eHealth
A F R I C A

Q2 2019
Impact Report

Sierra Leone

John Gindeh
Community Health Officer and
MLTP Graduate in front of his health
facility in Masiaka, Port Loko District,
Sierra Leone.

Foreword

We remain as committed as ever to support communities and leaders across Africa to build stronger health systems and lead healthier lives.

We are driven by our desire to make an impact on health systems and communities across Africa. Our passion drives us to create tools and solutions that enable governments to make decisions like where to cite facilities, what health interventions to invest in and how to build health workforce capacity in the most cost-effective way.

We care intensely about what we do and how we do it. We are committed to giving 100% and going the extra mile to deliver high-quality projects in collaboration with our partners.

Sahr Nyaka
One of our Facility staff at work at the reception area in the Sierra Leone office.

Where we work

Projects
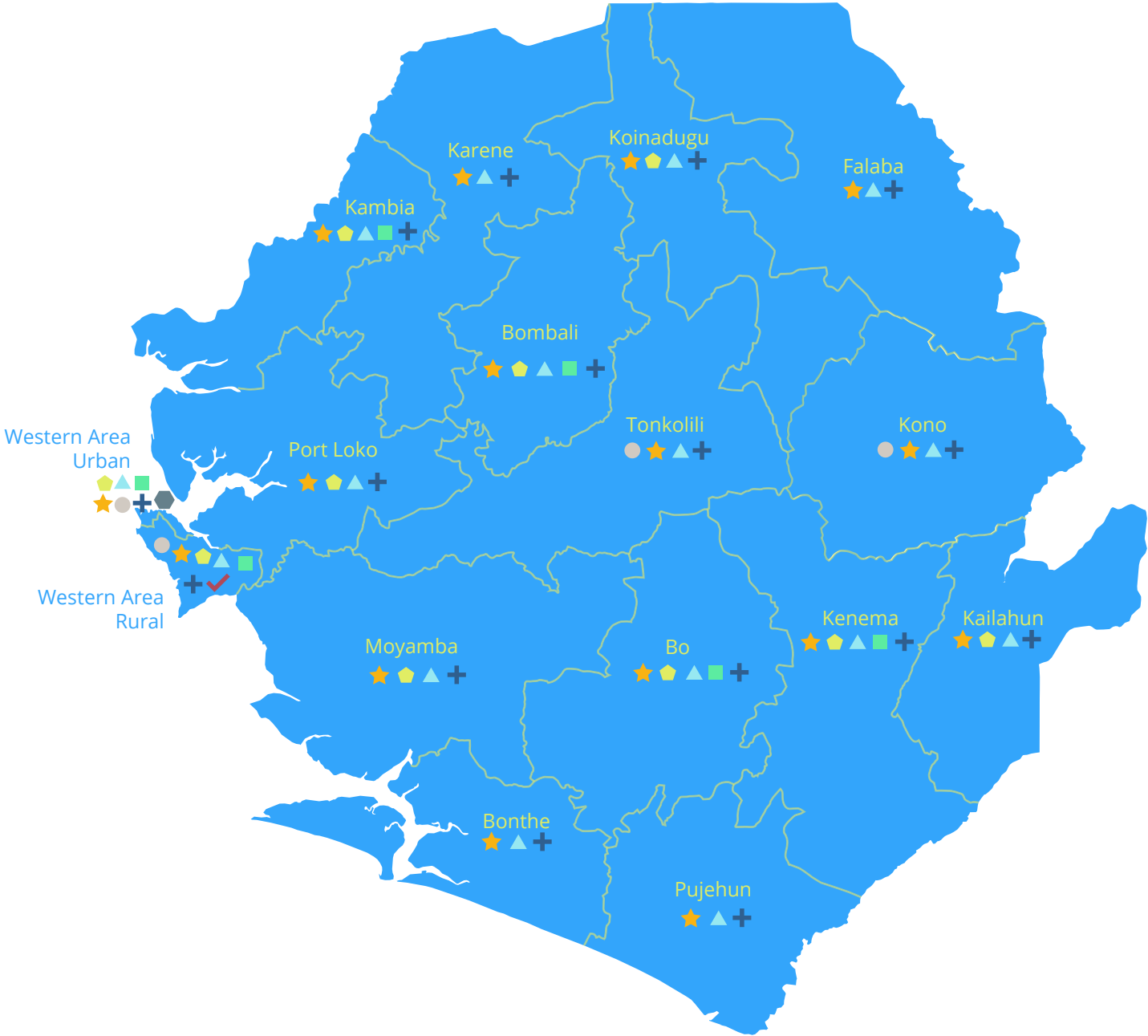
⭐ 117 Call Center   🟩 EMP

⚪ AVADAR   ➕ FETP

⬟ CHO-MLTP   ✔️ SLED

🔺 elDSR   ⬡ STRIVE

eHA in the Global Context

Global Health Security Agenda — **Immunization** · **National Lab Systems** · **Real-time Surveillance** · **Reporting** · **Workforce Development** · **Emergency Operations Center**

World Health Organization's 2019 Priorities — **Fragile and vulnerable settings** · **Weak primary health care systems**

SUSTAINABLE DEVELOPMENT GOALS — **SDG 3: Good health and wellbeing**

Our work aligns with global initiatives for improving health care delivery and strengthening health systems. We work to support our partners, communities and governments across Africa to meet global targets in primary health care, public health emergency management and preparedness and disease surveillance.

eHealth Africa in Sierra Leone

In Sierra Leone, eHA's work aligns with several action packages of the Global Health Security Agenda, namely, Real-Time Surveillance, Reporting, Workforce Development and Emergency Operations Centers. The programs implemented under these areas of effort all work together to strengthen the country's health system.

eHA is currently implementing three projects that have increased real-time surveillance in Sierra Leone, namely 117 Call Center, Audio Visual AFP Detection and Reporting (AVADAR) and electronic Integrated Disease Surveillance and Response (eIDSR) projects. These three projects also have components of reporting.

The eIDSR solution enhances disease prevention and control through the timely electronic capture and submission of data on epidemiologically important diseases. The solution is tackling the problems of low weekly priority disease reporting rates, low quality of data, poor internet and phone connectivity hindrances and reducing errors in reporting.

