

**GOVERNMENT OF KERALA****Abstract**

Health & Family Welfare Department - Coordination mechanism for COVID 19 vaccine introduction - State Steering Committee, State Task Force, District Task Force and Block Task Force - Constituted - Orders issued

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**HEALTH & FAMILY WELFARE (F) DEPARTMENT**

**G.O.(Rt)No.2282/2020/H&FWD** Dated,Thiruvananthapuram,  
09/12/2020

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Read DO No.1940407/2020/IMMUNIZATION dated 26.10.2020 from the Secretary to Govt. of India, Ministry of Health & Family Welfare.

**ORDER**

Government are pleased to constitute State Steering Committee, State Task Force, District Task Force and Block Task Force as the coordination mechanism for COVID19 Vaccine Introduction with the following members.

**A. State Steering Committee**

**Chair Person** : Chief Secretary

**Convenor** : Principal Secretary, Health & Family Welfare Department.

**Members** : Principal Secretary LSGD

Principal Secretary LSGD (URBAN)

Principal Secretary Revenue

Principal Secretary SC/ST D D

Principal Secretary Fisheries

Secretary – AYUSH

State Mission Director – NHM

Secretary – Social Justice

Secretary – Women & Child Development (W&CD)

Secretary – Information & Public Relations

**B . State Task Force .**

**Chair Person** : Principal Secretary, Health & Family Welfare Department

**Member Secretary** : State Mission Director – NHM

**Members** : Secretary – AYUSH

Director – Social Justice

Director – Women & Child Development (W&CD)

Director Urban Affairs

Director of Municipal Administration

Director of Panchayats

Director Fisheries

Director SC/ST

Director of Health Services

Director of Medical Education

Sr. Regional Director – Ministry of Health & Family Welfare,

Director of Homeopathy

Director ISM

Director Ayurvedic Medical Education

Principal Controlling Officer - Homeopathy

Director of Insurance Medical Services

Director – Animal Husbandry Department,

State Immunization Officer & Addl DHS – FW

State Nodal Officer PEID Cell

**Development Partners** – WHO, UNICEF, UNDP, Rotary International, Lions Club, Professional bodies like IMA etc.

**C . District Task Force .**

**Chair Person** : District Collector

**Member Secretary** : District RCH Officer

**Members** : DMO – Health

DMO – ISM

DMO – Homeopathy

Principal MCH  
Principal - Ayurveda College  
Principal Homeopathy Medical College  
District Program Manager (NHM)  
District Program Officer – W&CD  
Dy. Director of Panchayat  
Regional Joint Director Urban Affairs  
District Officer – Social Justice  
District Animal Husbandry Officer  
PEID Cell Nodal Officer

**Development Partners :** WHO, UNICEF, UNDP, Professional bodies like IMA etc.

**D . Block Task Force .**

**Chair Person :** Medical Officer in charge of Block level Community Health Centre

**Convenor :** Health Supervisor

**Members :** Block Development Officer

Child Development Project Officer

Block Education Officer

Representative of Youth Organizations like NCC, Nehru Yuva Kendra Sangathan

National Service Scheme

Assistant Executive Engineer – Buildings Division – PWD

Representative of Animal Husbandry Dept.

Representative of Education Dept.

Representative of Kudumbasree

Block PRO (NHM)

Any Other Organization involved in health activities

**Development Partners** : WHO, UNICEF, Rotary International , Lions Club etc.

The ToR of the committee is attached as Annexure.

(By order of the Governor)  
**RAJAN NAMDEV KHOBRADE**  
**PRINCIPAL SECRETARY**

To:

Secretary, Department of Health & Family Welfare, Govt of India.

All members of State Steering Committee

All members of State Task Force

All District Collectors

The Director of Health Services, Thiruvananthapuram

The Director of Medical Education, Thiruvananthapuram

All District Medical Officers

General Administration (SC) Department

Stock File/Office Copy

Copy to :-

Special Secretary to Chief Secretary

P A to Principal Secretary, H&FWD

Forwarded /By order

Signature Not Verified  
Digitally signed by SHEENA PAUL  
Date: 2020.12.10 10:44:41 IST  
Reason: Approved

Section Officer



## ToRs of Coordination Mechanism for COVID-19 Vaccine introduction

### Background:

COVID-19 pandemic has adversely impacted lives and economy across the globe. With around 250 vaccines in various stages of development, it is likely that a vaccine against COVID-19 will be the earliest available intervention to protect the citizens of our country.

