



World Health Organization

# Immunization, Vaccines and Biologicals

**The Common Assessment Tool  
for Immunization Services**

Booklet 5

## **Service Delivery Sub-Team Assessment Instructions**

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**Copies may be requested from:**

World Health Organization  
Department of Immunization, Vaccines and Biologicals  
CH-1211 Geneva 27, Switzerland

*Fax:* +41 22 791 4227      *Email:* [vaccines@who.int](mailto:vaccines@who.int)

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## About this booklet

This booklet describes the activities the Service Delivery Sub-Team needs to carry out.

It includes:

- information about the best way to make inquiries
- details of tasks for the Service Delivery Sub-Team
- Data Collection Guides
- Data Analysis Guides
- an Assessment Summary
- a Discussion Guide.

## Forms in this booklet

The following photocopiable forms can be found in this booklet on the pages shown.

Form title	Form reference	Page
Health facility fact sheet	Form 5.1	15
Overview of the health system – Responsibility for stewardship functions	Form 5.2	17
Overview of the health system – Responsibility for human resource development functions	Form 5.3	18
Overview of the health system – Responsibility for finance functions	Form 5.4	19
Overview of the health system – Operational responsibilities	Form 5.5	21
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Overview of immunization services – Immunization service delivery	Form 5.7	24
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Overview of immunization services – Disease surveillance	Form 5.9	26



MS Word versions of the forms are also on the CD enclosed in the folder. The MS Word versions can be modified and adapted for the country being visited.

Form title	Form reference	Page
Overview of immunization services – Logistics	Form 5.10	27
Overview of immunization services – Vaccine supply and quality	Form 5.11	28
Overview of immunization services – Advocacy and communications	Form 5.12	30
Summary of SWOT analysis – Immunization services	Form 5.13	32
Summary of SWOT analysis – Health system	Form 5.14	33
Summary of critical issues – Immunization services	Form 5.15	34
Summary of critical issues – Health system	Form 5.16	35
Summary of discussed issues – Immunization services	Form 5.17	53
Summary of discussed issues – Health system	Form 5.18	54

## Worksheets on the CD



Various MS Excel worksheets are on the CD enclosed in the folder. They can be modified and adapted for the country being visited.

<b>Worksheet title</b>	<b>Worksheet reference</b>
Overview of the Health System Status of critical indicators for health system management functions – Stewardship	Worksheet 5.1
Overview of the Health System Status of critical indicators for health system management functions – Human resource development	Worksheet 5.2
Overview of the Health System Status of critical indicators for health system management functions – Finance	Worksheet 5.3

## Overview of the assessment process

There are seven steps in the assessment process.

They are illustrated on the chart on the next page.

This booklet deals with the fourth step.

Step 4

**Collecting data**

	<i>Step 1</i> <b>Initiating the assessment</b>	<i>Step 2</i> <b>Preparing for the assessment</b>	<i>Step 3</i> <b>Planning data collection</b>	<i>Step 4</i> <b>Collecting data</b>	<i>Step 5</i> <b>Analysing findings and developing recommendations</b>	<i>Step 6</i> <b>Debriefing</b>	<i>Step 7</i> <b>Planning for implementation and monitoring</b>
<b>Who</b>	Ministry of Health	Planning Team	All Assessment Team members	National, Sub-National and Service Delivery Sub-Teams	All Assessment Team members with technical help from key stakeholders	All Assessment Team members	All Assessment Team members with technical staff from key stakeholders
<b>Time</b>	4 to 6 calendar months before the Assessment begins	1 to 2 person months	2 to 3 calendar days	5 calendar days	3 calendar days	1 to 2 calendar days	1 to 2 calendar day to develop 1st draft
<b>Tasks</b>	<p><b>Task 1.1</b> Decide that an assessment is needed</p> <p><b>Task 1.2</b> Appoint an Assessment Secretariat</p> <p><b>Task 1.3</b> Prepare Terms of Reference</p> <p><b>Task 1.4</b> Identify members of the Assessment Team</p> <p><b>Task 1.5</b> Identify members of the Planning Team</p> <p><b>Task 1.6</b> Prepare an Assessment schedule</p> <p><b>Task 1.7</b> Plan support for the assessment</p> <p><b>Task 1.8</b> Identify funding sources and mechanisms for all assessment activities</p>	<p><b>Task 2.1</b> Collect, compile, and review available information on immunization operations, the health system, and the external environment</p> <p><b>Task 2.2</b> Identify critical issues for immunization and the health system by conducting a SWOT analysis</p> <p><b>Task 2.3</b> Compile key materials for Assessment Team members</p> <p><b>Task 2.4</b> Prepare to brief the entire Assessment Team</p> <p><b>Task 2.5</b> If appropriate, select sub-national areas for visits</p>	<p><b>Task 3.1</b> Explain assessment objectives</p> <p><b>Task 3.2</b> Brief the team on critical issues for country immunization operations and health system</p> <p><b>Task 3.3</b> Provide an overview of the assessment methodology</p> <p><b>Task 3.4</b> Reach a consensus on critical issues to pursue</p> <p><b>Task 3.5</b> Adapt data collection materials</p> <p><b>Task 3.6</b> Reach a consensus on sub-national areas for assessment</p> <p><b>Task 3.7</b> Review the data collection process</p> <p><b>Task 3.8</b> Prepare Sub-Teams for data collection</p> <p><b>Task 3.9</b> Review special issues</p>	<p><b>Task 4.1</b> Visit the national, sub-national and service delivery level facilities</p> <p><b>Task 4.2</b> Collect data from the national, service delivery and sub-national level facilities</p> <p><b>Task 4.3</b> Debrief staff from the national, service delivery and sub-national level facilities</p>	<p><b>Task 5.1</b> Analyse information by sub-national area</p> <p><b>Task 5.2</b> Analyse information by area</p> <p><b>Task 5.3</b> Prepare main conclusions of the assessment</p> <p><b>Task 5.4</b> Develop main recommendations of the assessment</p> <p><b>Task 5.5</b> Compile information and prepare the first draft of the Assessment Report</p> <p><b>Task 5.6</b> Prepare for debriefing</p>	<p><b>Task 6.1</b> Debriefing</p> <p><b>Task 6.2</b> Complete the final draft of the Assessment Report</p>	<p><b>Task 7.1</b> Incorporate recommendations into a draft multi-year national plan</p> <p><b>Task 7.2</b> Prepare a draft budget and financing plan</p> <p><b>Task 7.3</b> Plan how implementation will be monitored</p>
<b>Outcomes</b>	<p>Comprehensive Terms of Reference outlining the reasons for the assessment</p> <p>Team Members identified</p>	<p>Critical issues for immunization and the health system identified.</p> <p>Gaps in information uncovered.</p>	<p>Objectives and methodology understood.</p> <p>Information from Planning Team reviewed.</p>	<p>Data collected from all levels.</p> <p>Staff at each level debriefed on findings and preliminary conclusions.</p>	<p>Findings reviewed.</p> <p>Recommendations agreed.</p> <p>Priorities for actions set.</p> <p>Debriefing report prepared.</p>	<p>Debriefing report delivered.</p>	<p>Implementation of the recommendations planned.</p>



