

Overview of PEI in Nigeria



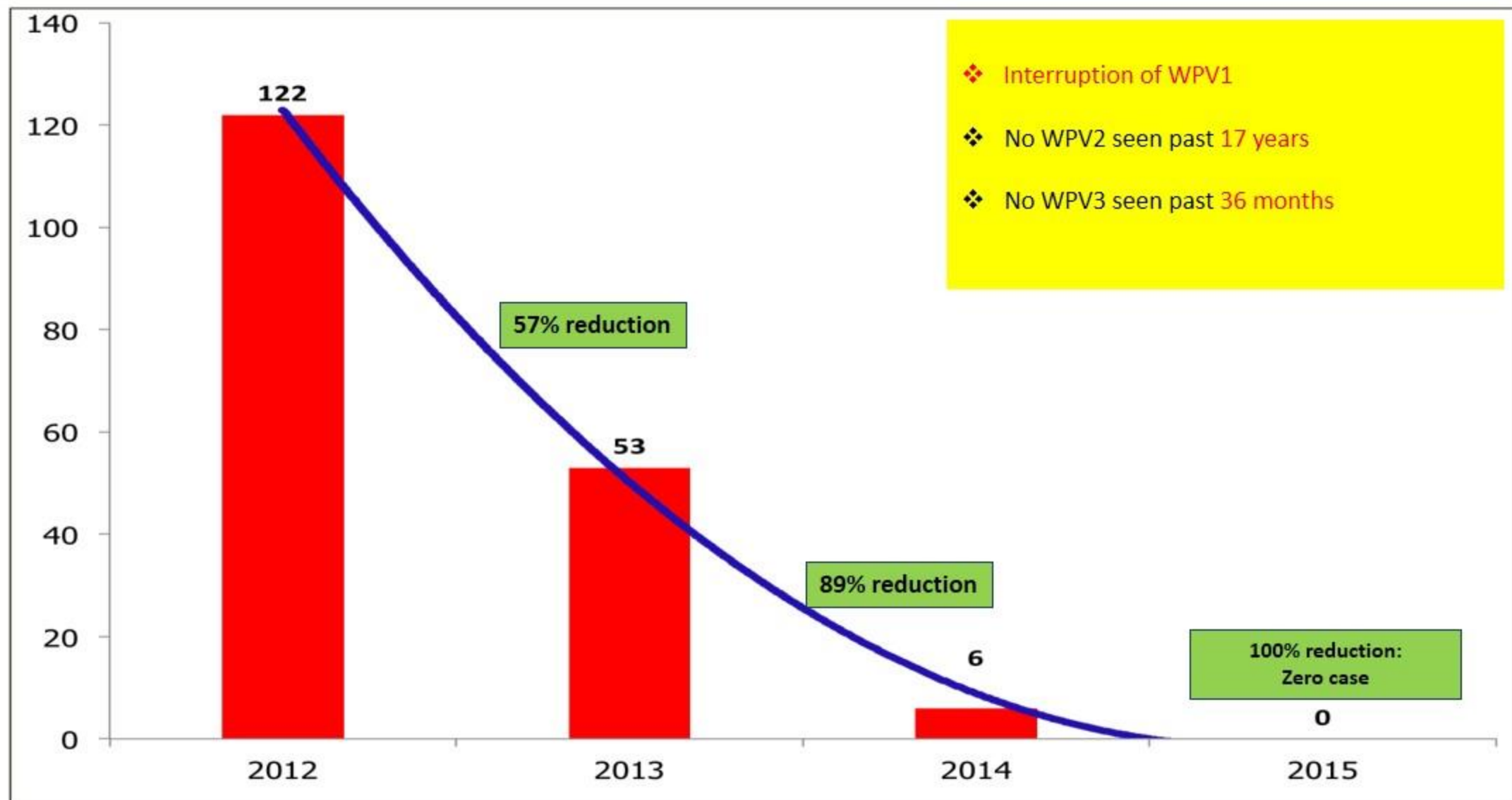
13th IMB Meeting
5th October 2015

National Polio Emergency Operations Centre

Outline of Presentation

- 1. WPV and cVDPV Epidemiology**
2. Strategies to stop transmission of cVDPV in Nigeria
3. Efforts to reach children in security compromised areas of Borno and Yobe
4. Surveillance
5. Challenges facing the programme
6. Next Steps

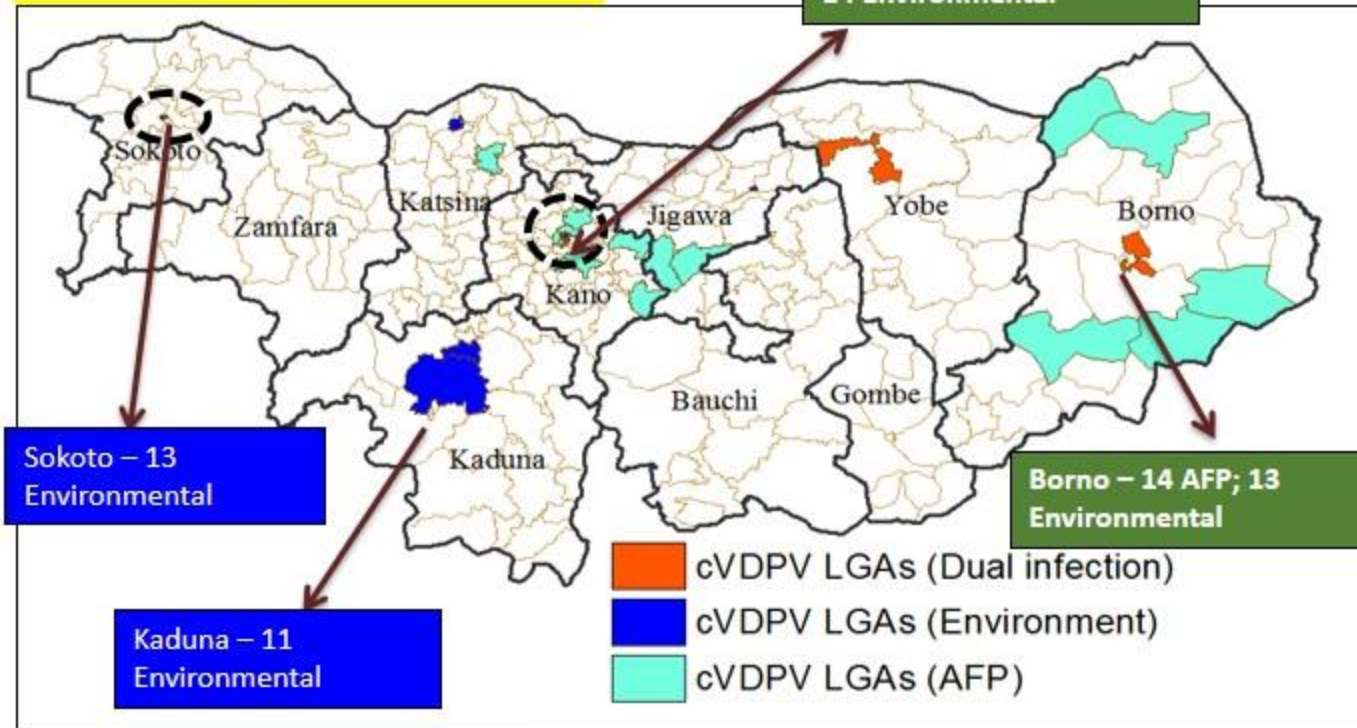
Trend of WPV in Nigeria (2012-2015)



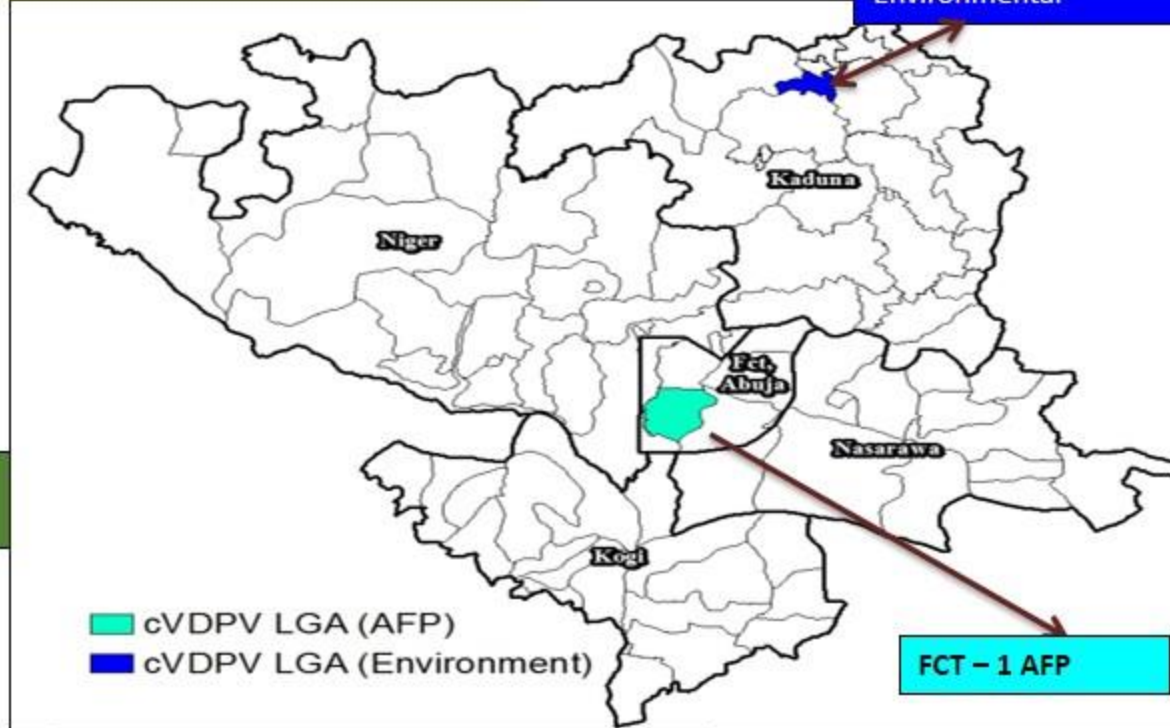
laboratory results out of the 13,645 specimens received in laboratory from July 2014 to July 2015, data as at week 35, 2015 have all been cleared : Nigeria has interrupted the WPV1 for 1 year now

Population Immunity to cVDPV: AFP & Environmental cases (2014/2015)

2014 Sanctuaries



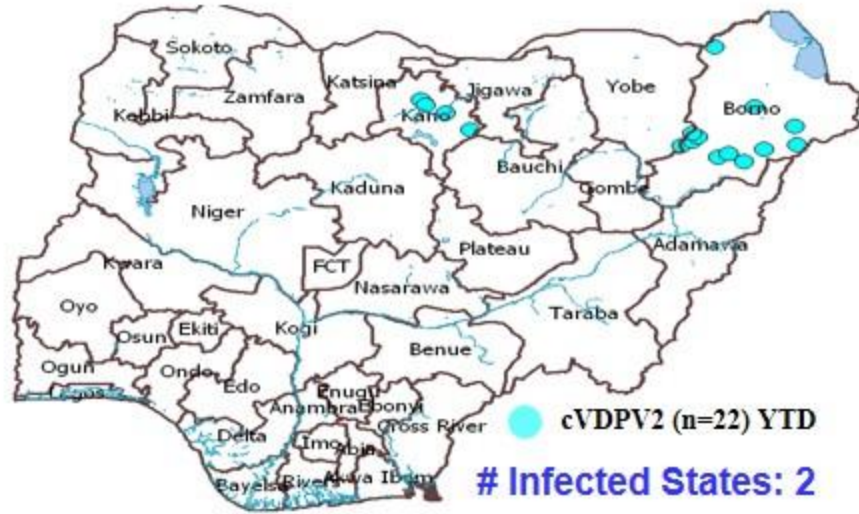
2015 Sanctuary



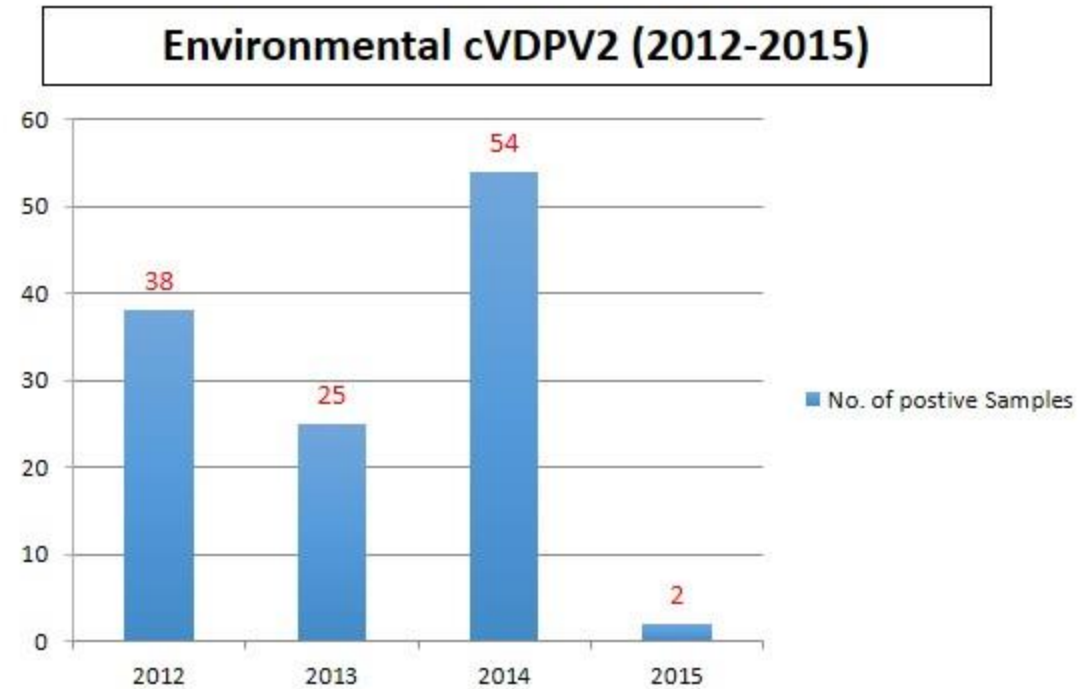
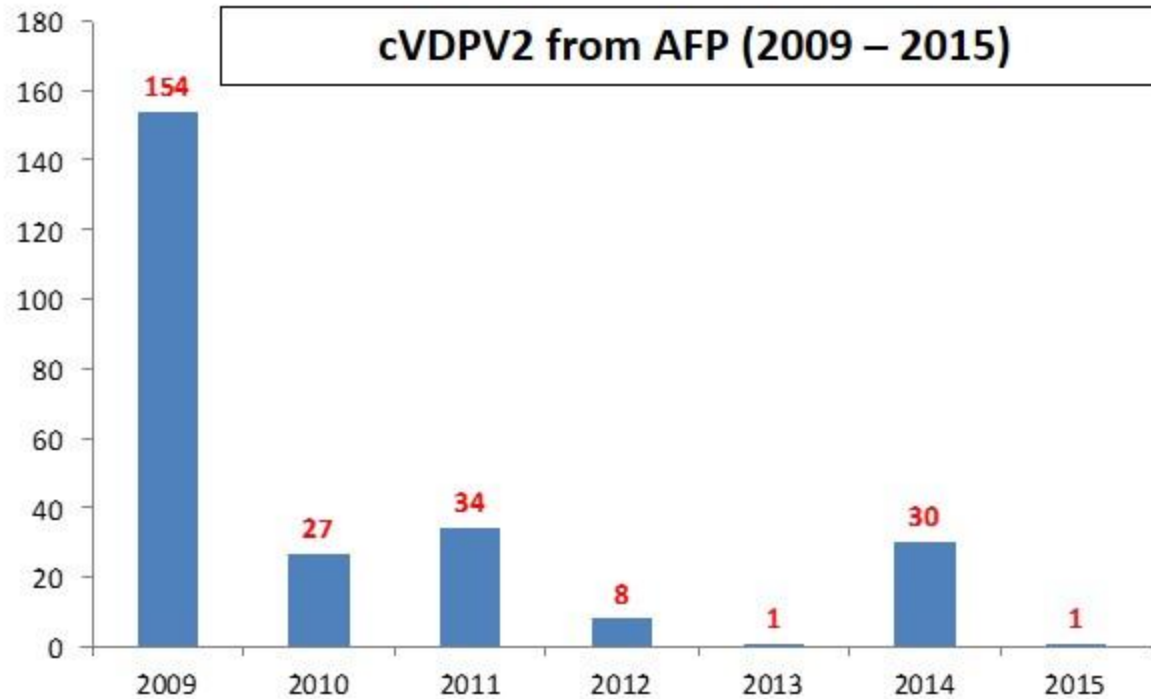
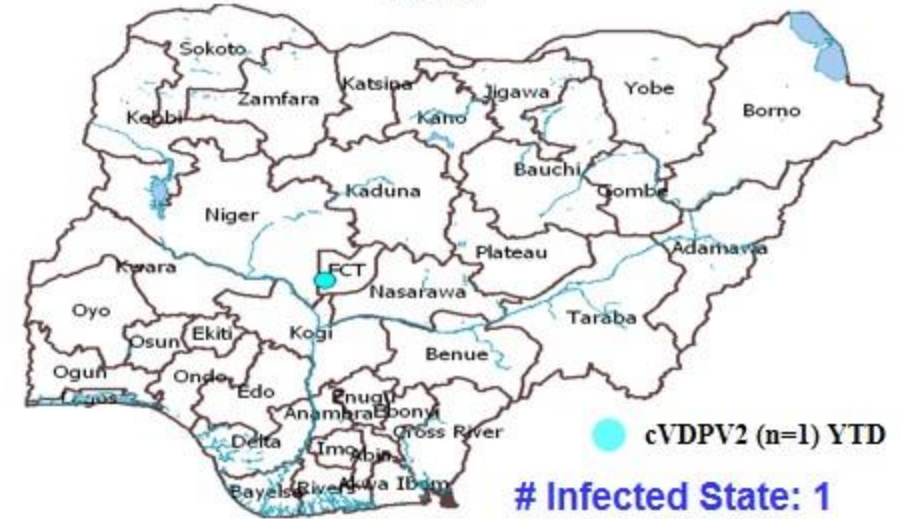
State	2014		2015	
	AFP	Environmental cVDPV	AFP	Environmental cVDPV
Borno	14	13	0	0
Jigawa	2	1	0	0
FCT	0	0	1	0
Kaduna	0	11	0	2
Kano	10	14	0	0
Katsina	1	2	0	0
Sokoto	0	12	0	0
Yobe	3	1	0	0
TOTAL	30	54	1	2