The 117 Call Center, which started as an Ebola hotline in 2014, is currently focused on improving community death reporting through mortality surveillance; real-time alert reporting for infectious deaths and increasing alert and data support to the maternal & perinatal disease surveillance.

eHA also implemented the Field Epidemiology Training Program (FETP) and the Community Health Officers Management and Leadership Training Program (CHO-MLTP) to build the capacity of health workers in the country. FETP aims to increase the number of public health workers who are trained and practicing basic epidemiological

principles of disease surveillance, in order to fulfill the Global Health Security Agenda (GHSA) of 1 epidemiologist per 200,000 population.

Modeled after FETP, the CHO-MLTP project aims to strengthen the capacity of Ministry of Health and Sanitation (MoHS) at the community level by providing leadership and management training to community health Officers (CHOs) to deliver increased quality services and required duties.

The Emergency Management and Preparedness program supports the full running of Sierra Leone's Emergency Operations Center(EOC) . This project strengthens the capacity of the Ministry of Health and Sanitation's ability to prepare, prevent and adequately respond to current and future outbreak of diseases.

Global Health Security Agenda

Real-time Surveillance

Reporting

Workforce Development

Emergency Operations Center

Real-time surveillance is 1 of 10 action packages of the Global Health Security Agenda (GHSA). eHA's surveillance work in Sierra Leone is aligned with those of the GHSA. eHA is implementing the electronic Integrated Disease Surveillance and Response and 117 Call Center projects.

eIDSR

Sierra Leone is the first country in Africa to transition its Disease Surveillance System from paper-based to digital reporting across all primary health facilities. This effort began in 2016 with eIDSR.

90%
90% of trained facilities electronically submitting their weekly report at noon every Monday.

26
26 priority diseases reported through the eIDSR system.

117 Call Center

The 117 Call Center records a series of call categories comprising death, (neonatal death, maternal death etc) cause of death, sickness, Health Emergency, Security Threats, requests for Health Information, Referrals, and others. This is helping health authorities to make informed decisions on issues bothering on the Sierra Leone health sector. Communities in Sierra Leone have become more aware about the dangers of touching corpses, for fear that they might be infected with contagious diseases, including Ebola.

2,897
2,897 calls were recorded via the 117 Call Center between April and June 2019 .

2,547
2,547 out of the 2897 were related to death, including maternal, and neonatal death reporting

"
The 117 toll free hotline has been one of our greatest achievements in the health Ministry, with dedicated staff thinking fast, multi-tasking and using their initiative for best results. Call handlers often work under great pressure but they get to overcome the challenges.
"

Mr. Harold Thomas
Communication Lead, Directorate of Health Security and Emergencies
Ministry of Health and Sanitation.

Training of Health care workers on the use of the eIDSR App.

Real-Time Surveillance: Auto-Visual AFP Detection and Reporting (AVADAR)

The AVADAR project has the main objective of improving AFP surveillance in high risk polio countries, for the purpose of identifying hidden cases of polio. eHA, together with its partners, has been implementing the AVADAR Project in Sierra Leone since 2016.

450

450 informants on the AVADAR dashboard in Sierra Leone.

4

4 active AVADAR districts in Sierra Leone (Kono, Tonkolili, Western Area Urban, Western Area Rural)

30

30 suspected AFP cases submitted by informants 20 of those cases were investigated by disease surveillance officers.
3 of those 20 investigated were true AFP cases.

Jeremiah Jimissa
Technical Officer AVADAR helping Community informant solve technical issues.

Training of CHOs in Bombali District, Northern Sierra Leone.

Workforce Development

672 hours of training and capacity building activities from April through June 2019.

332

332 health care workers trained in the Sierra Leone health System from April through June 2019.

eHA is building a strong health workforce that is competent and responsive. Through training sessions, we are equipping health care workers in Sierra Leone with optimal management and leadership skills, as well as epidemiological field investigation skills. These enlightened health care workers now provide quality health services to thousands of Sierra Leoneans.

Njala University Senate approves inclusion of Management and Leadership Training Program curriculum into CHO B.Sc. Program (pre-service).

Public health management knowledge of health leaders are a key aspect to strengthening and maintaining effective health systems. However, public health management education is non-existent in most of the tertiary training institutions in low-middle-income Countries such as Sierra Leone.

Prior to the launch of the Community Health Officers Management and Leadership Program (CHO MLTP) in 2016,, Community Health Officers (CHOs) in Sierra Leone had not been formally trained in public health management and leadership. The U.S. Centers for Disease Control (CDC) thus collaborated closely with the Sierra Leone Ministry of Health and Sanitation (MoHS), Njala University, Emory University, ICAP at Columbia University, and eHealth Africa (eHA) to develop a context-specific, modular management and leadership training program. Specifically, this program (MLTP) is designed to;

- Improve the public health management skills of CHOs to strengthen the existing health system in Sierra Leone at the Chiefdom level,

- Increase the application of public health systems thinking and related management principles needed to effectively run health facilities and outreach services, and

- Strengthen interpersonal communication and engagement with community leaders in order to develop practical and sustainable approaches to public health challenges.

In January 2019, eHealth Africa in collaboration with CDC and MoHs developed a detailed CHO MLTP course description as part of the process to integrate the MLTP curriculum into Njala University. Following this initiative, a series of meetings led by the Dean of Community health Science were held among the collaborating partners at Njala University in February 2019 to review and finalize the MLTP course description document.

Excellent leadership provided by the Dean of the Faculty of Community Health Sciences and the hard work of the entire faculty at school of community health science facilitated the review process of the MLTP course description which was consequently submitted to the University Senate for consideration and approval. After extensive deliberation of the MLTP course description in May 2019, the Senate has approved the implementation of the MLTP at the school of Community Health Sciences, Njala University in Bo and referred the document to the curriculum development committee for further review into a curriculum and provide guidance on mode of implementation.

"

These cadre of CHOs that are trained through CHO-MLTP, are only learning management and leadership on the job. With the Pre-service training, students will now have an in-depth understanding of management and leadership before they go out to practice.They would be up to the task for what lies ahead.

"

Exton Zoker
Senior Lecturer Public Health Department
Njala University.

Meeting between Njala University staff and
CHO-MLTP staff to discuss transition.

Emergency Management and Preparedness (EMP)

Since 2015, the EMP project has been delivering the requisite training to public health care workforce in Sierra Leone and fostering an efficient daily operation of the national Emergency Operations Center (EOC). The EOC is the country's central communication and coordination hub for public health emergency management and preparedness. eHA, together with its partners, is ensuring there is smooth running of the EOC in order to increase the Ministry of Health and Sanitation's ability to detect within the quickest time possible, effectively respond to and eventually prevent disease outbreaks.

One method used to train and test health care workers' ability to respond to public health emergencies is through simulation exercises. Simulation exercises can help to develop, assess and test functional capabilities of emergency systems, procedures and mechanisms. As a training tool, they allow participants to learn and practice emergency response procedures in a safe and controlled environment.

During the period being reviewed, eHA and partners (CDC, MoHS) among others, conducted a 5-day full-scale simulation exercise (17-21 June 2019) to test Sierra Leone's preparedness to respond to an emergency outbreak and to identify gaps for onward redress.

330

330 health care workers trained in emergency management and ready to respond to public health emergencies.

105

105 healthcare workers trained in disease outbreak response via simulation exercises.

"
Due to training of front-line personnel in the Ministry, there has been an improvement on timeliness in responding to disease outbreak
"

Dr. Mohamed A. Vandi, Director, Directorate of Health Security and Emergencies EOC.

Full-Scale simulation Exercise: Practical Ebola response sessions

Sierra Leone Ebola Database (SLED)

Following the 2014 Ebola Virus Disease (EVD) outbreak in Sierra Leone, there was an urgent need for a consolidated database to store outbreak-related data. eHA implemented the SLED Project in close collaboration with the CDC and the Government of Sierra Leone. The project, over the past four years, has ensured the development and maintenance of a consolidated database of EVD related records. Access to this database equips researchers with the information needed to better understand risk factors for potential future disease outbreaks. In addition, the SLED project in partnership with CONCERN Worldwide is successfully providing families who have lost loved ones during the Ebola outbreak with the location of their burialgrave sites via a dedicated reunification program.

23

23 families reunited with graves of loved ones lost to Ebola via confirmed matches in the SLED database- this brings the number of families reunited with gravesite of loved ones lost to Ebola to 100 in Quarter 2.

2

2 data packages prepared and provided to national researchers to support public health research proposals.

SLED Workshop of partners to discuss the project's progress

"Our greatest asset is our people"

Staff Spotlight: Nelson Clemens

Nelson Clemens is a programs staff in our Sierra Leone office. He is in charge of our electronic Integrated Disease Surveillance and Response (eIDSR) Project in Sierra Leone. He oversees project activities, for effective project delivery. As a loner, he has successfully led the eIDSR through significant timelines such as: Development of the requirement for eIDSR by MoHS; Agreement on District Health Information System 2 (DHIS 2) as the platform for implementation of eIDSR, Customization of DHIS 2 to meeting the MoHS requirements, Assessment of district readiness for eIDSR, eIDSR Introduction and Training for (MoHS) staff, District level electronic data capture Evaluation of Pilot, Roll out of eIDSR/DHIS 2 into all districts, Employment and training of data staff, Monitoring and supervising district data collection, unto a significant milestone where Sierra Leone is the first country in Africa to transition its disease surveillance from paper-based to electronic platform. Nelson contributed in the training of 2,758 health care workers on the use of the eIDSR App, across Sierra Leone.

