### Better Information, Better Planning, Better Health



### **Health Information Bulletin**

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# Government of Sierra Leone Directorate of Policy, Planning and Information (DPPI), Ministry of Health and Sanitation (MOHS)

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### **Key HMIS update:**

- ⇒ Procured and distributed Two Hundred and Fifty (250) laptops to CHCs for data entry
- ⇒ Conducted training for One Hundred and Eighteen (118) CHC In-charges on the use of the DHIS2 for data entry
- ⇒ Procured and distributed Eight Hundred and Twenty Eight (828) tablets to MCHPs and CHPs for data entry
- ⇒ Developed and Health Information System (HIS) policy for the Ministry of Health and Sanitation

### **Key statistics**

### **Number of Hospitals**



District = 2

Regional = 3

Tertiary = 4

Non Gov't = 26

### **Number of Peripheral Health Unit**



CHC = 253

(PHU)

CHP = 430

MCHP = 603



S Physicians

per 100,000 population



En

**Nurses and Midwives** 

per 100,000

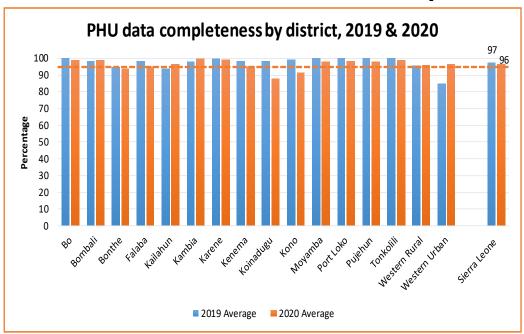


**OUTPATIENT CONSULTATIONS** 

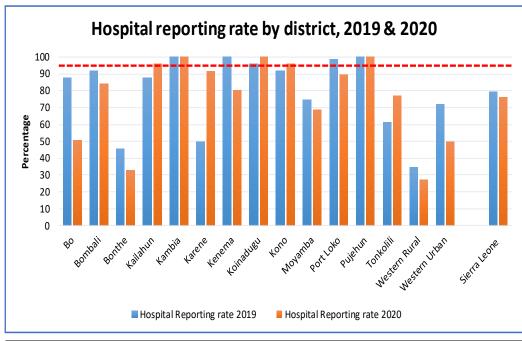
Year 2019 = 4,501,621

Year 2020 = 3,882.336

### **Data Completeness**



- PHU Data Completeness: % of PHUs with complete report (HF1-HF3) entered into the DHIS2 for a specific period of time (usually one month).
- The Average PHU data completeness reduced slightly from 97% in 2019 to 96% in 2020,.
- For 2020, Bonthe, Koinadugu and Kono districts did not meet the national target of 95%.
- Eight out of sixteen (16) districts achieved 98% and over data completeness in 2020.



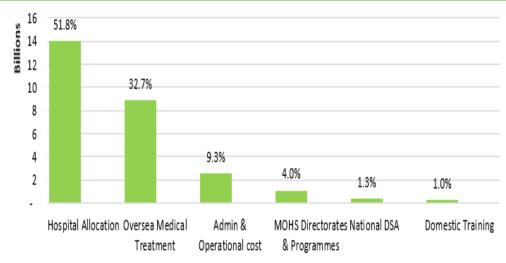
- Hospital Data Completeness: % of districts with complete hospital inpatient and outpatient (HF5-HF6) report entered into the DHIS2 for a specific period of time (usually one month)
- Overall, only five out of the 16 districts achieved the national data completeness target of 95% in 2020
- Western Area Rural had the lowest hospital reporting rate of 27%.
- The overall completeness of hospital data dropped from 79% in 2019. to 76% in 2020.