Nigeria: cVDPV2 distribution, 2014&2015 as at week 37, 2015

2014



2015



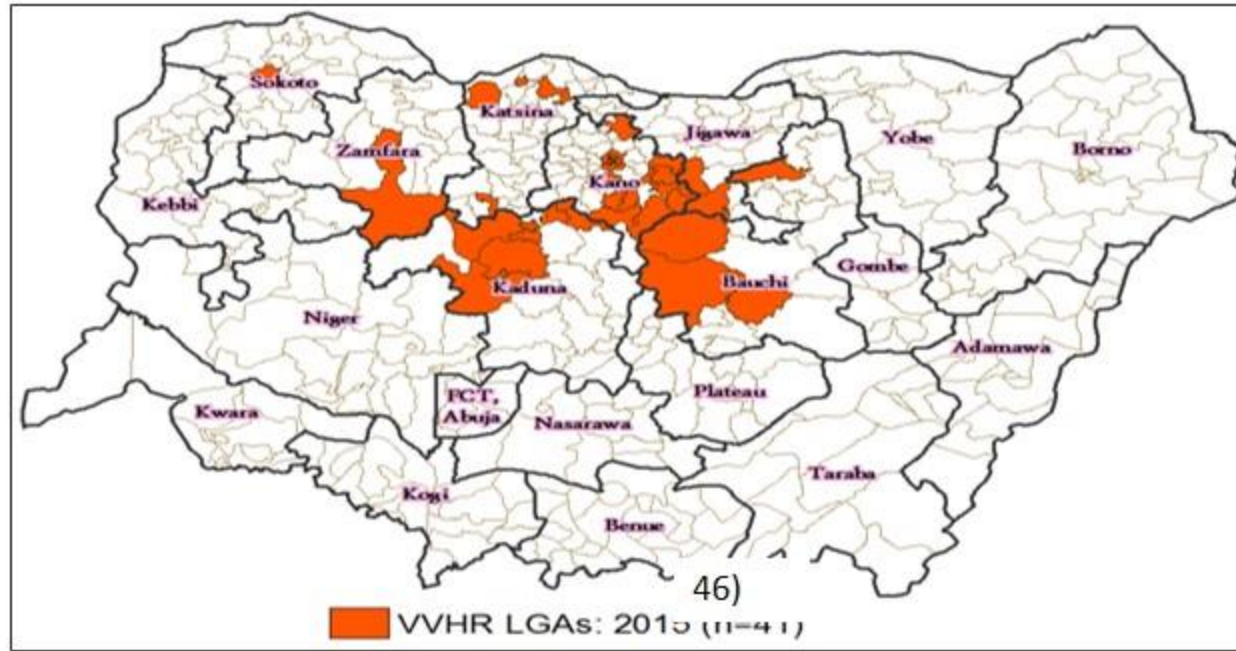
Status of Wild Polio Virus Serotypes in Nigeria

WPV Type	State	LGA	Ward	Date of Onset	Duration	Remarks
WPV ₁	Kano	Sumaila	Rimi	24/07/14	16 months	Nigeria has achieved interruption. (No pending cases in the Lab from July 2014 - July 2015 have been cleared).
WPV ₂	Nasarawa	Kokona	Kokona	9/2/98	17 years	Eradicated
WPV ₃	Yobe	Nangere	Kukuri	10/11/12	36 months	Nigeria has achieved eradication status

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Deploying the Polio Structure to support Routine Immunization in 46 polio vulnerable LGAs



Activities

- Polio infrastructure supporting the planning and implementation of Fixed and Outreach RI sessions
- Polio infrastructure supporting mobilization /defaulter tracking
- Supportive supervision
- National and state EOCs monitoring implementation of work plans and RI sessions on a weekly basis

Outcome

- Logistics gaps closed
- More fixed and outreach RI sessions are being held and tracked weekly
- Tracking of community linked activities
- Sessions are monitored and tracked by senior supervisors
- Tracking IPV utilization in the 46 priority LGAs. This would be scaled up in other LGAs

SIAs response to stop cVDPV transmission in 2014 and 2015

3 tOPV rounds conducted in 2015

*IPV done in selected LGAs in some states

AFP

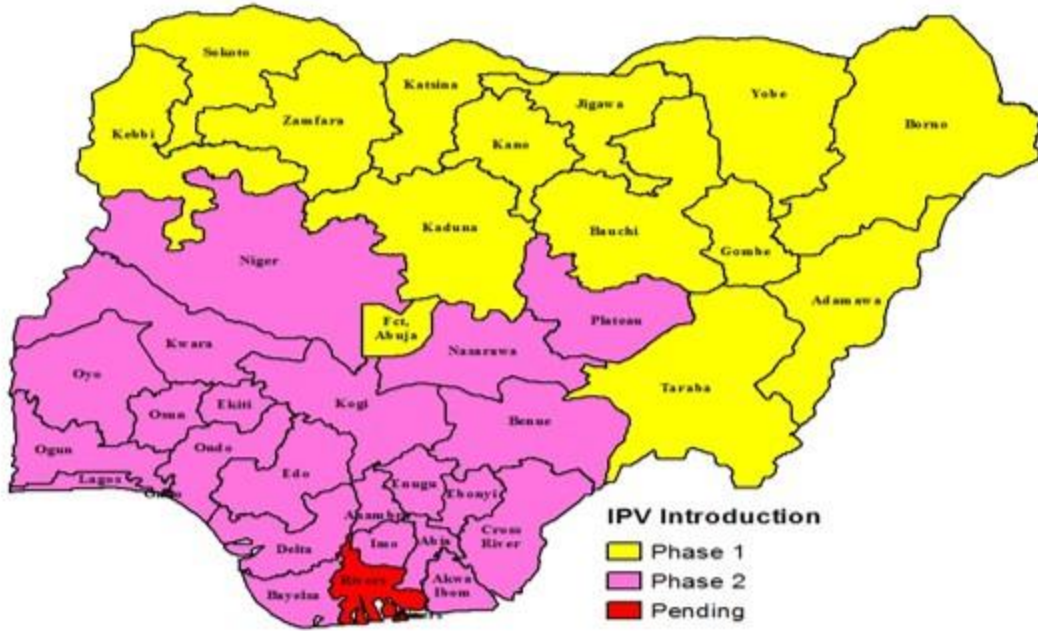
State	Jun '14	Jul '14	Aug '14	Sept '14	Oct '14	Nov '14	Dec '14	Jan '15	Feb '15	Mar '15	Apr '15	May '15	Jun '15	Jul '15	Sept '15
Borno	3			1											
Kano	4		1		1	1									
Katsina				1											
FCT												1			
Jigawa					2										
Yobe					1	1									
Total	7		1	2	4	2						1			

Environmental

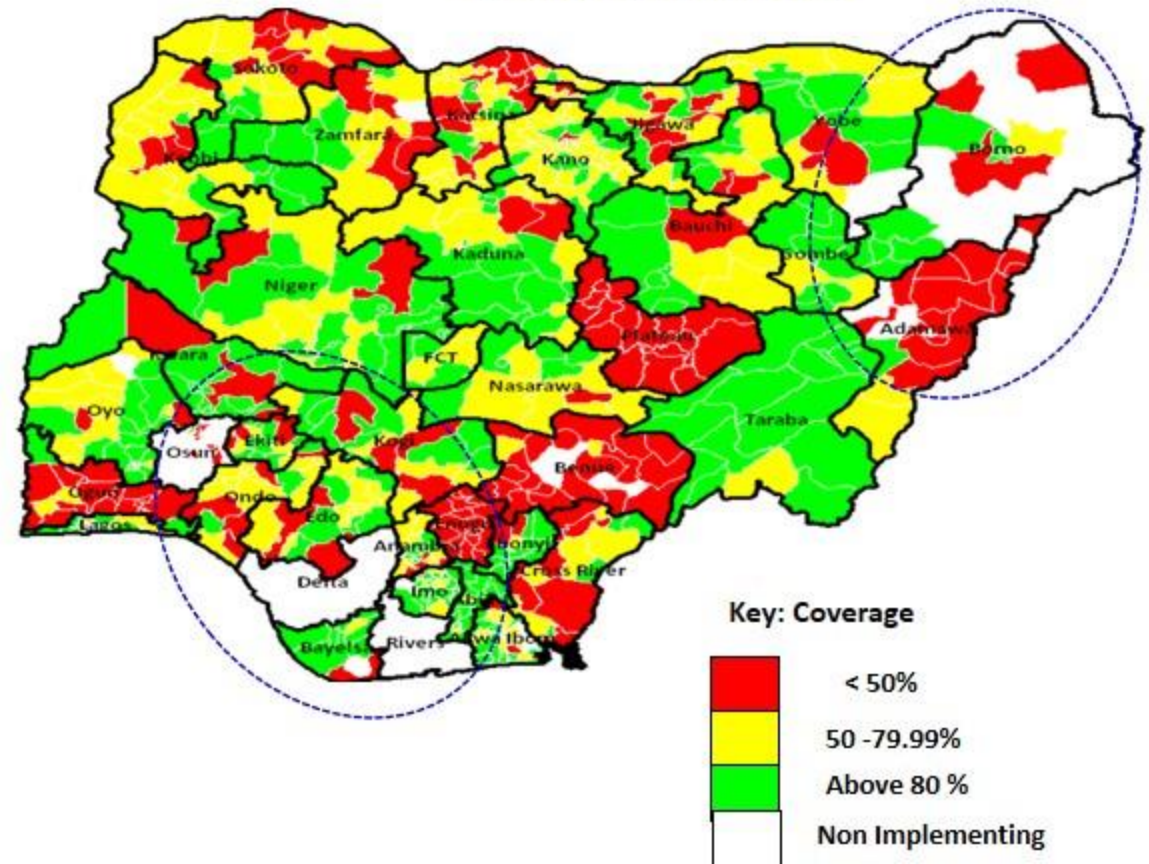
State	Jun '14	Jul '14	Aug '14	Sept '14	Oct '14	Nov '14	Dec '14	Jan '15	Feb '15	Mar '15	Apr '15	May '15	Jun '15	Jul '15	Sept '15
Kano	2	2	2	1	1										
Borno	1														
Kaduna	4	1	2		2	2		1		1					
Sokoto	3	1	1												
Katsina	1	1													
Jigawa						1									
Yobe						1									
Kebbi															
Total	11	5	5	1	3	4		1		1					

Phased introduction of IPV in RI schedule in 2015

Phased Introduction of IPV

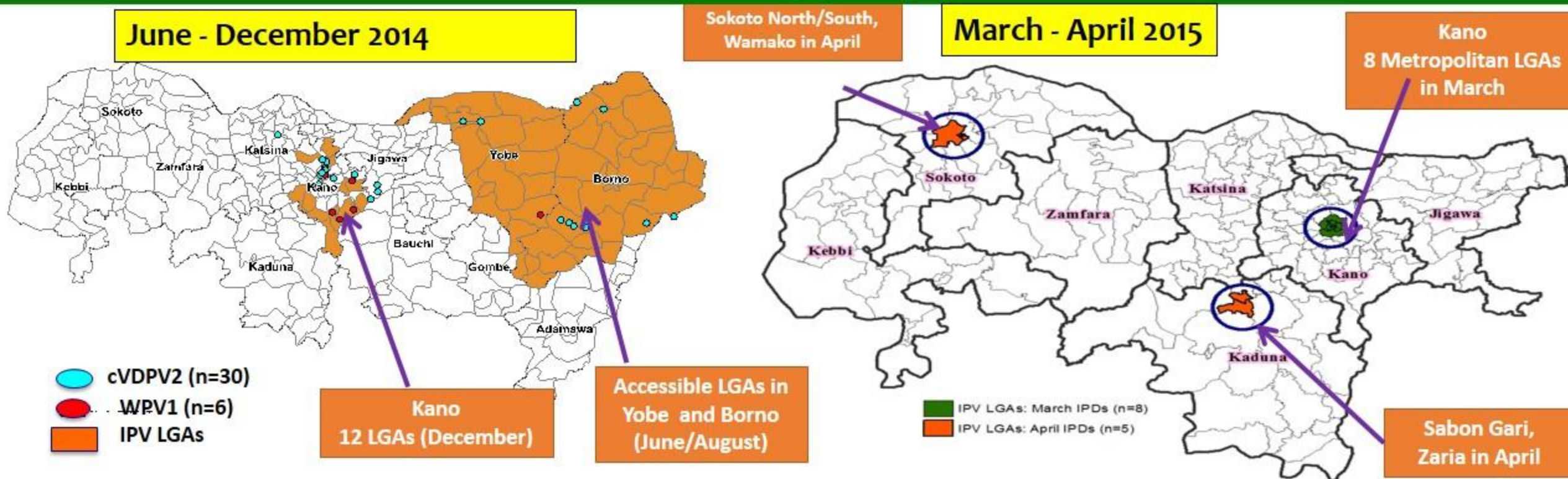


Coverage as at June 2015



IPV was introduced into RI in Nigeria in February 2015

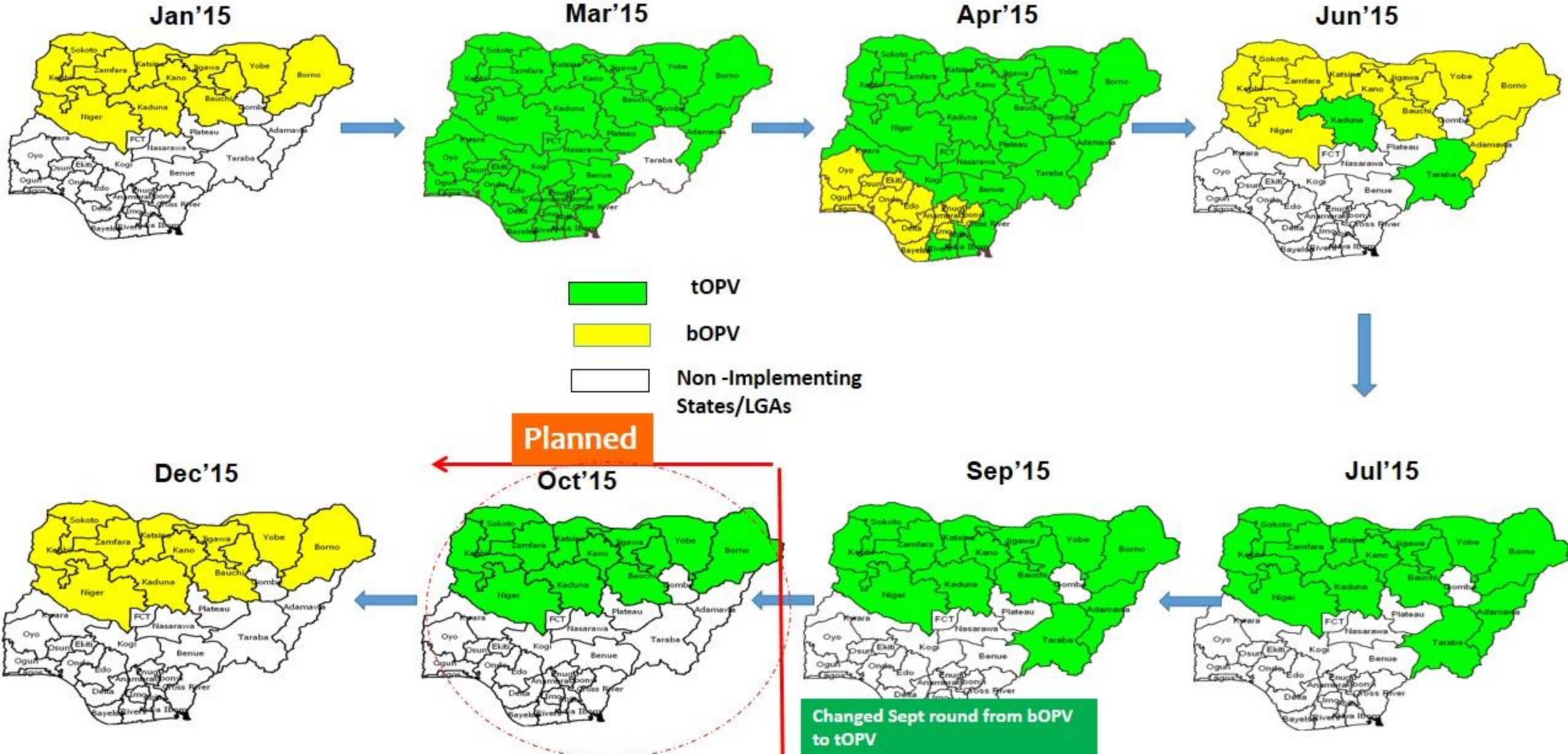
Use of IPV as a New Tool to Stop cVDPV Transmission in Borno, Yobe and Selected LGAs in 2014 & 2015



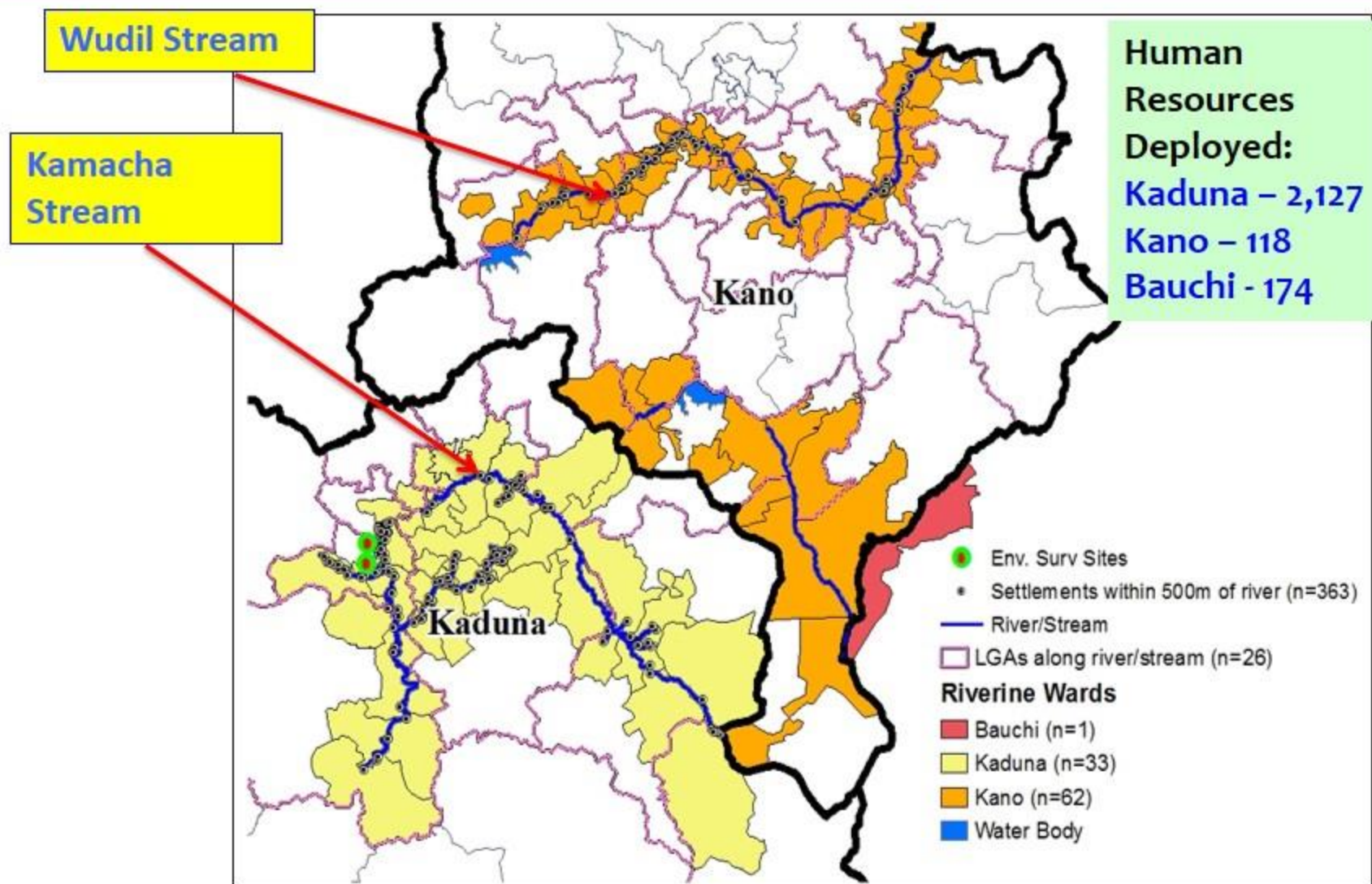
State	LGA	# of children vaccinated
Borno	27	1,375,049
Yobe	17	880,566
Kano	12	756,208
Total	56	3,011,823

