

Health Systems Strengthening and Epidemic Prevention in Sierra Leone, Phase II (HSS-EP)

Supporting Sierra Leone in building up a resilient health system

Context and Challenge

Between 2014 and 2016, Sierra Leone was severely affected by the Ebola outbreak, which overburdened the country's health system that was just recovering from the civil war. In Sierra Leone over 11,000 people were infected by the Ebola disease virus, of whom close to 4,000 died. Since the Ebola outbreak, the health system has been repeatedly impacted by new disasters (e.g. severe flooding and landslides) and is not yet resilient to tackle a pandemic like Covid-19 in the long term.

In response, on behalf of the *German Federal Ministry for Economic Cooperation and Development (BMZ)*, the *Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)* launched together with the Sierra Leonean Ministry of Health and Sanitation (**MoHS**) the Health Systems Strengthening and Epidemic Prevention project (**HSS-EP**). GIZ, MoHS and other partners are implementing HSS-EP towards a resilient health system that is responsive to its demands. In the first project phase between 2016 and 2019, GIZ supported the MoHS in strengthening and decentralizing the management of human resources in health, enhancing the quality of school management and teaching methods at midwifery schools, providing technical support in health financing, and strengthening disease surveillance and response systems in the two border districts Kambia and Kailahun, which had already initial positive effects.

Although meanwhile the *electronic disease surveillance and response system (e-IDSR)* is introduced nationwide, there remains a need to continuously improve this system, particularly at district level, to timely report and contain infectious diseases with epidemic potential, such as Covid-19. The many developed plans, strategies, policy guidelines, curricula and databases for staff retention, personnel management, workforce requirement planning and in-service training, is planned to be implemented in the running project phase, in order to meet the health needs of the Sierra Leonean population.

Our approach

The HSS-EP Phase II started in January 2020 and is providing through GIZ and in cooperation with the MoHS, technical support in the following three priority areas:

- **Strengthening human resources in health** (Output 1)
- **Decentralization of health management** (Output 2)
- **Strengthening cross-border epidemic prevention, including One Health approach** (Output 3)

Project name	Health Systems Strengthening and Epidemic Prevention in Sierra Leone (Phase II)
Commissioned by	Federal Ministry for Economic Cooperation and Development (BMZ)
Project region	Kambia, Kailahun and Central level in Freetown
Lead executing agency	Ministry of Health and Sanitation Sierra Leone (MoHS)
Duration	01.01.2020 – 31.12.2022

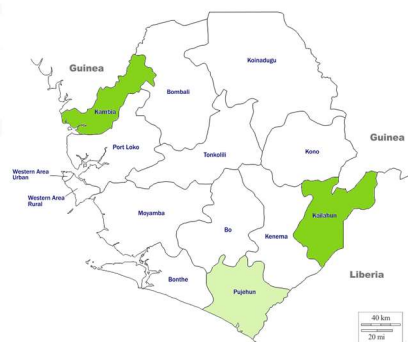
1) Strengthening human resources in health management

At national level, GIZ provides technical assistance to the Directorate of Human Resources in Health.

At district level, HSS-EP is improving human resource development and management in the health sector in Kambia and Kailahun Districts whereby GIZ supports the implementation of the rural retention plan, the decentralization of HR management, the implementation of the integrated Human Resource Information System (iHRIS), and of in-service training policy and plan.

2) Decentralization of health management

Aim: A more efficient and needs-based decentralized management of the health system.



Left: Training of Trainers training on Lassa Fever in January 2020. Developing training materials for trainers to cascade the trainings in their districts in the future.

Right: Map of Sierra Leone with project implementation districts: Kambia, Kailahun and partly Pujehun (Piggyback).



Left: Training of clinicians on COVID-19 Case management in May 2020 in Kailahun

Right: Trainer at the Training of Clinicians on COVID-19 Case management in May 2020 in Kailahun

At national level, GIZ supports the capacity development of the Directorate of Policy, Planning and Information (DPPI) „Information, Communication Technology (ICT)“ and „Planning“ units in data use and strategic planning. This will strengthen the links between target districts.

At district level, GIZ plans to strengthen the capacities of district councils and District Health Management Teams (DHMT) in planning, budgeting, management, coordination and supervision. Further, it plans to strengthen data quality and use by undertaking quarterly Data Quality Audits (DQA) in five Community Health Centers, functioning as Basic Emergency Obstetric and Neonatal Care (BEmONC) centres and selected border Community Health Centres to support planning, decision making and actions at facility level and in the DHMT.

3) Strengthening cross-border epidemic prevention

Aim: The reporting and response system for infectious diseases with epidemic potential is institutionalized including a *One Health* approach (see box on the right side).

At national level, GIZ will provide periodic updates to National Emergency Preparedness and Response (EPRRG), *One Health*, and organise related meetings on activities in the districts.

At district level, in the districts Kambia, Kailahun as well as to a very limited extent Pujehun, GIZ will facilitate a District Task Force on cross-border epidemic prevention (including *One Health*), support the development, implementation of the e-IDSR and regular updating of an action plan for cross-border epidemic prevention, provide support to screening capacity and processes, and institutionalize cross-border epidemic prevention.

Optimized human resources management reduces the absence of health personnel in the workplace and increases the number of decentrally recruited health workers which reduces the brain drain to Freetown.

All activities are implemented in line with the **One Health approach**. As a cross-sector and cross-border approach, it recognizes the systemic relationships in relation to human, animal and environmental health. Thus, HSS-EP II together with the MoHS and Partners are making a step towards more efficient diagnosis and prevention of infectious disease, which is very helpful in the COVID-19 response.

The institutionalization of a cross-sectoral reporting and response system contributes to an early detection of disease outbreaks with epidemic risk, to an appropriate reaction and thus to the protection of the population.

Decentralized management of health services and the connected evidence-based use of data for planning, budgeting, management, coordination and supervision leads to a more efficient use of the available financial and human resources and to a more effective sector planning in the districts.

The benefits



The HSS-EP is aligned to the **Sustainable Development Goals**: Reducing maternal mortality (SDG 3.1), achieving universal health coverage (SDG 3.8), strengthening the surveillance and response system for reportable infectious diseases (SDG 3D) and, to a limited extent, improving sexual and reproductive health (SDG 3.7).

Main activities of HSS-EPP II so far

- 10 BEmONC Centers were assessed in Kambia and Kailahun to identify the needs for common agreed action.
- **Nationwide trainings on Lassa fever in January/February 2020** as response to a Lassa fever outbreak in November 2019, in collaboration with the German Epidemic Preparedness Team (SEEG) together with the Robert Koch Institute and the MoHS.
- **Activities in Kambia, Kailahun and Pujehun in response to the SARS-CoV-2 pandemic:** Training of Community Health Workers and Community Animal Health Workers on contact tracing, training clinicians on case management, Provision of Infection Prevention and Control (IPC) equipment for border health facilities and Points of Entry.

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Health systems strengthening and Epidemic Prevention
GIZ Office Freetown, Sierra Leone
32D Wilkinson Road
Phone T+49-421-98504375-10
www.giz.de/en/worldwide/66827.html

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Photo credits

Duraman Conateh, Elisabeth Kinsky

Text

Kläre Heyden, Kina-Kira Hiller and Elisabeth Kinsky

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