOH area before the delivery (G)	Pregnant Mother Register (H 513) – Temporary component/ Pregnancy record B card (H 512-B)
	Number of pregnant mothers who have registered in another MOH area and delivered <b>a live birth</b> in 2025, but had come <b>permanently</b> to the MOH area immediately following the delivery (G)	Pregnant Mother Register (H 513) Post-partum mother component
6. Coverage of BCG vaccination	BCG	Birth and Immunization Registers, EPINET
	TT and Rubella	Pregnant mother register (H 513)
7 to 14		Birth and Immunization Registers, EPINET
18- aTd	Number on roll in grade 7 – at the time of survey	School Health Survey (H 1015 A)
	Number on roll in grade 7- at the time of Immunization	Summary of School Medical Inspection - 2025 School Immunization Register
	aTd doses given of year 2024	School Immunization Register
19- HPV	Number of female children in grade 6 – at the time of the survey	School Health Survey (H 1015 A)
	Number of female children in grade 6- at the time of Immunization	Summary of School Medical Inspection - 2025 School Immunization Register

	HPV doses given	School Immunization Register
24- AEFI		EPINET AEFI form 3
27- VPD	A and C	e-Surveillance
	E	Notification register remarks/ ID register remarks/ Special Investigation forms

## Important points to consider when preparing the slides

Slide Number	Slide topic	Important points to note/ Changes done
Slide 6-11	Coverage of vaccines BCG-LJE	The value for column B (Number of estimated births for 2023) should be obtained from Slide 2 - The most probable number of births for the MOH area (Number 13)
Slide 16	PHM areas with high immunization coverages and high left the area percentages	The highest left the area % should be calculated for only last 3 vaccines – DPT, MMR2, DT
		Denominator: Total number of infants registered (within 3 months of birth + after 3 months of birth + came newly into the area) (V + W + X)
Slide 17	Follow up on recommendations of previous EPI review	The progress for the issues identified in the previous EPI review should be mentioned quantitatively for the Q1/ Q1 & Q2 of 2026 (Ex: Age appropriateness has increased by 5%)
Slide 18	Coverage of aTd vaccination among school children in grade 7 & other grades in 2024	For the number on roll in Grade 7 in 2024, <b>both the number obtained during the School Health Survey at the beginning of the year and the number of roll at the time of the vaccination</b> should be entered.
		<b>All School immunization registers should be available during the review.</b>
Slide 19	Coverage of HPV vaccination among female children who were in grade 6 in year 2024	For the number of female children on roll in Grade 6 in 2024, <b>both the number obtained during the School Health Survey at the beginning of the year and the number of roll at the time of the vaccination</b> should be entered.
Slide 20, 21 & 22	Coverage of HPV vaccination among female children who were in grade 6 in year 2023 and 2022	These slides contain details about HPV vaccination <b>for girls who were in Grade 6 in year 2024, 2023 and 2022.</b>
Slide 28	Reasons for not-vaccinating	This slide should be available next to the coverage slide of each vaccine.
Slide 29	Reasons for delays in vaccination	This slide should be available next to the coverage slide of each vaccine, along with the “reasons for not-vaccinating” slide.

## Documents that should be available at the EPI and VPD Review

01	Birth and Immunization Registers of the PHHM with highest left area % for DPT, MMR2, DT
02	All School Immunization Registers
03	Monthly statement of school health activities - 2025
04	MOH AEFI register
05	MOH vaccine movement register
06	ILR Temperature monitoring charts for 2025
07	Fidge tag printouts for 2025
08	MOH vaccine hesitancy register
09	Follow up register for children with delayed LJE
10	Reports of population surveys conducted in 2025

## District and Provincial Birth Rates for year 2025

(Source- Department of Census and Statistics)

Province/ District	2024*
	Crude Birth Rate (per 1,000 population)
<b>Sri Lanka</b>	<b>10.1</b>
<b>Western</b>	<b>8.5</b>
Colombo	9.5
Gampaha	7.9
Kalutara	7.7
<b>Central</b>	<b>10.4</b>
Kandy	10.4
Matale	9.5
Nuwara Eliya	10.9
<b>Southern</b>	<b>10.0</b>
Galle	10.1
Matara	8.2
Hambantota	12.0
<b>Northern</b>	<b>13.7</b>
Jaffna	12.4
Kilinochchi	17.2
Mannar	17.8
Vavuniya	14.9
Mullaitivu	9.7
<b>Eastern</b>	<b>14.9</b>
Batticaloa	14.9
Ampara	14.7
Trincomalee	15.1
<b>North-West</b>	<b>10.0</b>
Kurunegala	9.4
Puttalam	11.1
<b>North-Central</b>	<b>9.0</b>
Anuradhapura	8.4
Polonnaruwa	10.2
<b>Uva</b>	<b>10.5</b>
Badulla	11.0
Monaragala	9.5
<b>Sabaragamuwa</b>	<b>9.0</b>
Ratnapura	8.8
Kegalle	9.2

*\*Latest available data are for 2024*