State	Target Population	LGA	# of children vaccinated
Kano	760,181	8	805,949
Kaduna	318,445	2	344,330
Sokoto	319,192	3	225,506
Total	1,397,818	13	1,375,785

Stopping cVDPV:: Polio SIAs for 2015 with focus on cVDPV- type 2 circulation (5/8 SIAs tOPV rounds)



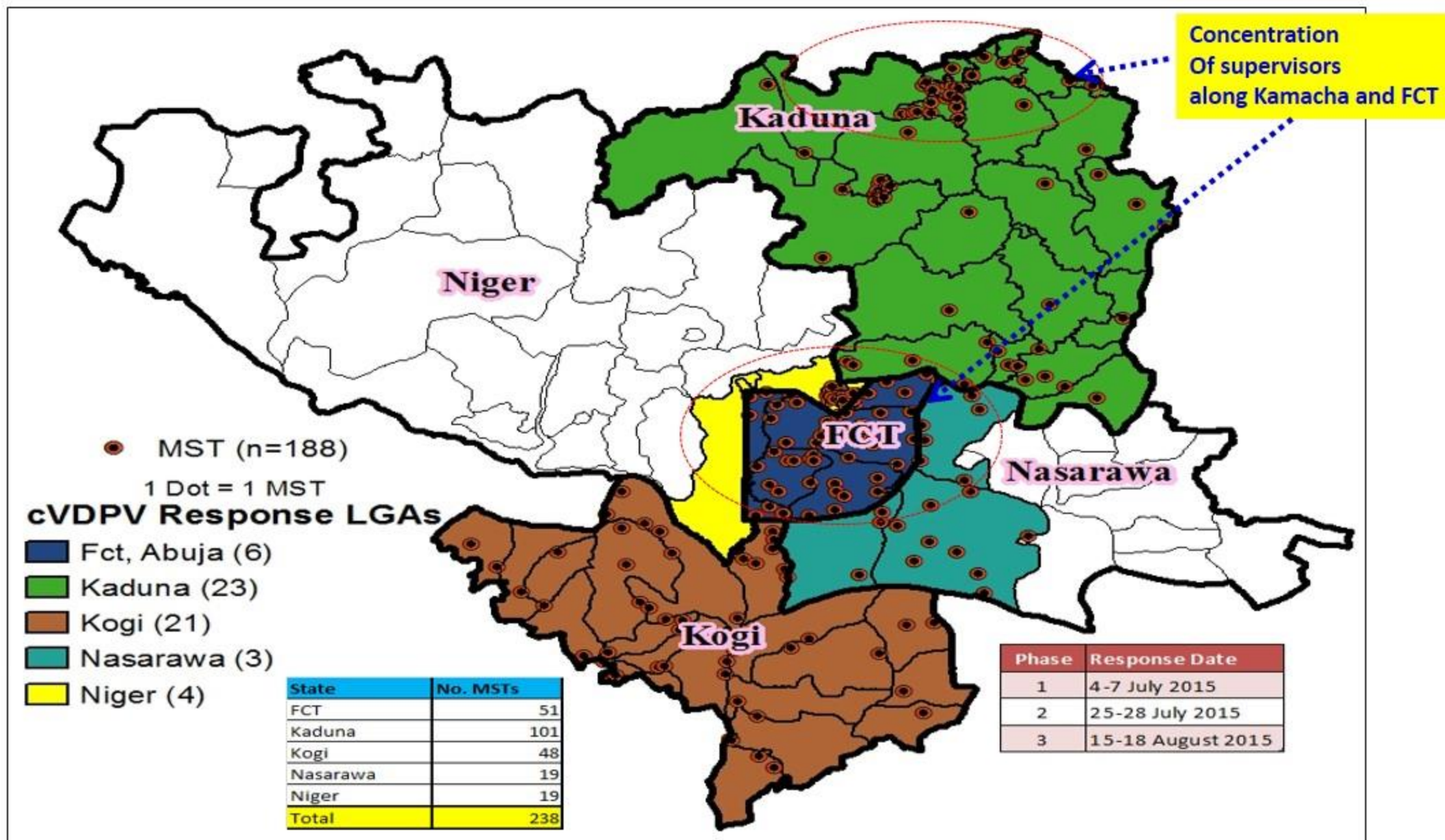
Improving Population Immunity along Streams of Interest (Kamacha stream in Kaduna and Wudil stream in Kano)



State	Number of LGAs	Number of Wards
Kaduna	10	50
Kano	17	62
Bauchi	1	3
TOTAL	28	115

Environmental cVDPV was detected in Kamacha River in Zaria LGA of Kaduna state on **20th January and 4th March 2015**, active case search was done and outbreak response was conducted

Intensified targeted supervision of mop-up responses: cVDPV Outbreak Response July 4-7 IPDs



Zaria sanctuary : Response to cVDPV from the Environment

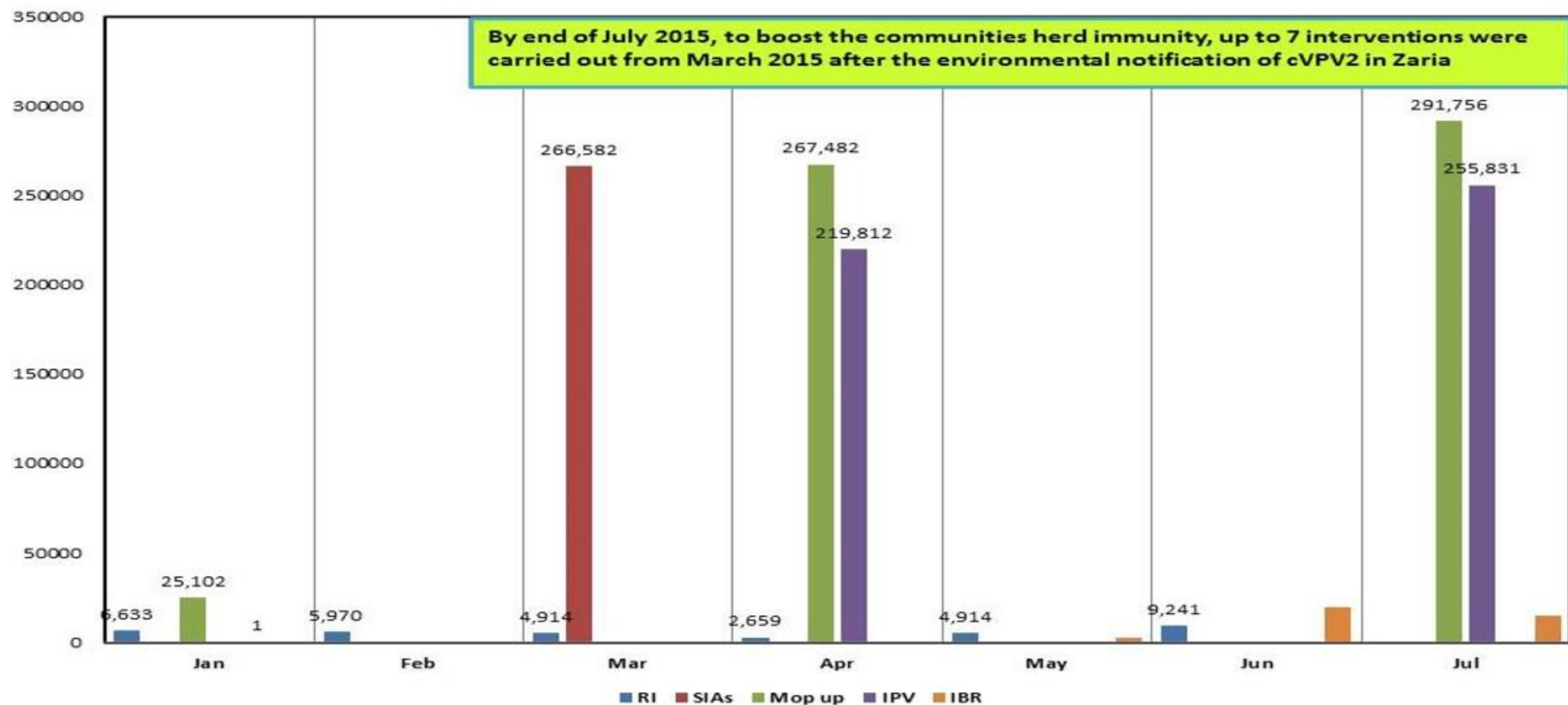
State	LGA	S/No	Date	Scope	Type of Antigen	Status	
Kaduna (Environmental cVDPV)	Zaria /Kamacha Tudun Bridge	1	Date of Sample collection	20 th Jan 2015 4 th March 2015			
		2	Date of Notification	7 th April 2015			
		3	1 st OBR	12 th -17 th March 2015	National IPDs	tOPV	Timely
		4	2 nd OBR	25 th – 28 th April 2015	Kaduna 2 LGAs (Zaria, Sabon Gari) Sokoto 3 LGAs (S/North, S/South & Wamakko)	tOPV+IPV	Timely
		5	3 rd OBR	27 th Apr – 2 nd May	June SIPDs (11 HR states + Adamawa & Taraba)	tOPV	Timely

Zaria : Also benefited from the mop up responses to the cVDPV case in FCT

State	LGA	S/No		Date	Scope	Type of Antigen	Status
FCT (cVDPV2 from AFP)	Kwali	1	Date of Onset	16th May 2015	Target Population – 8,566,460		
		2	Date of Notification	26th June 2015			
		3	1 st OBR	4th -7th July 15	State-wide (FCT, Kaduna, Kogi),3 LGAs in Niger,4 LGAs in Nasarawa	tOPV	Timely
		4	2 nd OBR	25th-28th July 15	With July SIPDs	tOPV	Timely
		5	3 rd OBR	15th -18th August 15	State-wide (FCT, Kaduna, Kogi),3 LGAs in Niger,4 LGAs in Nasarawa	tOPV	Timely

Zaria sanctuary : Boosting immunity to cVDPV2 with total of 5 interventions (SIAs, mop-ups, IBR ,IPV, and RI)

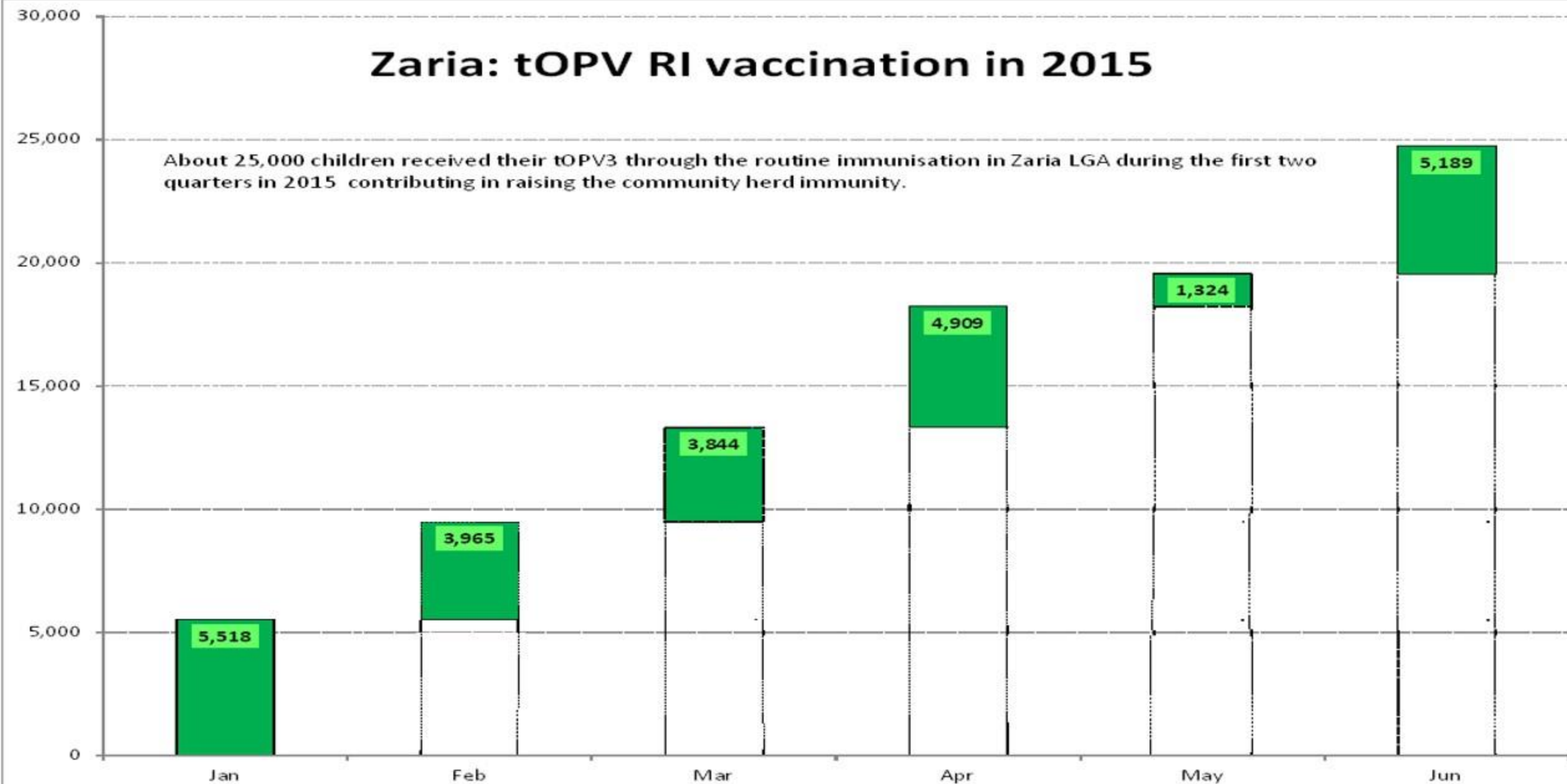
Zaria 2015 tOPV and IPV used



Boosting Population Immunity: RI Intensification in Zaria, Kaduna

Zaria: tOPV RI vaccination in 2015

About 25,000 children received their tOPV3 through the routine immunisation in Zaria LGA during the first two quarters in 2015 contributing in raising the community herd immunity.



cVDPV2 Case in Kwali, FCT

Geographic location	Gbesa settlement, Dafa ward, Kwali Area Council - FCT
Age	22 months
OPV Status (IPDs Campaigns)	4 doses
OPV Status (RI)	4 doses (name found in RI register)
Residence/Location	Not from Nomadic Family but in close proximity to Nomads
Parents' Social Status	Poor, highest education is secondary school
Residence	Rural, village
Status of RI Coverage in settlement	7 out of 30 children aged 0 - 5 years were zero dose for OPV
Nutritional Status	Malnourished and had measles at 6 months

Summary: Young male child of poor background, living in rural village with poor routine immunization coverage.

FCT: Details of response in Kwali, FCT

State	LGA	S/No		Date	Scope	Type of Antigen	Status
FCT (cVDPV2 from AFP)	Kwali	1	Date of Onset	16th May 2015	Target Population – 8,566,460		
		2	Date of Notification	26th June 2015			
		3	1 st OBR	4th -7th July 15	State-wide (FCT, Kaduna, Kogi),3 LGAs in Niger,4 LGAs in Nasarawa	tOPV	Timely
		4	2 nd OBR	25th-28th July 15	With July SIPDs	tOPV	Timely
		5	3 rd OBR	15th -18th August 15	State-wide (FCT, Kaduna, Kogi),3 LGAs in Niger,4 LGAs in Nasarawa	tOPV	Timely

What were the Qualities of Response : LQAS Performance for July – August 2015

Response 1: 4 - 7 July 2015



Response 2: 25 - 28 July 2015



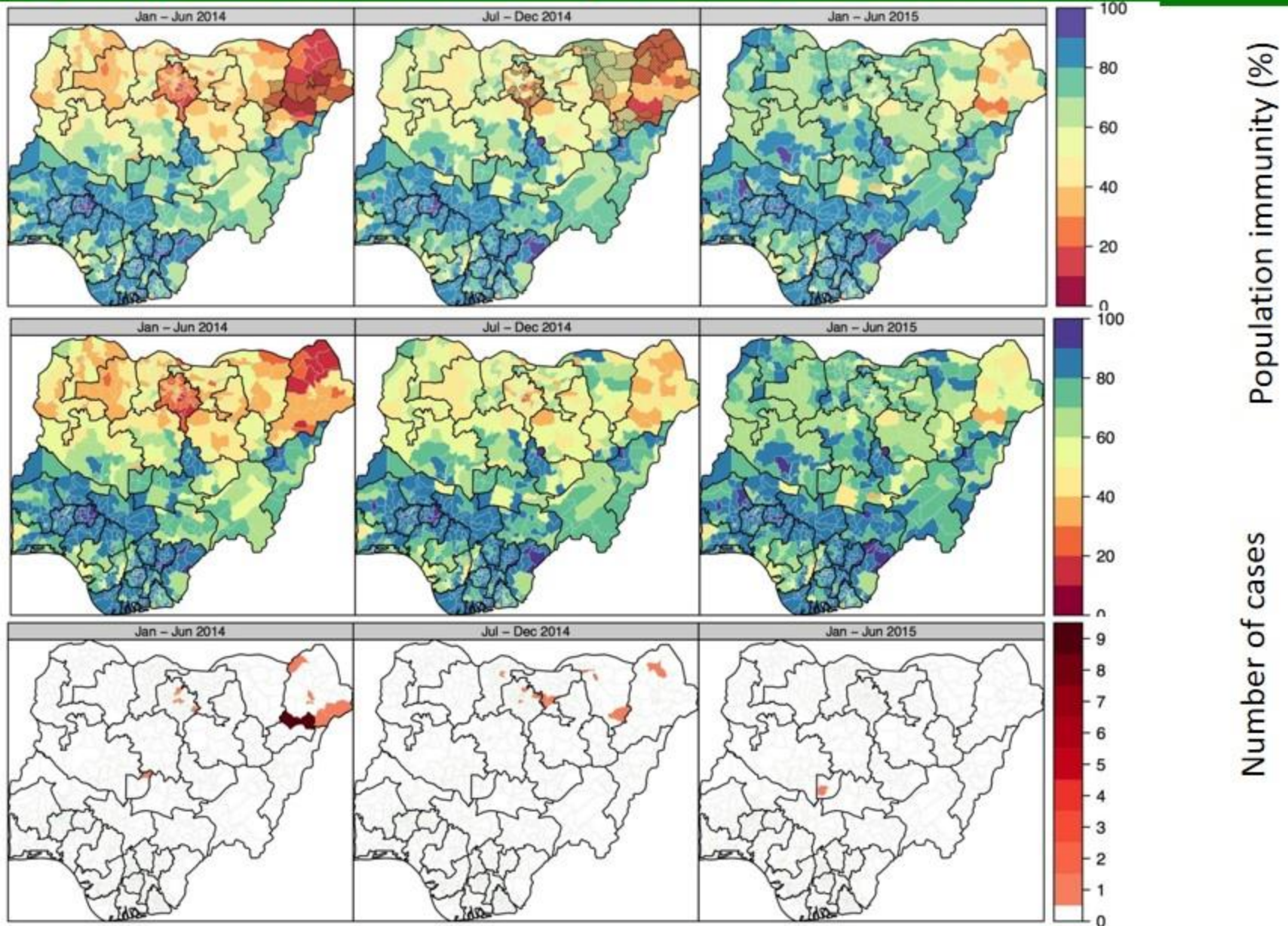
Response 3: 14 - 17 Aug 2015



Rising Population Immunity Profile to cVDPV2

Immunity estimates do not account for SIAs with IPV.