## Service Delivery Sub-Team tasks

During Step 4, the Service Delivery Sub-Team visits the selected health facilities and areas to collect data.

### Step 4

#### Tasks for Step 4 – Collecting data

**Task 4.2** Collect data from the national, sun-national, and service delivery level facilities

**Task 4.3** Debrief staff from the national, sun-national, and service delivery level facilities

*Make sure all members of the team are familiar with SWOT methodology and the Discussion Guides for the national level.*

## Task 4.2 Collect data from the national, sub-national, and service delivery level facilities

- 1 When you arrive at each health facility, meet with the director of the facility and any other facility staff who can contribute to the assessment.
- 2 Explain the objectives of the assessment to staff members.
  - Staff members who can contribute to the assessment include health workers and staff members in charge of the cold chain and logistics.
  - You should also try to talk to clients, community leaders, and eligible people who don't use health services at each level.
- 3 Talk to staff members about the facility's immunization services and other services.
- 4 Observe health workers when they prepare for and give immunizations. If possible, go to outreach sessions with health workers.
- 5 Talk to clients to find out more about their opinions and concerns about the services offered by the facilities.
- 6 Talk to people in communities who do not use, or who do not have access to, the services, to find out what they perceive the barriers to be.
- 7 Meet with relevant community leaders to find out their opinion on immunization services in the area.
- 8 Use the Discussion Guide in this booklet for ideas on how to initiate discussions, and how to find the 'issues behind the facts'.
- 9 Use the Data Collection Guides in this booklet to record your findings. You don't need to fill out every line in the Data Collection Guide – only the information that will help you to clarify critical issues.

### *Finding the 'issues behind the facts'*

- The Discussion Guide gives you ideas to help you find the 'issues behind the facts'. However, you should not use the Discussion Guide as a questionnaire and you do not need to ask all the questions in the discussion points column.
  - Instead, focus on the critical issues you agreed with the rest of the Assessment Team during Step 1.
  - You will have more success in gathering the information if you try to establish an open dialogue with health staff and their stakeholders.
- 10 Use the SWOT technique described in Annex 2, page 57 to identify the strengths and weaknesses of immunization services and the health system, as well as any external opportunities and threats that may have an impact on services. Summarize your conclusions on the forms provided.
  - 11 Summarize what you think the critical issues for immunization services and the health system might be. This should include:
    - any conclusions you have made based on the SWOT analysis
    - possible implications these conclusions have on immunization services and the health system
    - a brief summary of draft recommendations including suggestions on the administrative level or levels.

### *After a visit, or at the end of the day, meet other sub-team members to:*

- compare interpretations of what they have found and observed
- discuss problems with implementing the methodology
- modify planned visits, if appropriate.

### **Task 4.3 Debrief staff from the national, sub-national, and service delivery level facilities**

When you have finished collecting data, meet with health facility staff to discuss your findings and possible solutions for the problems identified. Consider including community leaders or key community representatives in the debriefing.

***Remember to congratulate health facility staff on any positive findings, and to explore options for solving problems which respect existing lines of authority and responsibility.***

Before the meeting, write your findings on the strengths and weaknesses on flip chart paper or newsprint and stick it on the wall. Make sure that you allow local staff members and partners to take part fully in the meeting. It should take between 45 minutes and an hour.

### **Suggested debriefing meeting agenda**

#### **Review and discussion of findings**

Describe the strengths and weaknesses you have observed in immunization services and health system functions. Ask staff if they agree with the findings, and invite them to make suggestions or add information that will help you understand the situation.

#### **Consensus on recommendations**

Ask staff what recommendations they suggest for solving problems identified.

Discuss suggested responsibilities for implementing recommendations. For example, health facility staff can agree to check all their vaccines and remove the ones whose expiry date has passed, but they probably cannot solve a vaccine supply problem without involving other levels.

### **Conclusions**

Review what health facility staff have suggested they will do themselves, and what you have agreed to bring to the attention of staff at the next levels.

Before you leave the health facility, give a completed Assessment Summary sheet to the staff. This will serve as a reminder of the discussions and will also be a benchmark for any future assessments.

***Repeat the tasks until you have visited all the health facilities or areas selected for the assessment.***

***Use separate Data Collection Guides and Assessment Summaries for each one.***

***Share findings with those who are most concerned with them, and with those who can help to solve them.***



## Data Collection Guides

### An overview of the Data Collection Guides for the Service Delivery Sub-Team

This chapter contains the Data Collection Guides that the Service Delivery Sub-Team will need for their assessment.

The forms should be photocopied for each country being assessed.

Alternatively, MS Word versions of the forms are on the CD enclosed in the folder. They can be modified and adapted for the country being visited.



There are various MS Excel worksheets on the CD enclosed in the folder.

They can be used as they are or can be modified and adapted for the country being visited.

Look for Worksheets 5.1, 5.2 and 5.3.

