

**Ministry of Health, Wellness, Human Services and Gender Relations, Saint Lucia**

**Primary Health Care (Community Health Nursing Service)**

**Expanded Program on Immunization (EPI)**

**Measles Mumps Rubella (MMR) Vaccination Coverage Survey**

**Terms of Reference for Interviewers**

**Background**

The Expanded Program on Immunization (EPI) commenced in Saint Lucia in 1977 and committed to procuring its vaccines through the Pan American Health Organization (PAHO) EPI Revolving Fund. The government provides the budget for all the implementation components of the EPI.

Immunization is delivered primarily at the Maternal and Child Health clinics through 36 Primary Care facilities by the Community Health Nurses of Family Nurse Practitioners in the public sector. There has been a well-established school vaccination program where children are vaccinated at the schools they attend integrated with other health interventions. Immunization is also offered at six private physician offices. One private hospital procures a limited supply of vaccines by individual order mainly for adults.

Measles Mumps Rubella vaccines are administered to children at 1 year and a booster dose at 4 - 5 years prior to school entry. Vaccination coverage of MMR1 has been 95% and above, whilst the reported coverage MMR2 has been between 60% to 80% for the past ten years.

In 2011 Saint Lucia completed the verification and documentation of measles, rubella and Congenital Rubella Syndrome (CRS) elimination in keeping with PAHO's Directing Council Resolution CSP27.R2 of 2007. Consequently, countries are urged to maintain high MMR vaccination coverage of 95% and above, for two doses, in every community and district, and to improve surveillance for the detection and management of cases and outbreaks of these diseases in a timely fashion.

The primary purpose of this survey is to determine the coverage of MMR1 and MMR2 among children born in 2004 to 2009 in Grade K through 5 and Special needs schools and as a secondary objective MMR1 for children 12 -36 months.

## **Objectives:**

- 1) Assess MMR2 vaccination coverage by area (A and B, see below), by region, sex, grade and cohort
- 2) Assess MMR2 vaccination timeliness
- 3) Assess vaccination status with other vaccines recommended for children <5 years of age
- 4) Assess factors related to incomplete vaccination schedules
- 5) Determine the main reasons parents or guardians give for not having their children up-to-date with their vaccination schedule
- 6) Assess the proportion of children being vaccinated in the private sector
- 7) Assess health passport retention, completeness and quality
- 8) Assess the knowledge and attitudes of parents and guardians regarding vaccines and immunization services
- 9) Assess the knowledge and attitudes of school principals and selected teachers regarding immunization requirements for school entry
- 10) Compare parental/guardian recall with documented MMR2 vaccination (health passport or clinic record)
- 11) Compare MMR2 vaccination information in the health passport vs. clinic record for selected situations (e.g.. Doses given outside the recommended age, particularly earlier than 4 years of age).
- 12) Assess vaccination status for all age appropriate antigens in children aged 12-36 months of selected homes

The country will be grouped into two segments by regions with similar socioeconomic status, and surveys conducted in both segments (approximately \_\_\_ children in each survey).

Individuals not currently employed in the health sector will be selected and trained to conduct interviews of caregivers of selected children in their homes and Public Health Nursing Supervisors will obtain listings of children for participant selection and conduct interviews with principals at the schools. Photos of vaccination records will be taken and transcription of records will also be necessary for validation of vaccination at Wellness Centres. Interviewing teams will be supervised by an assigned Public Health Nursing Supervisor (PHNS).

## **Duties and Tasks for interviewers**

- Participate actively in training activities and pass the training test
- Conduct household interviews and data extraction from vaccination cards
- Complete the assigned schedule of visits
- Transcribe vaccination records
- Take photos of the vaccination health card
- Explain to parents/caregiver if the child is up-to-date. If not, advise them where to take the child for vaccination
- Revisit households if needed to complete questionnaire

- Attend meetings when requested
- Submit completed questionnaires to PHNs

### **Skills, Knowledge, Experience and Qualifications Required**

- Minimum of an Associate Degree or BSc in Nursing or a field related to health or the social sciences
- Knowledge of research /survey methodologies
- Excellent interpersonal and communication skills
- Good writing and reporting skills
- Knowledge of Vaccine schedule for St. Lucia
- Analytic and decision making skills
- Ability to operate an electronic device (digital camera)
- Demonstrate an ability to understand and speak the creole language

### **Deliverables**

- Timely and objective completion of household questionnaires according to the schedule
- Daily/weekly submission of completed questionnaires
  
- Submission of cameras

**Time Frame:** 4 to 6 weeks

Start date: April 2015

End date: June 2015

**Reporting:** The interviewer will report to the PHNS

**and**

The coordinator when requested.