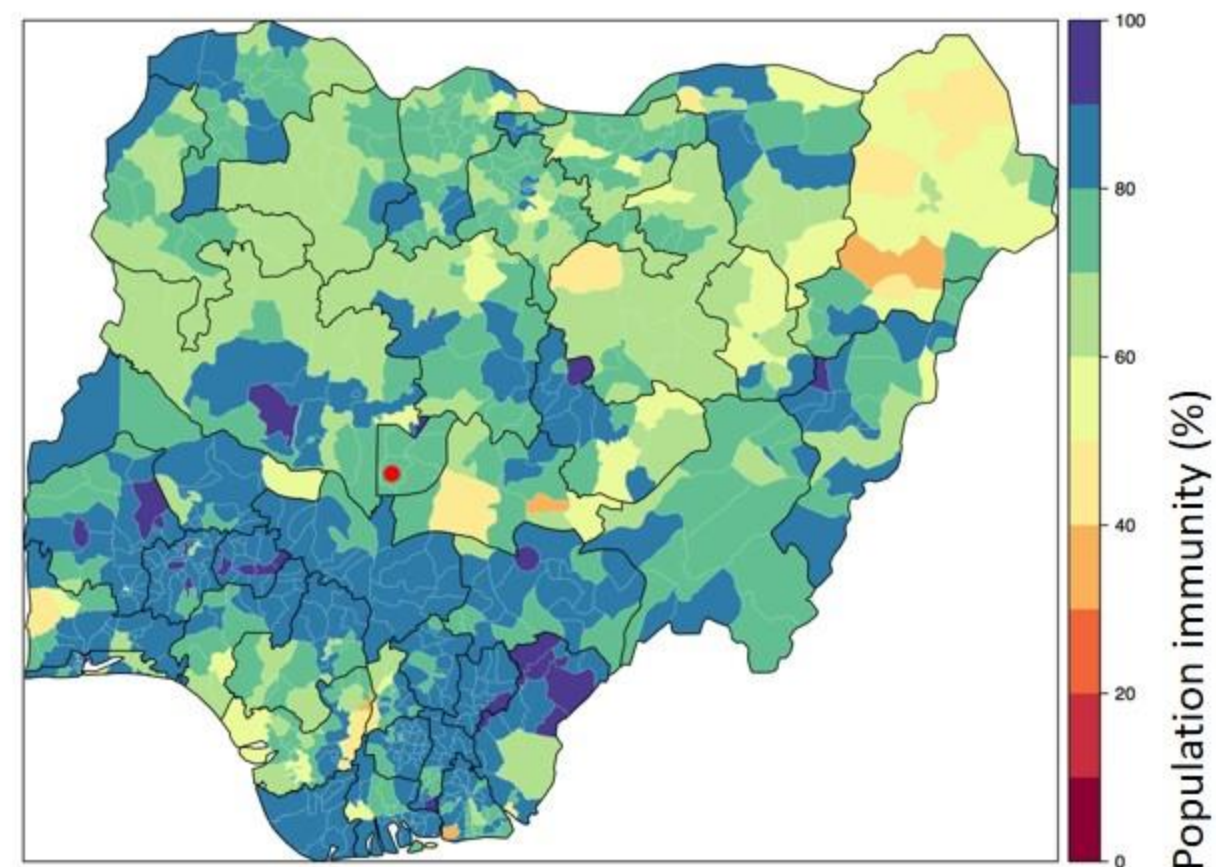
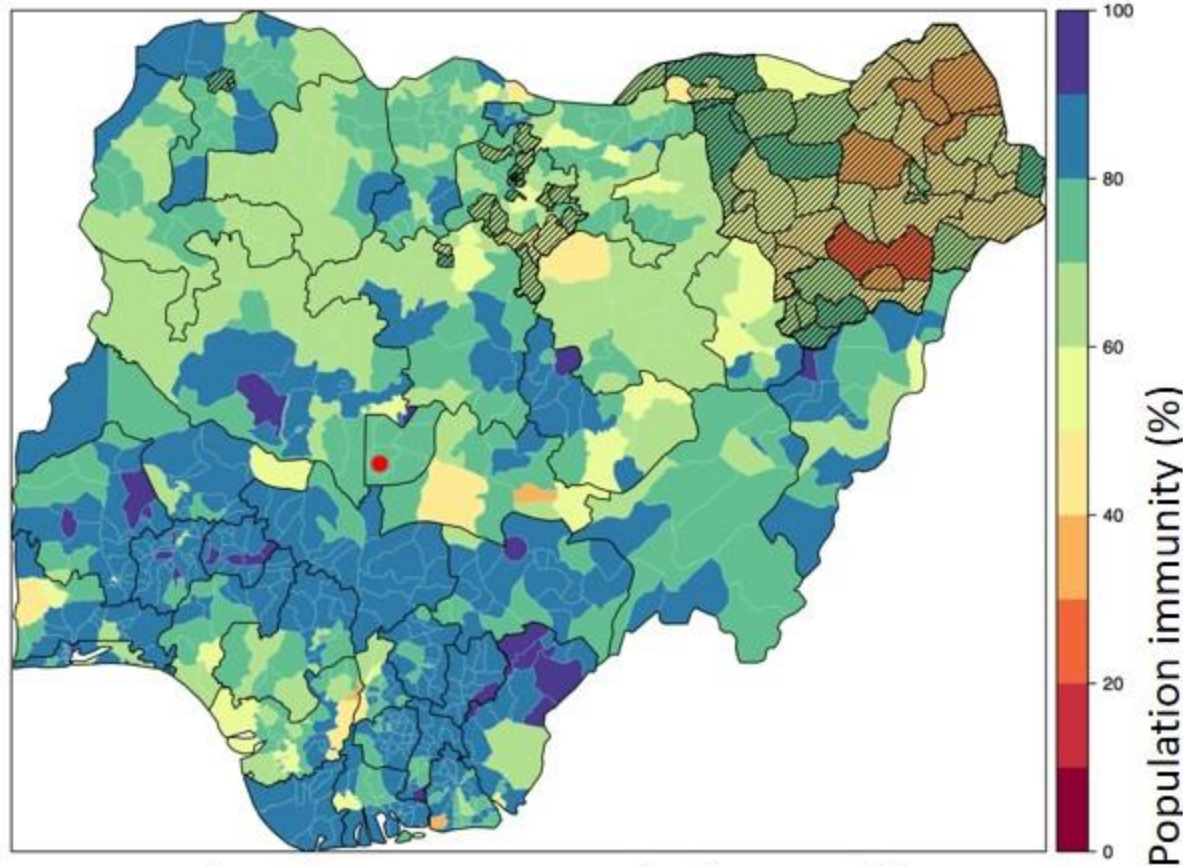
*Districts with IPV campaigns are shown by cross-hatching.



Immunity estimates accounting for SIAs with IPV.

cVDPV2 cases

Rising Population Immunity Profile to cVDPV2- Children 0-2 YEARS



Immunity estimates not accounting for SIAs with IPV.

Immunity estimates accounting for SIAs with IPV.

*Districts with IPV campaigns between January 2014 and June 2015 are shown by cross-hatching.

● indicates LGA location of most recently reported case

Reaching Chronically Missed Children Through Innovations

1



Health Camps

2



Attractive Pluses

Vetting the Programme to scale up what works and scale down what does not work

3



DOPV

- Approximately 3,300 health camps used during the July 2015 IPDs
- The evaluation study done supports the scaling up of health camps and \$20 million would be required for 2016 and 2017
- Directly Observed Polio Vaccination (DOPV)
- 578 CMAM sites

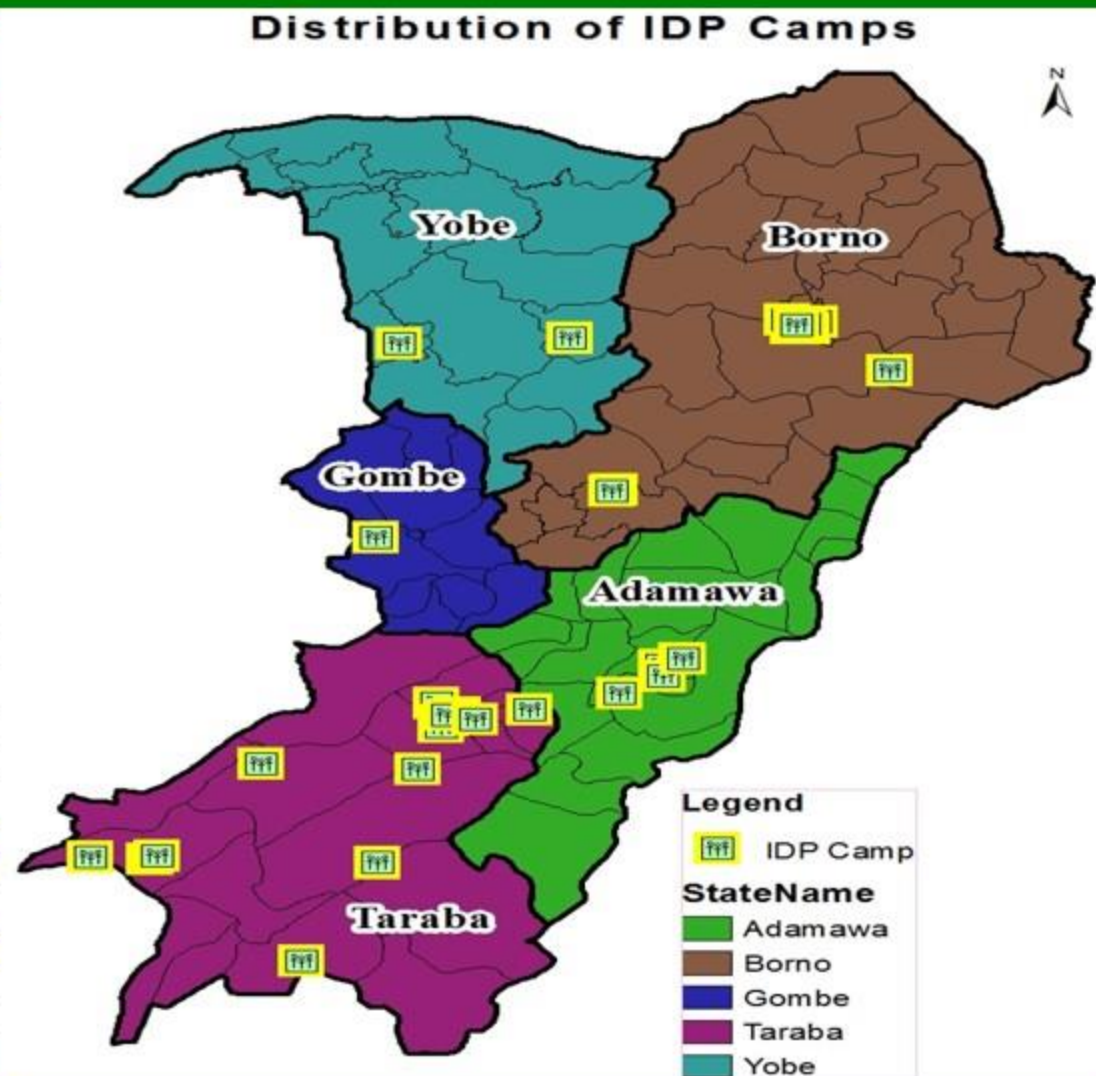
update

4



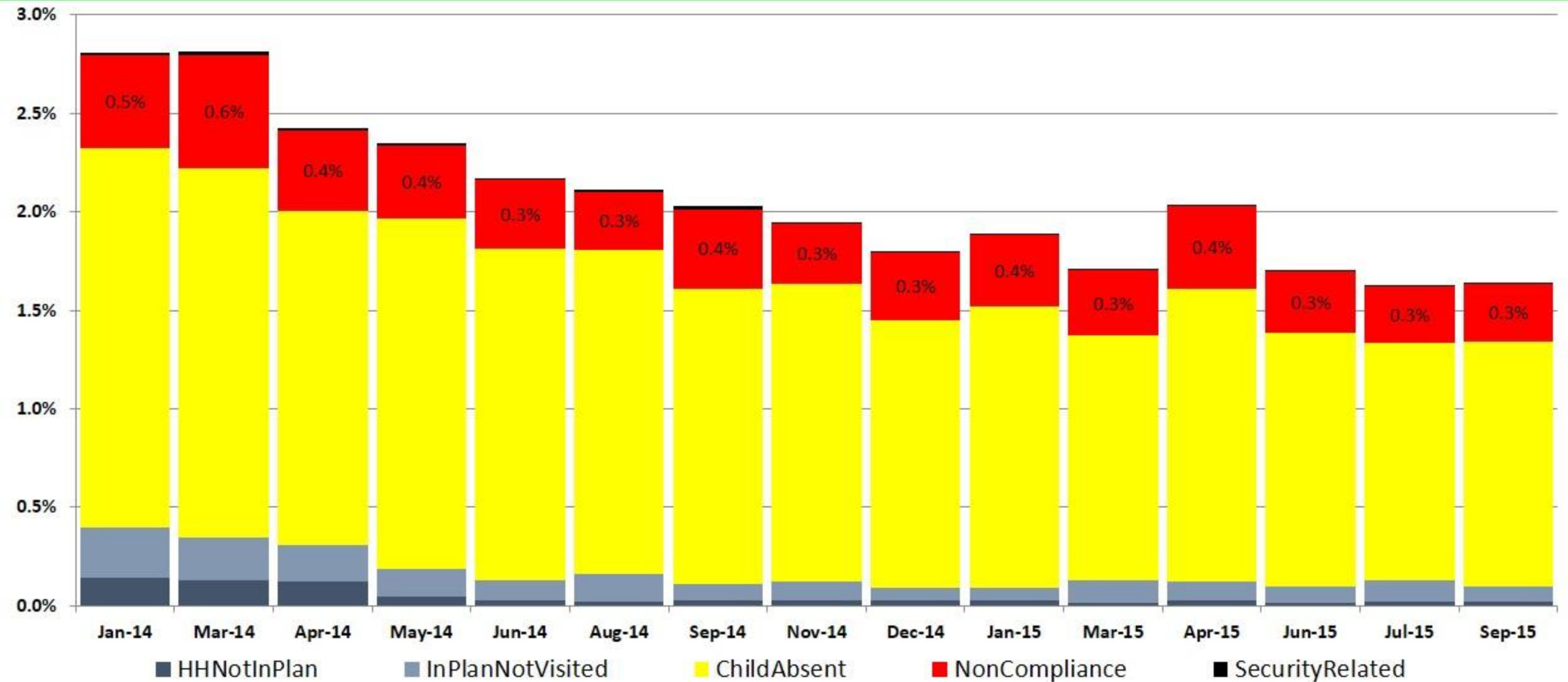
Community Clowns

LGA/State	# IDP Camps	Cumulative doses adminstere	Cumulative zero-dose	Cummulative IPV doses	# AFP Cases reported
Fufore	2	6229	42		
Girei	3	17061	50		
Yola North	1	1512	13		
Yola South	2	13369	57		
Adamawa	8	38171	162		
Jere	15	105995	1864	2430	2
Konduga	1	1412	70	439	0
Maiduguri	10	120737	1233	2204	4
Borno	26	228144	3167	5073	6
AKKO	1	1336	212	2	
Gombe	1	1336	212	2	
Ardo Kola	6	3637	95		
Bali	3	1483	29		
Donga	4	1497	20		
Gassol	1	436	20		
Jalingo	4	4313	101		
Karim Lamido	1	61	3		
Wukari	7	6145	143		
Zing	1	665	33		
Taraba	27	18237	444		
Damaturu	1	2022	36	1	
Geidam	1	3880	30	1	
Yobe	2	5902	66	2	
Logo	2	61	0		
Ukum	1	68	14		
Benue	3	129	14		
Jos South	5	129	0	237	0
Kanam	1	266	23	72	1
Quaan Pan	14	69	4	62	0
Wase	9	0	0	0	0
Plateau	29	464	27	371	1
Total	96	292,383	4,092	5,448	7

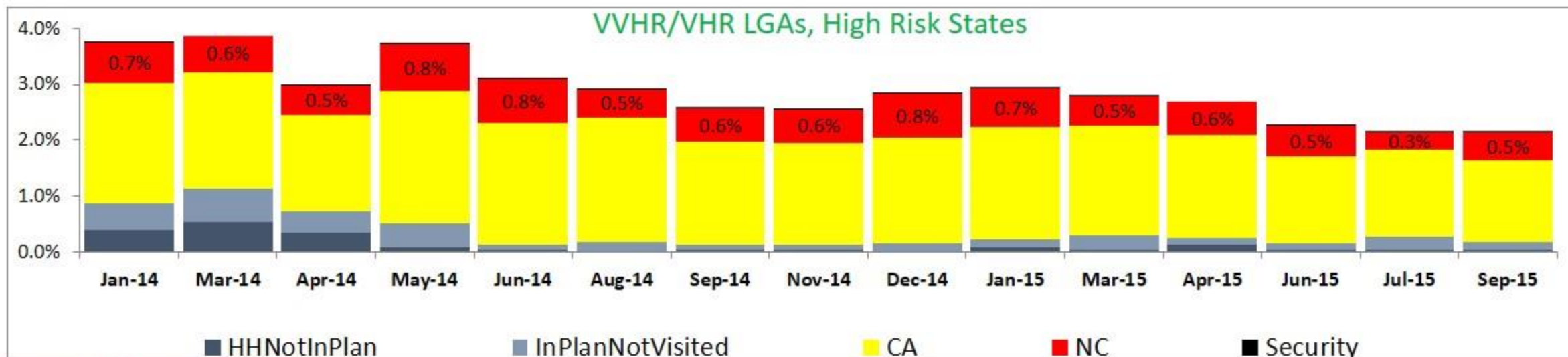
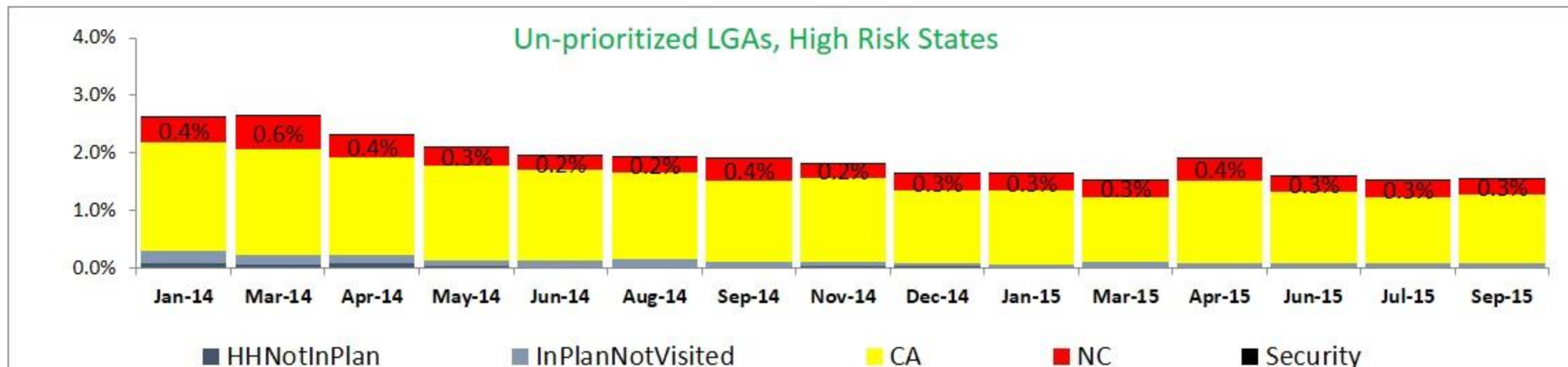