## Health facility fact sheet

### **Purpose**

- Provides a summary of basic data and the status of key immunization services indicators.

### **Activities**

- Fill in brief details of the most recent information on immunization services.

### **Outcome**

- A brief summary of basic information about the status of immunization services.

# Health facility fact sheet

Country .....

Date .....

► *Photocopy this form for each assessment.*

Identification	Basic facts	<i>continued</i>	<i>continued</i>	Underserved population
Name of health facility ..... ..... .....	Total population .....	Number of immunizing staff .....	Find out what policies, guidelines, and other materials issued by national, sub-national offices are available in the facility.	Find out the location and size of underserved/unreached populations and then locate them on a map.
Location ..... ..... .....	Birth cohort/crude birth rate .....	Services provided <i>please tick</i> Scheduled immunization sessions <input type="checkbox"/>	Materials available <i>please tick</i>	Include a summary of major reasons for low performance in those areas. For example, difficulty of access or inefficient use of existing services.
Type <i>please tick</i>	Children under 1 year old .....	On demand immunization sessions <input type="checkbox"/>	List of reportable diseases <input type="checkbox"/>	.....
Public <input type="checkbox"/>	Infant mortality rate/1000 .....	Number of days of outreach services/per week .....	Case definitions <input type="checkbox"/>	.....
NGO <input type="checkbox"/>	Women of childbearing age .....	Outreach services provided ..... ..... .....	Procedures for reporting cases and suspected outbreaks <input type="checkbox"/>	.....
Private Practitioner <input type="checkbox"/>	<b>Health facility description</b>	Budget and sources of funding ..... ..... .....	Case investigation procedures <input type="checkbox"/>	.....
Reasons for including in assessment ..... ..... ..... ..... ..... ..... ..... ..... ..... .....	Number of staff .....		Handling vaccines <input type="checkbox"/>	.....
	Job titles of staff ..... ..... ..... ..... ..... ..... ..... ..... ..... .....		Giving injections safely <input type="checkbox"/>	.....
			Use of opened multi-dose vials <input type="checkbox"/>	.....
			Storing vaccines in the event of a power outage <input type="checkbox"/>	.....

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.** ► **Look for Form 5.1**

## Overview of the health system

### Purpose

- Examines the status of various elements and key functions of the health system.

### Activities

- Give an update on health system functions, operational responsibilities, public and private sector roles in healthcare, and the financial status.
- Give an update on the status of critical indicators for the health system.

### Outcome

- Key information about the status of various elements of the health system.
- Key information about the status of indicators for all management functions of the health system.

### More information about collecting data on the health system

Use this Data Collection Guide as a guide for describing how the external environment has changed in the last five years.

Ask staff at the service delivery level what they think the roles and responsibilities are for each management function at each level. If they are not sure, write a question mark in the appropriate place on the table.



**Service Delivery level**

# Overview of the health system Responsibility for stewardship functions

Country .....

Date .....

► Briefly describe the roles, responsibilities and functions at each level. Place a question mark where you are not sure.

► Photocopy this form for each facility you are assessing.

Management functions	National level	Sub-national: regional, state or provincial level	Sub-national: district level if appropriate	Service delivery: health facility level
Policy-making and standard-setting	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
Planning	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
Information management	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
Coordination among public and private health providers	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
Cooperation with development partners	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
Monitoring and evaluation	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing. ► Look for Form 5.2**

# Overview of the health system

## Responsibility for human resource development functions

Country .....

Date .....

► Briefly describe the roles, responsibilities and functions at each level. Place a question mark where you are not sure.

► Photocopy this form for each facility you are assessing.

Management functions	National level	Sub-national: regional, state or provincial level	Sub-national: district level if appropriate	Service delivery: health facility level
Employing and assigning staff	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....
Training	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....
Supervision	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... .....

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing. ► Look for Form 5.3**

# Overview of the health system Responsibility for finance functions

► Briefly describe the roles, responsibilities and functions at each level. Place a question mark where you are not sure.

► Photocopy this form for each facility you are assessing.

Management functions	National level	Sub-national: regional, state or provincial level	Sub-national: district level <i>if appropriate</i>	Service delivery: health facility level
Budgeting	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....
Identifying budget sources	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....
Tracking expenditures	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing. ► Look for Form 5.4**

## Operational responsibilities

Ask staff at the service delivery level what they think the roles and responsibilities are for each management function at each level. If they are not sure, write a question mark in the appropriate place on the table.

- 1 Indicate whether or not each of the functions listed in the table below is:
  - operated separately by different health programmes, for example, immunization, malaria, HIV, tuberculosis, or curative services
  - partially integrated with other health programmes
  - fully integrated with other health programmes.
- 2 Fill in the implications of the current mode of operation on immunization services and on all basic services.
- 3 Ask staff to discuss what parts of the current arrangement are effective and what parts are not. Summarise your conclusions on a separate page.

# Overview of the health system Operational responsibilities

Country .....

Date .....

► Photocopy this form for each facility you are assessing.

	Information management	Procurement of supplies and equipment	Distribution of supplies and equipment, including drugs and vaccines	Maintenance and repair of vehicles
Mode of operation	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>
Implications for immunization services	..... .....	..... .....	..... .....	..... .....
Implications for all basic health systems	..... .....	..... .....	..... .....	..... .....
	Maintenance and repair of equipment	Supervision	Training	
Mode of operation	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>	<input type="checkbox"/> <i>separate</i> <input type="checkbox"/> <i>all services integrated</i> <input type="checkbox"/> <i>some services integrated</i>	
Implications for immunization services	..... .....	..... .....	..... .....	
Implications for all basic health systems	..... .....	..... .....	..... .....	

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.5**



## Overview of immunization services

### Purpose

- Sets the scene and provides a brief summary describing the status of immunization services over the last five to ten years.
- Examines the status of the various components of immunization services.

### Activities

- Give an update on the available information about the status of the five components of immunization services.

### Outcome

- A summary describing how immunization services have developed over the last five to ten years.
- Key information about the status of indicators for all components of immunization services.

