



Updates From the Field

BEST PRACTICES

No. 1 Series of 2000
<http://www.msh.org.ph>

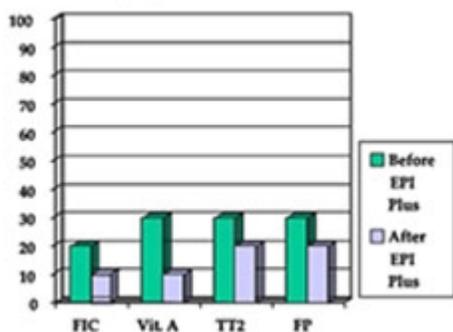
“EPI PLUS” (Expanded Programme on Immunization Plus)

Background

In May 1999, Bago City in Negros Occidental became a recipient of the LPP-Matching Grant Program. The LGU promptly set up a community-based monitoring and information system (CBMIS). The baseline survey revealed that a significant proportion of women and children needed immunization, Vitamin A supplementation, and family planning services (see Figure 1). Essential health services had to be expanded to respond to these needs. Thus, a strategy was designed to bring these services closer to the women and children of Bago City.



Figure 1. Proportion of Target Clients with Unmet Needs by Type of Service Needed



The Intervention

The Expanded Programme on Immunization Plus (EPI Plus) is an expansion of the Department of Health’s immunization program (EPI) to prevent childhood illnesses such as tuberculosis, poliomyelitis, diphtheria, pertussis, and tetanus. The word “Plus” means the integration of other health programs, such as nutrition and family planning, into the EPI delivery system. The Plus also means that other stakeholders, including local chief executives, *barangay* (village) officials, *purok* (zone) presidents, and representatives of

nongovernmental organizations, are involved in health service delivery in their communities. The City Health Office takes the lead in carrying out the EPI Plus activities. Table 1 summarizes the program.

Table 1. EPI Plus Features and Teams

Features	EPI Team	EPI Plus Team
Team members	Nurse, Midwife, Barangay Health Worker (BHW)	MD, Nurse, Midwife, BHW (Health Education and Promotion Officer, Med. Tech., Sanitary Inspector as Irregular members)
No. of teams	One (whole city)	Three (one/district)
Area of coverage	24 barangays	24 barangays
Health programs involved	EPI	EPI, FP, TT Immunization, Vit. A supplementation
Target population	Infants (0-11 months old)	Infants (0-11 months old); Children (12-59 mos. old); Mothers (15-49 years old)
Schedule of visits	One visit per 1-2 barangays/month	2-3 visits per barangay/month
No. of visits per barangay/month	1 visit	2-3 visits
Service vehicle	One	One



MATCHING GRANT PROGRAM
 Department of Health

How EPI Plus Works

- ▶ Conduct a survey in all barangays to identify women and children in need of immunization, nutrition, and family planning services. During the survey, distribute leaflets to different households, informing them about the health programs and where they can receive services.
- ▶ Consolidate and analyze the survey results to identify target clients and underserved areas.
- ▶ Develop plan with courses of action that respond to the health needs of the community. As the three health programs are integrated in the EPI activity, the team is expanded to cover more areas, reach out to more target groups, and increase the frequency of visits to barangays.
- ▶ Present the results of the survey and EPI Plus plan of action to stakeholders, namely, city and barangay officials, health personnel, and BHWs.
- ▶ Implement EPI Plus, which follows the previous EPI schedule (that is, a 28-day immunization cycle). The EPI Coordinator makes the monthly schedule and copies for the city mayor, city administrator for transportation, barangay chairman, and the barangay health station.
- ▶ Assess the activity at all levels to discuss issues and concerns and determine ways to improve it.
- ▶ Give feedback to city officials during one of their regular meetings.

Results

Bringing health services directly to the barangays of Bago City has provided numerous benefits to women and children with unmet needs. This initiative by the LGU helped in reaching clients who are not able to go to the health centers or barangay health stations. Likewise, the performance of the City Health Office improved, as reflected in the reduction in the number of unserved and underserved clients for immunization, family planning, and nutrition services (Figure 1). Other benefits to clients included consultations for prenatal, postnatal, and family planning services. Pap smears were also provided during EPI Plus days.

In far-flung areas of Bago City, mothers expressed their appreciation to the program for bringing services to their area. It reduced their expenses for transportation and the time they spent traveling to the barangay health station or health center for services.

Lessons Learned

- EPI Plus is effective in reducing the unmet needs of target clients;
- CBMIS is a reliable and accurate tool for assessing the health needs of the community and developing realistic interventions;
- Proper identification of the root causes of the problems is a necessary component in planning efficient and appropriate health interventions;
- Community health volunteers (BHWs and Barangay Nutrition Scholars) are among the best partners in delivering health services to the community;
- Mobilizing community resources is important for improving access to services and responding to the health needs of the community;
- There should be active involvement and coordination among all stakeholders in the community. The commitment of everyone from the health staff, team members, and city and barangay officials to the residents is important in ensuring the success of the EPI Plus program.



Please address all inquiries to:

Management Sciences for Health
Unit TN No. 4, 10/F Times Plaza Building
U.N. Ave cor Taft Ave, Ermita, Manila, Philippines
Tel. Nos: (632) 525-7145/52/56 Fax No.: (632) 525-6086
E-mail: info@msh.org.ph