292,383 doses administered to children in IDP Camps : week 01 - 34

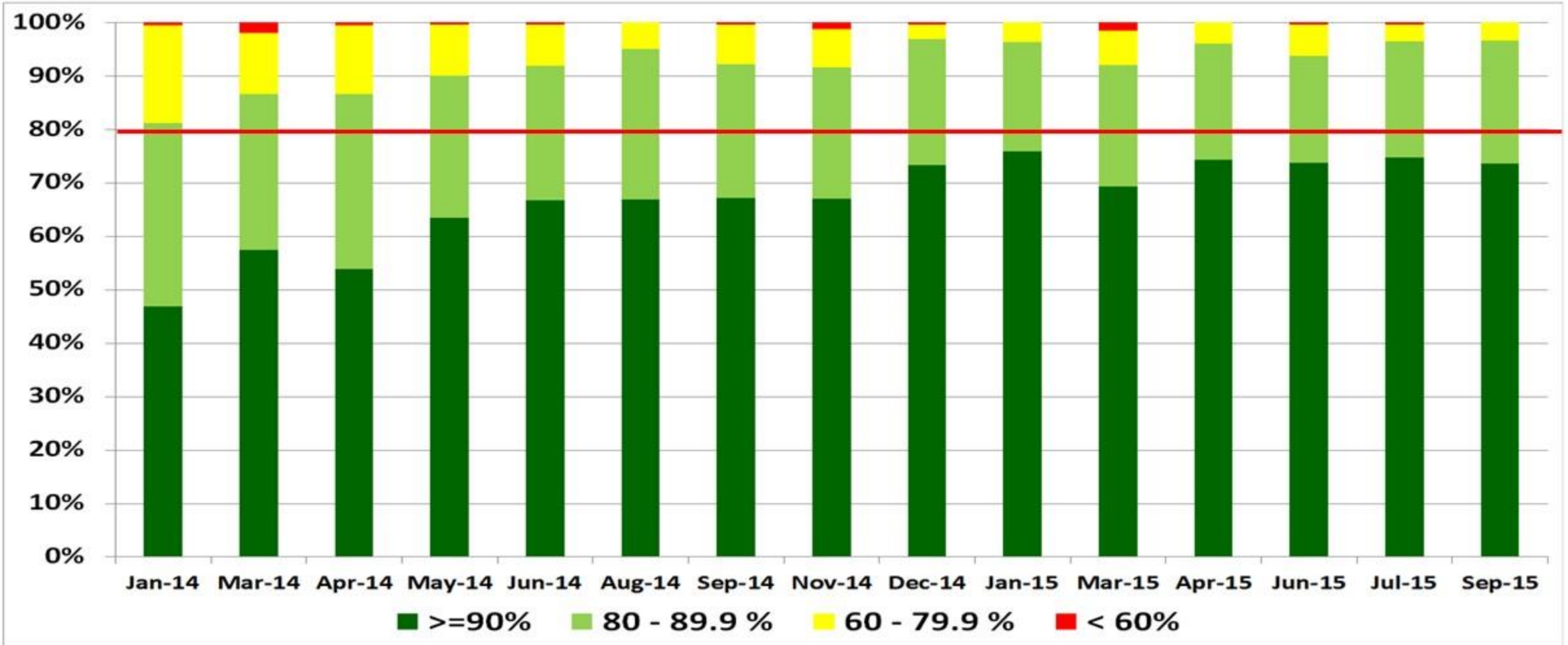
Continued focus on understanding reasons for missed children: Steady reduction in overall missed children



Overall reduction in missed children

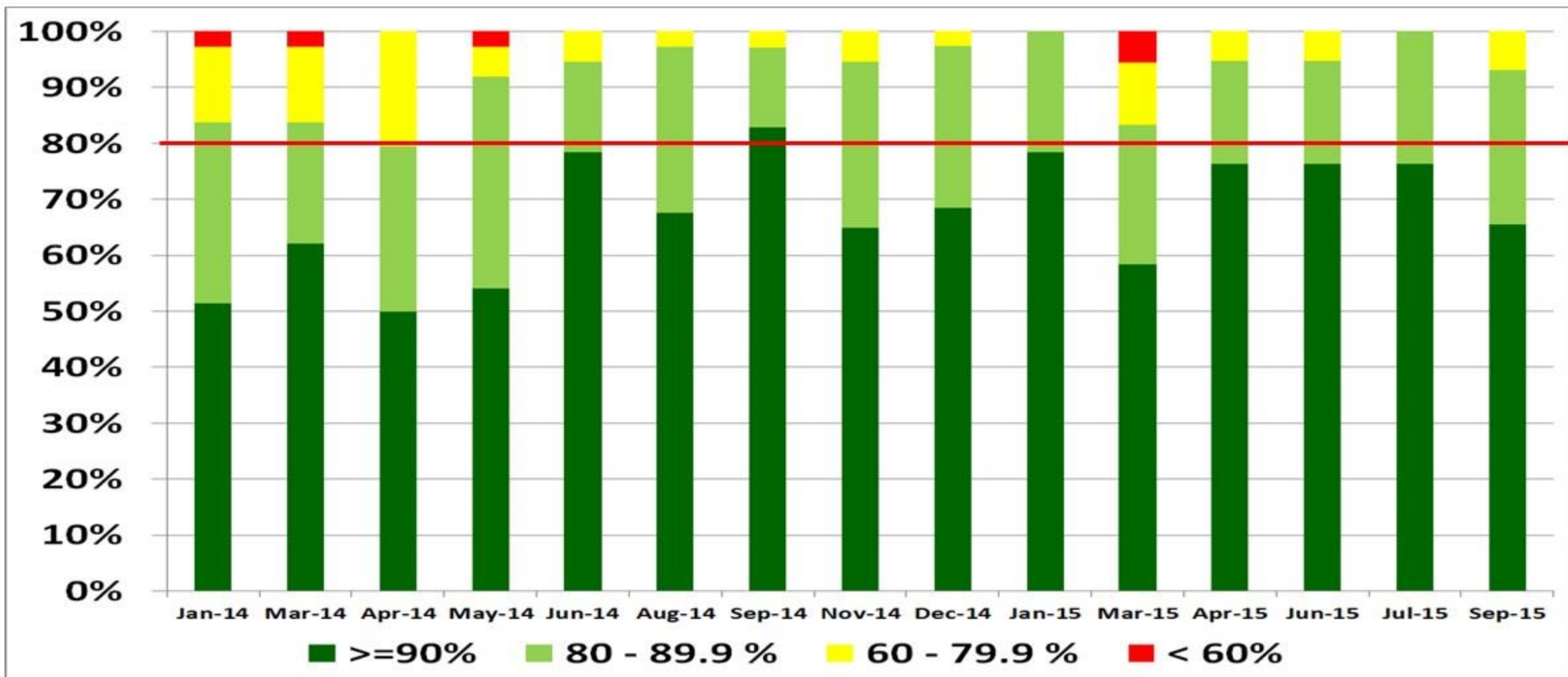


Trends in LQAs from the 11 High risk states



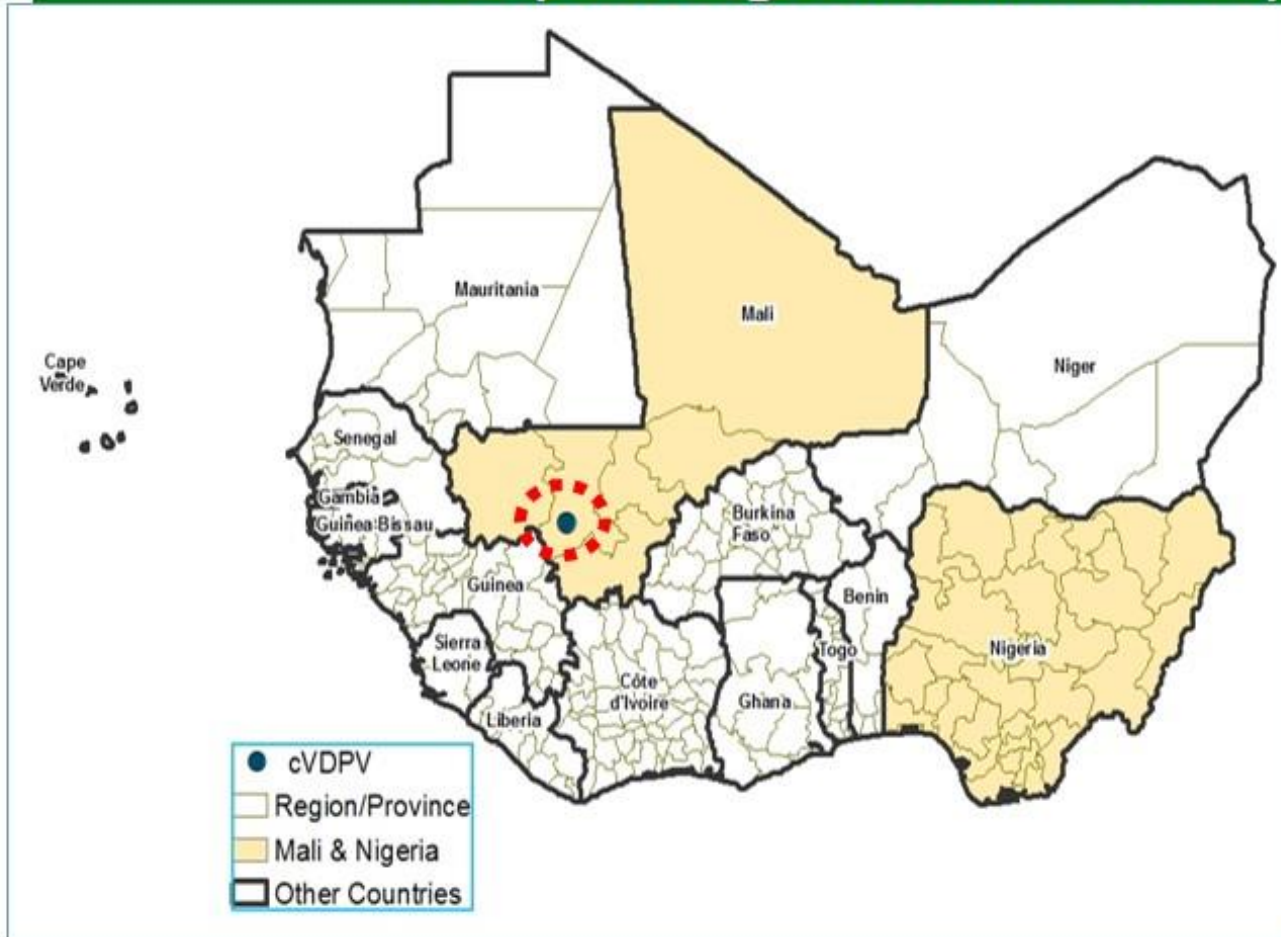
	Jan-14	Mar-14	Apr-14	May-14	Jun-14	Aug-14	Sep-14	Nov-14	Dec-14	Jan-15	Mar-15	Apr-15	Jun-15	Jul-15	Sep-15
<i>LGAs surveyed</i>	207	209	208	222	222	220	216	227	225	220	202	226	225	226	204
>=90%	47%	57%	54%	64%	67%	67%	67%	67%	73%	76%	69%	74%	74%	75%	74%
80 - 89.9 %	34%	29%	33%	27%	25%	28%	25%	25%	24%	20%	23%	22%	20%	22%	23%
60 - 79.9 %	18%	11%	13%	9%	8%	5%	7%	7%	3%	4%	6%	4%	6%	3%	3%
< 60%	0%	2%	0%	0%	0%	0%	0%	1%	0%	0%	1%	0%	0%	0%	0%

Trends in LQAs from the 38 VERY High Risk LGAs



	Jan-14	Mar-14	Apr-14	May-14	Jun-14	Aug-14	Sep-14	Nov-14	Dec-14	Jan-15	Mar-15	Apr-15	Jun-15	Jul-15	Sep-15
<i>LGAs surveyed</i>	37	37	34	37	37	37	35	37	38	37	36	38	38	38	29
>=90%	51%	62%	50%	54%	78%	68%	83%	65%	68%	78%	58%	76%	76%	76%	66%
80 - 89.9 %	32%	22%	29%	38%	16%	30%	14%	30%	29%	22%	25%	18%	18%	24%	28%
60 - 79.9 %	14%	14%	21%	5%	5%	3%	3%	5%	3%	0%	11%	5%	5%	0%	7%
< 60%	3%	3%	0%	3%	0%	0%	0%	0%	0%	0%	6%	0%	0%	0%	0%

Responding to the risk of Importation of cVDPV in Mali



- Sensitization of Port Health Staff to vaccinate travellers with OPV.
- Intensification of cross border vaccination with Niger, Benin Republic.
- Deploying of additional resources: Vaccines and logistics.
- Intensification of cross border surveillance activities.

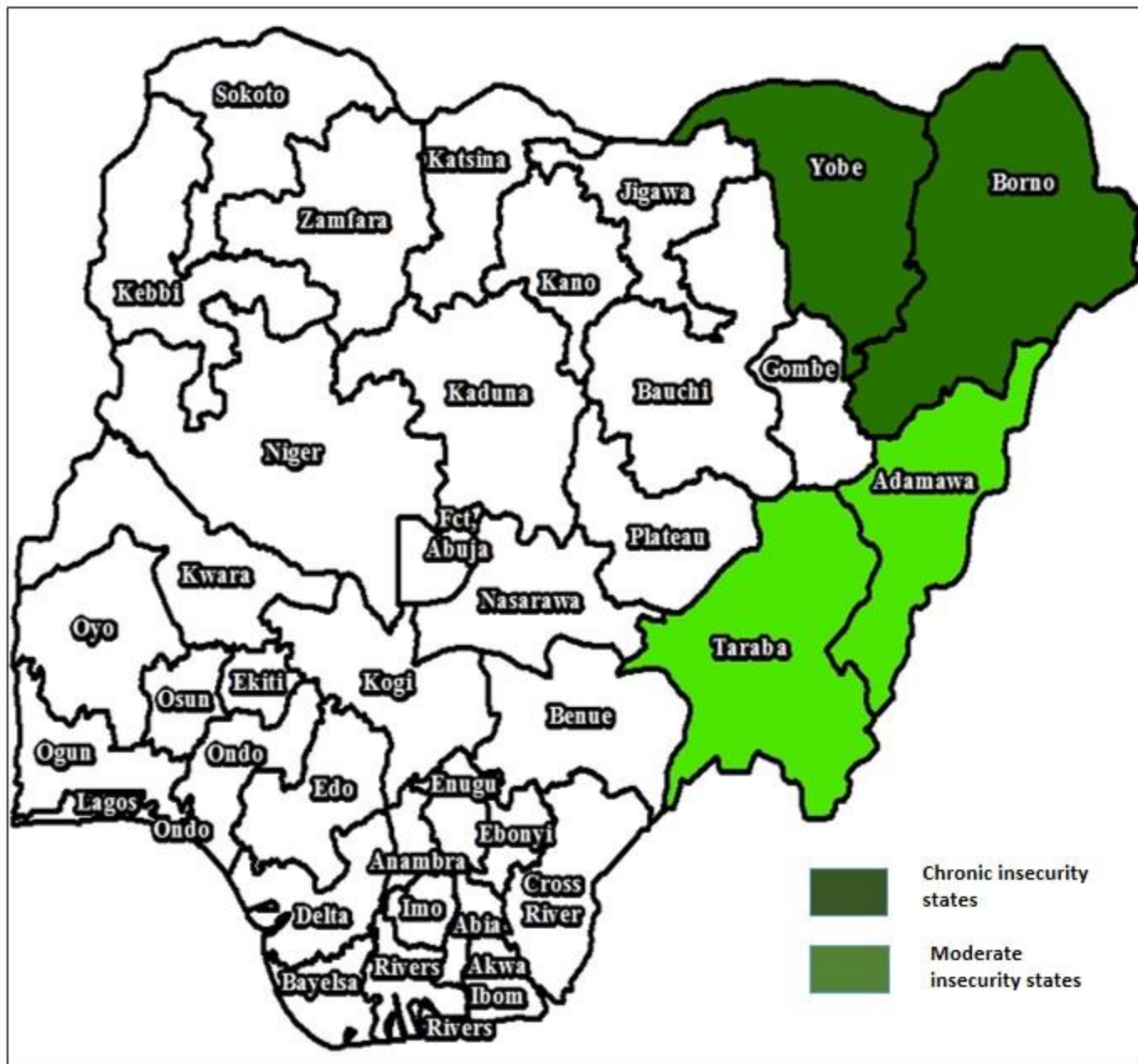
New cVDPV Threat in West Africa: Mali with the latest case

Infected LGA/District	Commune 3
Infected Province	Bamako
Date of Onset	20 July 2015
Closest match	2014 VDPV 2 from Guinea

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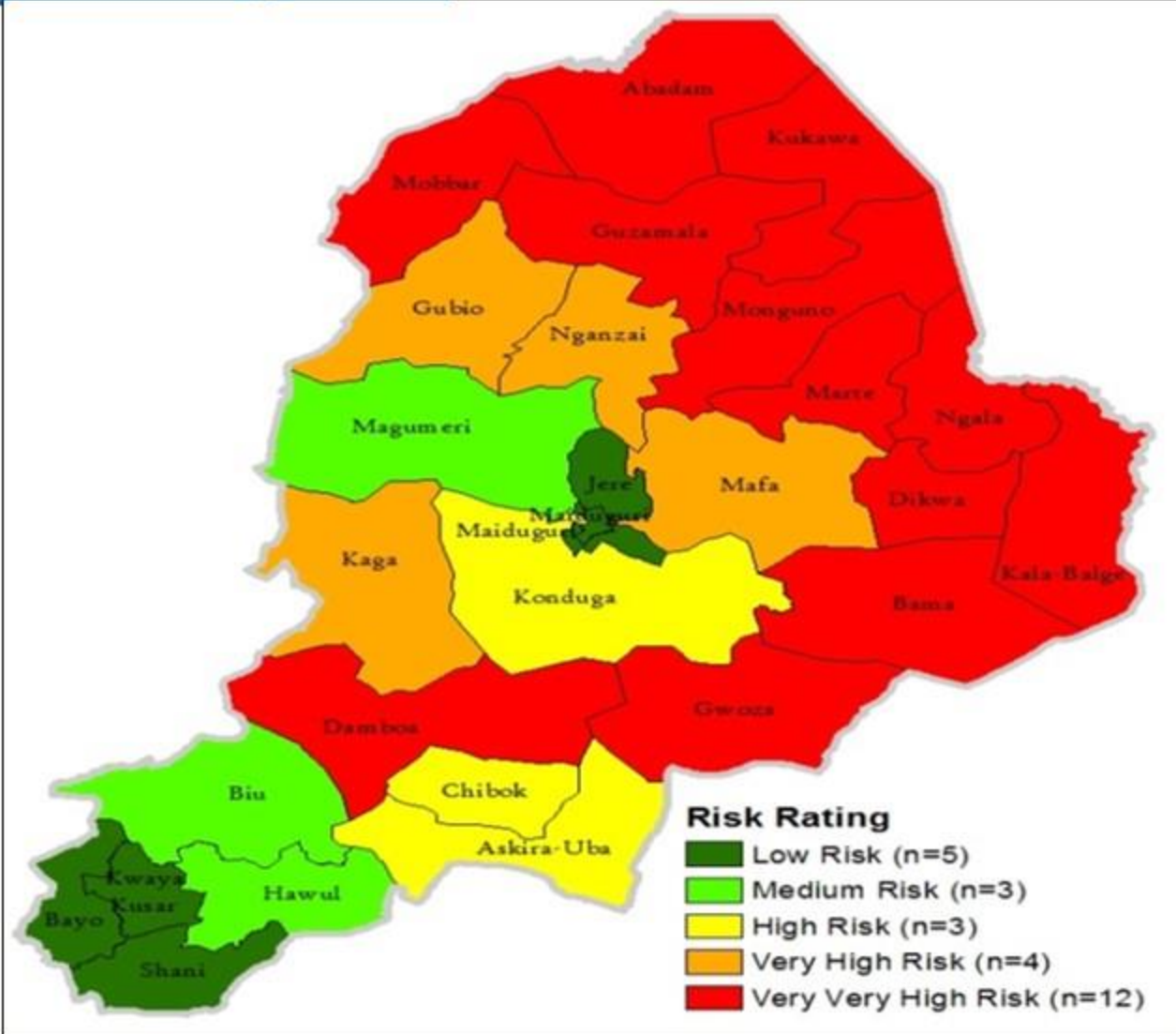
Insecurity continues to be the major challenge to the program in north-eastern Nigeria