### More information about collecting data on immunization services

Use this Data Collection Guide to provide a summary describing the status of immunization services over the last five to ten years, and to examine the status of various elements and key functions of the health system.

Your summary should include information about the status of critical indicators for each component of the immunization services and you should attach any relevant reports.

### Reports you will need to attach

- the structure of immunization services  
*an organization chart may be useful for this*
- immunization goals
- national coverage targets for each vaccine  
*if regional targets are different, include these too*
- disease reduction targets
- reporting requirements for vaccine-preventable diseases
- sources of vaccines by antigen
- the immunization schedule
- the impact of recent changes in the public or private health sector on:
  - immunization policy
  - financing
  - organization
  - staff allocation
  - the public/private service mix
- the status of critical indicators  
*use the Data Collection Guides on the following pages as a guide for this*

# Overview of immunization services

## Immunization service delivery

Country .....

Date .....

► *Photocopy this form for each facility you are assessing.*

Indicator	Year	Year	Year	Remarks on reliability/quality of data
Coverage level for each vaccine during last 3 years (%)				
• BCG				
• DTP3				
• OPV3				
• Measles				
• YF				
• HepB3				
• Hib3				
• TT2+ among WCBA				
• Other:				
Health facility drop-out rate (%)				
• DTP1 to DTP3				
• DTP1 to measles				
Completeness of routine coverage reporting to sub-national levels				
Timeliness of routine coverage reporting to sub-national levels				
Proportion of catchment areas by coverage level for each vaccine (e.g. <50%, 50-79%, >80%)				
Effective outreach schedule				

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.7**



# Overview of immunization services

## Safety

Country .....

Date .....

► *Photocopy this form for each facility you are assessing.*

Indicator	Status	Remarks on reliability/quality of data
Use of one sterile needle and syringe for each immunization		
Collection of sharps in puncture-proof container		
Appropriate disposal of injection equipment		
Knowledge of what should be reported as an AEFI		

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.8**

# Overview of immunization services

## Disease surveillance

Country .....

Date .....

► *Photocopy this form for each facility you are assessing.*

Indicator	Year	Year	Year	Remarks on reliability/quality of data
Vaccine-preventable diseases incidence				
Non-polio AFP rate				
% of AFP cases with 2 adequate stool samples				
% of measles outbreaks investigated				
% of measles cases with information on age and vaccination status				
Timeliness of routine reporting				
Completeness of routine reporting				

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.9**

# Overview of immunization services

## Logistics

Country .....

Date .....

► *Photocopy this form for each facility you are assessing.*

Indicator	Status	Remarks on reliability/quality of data
Good quality supplies, equipment, consumables are available where and in the amount needed		
Cold-chain equipment operating and in good repair		
Staff monitors status and stock of supplies, equipment, and consumables when visiting service delivery areas		
Staff has an emergency plan for logistics for health facility		

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.10**

# Overview of immunization services

## Vaccine supply and quality

Country .....

Date .....

► Photocopy this form for each facility you are assessing.

Indicator	Status	Remarks on reliability/quality of data
Supply:  • Vaccine forecasting		
• Vaccine utilization and wastage monitoring		
Quality:  • Vaccine stored and handled properly		
• Quality and expiry date of vaccine checked before use		

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.11**

## Component: Advocacy and communications

Decision-makers who determine budgets for vaccines and immunization services need to be aware that vaccines are a crucial, cost-effective investment so that they commit budget to them and ensure there is an uninterrupted supply of vaccines.

To assess how aware decision-makers are of this, you will need to ask:

- if high level decision-makers are convinced of the value of vaccines  
*do they promote immunization? Is there a strategy in place to mobilize and sustain decision-makers' commitment to immunization services?*
- if all relevant sectors are engaged in making sure that all children are immunized  
*this includes other ministries as well as the MOH, for example, Information, Education, Finance, Development, Planning*
- if there are a number of players involved in advocacy and social mobilization for immunizations  
*does the approach to immunization mobilize all the relevant sectors of society?*
- if there is a social mobilization, advocacy, or overall communications strategy plan  
*does it have both budget and human resources?*
- if there are adequate and appropriate IEC materials.

# Overview of immunization services

## Advocacy and communications

Country .....

Date .....

► *Photocopy this form for each facility you are assessing.*

Indicator	Status	Remarks on reliability/quality of data
Knowledge of public – including parents – about immunizations		
Health staff communicate effectively with clients		
Community involvement in planning and monitoring of health services		
Active attempts to reach the unreached, defaulters and non-users		

**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.**

**► Look for Form 5.12**

## Data Analysis Guides

An overview of the Analysis Guides for the Service Delivery Sub-Team

### Summary of SWOT analysis

#### *Purpose*

- Identifies the strengths and weaknesses of immunization services and the health system, and the external opportunities and threats that have an impact on it.

#### *Activities*

- Conduct a SWOT analysis.

#### *Outcome*

- Basic information about the status of immunization services.

### Summary of critical issues

#### *Purpose*

- Examines the status of various elements and key functions of the health system.
- Provides a brief summary describing the critical issues for immunization services and the health system.

#### *Activities*

- Review the results of the SWOT analysis and assess the implications for the health system and immunization services.
- Write a summary report.
- Prepare a briefing for the service delivery level.

#### *Outcome*

A preliminary summary of critical issues, including:

- any conclusions you have been able to make based on the SWOT analysis
- possible implications of these conclusions on immunization services and the health system
- a brief description of any suggested recommendations
- suggestions on the administrative level or levels where recommendations and activities need to be implemented.

# Summary of SWOT analysis

## Immunization services

- Immunization service delivery
- Disease surveillance
- Logistics

- Vaccine supply and quality
- Advocacy and communications

Country .....

Date .....

► Photocopy this form for each immunization services component. Tick whichever applies.

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### Strengths

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### Weaknesses

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### Opportunities

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### Threats

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There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.

► Look for Form 5.13



# Summary of SWOT analysis

## Health system

- Stewardship
- Service provision
- Human resource development
- Finance

Country .....