Government of India has begun its preparations for possible introduction of COVID-19 vaccine and a National Expert Group on Vaccine Administration for COVID-19 (NEGVAC) has been formed as the highest group that will guide the strategies for vaccine introduction. It is anticipated that initially the supply of vaccine will be limited in view of huge demand hence, prioritization of socio-demographics group will be done for vaccination and subsequently other groups will be included for vaccination.

In all likelihood, the COVID-19 vaccine introduction will span over an year with multiple groups being included sequentially starting from Health Care Workers (HCWs). Therefore, it is important to create strong advisory and coordination mechanism at State and District level to guide the process of COVID-19 vaccine introduction while ensuring minimal disruption of other routine health care services including Immunization.

Hence the following are groups are to be formed at district and state level.

### A. State Steering Committee

**Chairperson:** Chief Secretary

**Convener:** Principal Secretary, Health

#### **Members:**

- **Government Departments:** Health, Women & Child Development (WCD), Rural Development & Panchayati Raj, Municipal Corporations, Urban Development, Revenue department, Home department, Social Welfare, Sports & Youth Affairs, National Cadet Corps (NCC), Nehru Yuva Kendra Sangathan (NYKS), National Service Scheme (NSS), Education, Minority Affairs, Information & Broadcasting, Labour and Employment, Transport, Mining, Tribal Affairs, other relevant departments and representatives of central ministries/departments/agencies needed for COVID-19 vaccination purpose (Railways, Central Paramilitary forces, Defence establishments etc.)
- **Development partners** – WHO, UNICEF, UNDP, BMGF, JSI, CHAI, IPE Global, Rotary International, Lions Club etc.

**Frequency:** At least once in a month. Additional meeting may be held if required.

#### **Activities to be conducted:**

##### **1. Preparatory phase:**

- Ensure active engagement of other line departments for various activities related to COVID-19 vaccine introduction as and when the vaccine is made available.
- Oversight on creation of database of Health Care Workers (HCWs) on COVID-19 Vaccination Beneficiary Management system (CVBMS) who will be prioritized for vaccination in the 1<sup>st</sup> phase.
- Review of state's preparatory activities in terms of cold chain preparedness, operational planning, communication planning, strategies for anticipated state specific challenges in terms of geographical terrain, network connectivity, hard to reach areas etc.
- Mobilize human/other resources and coordinate planning and other activities with other departments. HR with expertise in medical/health may be utilized for vaccination while other HR may be used for operational support, IEC, resource mobilization, community mobilization etc.
- Financial planning for COVID-19 vaccine introduction amongst HCWs followed by other priority socio-demographic groups.
- Explore utilization of Corporate Social Responsibility (CSR) for financing various activities related to COVID-19 vaccine introduction.
- Devising plan for utilization of Common Service Centres and other public infrastructure as per need.
- Review and ensure that regular meetings of State Task Force (STF) and District Task Force (DTF) are held.

## 2. Implementation phase (upon availability of vaccine):

- Oversight on overall microplanning and other operational aspects of COVID-19 vaccine introduction.
- Ensure active involvement of all concerned department and stakeholders as per their pre-defined roles in the process of COVID-19 vaccine introduction.
- Ensure early tracking of social media and other platforms for possible misinformation and rumors around COVID-19 vaccine that could impact the community acceptance for COVID-19 vaccine.
- Devise innovative strategies for improving community engagement '*Jan Bhagidaari*' for improved coverage of COVID-19 vaccine.
- Regular review of coverage of COVID-19 vaccine and guidance to STF for corrective actions.
- Institute reward/recognition mechanism for achievement of best performing district/block/urban ward etc.

## **B. State Task Force:**

**Chairperson:** Additional Chief Secretary/Commissioner/Principal Secretary, Health

**Member Secretary:** State Immunization Officer (SIO)

**Members:** Mission Director, National Health Mission (MD, NHM) and other State-level implementing officers from health department, key government departments like Urban



development, Women & Child Development including ICDS, PRI, AYUSH, partner agencies like WHO, UNICEF, UNDP, BMGF, JSI, CHAI, IPE Global etc, CSOs, religious leaders etc.

**Frequency of meeting:** At least once every fortnight. Additional meetings may be held as per need.

**Activities to be conducted:**

### 1. Preparatory phase:

- Regularly monitor the progress of database of beneficiaries on COVID-19 Vaccination Beneficiary Management system (CVBMS).
- Provide guidance, including funding and operational guidelines, and fix timelines for districts to plan and implement COVID-19 vaccine introduction as and when vaccine is made available.
- Involve other relevant departments including ICDS, PRI and key immunization partners such as UNDP, UNICEF, WHO, Rotary International, Reproductive, Maternal, Newborn, Child Health and Adolescent Health (RMNCH+A) lead partners and other organizations at state level. CSOs, including professional bodies such as IMA should also be involved.
- Review cold chain preparedness across the state for possible introduction of COVID-19 vaccine and guide strengthening measures for the same in view of increased cold chain space requirement.
- Identify vaccinators across government and private sectors so as to minimize disruption of Routine Immunization services while introducing COVID-19 vaccine.
- Planning and mapping of vaccination sessions where HCWs will be vaccinated during the 1<sup>st</sup> phase of COVID-19 vaccine roll-out.
- Mapping human resources across departments that could be deployed for vaccination sessions for verification of beneficiaries, crowd management and overall coordination at session site.
- Communicate with District Magistrates (DM) for conducting meetings of District Task Force.

### 2. Implementation phase (upon availability of vaccine):

- Track districts for adherence to timelines for overall implementation of COVID-19 vaccine introduction as per the guidelines approved by NEGVAC and communicated from national level.
- Deploy senior state-level health officials to each district identified for monitoring and ensuring accountability framework. They should visit these districts and oversee the activities for the roll-out of COVID-19 vaccine, including participation in DTFI meetings and assessment of district preparedness.
- Develop a media plan to address rumour mongering as well as vaccine eagerness. Ensure adequate number of IEC materials (as per prototypes) are printed and disseminated to districts in time.

- Involve youth organizations like NCC/NYKS/NSS for social mobilization of identified group of beneficiaries to be prioritized from time to time. On similar lines, ensure involvement of self-help groups.
- Regular review with districts and urban local bodies to review and resolve issues related to microplanning, vaccines and logistics, human resources availability, training, waste management, AEFI and IEC/BCC.
- Review and need based approval of additional fund requirement.

### **C. District Task Force:**

**Chairperson:** District Magistrate

**Member Secretary:** DIO

**Responsibility:** CMO

**Members:** CMO, key departments including WCD, PRI, Urban Development, Cantonment boards, Sports & Youth Affairs, National Cadet Corps (NCC), Nehru Yuva Kendra Sangathan (NYKS), National Service Scheme (NSS), Education, Social Welfare, Minority Affairs, Information & Broadcasting, Railways, Home dept., Revenue dept., Labour dept., Mining, Tribal Affairs and any other relevant departments and District-level partner agencies like WHO, UNICEF, UNDP, BMJF, JSI, CHAI etc, CSOs, professional bodies like IMA & religious leaders

**Frequency:** Weekly.

#### **Activities to be conducted:**

##### **1. Preparatory phase:**

- Monitor progress of database of beneficiaries on COVID-19 Vaccination Beneficiary Management system (CVBMS).
- Ensure training of all concerned HR on COVID-19 Vaccination Beneficiary Management system (CVBMS).
- Monitor progress on key activities such as microplanning, communication planning, cold chain and vaccine logistics planning. Accountability to be fixed for each activity at all levels.
- Planning and mapping of vaccination sessions where HCWs will be vaccinated during the 1<sup>st</sup> phase of COVID-19 vaccine roll-out.
- Involve other relevant departments including ICDS, PRI and key immunization partners such as UNDP, UNICEF, WHO, Rotary International, RMNCH+A lead partners and other organizations at district levels. CSOs, including professional bodies such as IMA should be involved. Involve the local and religious leaders.
- Identify vaccinators across government and private sectors so as to minimize disruption of Routine Immunization services while introducing COVID-19 vaccine.

- Mapping human resources across departments that could be deployed for vaccination sessions for verification of beneficiaries, crowd management and overall coordination at session site.

## 2. Implementation phase (upon availability of vaccine):

- Monitor the roll-out of COVID-19 vaccine in the district for progress made and resolving bottlenecks.
- Requisition of required human resource and infrastructure including vehicles if needed from other departments for implementation and monitoring.
- Ensure minimal disruption of other routine health services during rollout of COVID-19 vaccine.
- Ensure identification and accountability of senior officers in the blocks and the urban cities. They should visit these blocks and provide oversight to activities for rollout of COVID-19 vaccine, including participation in training, monitoring etc.
- Robust communication planning at all levels to address rumor mongering as well as vaccine eagerness. Ensure adequate number of printed IEC materials (as per prototypes) are printed and disseminated to blocks/planning units in time. Ensure that these materials are discussed and used in the sensitization workshops.
- Track blocks and urban areas for adherence to timelines for various activities required for introduction of COVID-19 vaccine.
- Ensure timely disbursement of funds at all levels
- Share key qualitative and quantitative feedback at state level for review.

Note: The above composition of the State Steering Committee, State & District Task Forces and their activities is recommended. However, states may add members to their committees and enhance their activities based on local context and requirements.

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