Months	PHUs		Hospitals	
	Report complete- ness	Report timeli- ness	Report complete- ness	Report timeli- ness
Jan-20	87.8	77.05	38	21.7
Feb-20	88.8	68.35	53.57	40
Mar-20	81.6	67	46.4	28.57
Apr-20	90.1	78	46.4	33.2
May-20	92.9	86	42.42	33.33
Jun-20	92.98	86.8	34.85	27.27
Jul-20	91.38	83.91	37.88	25.76
Aug-20	93.82	83.14	64.30	37.88
Sep-20	94.51	89.40	50.00	39.39
Oct-20	93.90	91.38	53.03	51.52
Nov-20	95.27	90.04	54.55	48.48
Dec-20	92.52	89.40	42.42	39.39

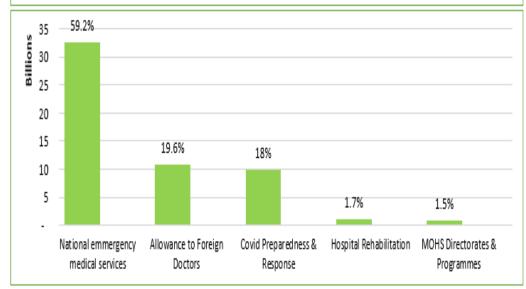
- RRIV Data Completeness: The percentage of PHUs and hospitals with complete RRIV reports entered into the DHIS2 in 2020.
- Green color represent district that scored 95% and above, Yellow represent 60%-94%, and Red represent 59% and below
- Generally, the completeness and timeliness of RRIV data was higher for PHUs than Hospitals. RRIV reporting gradually increased from Q1 to Q4.

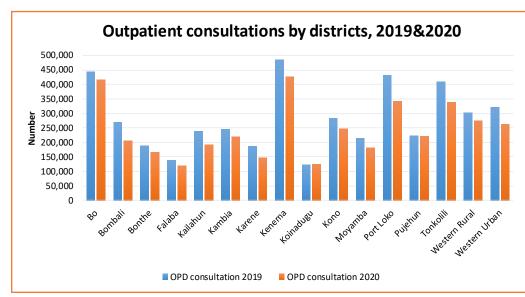
#### **HFU**

## MoHS Recurrent Expenditure Analysis (1, January – 31, December 2020)



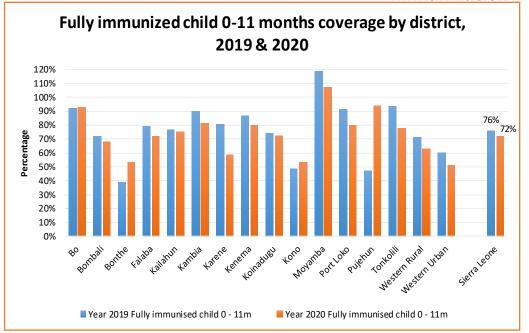
### MoHS Public Investment Program (PIP) Expenditure Analysis (1 January – 31 December 2020)



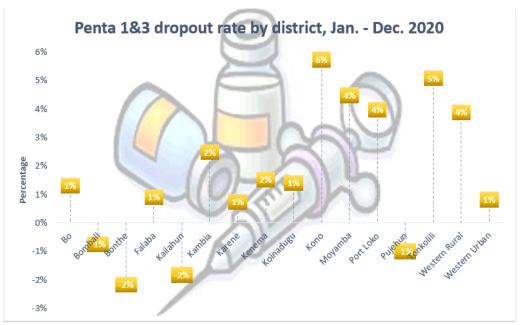


- Total recurrent expenditure for 1st Jan. – 31st December 2020 was SLL 27.047billion, or 52.8% of the total annual recurrent budget of 51.2 Billion Leones for 2020
- The major cost drivers were hospital allocation and overseas medical treatment.
- Expenditure on overseas medical treatment far exceeded its annual budget allocation.
- 2% of MoHS recurrent budget was allocated to overseas medical treatment but 32.7% was spent in 2020
- Total PIP expenditure for 1st Jan. –
   31st December 2020 was SLL 55,038
   billion Leones for 2020
- The major cost drivers were NEMS, allowance to foreign medical Doctors and COVID-19 preparedness and response.
- 10.7 billion Leones was charged under capital budget for establishing National Public Health Agency to pay allowance to 17 Cuban foreign medical Doctors.
- Also, 9.9 billon Leones was used to procure Ventilators for COVID-19 response
- More OPD visit in 2019 compared to 2020. COVID-19 might have contributed to this
- Overall the total out-patient consultation in 2019 was 4,501,621, and in 2020 it was 3,882,366. The reduction in outpatient consultations is probably due to COVID-19
- Very minimal differences were observed in Pujehun and Koinadugu districts.

### **Immunization**

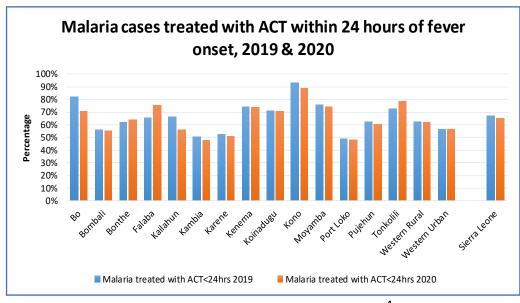


- Coverage for fully immunized children was 76% in 2019 and 72% in 2020. Generally, fewer children were immunized in 2020 than 2019, probably due to Covid 19 fears and movement restrictions.
- Coverage for fully immunized children was however higher in 2020 than 2019 in Bo, Kono and Pujehun districts.
- Five districts reported fully immunization coverage under 70%.
   They were Bombali, Bonthe, Karene, Western Rural and Western Urban.



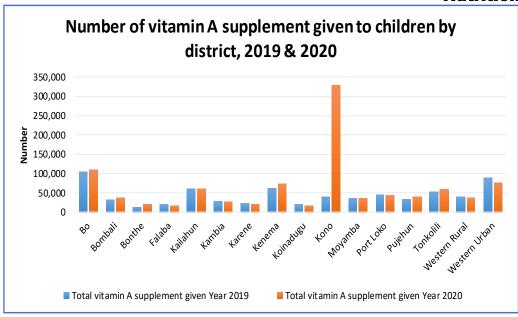
- Overall Penta 1 & 3 drop out rate was 2%, which is within the accepted 10% threshold. Overall Penta 1 and 3 dropout rate was considered very low.
- High Negative dropout rates were shown in 4 districts: Bombali, Bonthe, Kailahun and Pujehun districts.
- Kono district had the highest dropout rate of 6%, closely followed by Tonkolili district (5%), Moyamba (4%), Port Loko (4%) and Western Rural (4%)

### Malaria

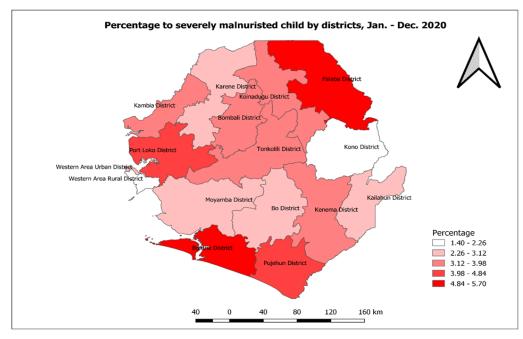


- Nationally, 67 % and 65% of children with confirmed malaria were treated with ACT within 24 hours of onset of fever respectively in 2019 and 2020, respectively.
- There are huge variations in early treatment of malaria with ACT among districts in 2020 with Kono achieving the highest percentages 89% in 2020, whilst Kambia and Port Loko districts achieved the lowest percentage of 48%.

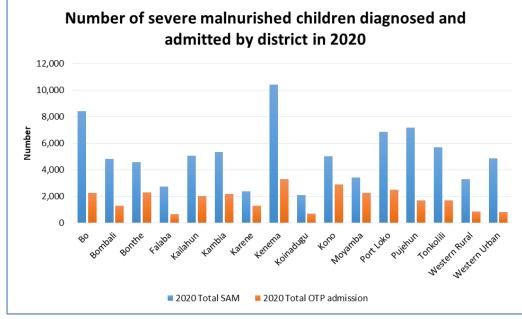
### **Nutrition**



- The number of vitamin A supplements given to children between the ages of 12-59 month was 1,010,245 in 2020 compared with 702,103 in 2019.
- Kono district recorded the highest uptake of vitamin A supplements to children between the ages of 12-59 month of 328,734 in 2020., closely followed by Bo district (109,663), Western Urban (75,729) and Kenema district (74,895).

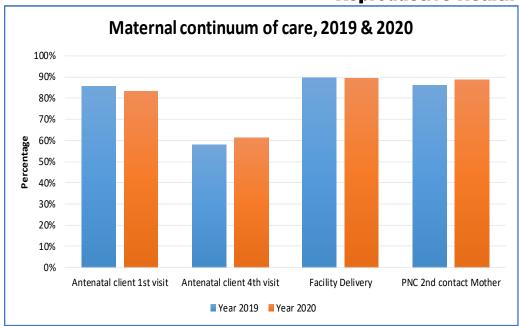


- A total of 87,804 (4%) children weighed were diagnosed with SAM in 2020
- The prevalence of SAM affects districts disproportionately with Pujehun and Kambia districts having the highest rates (6%), followed Falaba and Koinadugu districts (5%).
- The districts with lowest SAM rates were Bonthe, Karene, Kono and Moyamba districts (2%).

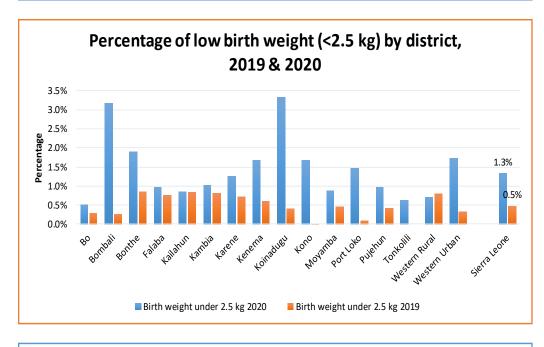


- A total of 82,028 under-five children were diagnosed for malnutrition, and 28,615 were put on treatment in 2020, equivalent to 35% of severely malnourished children.
- Moyamba district had the highest SAM admission rate of 66% followed by Kono district 58%.
- Western Urban had the lowest SAM admission rate of 17%, followed by Falaba 23% And Western Rural 26%.

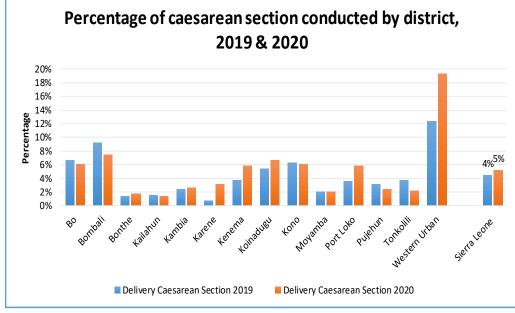
### **Reproductive Health**



- The ANC first visit coverage rate was slightly higher in 2019 (86%) than in i2020 (83%)
- Conversely, ANC 4th visit was however higher in 2020 (74%) than in 2019 (68%)), showing a high drop out of antenatal services between ANC1 and ANC4
- Facility delivery rate was slightly higher in 2019 (90%) than in 2020 (89%)
- Postnatal second contact for mother slightly increased between 2019 and 2020.



- There was a higher rate of low birth weight babies in 2020 (1.3%) than in 2019 (0.5%).
- In 2020, Koinadugu district had the highest rate of low birth weight babies (3.3%), followed by Bombali district (3.2%).
- Bo district had the lowest rate of low birth weight babies in 2020 (0.5%), followed by Tonkolili district (0.6%) and Western rural district (0.7%)



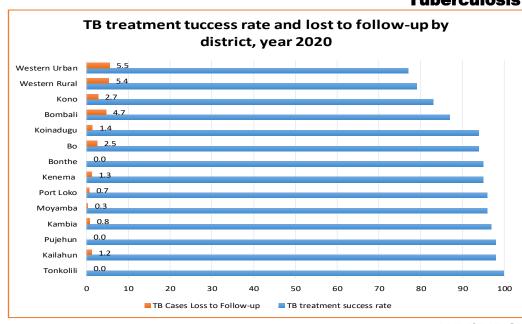
- Caesarean section rate was higher in 2020 (5%) than in 2019 (4%)
- Western Urban had the highest Ceasarean Section rate of 19% in 2020. followed by Bombali district with 7%.
- No Ceaserean section was conducted in Falaba district, as it has no secondary facility.
- Kailahun, Bonthe and Moyamba districts all had Ceaserean section rates below 2% in 2020.

### **Family Planning**



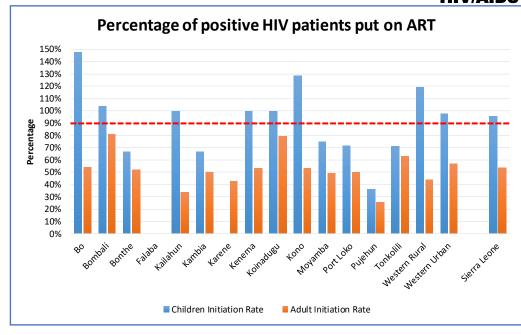
- Overall FP uptake was higher in 2020 than in 2019.
- Uptake of Jadelle implant was slightly higher in 2020 than in 2019.
- IUD uptake was very low in both years of only 2.275 clients.

### **Tuberculosis**



- TB Treatment success rate about 80%.
- Tonkolili district had the highest level of TB treatment success rate of 100% while Western Area had the lowest rate of 77%

### **HIV/AIDS**



- Overall only 55% of HIV positive patients initiated in ART in 2020.
- About 9% of HIV positive children initiated treated comparted to only 54% of HIV positive adults.
- All districts were below the 90% target for HIV positive patients initiating treatment.
- Apart from Falaba district that was not yet on the HIV database, Pujehun had the lowest ART Initiation rate (26%), followed by Kailahun (34%).







At the entrance of Ross Road Community Health Centre (CHC), a Peripheral Health Unit (PHU) in the East End of Freetown, stands a pedal-operated handwashing station. A member of staff wearing a mask branded "Corona na wi all fet" ("Corona is our fight") checks each visitor's temperature with a thermometer.

All health care workers wear masks and strictly observe all Covid-19 protocols. The woman at the helm of this CHC is Community Health Officer (CHO) Rose Stevens. Ross Road CHC is supported by the Western Area Urban District Health Management Team and Concern Worldwide, part of the NGO consortium (UNITE) which implements Saving Lives in Sierra Leone (SLiSL) in partnership with a United Nations consortium and Montrose.

The SLiSL programme conducts quarterly joint field visits to give FCDO, the Ministry of Health and Sanitation (MoHS) and implementing partners first-hand experience of the health system. The visits are also an opportunity to address specific issues and brainstorm solutions. This joint visit focused on maintenance of essential health services in the Western Urban District during Covid-19 and included a visit to Ross Road CHC to illustrate how essential health service delivery was affected at PHU level. During the visit, Rose Stevens presented the CHC's strategies to combat Covid-19 while maintaining delivery of routine health services.

At the start of the Covid-19 pandemic, the Western Area Urban District Health Management Team (DHMT) invited Rose and other health workers to attend sensitisation training, including handwashing, wearing masks, screening patients, encouraging social distancing and reporting suspected cases. The training helped Rose to implement efficient handwashing practices and mandatory wearing of face masks for all staff and patients at her CHC.

SLiSL's clinical mentorship programme has also proven to be helpful in easing the burden on Rose. Mentors from the UNITE consortium in Western Area Urban district (Concern Worldwide and Marie Stopes) visit the CHC regularly to provide training in reproductive, maternal, newborn, child and adolescent health (RMNCAH) skills integrated with Covid-19 prevention measures.

Rose has faced significant challenges in running the clinic during the pandemic, including an irregular power supply and a broken incinerator, which makes proper waste disposal difficult. At the onset of the crisis many patients were reluctant to come to the CHC as they feared they might contract Covid-19. Rose decided to work with Community Health Workers (CHWs) to share accurate information about safety measures in place at Ross Road CHC. As community members perceive CHWs to be trusted bearers of information, this engagement strategy proved to be successful in increasing the patient volume for routine health services.

Supporting over 40 staff with record-keeping and patient screening, as well as overseeing all activities at the clinic, including patient consultations, Rose continues to manage the clinic with fortitude and an optimistic can-do attitude.

Story is courtesy of Concern World Wide / UNITE Consortium, Saving Lives in Sierra Leone program.



Rose Stevens (green top) leads the CHC tour Inset: Pedal-operated handwashing station

Please help us improve future editions by sending your comments and suggestions to:

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