Date .....

► Photocopy this form for each health system function. Tick whichever applies.

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### Strengths

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### Weaknesses

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### Opportunities

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### Threats

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There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing.

► Look for Form 5.14

# Summary of critical issues

## Immunization services

Health facility area .....

Location .....

▶ *Photocopy this form for each health facility visited.*

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**Achievements**

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**Strengths**

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**Weaknesses**

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**Suggestions  
about what  
the unit can do**

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**Suggestions  
for staff at the  
next level**

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**There is an MS Word version of this form on the CD. You can edit or amend it for the country you are assessing. ▶ Look for Form 5.15**

# Summary of critical issues

Health system

Health facility area .....

Location .....

► *Photocopy this form for each health facility visited.*

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**Achievements**

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**Strengths**

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**Weaknesses**

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**Suggestions  
about what  
the unit can do**

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**Suggestions  
for staff at the  
next level**

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## Discussion Guide for Service Delivery Sub-Teams

### What is the Discussion Guide for?

The knowledge and expertise of sub-team members may vary and not everyone will have experience in the five immunization services components and the health system functions, so to help you find the 'issues behind the facts' more effectively we have developed this Discussion Guide.

We asked various people with knowledge and experience of immunization services components and health system functions to share the methods they use when they are conducting an assessment. We have summarised their suggestions in the Discussion Guide.

*The Discussion Guides are for guidance only – you can adapt them to suit the local situation.*

### What does the Discussion Guide contain?

#### Indicators (metrics)

Provide the critical pieces of information to:

- assess the current status of each immunization services component and health system management function
- facilitate comparability between sub-national levels within the country and between different countries.

Often these indicators will already be included in existing reports, for example, the WHO/UNICEF Joint Reporting Form, or in specific assessment tools such as the Financing Assessment Tool, or the Immunization Safety Assessment Tool.

#### Methods and sources

Suggested ways of accessing information on the status of indicators and suggestions on sources of information for each indicator.

#### Discussion points

Lists of basic questions and methods that you can use to:

- obtain information related to the status of each indicator
- obtain additional information on:
  - possible constraints
  - the reliability of the data provided
  - staff knowledge.

## Health system links

Lists of suggested basic questions and methods you can use to verify whether the conditions that facilitate progress, or the constraints that prevent it, are linked to situations common to other outcome-orientated programmes, or to strengths and weaknesses of one or more of the health system management functions.

## How to use the Discussion Guide

Before you begin data collection:

- with the full Assessment Team, identify critical issues that you will need to assess during the data collection process, and adapt the Data Collection Guides accordingly
- read all the indicators and make sure that you:
  - understand what each of the indicators measures
  - are familiar with the sources and methods used to obtain information
  - can confidently use the different discussion points to guide your observations and interviews
- review indicators, compare techniques, and calibrate interpretations with other team members. You should also support other members of the team in areas where you have expertise and they do not.

During the visits to different sites:

- use the Discussion Guides to remind you of the critical indicators used to assess the status of immunization services and the health system
- conduct the inquiry in a way that allows people an opportunity to talk about the key issues and their possible solutions
- talk to people at each level about different issues so that they can be traced through the different levels to find their origins, if necessary.

There are discussion summary forms at the end of this chapter.

### *Find the 'issues behind the facts'*

- Don't use the Discussion Guide as a questionnaire, or attempt to ask all the questions listed as discussion points.
- Instead, try to focus on the critical issues the full Assessment Team agreed on.
- You'll have more success obtaining information if you try to establish an open dialogue with health staff and stakeholders and observe them during their normal work routine.

## 1 – Immunization coverage indicator

### *Methods and sources*

Compare the number of doses given to the target population.

### *Discussion points*

Ask health workers if the trend in coverage is rising, falling, or stable, and explain the reasons for the trend.

If health workers have failed to meet national targets, ask them why.

Discuss causes of low coverage, for example:

- geographical accessibility
- social, religious, and ethnic barriers
- financial and administrative barriers
- access to information
- missed opportunities
- poor service quality.

Ask health workers to describe any areas that are not currently reached, or are underusing. What strategies have they used to reach these populations? What have been the results?

### *Health system links*

Ask if access and use problems are common among other health services in the area.

Meet with members of groups who are not currently reached, or with people who know them, to find out how they view the health system.

## 2 – Drop-out rate indicator

### *Methods and sources*

Review coverage reports for the number of DTP1 doses compared to the number of DTP3 doses and measles.

### *Discussion points*

Discuss the causes of high drop-out rates.

Ask health workers why they think parents do not return for immunization or other services.

### *Health system links*

Ask if drop-out problems also occur with other health services.

Meet with parents who have stopped using a service at the health facility and try to find out why.

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## 3 – Completeness and timeliness of reporting indicator

### *Methods and sources*

Review records of the number of reports submitted compared to the number of reports due each month.

### *Discussion points*

Ask health workers if they submit coverage reports every month on time. If they don't, what reasons do they give for this?

### *Health system links*

Find out what other service coverage reports they have to submit. Do they submit them on time? What kinds of forms do they use?

#### 4 – Health workers perform vaccination tasks correctly

##### *Methods and sources*

Observe health workers during immunization sessions.

Try to observe them at fixed and outreach sessions, if possible.

##### *Discussion points*

Observe whether or not they do each of the following correctly:

- select the appropriate vaccine for the age and vaccination status of the patient
- sterilize equipment
- reconstitute vaccines
- store vaccines during the session
- give injections.

If you are not able to observe all these activities, ask health workers how they perform them.

Discuss the causes of any problems you observe with health workers.

##### *Health system links*

Observe health workers when they give other injections to see if they use the proper techniques.

#### 5 – Health workers handle vaccination equipment safely and dispose of used equipment properly

##### *Methods and sources*

Observe health workers during immunization sessions. Try to observe them at fixed and outreach sessions, if possible.

##### *Discussion points*

Observe whether or not they:

- handle needles and syringes safely
- dispose of injection equipment properly.

