Synopsis - RAPID (Regular Appraisal of Program Implementation in District) for Immunization

Rationale

Immunization has a significant impact on the morbidity and mortality of children through reducing prevalence of vaccine-preventable diseases. However, immunization targets become achievable only when potent vaccines are delivered through quality services. Quality services, in turn, result in increased utilization by beneficiaries and improved coverage. Lack of supervision is one critical factor identified that leads to the present suboptimal coverage and quality for immunization in India. A robust system of monitoring and supervision based on continuous and consistent support with regular collection and analysis of well-defined indicators is, therefore, critical to improve the coverage and quality of immunization services.

Introduction

Regular Appraisal of Program Implementation in a District (RAPID) is one such model developed by the USAID-funded Maternal and Child Health Integrated Program (MCHIP), which aims to improve quality of immunization services through supportive supervision approach. Supportive supervision is the "process of guiding, supporting and assisting staff to perform more efficiently in carrying out their assigned tasks."

RAPID is a participatory supportive supervision approach for periodically assessing the processes, practices, including infrastructure, suggesting corrective actions and supporting functionaries to effectively perform their duties according to program benchmarks. The key feature of RAPID is to work with staff to monitor performance, recognize good practices, and identify and correct issues through on-site training. In partnership with Government and partners, MCHIP facilitated biannual RAPID rounds in the focus districts to improve quality and coverage of immunization services. The periodic RAPID rounds provide critical information to program managers for taking decisions and recommend measures for quality improvement at all levels of health system.

Methodology

The RAPID approach entails trained supervisors, guided by a checklist covering critical and customized parameters, assessing routine immunization services in all the sub-district cold chain points (health facilities) in a district. On-site corrections, capacity building of the functionaries are part of the assessment, with data collection being integral component in this 4 to 6 days exercise. The training and engagement of facility in-charges and concerned staff make the RAPID approach sustainable. Data collected during the exercise are entered into Excel-based tool to generate scores and graphs. Each facility is categorized as good, average or poor based on the performance. Feedback to all concerned staff and officials at every level is an important and integral component of this approach.

Results

Successive rounds of RAPID have shown progressive improvements across the focus districts of UP and Jharkhand. The approach has contributed to improved quality of services as evident from the results depicted below (for specific parameters and overall).

Figure 1: Parameter wise analysis

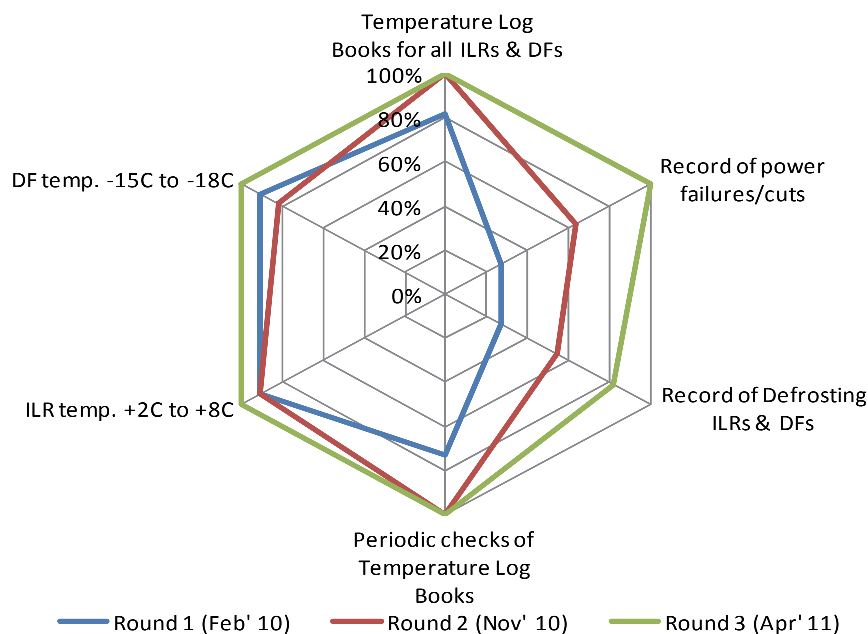
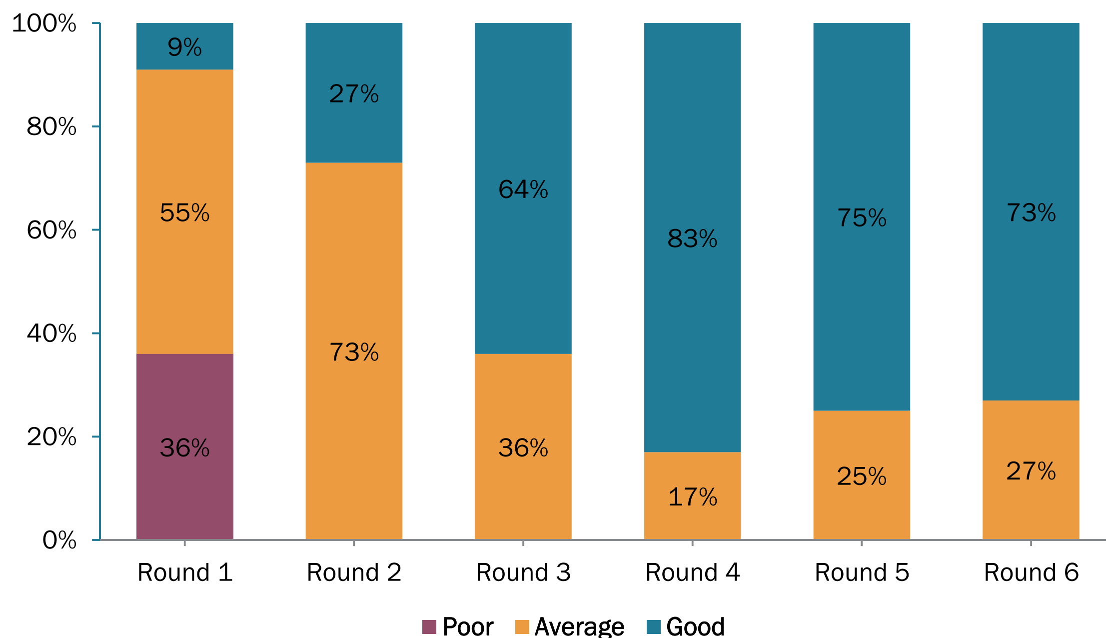


Figure 2: Overall grading of health facilities in the focused districts of Jharkhand showing improvement



Scale-up

After noting the success of RAPID in focused districts (Deogarh and Jamtara), the government of Jharkhand scaled-up RAPID in all 24 districts through state funds, while in Uttar Pradesh the scale-up is done through UNICEF support in 32 of 75 districts by involving the Government Medical Colleges. The state governments of Odisha, Madhya Pradesh and Haryana requested MCHIP to demonstrate RAPID, and government of Haryana scaled up RAPID in all districts through state funds.

The model was also shared internationally in Kenya, Tanzania, Uganda, Madagascar, DRC and Nigeria.