- Immunization activities are still being affected by activities of insurgents in NE Nigeria
- 12/27 LGAs in Borno were completely inaccessible for SIAs in July 2015.
- 2/17 LGAs in Yobe (Gujba & Gulani) were completely inaccessible in July IPDs
- 3/21 LGAs in Adamawa were affected by the insurgency.
- 4/16 LGAs in Taraba.
- In some LGAs where campaigns took place, not all wards were covered

We have categorized the LGAs and Wards based on level of insecurity, and tailor made strategies to reach inaccessible children

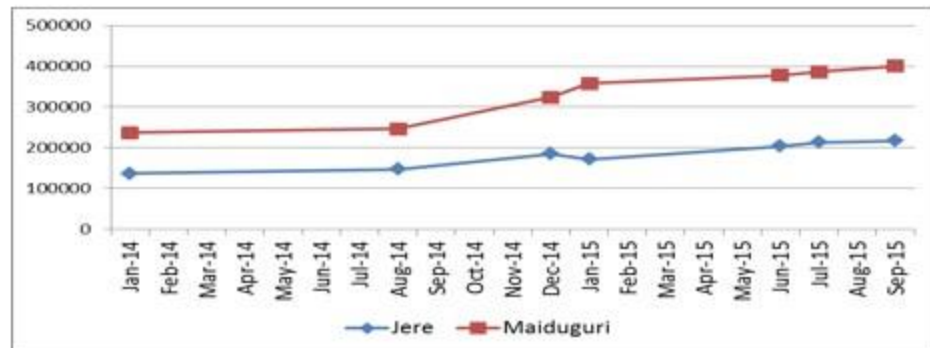
LGA Risk Categorization



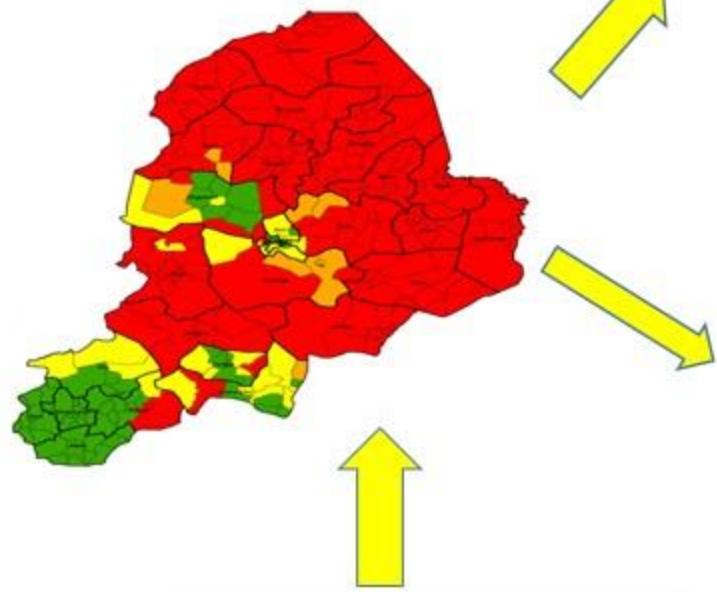
Category	LGAs	Accessibility to PEI Activities	Customized Strategies
Low Risk	Bayo	Fully accessible	All
	Shani		
	Kwaya Kusar		
	Maiduguri		
	Jere		
Medium Risk	Magumeri	> 80% accessible	PHT, Hit and Run , Market and local transit immunization, Hard to Reach,
	Biu		
	Hawul		
High risk	Konduga	60-70% accessible	PHT, Hit and Run, Free Child health
	Askira/Uba		
	Chibok		
VHR	Gubio	>50%	Hit and Run, free Child health
VHR	Nanzai		
VHR	Mafa		
VHR	Kaga		
VVHR	Bama	Highly volatile	Completely Inaccessible
	Dikwa		
	Gwoza		
	Damboa		
	Ngala		
	Abadam		
	Marte		
	Kala-Balge		
	Monguno		
	Guzamala		
	Mobbar		
	Kukawa		

Children have moved to other LGAs, states, countries etc.

40% (249,607) increase in number of children immunized in Jere & MMC between Dec 2013 and Sept 2015



Relatives in Borno/other States; neighboring countries



As of August 8, 2015, an estimated 250k children are trapped in the inaccessible LGAs



In September 2015, 2183 children were liberated from Gujiba and Gulani LGAs of Yobe State.

Special Interventions Summary in the North East Zone as at week 36

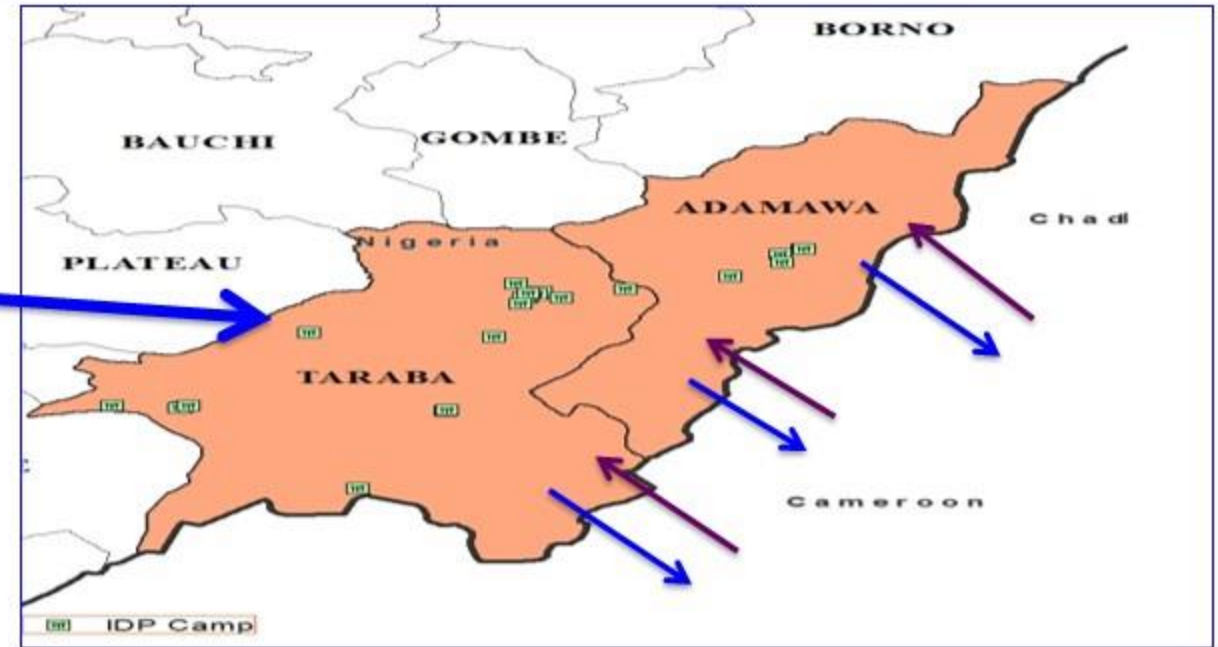
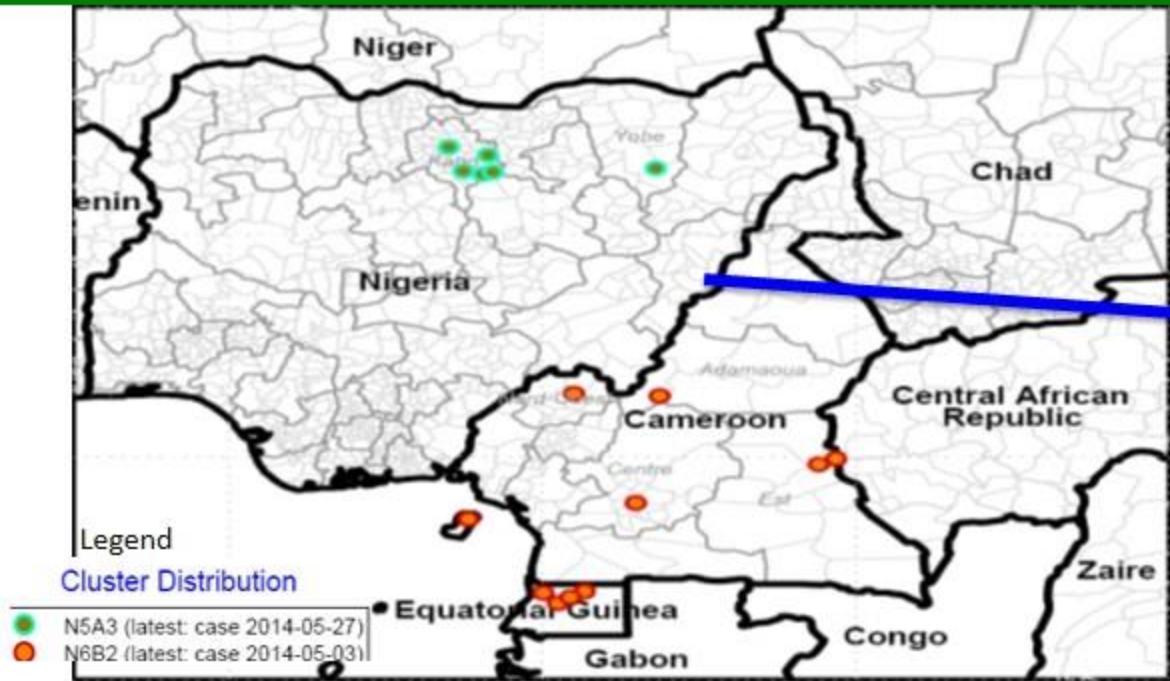
Interventions	Borno	Yobe	Taraba	Adamawa	Total	Type of vaccine
Fire walling	33,033	44,984			78,017	bOPV/tOPV
PHT	329,470	454,338		24,648	808,456	bOPV/tOPV
Market/ IBPT	286,329	14,431	56,362	36,401	393,523	tOPV
Cross Border		11,634	46,345	53,962	111,941	bOPV
Hit & Run	45,874	1,350,213		6,730	6,730	bOPV
IDPs	228,144	5,902	18,237	55,130	1,451,217	bOPV
Hospital		14,908		38,171	290,454	tOPV, bOPV, tOPV-IPV)
Nomadic		24,457			14,908	tOPV
Total	922,850	1,920,867	120,944	215,042	3,179,703	

A total of 3,179,703 doses administered through Special interventions in 4 states

Other Strategies for Security Compromised areas.

- To disaggregate IDPs data based on children reached from inaccessible LGAs
- To document the consolidated impact of the various strategies contributing to the reduction in missed children by area.
- Search teams engaged to locate incoming IDPs and informal IDP camps.
- Plans with timelines for vaccinating children when schools are re-opened.
- Vaccination of Newly Accessed Children from security compromised areas.
- Enhanced Health Services in selected health facilities e.g. CMAM

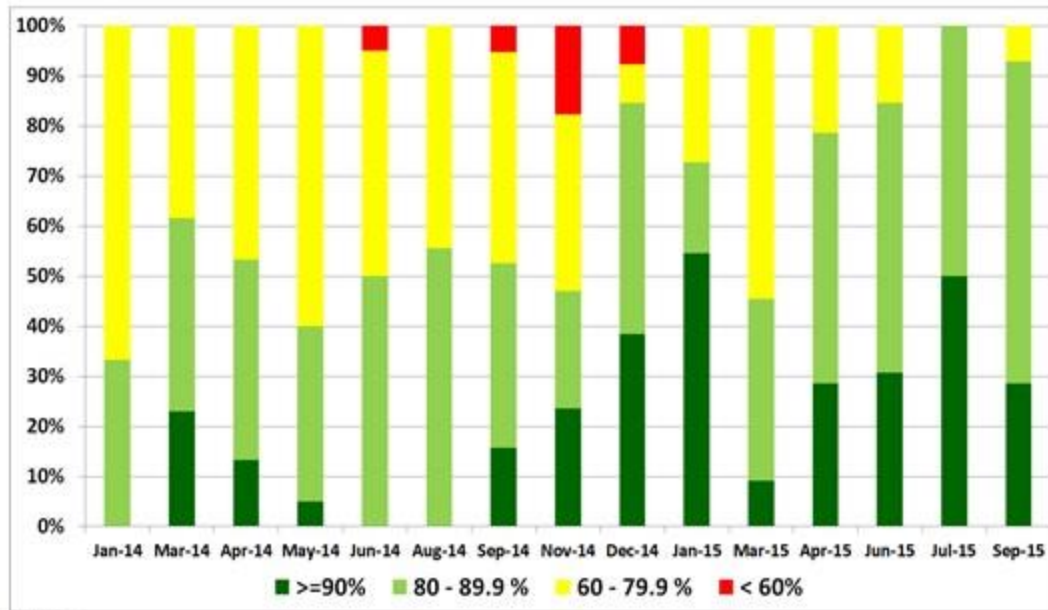
Closing Population Immunity Gaps in Adamawa and Taraba states



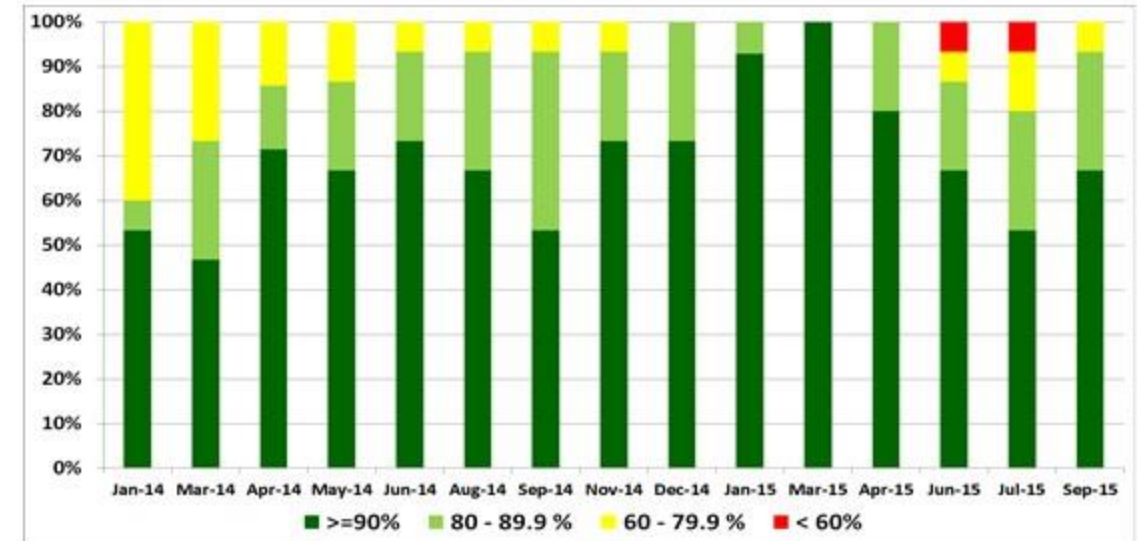
- **Surge capacity strengthened: 71 Personnel** from the Federal Government and partner agencies were deployed to both states for 3 months (August 2015 – October 2015) to support with SIAs, routine immunization and surveillance activities
- **Use of innovative strategies: DOPV implemented** in 7 LGAs in Taraba and 3 LGAs in Adamawa; immunization in **20 IDP camps** in Adamawa and in 8 IDP camps in Taraba
- **Strengthening of border vaccinations** between both states and Cameroon and Chad: immunization at **36 international border points** in 9 LGAs in Adamawa and in 4 LGAs in Taraba

