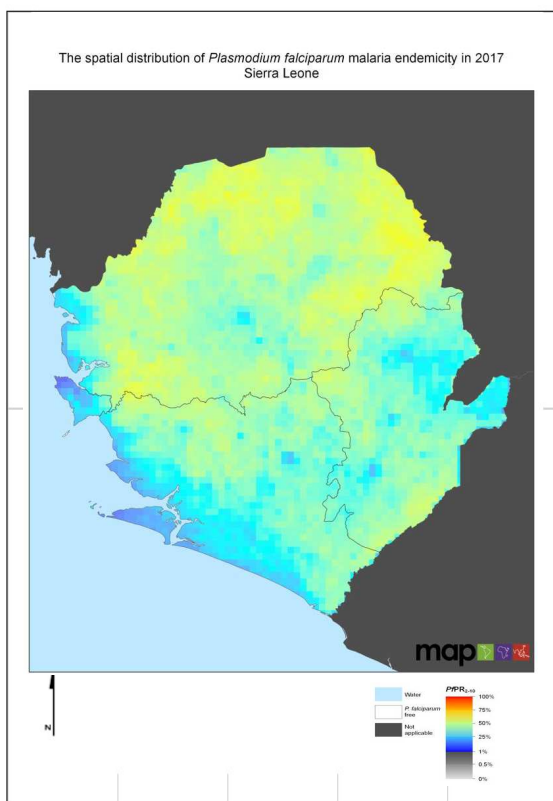


Scorecard for Accountability and Action



The entire population of Sierra Leone is at high risk of malaria. The annual reported number of malaria cases in 2019 was 4,849,696 with 2,771 deaths.

Metrics

Commodities Financed and Financial Control

LLIN financing 2021 projection (% of need)	100
Public sector RDT financing 2021 projection (% of need)	100
Public sector ACT financing 2021 projection (% of need)	100
World Bank rating on public sector management and institutions 2020 (CPIA Cluster D)	3.2

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	4
Insecticide resistance monitored since 2015 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
RDTs in stock (>6 months stock)	▲
ACTs in stock (>6 months stock)	
LLIN/IRS campaign on track	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	
Scale of Implementation of iCCM	
Operational LLIN/IRS coverage (% of at risk population)	100
On track to reduce case incidence by ≥40% by 2020 (vs 2015)	
On track to reduce case mortality by ≥40% by 2020 (vs 2015)	

Tracer Indicators for Maternal and Child Health and NTDs

Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2019)	73
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2020)	47
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2020)	10
% deliveries assisted by skilled birth attendant	69
Postnatal care (within 48 hrs)	73
Exclusive breastfeeding (% children < 6 months)	31
Vitamin A Coverage 2018 (2 doses)	69
DPT3 coverage 2020 (vaccination among 0-11 month olds)	91

Key

	Target achieved or on track
	Progress but more effort required
	Not on track
	No data
	Not applicable

Malaria

Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Adolescent and Child health, Neglected Tropical Diseases and malaria.

For Sierra Leone, we commend the Ministry of Health, in the decision to go ahead with the universal coverage campaign for LLINs, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. It is of particular note that this guidance was developed based upon the experiences of distributing LLINs in Sierra Leone during the Ebola outbreak. Based on WHO modeling, this decision, allied with sustained malaria case management through the health system will prevent a significant increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 29.3% increase in malaria cases, and a 99.6% increase in malaria deaths in Sierra Leone. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2021 as the COVID-19 pandemic continues to impact our continent. This may include the implementation of any necessary catch-up activities and ensuring timely planning to account for potential delays in procurement and delivery. Any intervention must ensure the safety of communities and health workers given the ease of transmission of COVID-19.

Progress

Sierra Leone secured sufficient resources to achieve universal coverage of LLINs, RDTs and ACTs in 2021 and has distributed sufficient LLINs to achieve 100% operational coverage of the targeted at risk population. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has recently finalised the insecticide resistance monitoring and management plan. Sierra Leone has launched the Zero Malaria Starts with Me campaign.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Sierra Leone has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard, although the scorecard has not yet been posted to the ALMA Scorecard Hub.

Impact

The annual reported number of malaria cases in 2019 was 4,849,696 with 2,771 deaths.

Key Challenge

- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and Neglected Tropical Diseases.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020		Sierra Leone has worked to sustain case management during the COVID-19 pandemic but the pandemic has impacted accessibility and utilization of malaria services. This is evidenced by a drop in key coverage indicators. The disruptive effects of COVID-19 pandemic on malaria services have included decreased health facility attendance due to fear of contracting COVID-19, reduced fever cases tested with RDTs and malaria cases treated related to severe supply chain blocks caused by significant decreases in air cargo capacity, sea freight, and transport logistics. This led to stock outs of lifesaving antimalarial commodities and delays in the distribution of malaria commodities. In response, the country is intensifying community-led sensitization on ANC attendance to promote ITNs and IPTp; Sensitization of PHU staff to ensure compliance to the malaria treatment guidelines; adapted the WHO-UNICEF global interim guidance on continuity of community based essential health services in the context of COVID-19 and CHWs were oriented on the prevention and control of COVID-19. With regards to integrated community case management (iCCM), CHWs have been following the no-touch policy and treated simple malaria cases presumptively (without RDT test) in the absence of sufficient PPE supplies for CHWs. Resumption of the Test component of the T3 approach at community level, based on the review of level of community transmission of COVID-19 and PPE availability for CHWs. In 2021, the CHW hub and partners will be conducting a standard training of CHWs in malaria case management including COVID-19 precautionary measures. Continuous sensitization of health workers on the precautionary measures of COVID-19 infection. constantly monitor the stock situation including the demand, pipeline management procurement, delivery timelines, supporting in-country stock management and distribution capacity in order to ensure that sufficient quantities (including buffers) are available at any point in time. The IRS campaign has been completed on schedule

RMNCAH and NTDs

Progress

Sierra Leone has achieved high coverage of the tracer RMNCAH intervention of DPT3 and has recently increased coverage of ARTs in the total population and skilled birth attendants. The country enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Sierra Leone is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, and soil transmitted helminths. Preventive chemotherapy coverage in Sierra Leone is good for schistosomiasis (84%), for lymphatic filariasis (76%) and onchocerciasis (76%) and below WHO targets for soil transmitted helminths (58%). Overall, the NTD preventive chemotherapy coverage index for Sierra Leone in 2019 is 73, which represents a very substantial increase compared with the 2018 index value (14).

Previous Key Recommended Actions





Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities	Q4 2020		The COVID-19 pandemic has caused a significant disruption in delivery of essential health services. The high burden of infection among health workers directly contributed to some of the disruptions, including temporary closure of health facilities, or selected services within facilities. Out-patient consultations fell by 13% in 2020 compared to 2019. Hospital admissions fell by 80% in 2020 compared to 2019, while in-patient hospital mortality rose from 4% to 6%. Essential commodities and supplies were redistributed to prioritize the needs of COVID-19 Treatment Centres, with the result that existing shortfalls in supplies of free healthcare commodities were exacerbated and stock-outs worsened. Training of health workers on continuity of essential services in the context of COVID-19 has been conducted. Mother Support Groups from different districts have been trained on maternal, infant and young child feeding in the context of COVID-19. Health workers in Primary Health care facilities have been supervised and mentored on Integrated Case Management of Newborn and Childhood Illnesses (IMNCI) skills. Special Care Baby Units remained fully functional. In the quarter, 8,700 new national community health workers have been recruited. This has followed the revision of the national CHW Policy which guides the programme starting from 2021. Sierra Leone's CHW program is a vehicle to

¹ RMNCAH metrics, recommended actions and response tracked through WHO

				<p>deliver a package of RMNCAH+N interventions through home visits for promotional, preventive and basic curative services. the training curriculum includes COVID 19 prevention and control and topics on continuity of essential services during COVID 19. A national integrated IPV, Vitamin A and Albendazole campaign has been conducted in all districts, with 81% coverage for IPV, 75.3% for Vitamin A, and 80% for Albendazole for under five children. As one of the Child survival and health interventions the MoHS and the DHMTs in all districts have been engaged in consolidating routine vitamin A supplementation coming out of the campaign mode. In this quarter training and planning have been conducted involving the district medical officers, M&E officers, nutrition officers of all the 16 districts. The routine VAS approach will be augmented with periodic intensification . in this case VAS will be integrated to EPI, outreach, growth monitoring and to CHW program activities in hard to reach communities.</p>
NTDs	<p>Ensure that NTD interventions including Mass Drug Administration, vector control and Morbidity Management and Disability Prevention are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. This includes prioritising key necessary catch up activities</p>	Q4 2021		Deliverable not yet due

Sierra Leone has responded positively to the RMNCAH recommended action addressing low coverage of ARTs in children, and continues to track progress as this action is implemented, with increases in coverage recently observed.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due