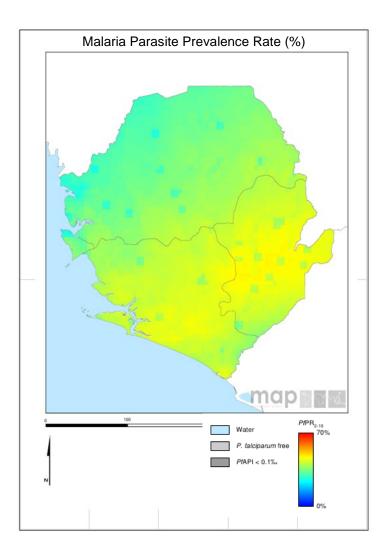
Sierra Leone ALMA Quarterly Report Quarter Three, 2016



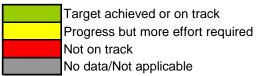
Scorecard for Accountability and Action



etrics		
Commodities Financed and Financial Control		
LLIN financing 2016 projection (% of need)		100
Public sector RDT financing 2016 projection (% of need)		100
Public sector ACT financing 2016 projection (% of need)		100
World Bank rating on public sector management and institutions 2015 (CPIA Cluster D)		3.1
Insecticide Resistance Monitoring, Implementation a	nd l	Impact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		C
Insecticide resistance monitored since 2014 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of iCCM (2013)		
Operational LLIN/IRS coverage (% of at risk population)		100
>75% Decrease in Malaria Incidence Projected 2000–2015		
Tracer Indicators for Maternal and Child Health		
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2015)		27
Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2015)		13
% deliveries assisted by skilled birth attendant		60
Postnatal care (within 48 hrs)		73
Exclusive breastfeeding (% children < 6 months)		32
Vitamin A Coverage 2014 (2 doses)	•	8
DPT3 coverage 2015 (vaccination among 0-11 month olds)		86

The entire population of Sierra Leone is at high risk of malaria. The annual reported number of malaria cases in 2014 was 1,898,852 with 2,848 deaths.

Key



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Malaria

Progress

Sierra Leone has secured sufficient resources to achieve universal coverage of LLINs, RDTs and ACTs in 2016 and has distributed sufficient LLINs to achieve 100% operational coverage.

Impact

The annual reported number of malaria cases in 2014 was 1,898,852 with 2,848 deaths. WHO, through modeling, estimates that there has been a less than 50% decrease in malaria incidence between 2000 and 2015.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Prioritise mosquito insecticide resistance testing and finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		Insecticide resistance testing and finalisation of the national insecticide resistance monitoring and management plan were delayed due to the ebola outbreak. Sierra Leone has requested technical support from WHO to finalise the plan

MNCH

Progress

The country has achieved high coverage in the tracer MNCH interventions postnatal care and vitamin A. Sierra Leone has enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn and Child Health Scorecard. Sierra Leone has responded to the challenge of the post ebola recovery. The country has developed and put in place a recovery plan and health systems building strategy and is mobilizing resources for it.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Work to accelerate coverage of ARTs in the total population and in children under 14 years of age	Q1 2017		Sierra Leone has increased ART coverage by 7% in the total population and 5% in children. Additional actions have been taken to further improve coverage. The country has begun implementing early infant diagnosis. There were some problems with the testing equipment but this has now been addressed. Transport of the samples has also been enhanced and the country has put in place a system to track district transport of the samples. The number of sites offering ART services has also been increased through capacity building and training

Sierra Leone has responded positively to the MNCH recommended action addressing low coverage of exclusive breastfeeding and continues to track progress as this action is implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
MNCH1:	Identify and address reasons for decreasing vitamin A coverage	Q3 2017
Optimise		
quality of care		



¹ MNCH metrics, recommended actions and response tracked through WHO MCA