Trends of LQAS: Borno, Yobe, Kano and Kaduna states

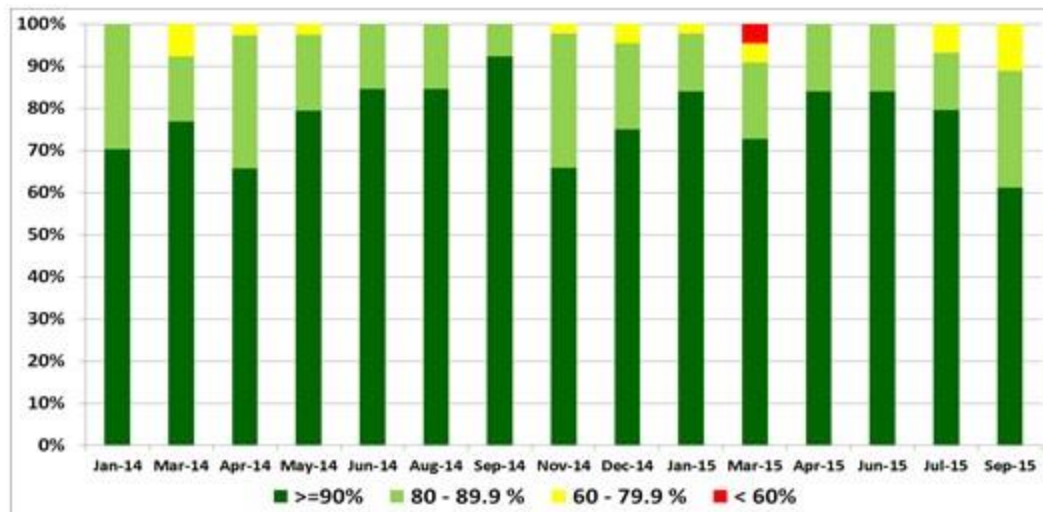
BORNO



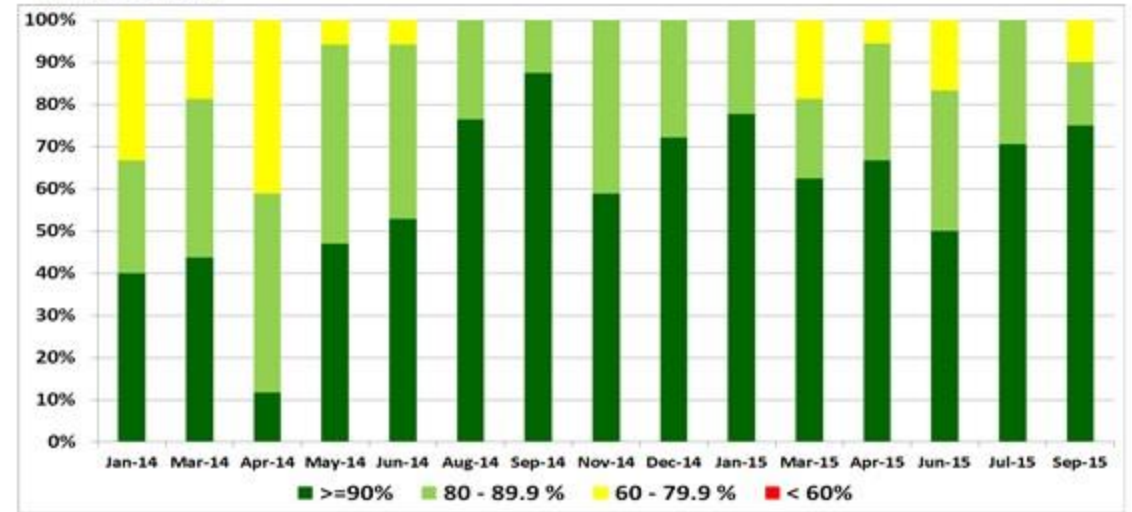
YOBE



KANO



KADUNA



Outline of Presentation

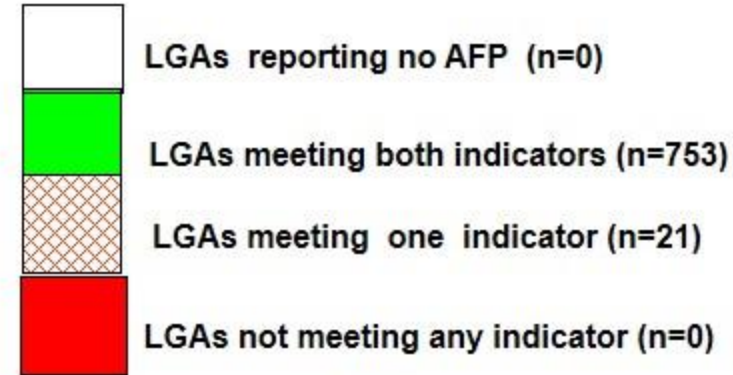
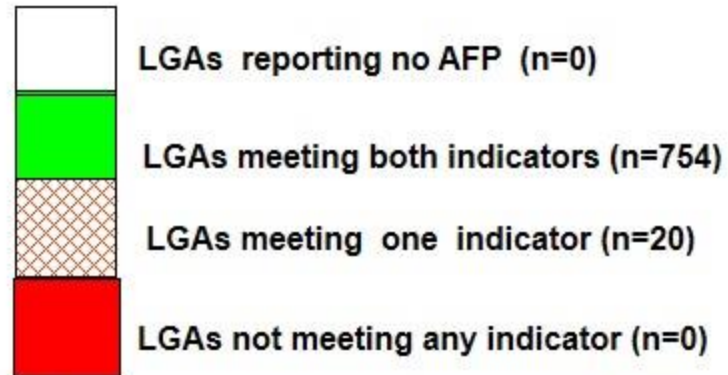
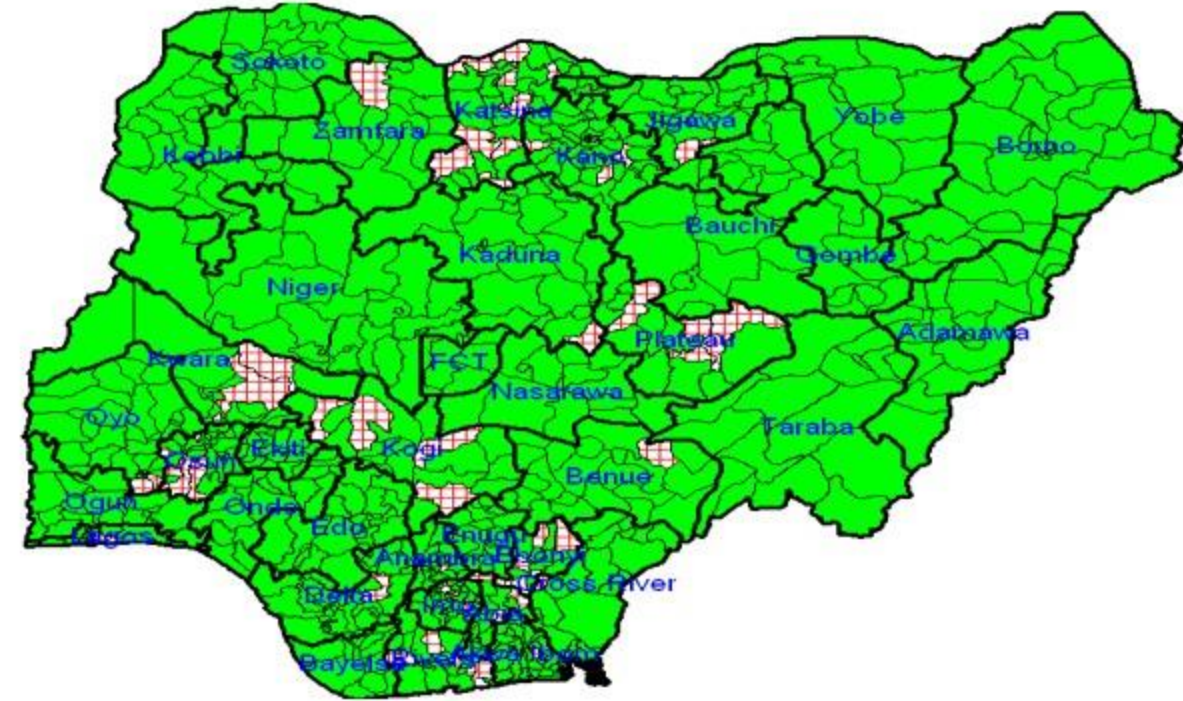
1. WPV and cVDPV Epidemiology
2. Strategies to stop transmission of cVDPV in Nigeria
3. Efforts to reach children in security compromised areas of Borno and Yobe
- 4. Surveillance**
5. Challenges facing the programme
6. Next Steps

LGAs that have reported at least 1 AFP case and achieved 2 AFP Surveillance core indicators, as at week 37, 2014 & 2015

2014



2015



Two AFP surveillance core indicators are NP AFP rate $\geq 2/100,000$ children under age of 15 years and % stool adequacy of $\geq 80\%$

Increasing sensitivity of surveillance through increase in trainings, sensitizations and active case search

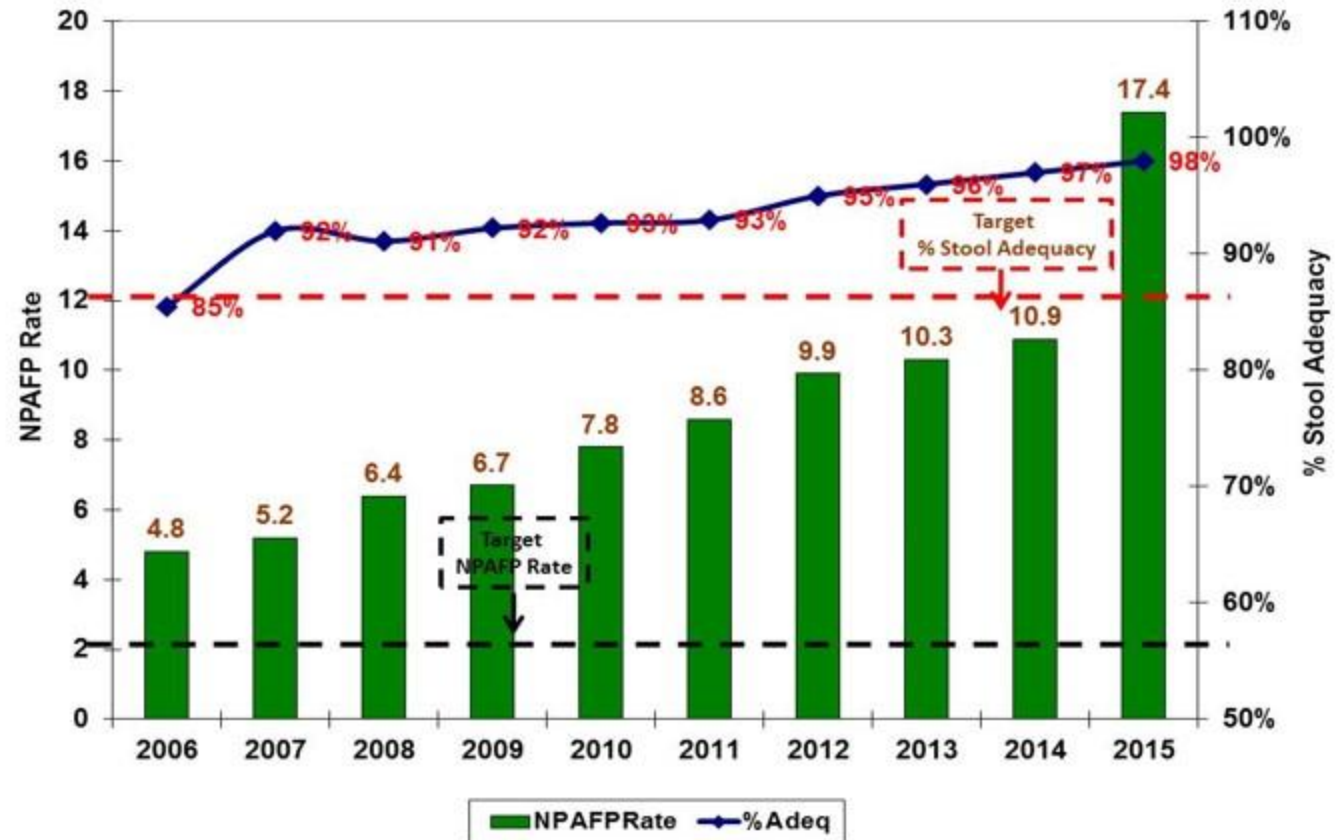
- **Sensitizations:**

- clinicians: 11, 831
- **Community Informants: 17, 668**
- Professional associations: 670
- Physiotherapists: 41

- **Trainings:**

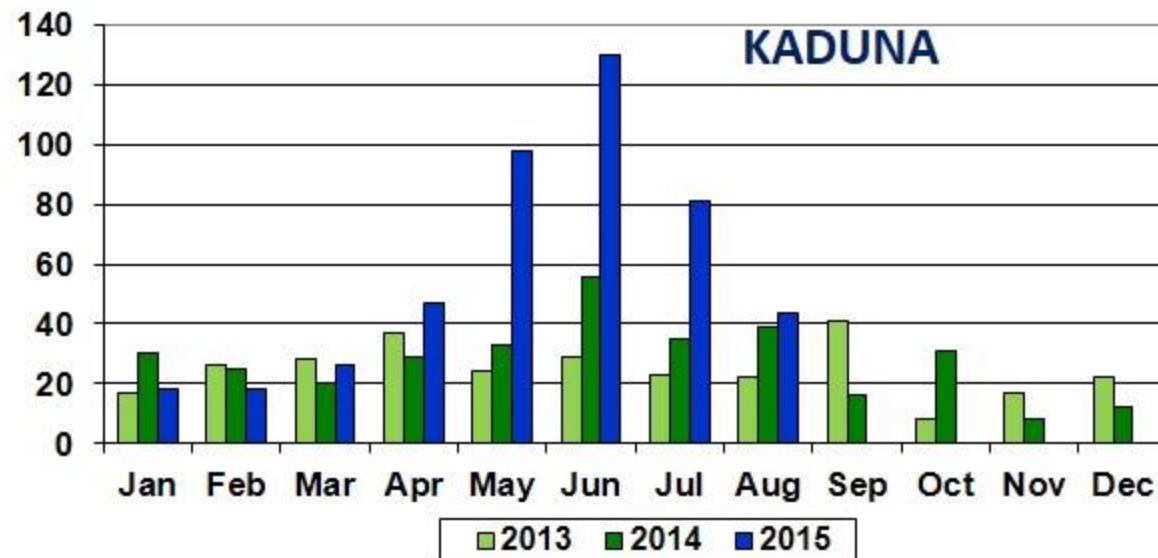
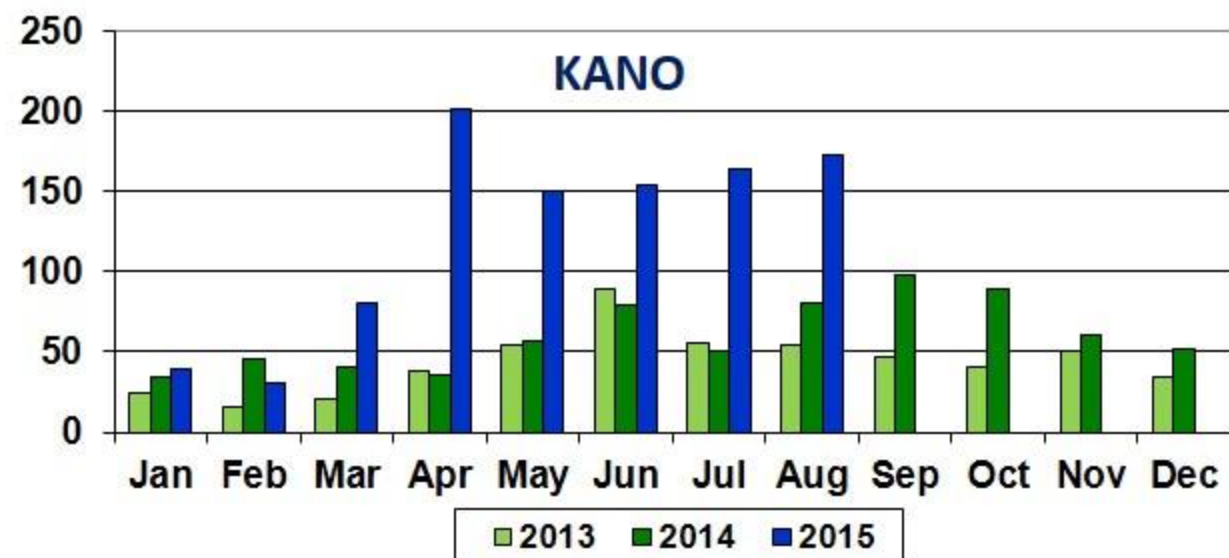
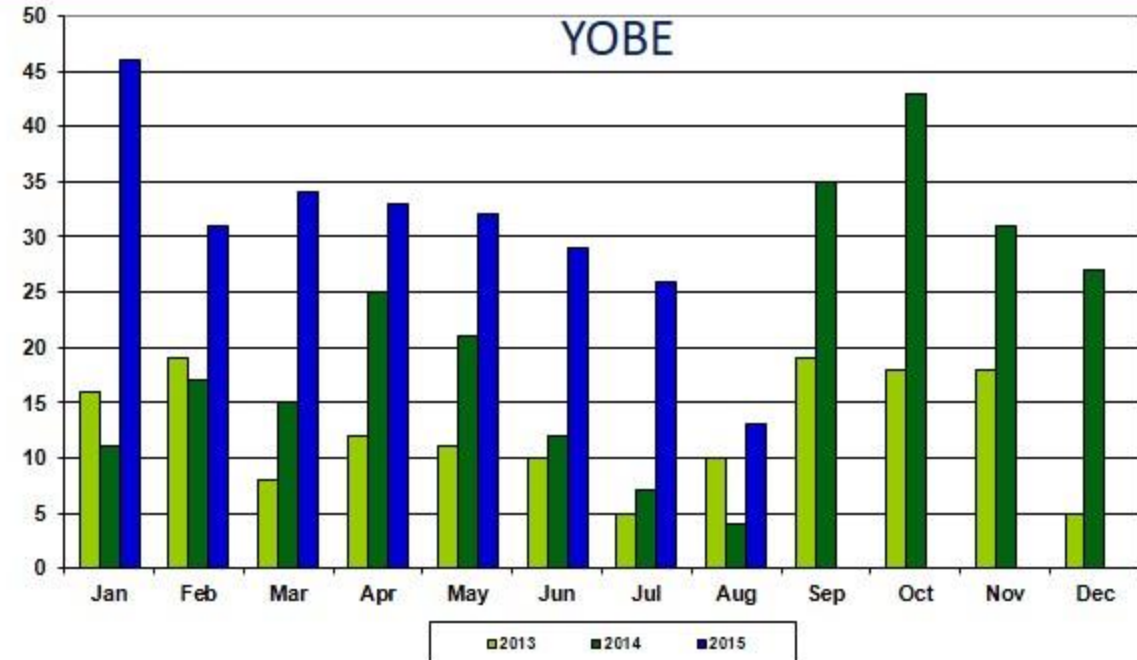
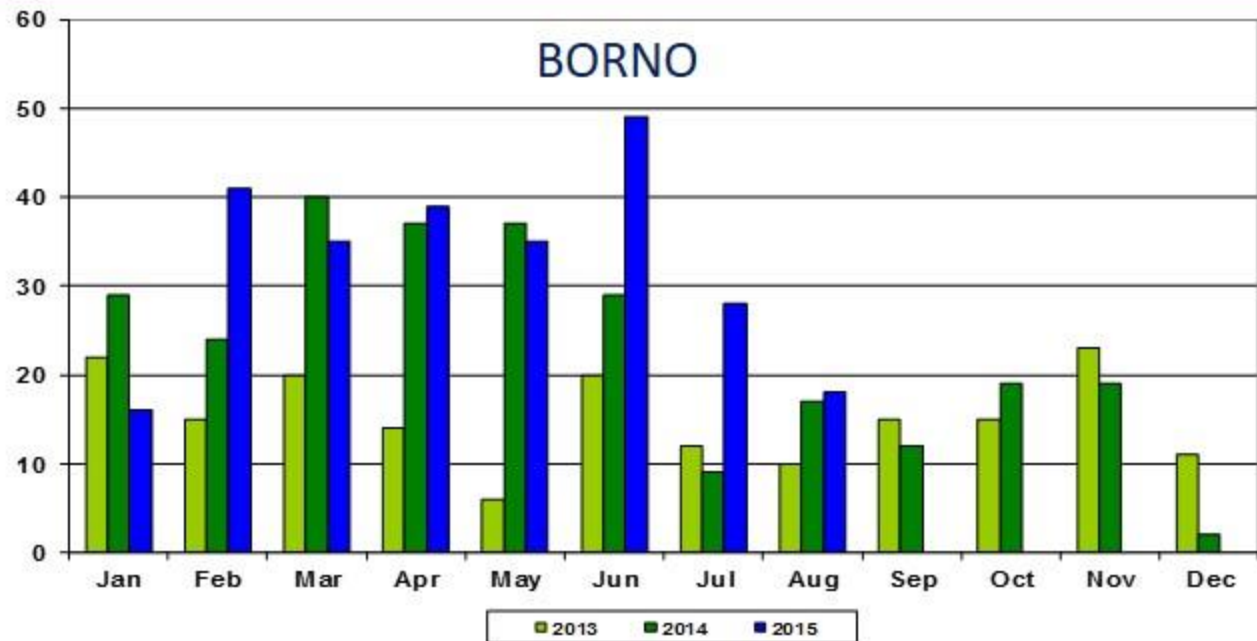
- DSNOs and assistants: 2, 887
- Focal persons: 4, 590
- FV 644
- **VCMs 12, 258**
- NYSC 24

- Conduct Active Case Search high priority HFs and in IDP camps
- Cross border activities (Sokoto Taraba) with increased reporting of cases



9, 869 AFP cases reported Jan – Aug, 2015

Borno, Yobe and Adamawa: Trends of AFP cases reported monthly Jan – Aug 2013 – 2015



Surveillance response to cVDPV₂: FCT and Kaduna

Surveillance performance in Kwali LGA 2015: NPAFP 27,5 Stool adequacy: 100%. Case reported by Community informant.