"
I would not have done this all by myself. Our Information Systems colleagues, (Les De Wit and Jasper Timm),Information and Communication Technology (ICT) colleagues (Aiah Kortequee and Desmond Kanu), also deserve a tap in the back for supporting me with technical issues pertaining to development and upgrade of app,internet connectivity and solving technical issues with the tablets used by health care workers for training and also for use in their respective facilities.
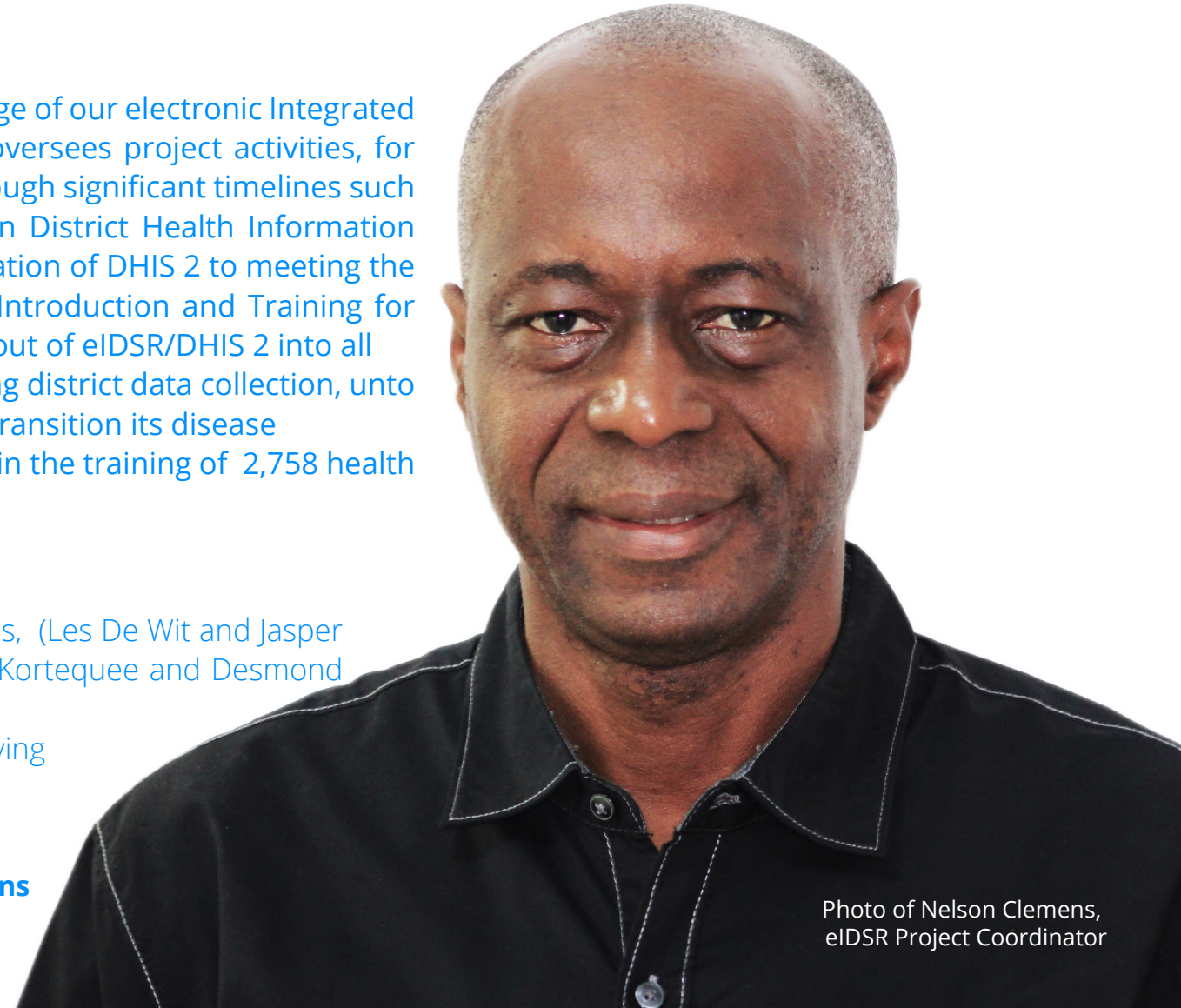"

Nelson Clemens

Photo of Nelson Clemens, eIDSR Project Coordinator

Our Partners

Bill and Melinda Gates Foundation

U.S. Centers for Disease Control and Prevention (CDC) Sierra Leone

Focus 1000

Emory University

Concern Worldwide

Sierra Leone Ministry of Health and Sanitation

ICAP

Njala University

Restless Development

College of Medicine and Allied Health Sciences (COMAHS)

World Health Organization (WHO)

World Bank

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