Observe health workers after sessions to make sure that full safety boxes are completely destroyed.

Discuss the causes of any problems you observe with health workers.

##### *Health system links*

Check:

- the supply of all injection equipment and safety boxes and compare the supply to the number of injections given
- the status of sterilization equipment
- the ground around the facility for needles and syringes.



## **6 – Health workers recognize and report adverse events following immunization (AEFIs) indicator**

### ***Methods and sources***

Review AEFI reports and investigations.

Estimate the rate of AEFIs reported by comparing AEFIs with the number of doses administered.

### ***Discussion points***

Ask health workers how many AEFIs were reported in the last six months and what action they took.

### ***Health system links***

Find out if adverse events occur at the same rate for other injections.

## 1 – Disease incidence indicator

### *Methods and sources*

Review the number of cases of disease incidence reported in the routine disease surveillance reports.

Estimate disease incidence rates.

Review case definitions and reporting forms.

### *Discussion points*

Ask staff to explain any failure to meet national targets.

Ask them if the trend is rising, falling, or stable for each disease and ask them to explain the reasons for the trend.

Discuss the reasons for any changes, for example, population changes, or changes in vaccination services.

Discuss which groups are most commonly affected, for example, which age group, which location, and vaccination status.

Ask what actions health workers take if surveillance data indicate problems.

Ask health workers what they put in their surveillance reports if no cases occur.

### *Health system links*

Compare the incidence of vaccine-preventable diseases to the incidence of other infectious diseases.

## 2 – Quality of disease surveillance indicator

### *Methods and sources*

Review:

- case and outbreak case investigation reports
- line listings of cases and the patient register.

### *Discussion points*

Ask health workers:

- which vaccine-preventable diseases they report immediately
- which diseases they should do case investigations for
- whether outbreaks have been identified in the past year, whether they were investigated, and what actions were taken.

Ask if diseases are reported in the same way as vaccine-preventable diseases.

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## 3 – Completeness and timeliness of reporting indicator

### *Methods and sources*

Review records of the numbers of reports submitted against the number of reports due each month.

### *Discussion points*

Ask health workers if they submit surveillance reports every month on time. If they don't, what reasons do they give for this?

### *Health system links*

Find out what other disease incidence reports they receive. Could the reports be combined into one form? If so, how could this be done?

#### **4 – Health workers collect and dispatch specimens for analysis in the laboratory correctly**

##### *Methods and sources*

Review:

- records of dispatch
- case reports.

##### *Discussion points*

Ask health workers which diseases need laboratory testing for confirmation of diagnoses.

If possible, observe health workers collecting and dispatching specimens. If it is not possible to observe them, ask them to describe the steps they take to confirm AFP.

##### *Health system links*

Ask health workers how they manage different uses of the laboratory, for example, do they dispatch different types of specimen together?

## 1 – Vaccine wastage rate indicator

### *Methods and sources*

Review:

- vaccine stock control records
- immunization coverage records
- wastage rate for each vaccine.

### *Discussion points*

Ask health workers if they calculate vaccine wastage rate and if so, how they use the information.

If records are not available, estimate the wastage factor using the steps below:

- 1 Starting balance of usable vaccine in doses **add** newly received doses **subtract** doses used, or thrown away.
- 2 Work out the number of people of the correct age who were vaccinated.
- 3 Divide the number of doses used by the number of vaccinations given.

### *Health system links*

Ask health workers if they think there is a wastage problem with other supplies, drugs, or consumables. What efforts have been made to reduce wastage?

## 2 – Availability of supplies indicator

Supplies, equipment, and consumables are available when they are needed, and in the amount needed, including;

- injection equipment
- sterilization equipment
- spare parts for equipment
- safety boxes for disposal of used injection equipment
- fuel
- report forms
- specimen kits.

### *Methods and sources*

Review records of supplies, equipment, and consumables.

### *Discussion points*

Ask health workers what basis they use for ordering supplies, equipment, and consumables. Is it the amount used, the amount ordered last time, or standard formulae?

### *Health system links*

How does the availability of vaccination supplies compare with supplies needed for other services?

### 3 – Cold chain indicator

The facility's cold-chain equipment is operating and in good condition.

#### *Methods and sources*

Look at:

- temperature monitoring records
- the stock of spare parts.

Observe temperature levels in cold-chain equipment at the health facility.

#### *Discussion points*

Check vaccine storage:

- Is the refrigerator functioning?
- Is the temperature of the refrigerator between 0°C and 8°C?
- Are the vaccines arranged correctly?
- Are there enough frozen ice packs?
- Has the TT been frozen?

Check if there is a form for recording refrigerator temperatures. Is it current?

Find out when the refrigerator was last cleaned and when it last received service maintenance.

Check if there are spare parts in stock.

Check the number and condition of cold boxes and vaccine carriers in the facility. Is the number adequate for fixed and outreach sessions?

Discuss the causes of any problems you observe with health workers.

#### *Health system links*

Compare the condition of other equipment in the facility with cold-chain equipment.

### 4 – Health workers check the quality of vaccines before using them

#### *Methods and sources*

Review stock records.

Check the expiry date on vaccines that are currently available in the facility.

#### *Discussion points*

Observe health workers during immunization sessions, or ask them if they:

- read the label of the vial to check the vaccine name
- read the expiry date
- read the vaccine vial monitors (VVMs).

#### *Health system links*

Do health workers show equal care in using all drugs?

## 5 – Health workers know what they should do if there is a shortage of vaccines, supplies, or fuel

### *Methods and sources*

Review supply stock records.

### *Discussion points*

Ask health workers if the facility has had a shortage of supplies or consumables in the last six months? How long did the shortage last? Were immunization services interrupted?

Ask health workers what they do in case of a shortage. How do they:

- tell clients there won't be a session?
- get more supplies?
- find out why the shortage occurred?

### *Health system links*

Have other services been interrupted because of shortages? What caused them? What was done to solve the problem?