Response:

- Immediate investigation <48hrs
- Conducted **Retroactive case search in 3 wards**, reviewed health records (no AFP found)
- Immediate Immunization around cases in June, Mop up response 2 - 7 July, **LQAS: Cov >90%**
- Training of **DSNOs, Clinicians, Community informants** done
- Supervision activities, **community stool survey** done

Community stool sampling results

23 stool samples were collected from contacts (3) and non-contacts (18) in Kwali LGA, FCT. These were from persons in same ward with case and other wards.

Results:

18 stools = negative (at Primary Isolation)

03 stools reveal polio virus and ITD carried out and results = Sabins

Conclusion: All stools from contacts and non-contacts are **negative for WPV and VDPV**.

In Kaduna state, detailed Retroactive case search that involved 196 surveyors; 35 AFPs were found and all are in the Database.

Outline of Presentation

1. WPV and cVDPV Epidemiology
2. Strategies to stop transmission of cVDPV in Nigeria
3. Efforts to reach children in security compromised areas of Borno and Yobe
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- 5. Challenges facing the programme**
6. Next Steps

Current Challenges

- Insecurity in the North Eastern part of the country
- New political office holders at national and state levels
- Funding gap: \$203 Million in 2016 and \$237 Million in 2017
- Global vaccine availability
- Bridging surveillance gaps
- Complacency and persistent Health Workers' strike

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1. Strengthening Political Support



High Level advocacy meeting with Mr. President and Governors of the 11 polio high risk states

Setting the context: New political leadership

- EOC advocacy plan being implemented for the new government leadership at each level
 - Letters on 1-year without a case to Mr President & Governors, Sultan, CAN President, Governor's Forum, National Economic Council
 - Briefing of NGF Chairman
 - Meetings with LGA Chairmen taking place at state level
 - Partner agency briefings with new Governors
 - Meetings with Northern & Nigeria Governor's forum – immunization to be a standing agenda item
 - Updated Abuja Commitments and Dashboard being finalized
- Strong media plan implemented across partners to manage 1-year without a polio case & beyond
 - Overarching message of 'cautious optimism' captured; most media captured message that polio is not over
 - Strong coverage in national, international & social media

Next Steps Cont.d

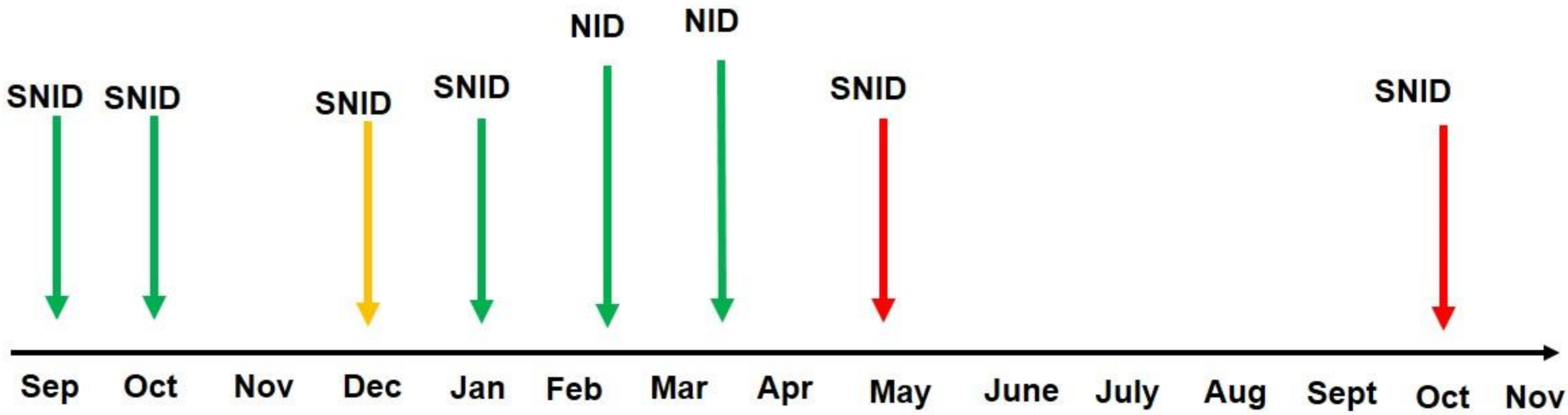
2. Ensure a polio free Nigeria and achieve certification status by 2017
3. Intensified Routine Immunization to raise population immunity
4. Reaching children in security compromised areas.
5. Conducting quality SIAs with the best tools to interrupt cVDPV2 transmission.
6. Intensification of surveillance
7. Timely and robust response to any outbreak
8. Intensify cross border vaccination against importation.

9. Continued focus on understanding missed children

- Detailed data analysis to understand reasons for missed children
- Tailored approaches during/in-between campaigns:
 - DOPV
 - Social mobilization
 - Hard-to-reach outreach project
 - Health camps in non-compliant areas/access issues
 - Market/outside/transit vaccination

ERC Endorsement: Implementation of high quality SIAs schedule

Sept 2015 – Oct 2016



Aggressive Mop-up Campaigns

↓ bOPV ↓ tOPV ↓ Schedule & Vaccine type to be confirmed based on tOPV-bOPV switch & epidemiology

Plans for SIAs: 2016 - 2018

Year	Total Number of Rounds	Number of National Rounds	Number of Sub National Rounds
2016	5	2	3
2017	5	2	3
2018	4	2	2

ERC Approved SIAs Calendar for 2016

ERC Approved SIAs Calendar for 2016			
S/No.	Dates	Antigen & Scope	Comment
1	23 - 26 January	tOPV (SIPDs)	
2	27 Feb – 1 st March	tOPV (NIPDs)	
3	19 – 22 March	tOPV (NIPDs)	
Easter: 25 – 28 March			
18 April Switch Day (from tOPV to bOPV)			
4	14 – 17 May	bOPV (SIPDs)	
Ramadan: June 6 - 5 July			
5	15 – 18 October	bOPV (SIPDs)	
Eid El Kabir: 13 September			
Independence Day: 1 October			

Withdrawal of tOPV and replacement with bOPV: The Switch committee has been set up



Withdrawal of tOPV and
replacement with bOPV.

- Several meetings of the Switch Committee have been held at the National EOC
- The switch date for Nigeria is **18th April 2016**.

Timeline of the legacy plan till December 2015

#	Activity	Participant(s)	Location	2015		2015		2015		2015		2015		2015	
				Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		
	Preparation phase														
	Planning meetings														
1	1st Legacy planning meeting	EOC	Abuja												
2	2nd Legacy planning meeting	EOC	Abuja												
3	3rd Legacy planning meeting	EOC	Abuja												
4	4th Legacy planning meeting	EOC	Abuja												
	Decision														
5	Collecting Background Documentation														
6	Budgeting the transition plan														
7	Transition plan endorsement by the ICC														
8	Designing the Process														
9	Arranging meetings with Ntl programmes														
10	Arranging meetings with donors community														
11	Arranging meetings with donors community														



Legacy Working Group meeting at the National EOC

➤ The ICC Legacy Working Group has had several meetings. The latest meeting was held on 4th August 2015 and an activity plan was developed for each phase of the transition plan. This is being tracked by the National EOC.

➤ Consultants have been hired to record the current inventory of all resources from all agencies.

“The Federal Government will do its best to ensure that no child in Nigeria will ever again be paralyzed with polio. *We shall leave no stone unturned* to mobilize the necessary resources in place and efficiently finish the job of polio eradication.”

“I also seize this opportunity to *call on Governors, our Traditional and Religious Leaders, the private sector and & Mothers & Fathers to redouble their effort* in ensuring that every child and every newborn baby is vaccinated with the polio vaccine and other life saving routine vaccines.”

“I wish all Nigerians a polio free country in 2017.”

Statement by His Excellency President Muhammadu Buhari as he immunized his grand-daughter on the occasion of Nigeria attaining one year without a case of polio.





Thank You!

Extra Slides

Monitoring Surveillance Performance in North East Zone 2015 as at September 18, 2015: Borno State

Security Situation	LGA	AFP Expected	AFP Reported	% Stool Adequacy	NPAFP Rate	WPV	cVDPV	Number with lab Result	Number NPENT isolated	NPENT isolation rate	Number of sabin isolation	Sabin isolation rate
Low Risk	Askira/Uba	1	6	100	9.0	0	0	6	0	0.0	2	33.3
	Bayo	0	29	100	76.1	0	0	27	5	18.5	5	18.5
	Biu	1	5	100	5.9	0	0	5	0	0.0	0	0.0
	Chibok	0	4	100	12.5	0	0	4	0	0.0	0	0.0
	Hawul	1	10	100	17.2	0	0	9	2	22.2	2	22.2
	Jere	1	25	100	24.5	0	0	22	0	0.0	5	22.7
	Kaga	1	5	100	11.5	0	0	5	0	0.0	1	20.0
	Konduga	1	12	100	15.9	0	0	10	0	0.0	4	40.0
	Kwaya Kusar	0	7	100	25.7	0	0	6	1	16.7	0	0.0
	Mafa	1	10	100	20.0	0	0	8	3	37.5	2	25.0
	Magumeri	1	5	100	7.4	0	0	5	3	60.0	0	0.0
	Maiduguri	3	27	96	10.7	0	0	26	2	7.7	1	3.8
	Mobbar	1	7	100	12.4	0	0	7	0	0.0	4	57.1
	Nganzai	1	4	100	10.4	0	0	3	1	33.3	0	0.0
Shani	1	22	100	44.6	0	0	21	4	19.0	4	19.0	
High Risk	Abadam	1	7	100	14.5	0	0	7	1	14.3	1	14.3
	Bama	2	16	94	11.5	0	0	15	3	20.0	1	6.7
	Dambo	1	3	100	2.7	0	0	3	0	0.0	0	0.0
	Dikwa	1	6	100	11.7	0	0	5	0	0.0	0	0.0
	Gubio	1	10	100	13.6	0	0	9	0	0.0	2	22.2
	Guzamala	1	5	100	10.8	0	0	5	0	0.0	1	20.0
	Gwoza	2	6	100	4.5	0	0	6	1	16.7	1	16.7
	Kala/Balge	0	3	100	10.2	0	0	3	0	0.0	1	33.3
	Kukawa	1	14	93	14.2	0	0	13	2	15.4	4	30.8
	Marte	1	6	100	9.6	0	0	5	0	0.0	0	0.0
	Monguno	1	15	100	28.3	0	0	13	4	30.8	4	30.8
Ngala	1	4	100	3.5	0	0	4	2	50.0	1	25.0	
Borno		27	273	99	16.3	0	0	252	34	13.4	46	17.1

Monitoring Surveillance Performance in North East Zone 2015 as at September 18, 2015: Yobe State

Security Situation	LGA	AFP Expected	AFP Reported	% Stool Adequacy	NPAFP Rate	WPV	cVDPV	Number AFP with lab Result	Number NPENT isolated	NPENT isolation rate	Number of sabin isolation	Sabin isolation rate
Low Risk	Bade	1	26	100	38.2	0	0	22	10	45.5	3	13.6
	Bursari	1	17	100	32.0	0	0	17	0	0.0	1	5.9
	Damaturu	1	23	100	53.7	0	0	20	3	15.0	5	25.0
	Fika	1	16	100	24.0	0	0	15	1	6.7	4	26.7
	Fune	2	31	100	21.2	0	0	29	2	6.9	2	6.9
	Geidam	1	13	100	17.0	0	0	12	1	8.3	1	8.3
	Jakusko	1	16	100	14.4	0	0	16	2	12.5	3	18.8
	Karasuwa	1	18	100	34.6	0	0	16	3	18.8	2	12.5
	Machina	0	15	100	50.0	0	0	15	1	6.7	5	33.3
	Nangere	1	11	100	25.7	0	0	11	1	9.1	2	18.2
	Nguru	1	11	100	15.0	0	0	11	1	9.1	3	27.3
	Potiskum	1	11	100	11.0	0	0	11	3	27.3	4	36.4
	Tarmuwa	0	16	94	42.6	0	0	14	2	14.3	1	7.1
	Yunusari	1	10	100	16.3	0	0	10	0	0.0	3	30.0
Yusufari	1	17	100	31.5	0	0	16	2	12.5	1	6.3	
High Risk	Gujba	1	4	100	6.3	0	0	4	1	25.0	0	0.0
	Gulani	1	1	100	2.0	0	0	1	0	0.0	0	0.0
Yobe		16	256	100	25.6	0	0	240	33	12.8	40	16.2

Monitoring Surveillance Performance in North West Zone 2015 as at September 18, 2015: Kano State

State	LGA	AFP Expected	AFP Reported	% Stool Adequacy	NPAFP Rate	WPV	cVDPV	Number with lab Result	Number NPENT Isolated	NPENT isolation rate	Number of sabin isolation	Sabin isolation rate
Kano	Ajingi	1	29	86	34.8	0	0	24	0.0	0.0	1	4.2
	Albasu	1	22	100	24.2	0	0	21	3.0	14.3	1	4.8
	Bagwai	1	30	90	38.5	0	0	16	1.0	6.3	2	12.5
	Bebeji	1	28	86	31.0	0	0	25	4.0	16.0	0	0.0
	Bichi	2	12	75	9.1	0	0	11	0.0	0.0	2	18.2
	Bunkure	1	24	92	29.4	0	0	19	3.0	15.8	2	10.5
	Dala	3	17	94	8.5	0	0	15	2.0	13.3	2	13.3
	Dambatta	1	62	97	62.3	0	0	53	6.0	11.3	5	9.4
	Dawakin Kudu	1	18	89	16.7	0	0	13	3.0	23.1	1	7.7
	Dawakin Tofa	2	14	86	11.8	0	0	11	2.0	18.2	0	0.0
	Dogauwa	2	17	76	23.5	0	0	14	0.0	0.0	5	35.7
	Fagge	1	15	87	15.8	0	0	11	2.0	18.2	3	27.3
	Gabasawa	1	29	93	28.7	0	0	22	5.0	22.7	3	13.6
	Garko	1	24	88	30.9	0	0	18	1.0	5.6	3	16.7
	Garum Mallam	1	33	94	59.2	0	0	29	3.0	10.3	3	10.3
	Gaya	1	19	84	19.8	0	0	16	1.0	6.3	3	18.8
	Gezawa	2	42	90	31.1	0	0	33	6.0	18.2	1	3.0
	Gwale	2	21	90	12.1	0	0	19	2.0	10.5	1	5.3
	Gwarzo	1	29	86	31.8	0	0	24	3.0	12.5	4	16.7
	Kabo	1	10	100	13.6	0	0	9	1.0	11.1	1	11.1
	Kano Municipal	2	11	100	6.3	0	0	9	0.0	0.0	0	0.0
	Karaye	1	13	85	19.2	0	0	9	1.0	11.1	2	22.2
	Kibiya	1	18	83	27.5	0	0	16	3.0	18.8	3	18.8
	Kiru	2	54	87	42.7	0	0	42	6.0	14.3	4	9.5
	Kumbotso	2	17	100	12.0	0	0	14	1.0	7.1	1	7.1
	Kunchi	1	20	100	37.7	0	0	18	2.0	11.1	2	11.1
	Kura	1	22	82	31.8	0	0	20	4.0	20.0	2	10.0
	Madobi	1	25	80	38.3	0	0	18	1.0	5.6	1	5.6
	Makoda	1	18	100	16.9	0	0	16	1.0	6.3	1	6.3
	Minjibir	1	17	82	16.6	0	0	11	1.0	9.1	0	0.0
	Nassarawa	4	25	84	8.8	0	0	20	2.0	10.0	4	20.0
	Rano	2	18	94	25.9	0	0	15	2.0	13.3	0	0.0
	Rimin Gado	1	15	93	29.9	0	0	13	2.0	15.4	5	38.5
	Rogo	1	30	97	27.5	0	0	26	5.0	19.2	4	15.4
	Shanono	1	15	93	22.3	0	0	10	2.0	20.0	0	0.0
	Sumaila	3	15	100	12.4	0	0	14	5.0	35.7	1	7.1
	Takai	1	24	96	24.8	0	0	21	1.0	4.8	3	14.3
	Tarauni	1	22	82	19.8	0	0	15	1.0	6.7	1	6.7
	Tofa	1	28	75	59.9	0	0	25	0.0	0.0	4	16.0
	Tsanyawa	1	19	95	25.2	0	0	18	1.0	5.6	3	16.7
Tudun Wada	1	24	88	20.8	0	0	22	6.0	27.3	1	4.5	
Ungongo	2	48	94	26.6	0	0	43	3.0	7.0	6	14.0	
Warawa	2	19	100	30.9	0	0	16	1.0	6.3	2	12.5	
Wudil	1	30	83	33.9	0	0	25	4.0	16.0	4	16.0	
Total		63	1042	90	26.1	0	0	859	103	11.9	97	11.6

Monitoring Surveillance Performance in North West Zone 2015 as at September 18, 2015: Kaduna State

State	LGA	AFP Expected	AFP Reported	% Stool Adequacy	NPAFP Rate	WPV	cVDPV	Number AFP with lab Result	Number NPENT isolated	NPENT isolation rate	Number of sabin isolation	Sabin isolation rate
Kaduna	Birnin Gwari	2	11	100	9.4	0	0	9	3	33.3	1	11.1
	Chikun	2	20	100	11.7	0	0	20	2	10.0	2	10.0
	Giwa	2	41	85	30.7	0	0	39	5	12.8	2	5.1
	Igabi	3	23	96	11.5	0	0	23	3	13.0	2	8.7
	Ikara	1	24	96	26.6	0	0	22	2	9.1	5	22.7
	Jaba	1	15	87	20.7	0	0	14	3	21.4	1	7.1
	Jema'a	2	15	93	11.6	0	0	15	0	0.0	3	20.0
	Kachia	2	21	100	18.5	0	0	20	2	10.0	4	20.0
	Kaduna North	2	25	88	15.0	0	0	23	3	13.0	1	4.3
	kaduna South	2	47	96	25.1	0	0	46	1	2.2	4	8.7
	Kagarko	1	7	100	6.2	0	0	7	0	0.0	2	28.6
	Kajuru	1	19	84	36.8	0	0	15	4	26.7	2	13.3
	Kaura	1	15	93	14.5	0	0	12	1	8.3	1	8.3
	Kauru	1	19	89	24.0	0	0	18	5	27.8	1	5.6
	Kubau	2	14	100	10.7	0	0	14	2	14.3	3	21.4
	Kudan	1	39	97	60.2	0	0	37	6	16.2	4	10.8
	Lere	2	11	100	7.1	0	0	11	0	0.0	0	0.0
	Makarfi	1	10	100	14.7	0	0	10	2	20.0	1	10.0
	Sabon Gari	2	11	91	8.2	0	0	11	2	18.2	1	9.1
	Sanga	1	18	89	24.4	0	0	16	2	18.8	1	6.3
Soba	2	20	95	14.6	0	0	20	3	15.0	4	20.0	
Zangon Kataf	2	12	92	8.1	0	0	12	5	41.7	1	8.3	
Zaria	3	42	93	22.1	0	0	40	8	20.0	4	10.0	
Total		38	479	94	18.8	0	0	454	64	15.3	50	11.7

Deteriorating access to settlements continue to post serious challenges to the program:

