

# Advancing Partners & Communities, Sierra Leone

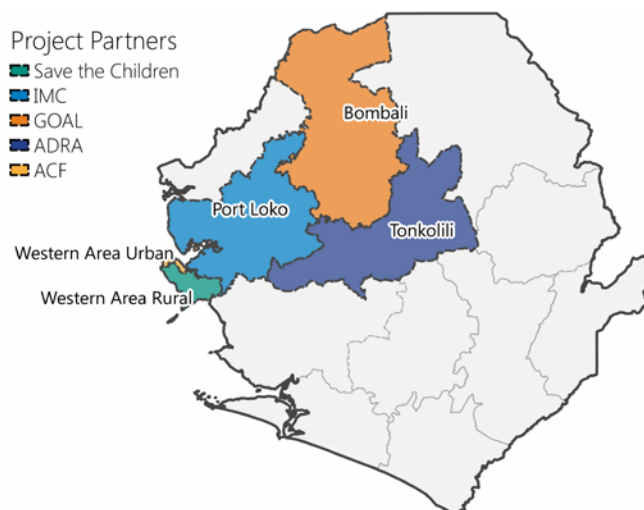
## Program Overview and Accomplishments – February 2016

**Advancing Partners & Communities** is a U.S. Agency for International Development (USAID) funded project implemented globally by JSI Research & Training Institute, Inc. (JSI) with partner FHI 360 in 32 countries. The project seeks to advance and support community programs to improve the overall health of individuals and communities and strengthen health-related indicators. Advancing Partners & Communities provides global leadership for community health systems, mobilization, and community-based programming; manages small and medium-sized grants; and builds the capacity of organizations to manage and implement programs.

**Advancing Partners & Communities** received a grant from USAID's "Ebola Response and Preparedness" funds authorized by the United States Congress. USAID designated these funds to strengthen critical non-Ebola health services, in particular reproductive, maternal, neonatal, and child health (RMNCH) at the primary care and community levels in the three West African countries most affected by the Ebola virus outbreak: Guinea, Liberia, and Sierra Leone.

In Sierra Leone, the project is operating under USAID's Global Health Ebola Team umbrella of priorities to support the early recovery and subsequent phases of the Ministry of Health and Sanitation (MOHS) 2015-2020 Health Sector Recovery Plan (HSRP). The overall approach has been guided by in-country consultations with MOHS, donor agencies, development partners, and a range of governmental and nongovernmental stakeholders. The project aims to fill gaps while attending to the most pressing needs for RMNCH service strengthening, in line with the HSRP and MOHS Basic Package of Essential Health Services (BPEHS). Advancing Partners & Communities provides direct technical assistance at the national level and implements district level activities in partnership with five nongovernmental organizations (one per district<sup>1</sup> – see map to the right).

The project focuses on improving access to and quality of RMNCH services, through a process of capacity building, mentorship and supportive supervision for community health posts (CHPs) and maternal and child health posts (MCHPs)<sup>2</sup>, complemented by coordinated community engagement and referrals. It includes key interventions on strengthening infection prevention and control (IPC) and water, sanitation and hygiene (WASH) standards at the health posts, and in communities. The project renovates health posts' infrastructure, builds new water wells and waste



<sup>1</sup> Bombali – GOAL; Port Loko – International Medical Corps (IMC); Tonkolili – Adventist Development and Relief Agency (ADRA); Western Area Rural (WAR) – Save the Children (SC); and Western Area Urban (WAU) – Action Contre la Faim (ACF).

<sup>2</sup> Due to their high prevalence in Western Area Urban, Community Health Centers are being supported in that district.

management structures, and procures and distributes minor medical equipment for RMNCH services. All efforts are informed by priorities identified by MOHS, district health management teams (DHMTs), USAID and the district implementing partners (IPs).

## Activity Highlights and Accomplishments to Date

### Policy Development

- Supporting the process of drafting the new CHW policy (expected in June 2016) through technical assistance for revising the RMNCH scope of the CHWs and direct support on development of the M&E framework.
- Providing technical assistance for policy revisions for the National CHW Technical Working Group (TWG) and CHW Hub including: documenting international best practices surrounding CHWs practices; researching Family Planning (FP) and First Aid for CHWs from other African ongoing programs; and drafting the costing elements of the revised CHW policy.
- Engaging with the MOHS Departments of Primary Health Care (DPHC) and Policy, Planning and Information (DPPI) and key governmental and non-governmental stakeholders to document the community engagement (CE) approaches during Ebola outbreak. These will be used to conduct a series of stakeholder consultations to draft the MOHS CE policy and approach.



Health Worker talking to a patient at Sussex MCHP Freetown, Western Area Rural. Photo by libba Bawoh

### Capacity Building and Community Engagement

- In cooperation with the five district-based NGO partners, and using facility based data and the recent results for the 2013 demographic and health survey (DHS), the project identified the following overarching gaps at the health post level: shortage of emergency medicines supplies, lack of equipment, limited knowledge of population or health professionals to recognize danger signs of pregnancy; low competency of health professionals (knowledge and skills) to provide Basic Emergency Obstetric and Newborn Care (BEmONC); insufficient facility compliance with IPC/WASH standards; and subsequent weak referral system from the community to health posts and/or from health posts to more specialized facilities.
- Using these identified gaps, the project partners established a harmonized framework for implementing capacity building and performance improvement activities for health post staff and CHWs, in line with MOHS recovery and post-recovery priorities on RMNCH and IPC. The planned performance improvement interventions include MOHS approved training programs on FP/RH, BEmONC, pre/post- natal care, and WASH/IPC.



Paramount Chief Kasanga II, Chairman of the Council of the Paramount Chiefs – Northern Region, speaks at project launch in Bombali District.

- At the national level, the project is working with UNICEF to facilitate ongoing discussions around the revision of MCH Aides roles and responsibilities as key primary health care providers at the health posts and community levels.

### Enhancing HP Functionality: Infrastructure Rehabilitation for Improved WASH and IPC, and Supplying Minor Medical Equipment

- Expanding upon the results of the Ebola Response Consortium WASH survey (conducted in the fall of 2015), and the project baseline assessment (conducted in February, 2016), the partners, along with the DHMT and Local Councils, selected 20 priority renovation sites (4/district) and the 20 borehole well drilling (4/district) locations (see illustrative Port Loko map below). Renovations at these initial sites are starting in March of 2016, with another 80 to follow (16/district).
- Using the BPEHS standards and the MOHS recommended list of minor medical equipment (MME) by health post type, the project developed a list of 30 MME items that will be procured for approximately 300 facilities in 5 districts. The list includes life-saving RMNCH equipment, including delivery kits, delivery beds, resuscitation equipment, weighing scales, height boards, instruments' trays and trolleys and sharp containers among others. Delivery kit orders are currently being negotiated with UNFPA and the other items are in the process of approval by the MOHS and DHMTs.
- Local procurement for the well drilling has been finalized and contract will be issued by mid-March. The borehole drilling will start in two districts, Western Area Urban and Bombali.



Non Function well at Gbanti CHP in Gbanti village, Bombali District. Photo by Josh Yospy

#### Renovations