Advocacy and communications play a crucial role in any immunization programme – whether or not a child gets immunized depends on whether his or her parents or caretakers:

- are aware of the importance of immunization
- know where the child can be immunized
- have the resources and the ability to bring the child to the place where he or she will receive the necessary vaccinations.

The rapport and communication skills of health workers can affect a parent or caretaker's willingness to bring a child back for subsequent vaccines.

## 1 – Health workers educate the public, including parents about immunizing against disease

### *Methods and sources*

Review IEC materials, including posters.

Talk to members of the public.

### *Discussion points*

Ask health workers to describe what they have done to educate the public. Check that adequate information and education materials are available, and that there are opportunities for parents and communities to:

- learn about new immunization issues
- make sure that they anticipate adverse events and minimise their impact
- receive adequate information.

Check whether the messages parents and communities are given are positive.

Ask members of the public what they know about immunizing women and children.

### *Health system links*

Discuss health information needs with health workers and members of the public.

## 2 – Health workers communicate effectively with parents about immunizations

### *Methods and sources*

Talk to parents of children who use health facilities, and those who live in underserved areas.

Observe an immunization session.

### *Discussion points*

Ask health workers what they tell parents after immunizing their children, for example, about side effects and when to return for the next immunization.

Observe health workers during a session. What do they tell parents? Do parents seem to understand? Do health workers show interest and respect towards clients?

### *Health system links*

Talk to parents about barriers that prevent them from using health services.

### **3 – The facility’s managers know which local political leaders, teachers, religious leaders etc. support the facility’s work, and the sort of support they provide**

#### ***Methods and sources***

Talk to community leaders.

#### ***Discussion points***

Find out if communities are taking part in making sure children are immunized. Are they also helping to raise awareness?

Ask managers to identify major supporters, and to describe the sort of support they provide, for example, financial support, volunteering to help, and providing transport.

Meet with community leaders to discuss the nature of their involvement. What do they do? What would encourage them to do more?

#### ***Health system links***

Ask community leaders about their support of all the health services provided by the facility, and about possible barriers to support.



## 1 – Planning function

### *Indicator*

Existence of a health facility plan, and budget if appropriate, for the current year.

### *Methods and sources*

Review:

- the health facility plan
- the health facility budget
- the schedule of services.

### *Discussion points*

Ask managers how they wrote the plan:

- Did they consider the needs of the population, and the strengths and weaknesses of the facility?
- How did they set priorities for each need?
- What strategies did they use to reach non-users, drop-outs and people who are not currently reached?

How did they develop the budget? Did they link the plan and budget?

Where did they get the numbers from?

Last year, was the number of sessions held in the facility about the same as planned? Was the number of outreach sessions about the same as planned?

## 2 – Information management function

### *Indicator*

Health workers receive timely information on new policies and guidelines.

Health workers receive reports on national progress towards meeting disease reduction and other health goals.

Health workers use information they collect without waiting for feedback.

Health workers get feedback on reports they submit.

### *Methods and sources*

Review:

- reports from the sub-national and national levels
- feedback documents.

### *Discussion points*

Ask health workers what the last policy or guideline they received was, and when they received it. Check this against the policies and guidelines issued at the national level.

Ask staff what reports they receive on service coverage and progress towards health goals. How does their health facility compare to others?

Ask each person interviewed:

- how they use the information they collect
- if they receive useful feedback on the reports they submit to the next level.

### 3 – Coordination among health providers function

#### *Indicator*

The facility's managers coordinate services with other health providers in the area, when appropriate.

#### *Methods and sources*

Review service plans for the catchment area.

Talk to private practitioners.

#### *Discussion points*

Ask managers what services private facilities, private practitioners, and traditional practitioners in the catchment area provide.

- How are referrals managed?
- Are personnel ever shared? In what situation?
- How are resources, such as transportation, equipment, supplies, drugs, vaccines, and consumables shared, if at all?

If possible, discuss the same issues with private practitioners in the catchment area.

### 4 – Public and private monitoring and evaluation function

#### *Indicator*

Health workers evaluate their work periodically.

#### *Methods and sources*

Review monitoring and evaluation reports.

#### *Discussion points*

Ask health workers how they:

- find out if they are providing the kinds of services the community want and need
- find out if they are reaching everyone in their area
- assess the quality of their services.

If possible, discuss the same issues with members of public in the catchment area.

## 1 – Staffing function

### *Indicator*

There are enough staff with the appropriate skills to meet the facility's needs.

Staff meet national staffing standards.

Staff receive adequate salaries on a regular basis.

### *Methods and sources*

Review:

- the staffing plan
- the staffing list for the facility.

### *Discussion points*

Ask staff if there are enough of the right kind of staff in the facility. If not, ask them to give you details and recommend changes.

How many posts are now vacant in the health facility? Ask if staff are transferred frequently? If so, what effect does this have.

Discuss salaries and the extent to which they cause dissatisfaction among staff.

What is being done to identify and meet human resources needs?

Ask about any effects recent organizational changes have had on staffing.

## 2 – Training function

### *Indicator*

All staff have the knowledge and skills they need to do their jobs.

### *Methods and sources*

Review the master training plan for the health facility.

### *Discussion points*

Ask health workers to assess the training they have received? When was it? What was it about? Do they think it was effective? Ask them what topic they would choose for their next training programme.

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## 3 – Supervision function

### *Indicator*

Health workers receive the supervision, and administrative and technical support they need to perform effectively. Health workers' performance is regularly evaluated and feedback is provided.

### *Methods and sources*

Review supervisor's reports.

### *Discussion points*

Ask health workers to tell you who visits them from the sub-national office. How often do they visit? What do the visitors do while they are in the facility?

Ask health workers to assess how adequate they think the information, practical advice and technical support they receive is. Ask health workers to assess how adequate the administrative support they receive is. Look at areas like salaries, expenses, and the assignment of tasks.

## 1 – Staffing function

### *Indicator*

Budgeting, identifying funding sources, and tracking expenditures.

Health workers are aware of the costs of services, sources of financing, and the need for efficient use of resources.

### *Methods and sources*

Review:

- health facility budget
- accounts of expenditures.

### *Discussion points*

Who pays for the cost of health care? Approximately how much does each funding source pay:

- the government?
- third-party payers?
- patients?
- community organizations?
- NGOs?

Ask health workers for examples of how they use resources efficiently.

For example, reduction of vaccine wastage, cooperation with the private sector, contributions from the community.

What recent changes have health workers noticed in:

- the amount or sources of financing?
- the control the facility has over the use of funds?
- funding proportions for different health services, for example, more for the treatment of TB and less for immunization services?





## New Vaccine Discussion Guide

Use this guide if you have been asked to assess the feasibility of introducing a new vaccine into the national immunization programme.



**Question: What is known about the disease?**

**Discussion points**

Ask health workers if they have ever seen the disease and if they think it's an important public health problem.



**Question: What are the disease burden estimates?**

**Discussion points**

Ask for a copy of any disease burden studies for this disease that have been made in the country.



**Question: Do staff members believe it to be important to public health?**

**Discussion points**

Ask health workers what they know about the disease – is it a public health problem?



**Question: What is known about the new vaccine? Is it seen as beneficial?**

**Discussion points**

Ask health workers what they think the benefits and shortcomings of the new vaccine are.



**Question: What impact might the new vaccine have on the health system?**

**Discussion points**

Ask health workers and managers what the impact the introduction of the new vaccine might have on:

- the immunization schedule
- immunization delivery strategies
- staff workloads and training
- disease surveillance system
- reporting and information management
- cold-chain storage and handling, for example, prevention of vaccine freezing
- injection equipment and supplies
- waste disposal
- other health services.

What changes might be needed?



**Question: What support might be needed to introduce the new vaccine?**

**Discussion points**

Ask managers what they might have to do to get the support of:

- clinicians
- health workers
- development partners
- the general public.



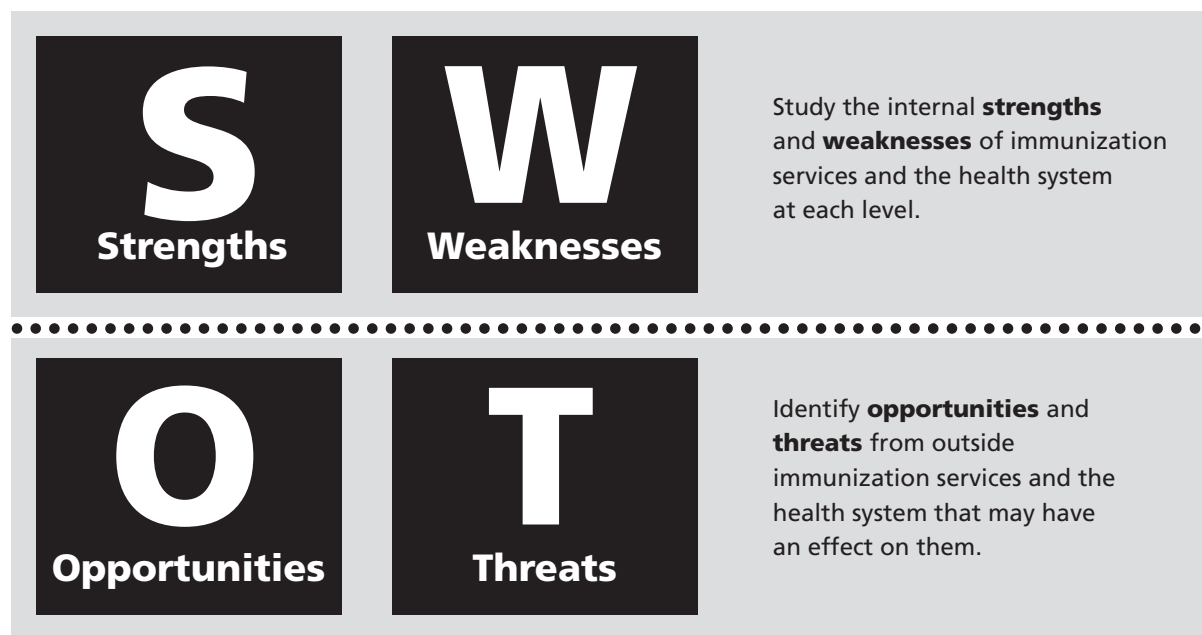
## Conducting a SWOT analysis

SWOT stands for strengths, weaknesses, opportunities, and threats\*. When you are assessing immunization services, you will need to use a SWOT analysis to study the strengths and weaknesses of immunization services and the health system at each level. You will also need to identify opportunities and threats from outside immunization services and the health system that may have an effect on them.

### Carrying out the analysis

- 1 Make lists of the internal strengths and weaknesses of immunization services and the health system, and the external opportunities and threats they face.
- 2 Compare, discuss, and analyse the possible implications of the items in the list.
- 3 Formulate strategies and recommendations based on the analysis.

\* John M. Bryson, *Strategic Planning for Public and Nonprofit Organizations: A guide to strengthening and sustaining organizational achievement*. Revised edition. 1995. San Francisco, Jossey-Bass Publishers.



*Discussion and analysis are just as important as listing the strengths, weaknesses, opportunities, and threats.*

## What to look for under each component of the SWOT analysis

### Strengths

Factors that contribute to good system performance that can be built on to achieve new objectives.

Examples of internal strengths might include an effective cold chain, or public acceptance of the need for immunization.

### Weaknesses

Factors in the system that hinder the achievement of objectives.

Examples of weaknesses include frequent occurrence of adverse events following immunization, or staff dissatisfaction with salaries.

### Opportunities

Factors outside the health system that you can take advantage of when planning change. Usually fit into one of the following categories:

- political, economic, social, and technological trends
- stakeholders who control resources
- actual or potential collaborators or competitors.

Examples of opportunities include the appointment of a new key decision-maker who supports immunizations, or public demand for injection safety.

### Threats

Factors outside the health system that have a negative effect on it. Examples include a general decrease in government revenue, or an extensive turnover or transfer of staff.