MEDICAL IMPACT SEPTEMBER MONTHLY REPORT 2024

MISL SEPTEMBER, 2024 MONTHLY REPORT

Introduction

After the Zoom meeting with Medical Impact Mexico (parent Body) on the 30th Augus,2024 which saw the need for MISL to follow strictly the strategic plan laid in June,2024 which activities will terminate in November amid closing the first contract.

Key activities for MISL from September to November include:

1.Engagement with District Health Management Team(DHMT) and Local Councils in the operation areas of MISL namely Western Urban, Western Rural Districts, Port Loko, Kambia, Moyamba, and Kono District.

2. Conduct baseline survey to generate empirical data that reflect the true nature of the District Health Systems in MISL mandatory regions of operation and to gain in-depth understanding on TB, Malaria and HIV AIDs prevalence, prevention and curative measures adopted

3. Draft MISL Health intervention plans for 2025 in preparation for submission to parent body

4. To continue to engage and collaborate with intended developmental partners and alliance.

The objective of MISL for the three remaining months is to increase the access to health services in a way of increasing the utilization rate of health facilities by supporting DHMTs, communities, and vulnerable groups of people by providing training to Health Care personnel to improve their skills, provide equipment and drugs in some facilities.

The Meetings are designed to hold between MISL and the DHMTs in all the districts of operation according to the agreed document Service Level Agreement (SLA) was created to facilitate the activities between the Districts and Health Partners (MISL & others) to ensure adequate Financial and Technical Support for the Health Sector to ensure effective and efficient service delivery at facilities guided by the policies, strategies and agreed processes.



Presentation of Service Level Agreement (SLA) to the District Medical Officer (DMO) of Kambia.

The meeting revealed that a high percentage of donor support and Implementing Partners activities are geared towards construction and reconstruction of health facilities. The objective of the Ministry of Health is to increase the access to health services by increasing the utilization rate of health facilities by providing skilled Health Care personnel, equipment and drugs in every facility.

The meetings facilitates the signing of agreements between MISL as implementing Partner (IP) and DHMT relating to the operation and funding arrangements. MISL will sign agreement and register with the Ministry of Planning and Economic Development (MoPED) after the line Ministry provides MISL with an attestation letter based on the agreed projects and activities to be carried out and selection of the area of operation. This will be hopefully accomplished when MISL shall have renewed the first contract with Medical Impact Mexico.

<u>HEALTH PARTNERS -</u> NGOs and FBOs are the key implementing partners, they are registered by MoPED in the NGO department in MoPED which is the dial needed document yet to obtain. However, alternate document have been secured to enhance approval for operating in the six District councils.

The line Ministries are responsible to agree, coordinate, monitor and supervise the supported and implemented activities of partners, said the District Health Sister I.

ACTIVITIES

RENEWAL and REGISTRATION

The DMO explained the procedure involved in renewal and registration of NGOs.

The Ministry developed a criteria list which guides IPs when submitting requests for renewal or registration Documents in the criteria list must be provided for attestation letter to be obtained by IPs for registration at MoPED. Key documents in the criteria list are proposal, budget, mapping form and letter of recommendation from DHMT. The activities and locations are guided and agreed with the Directorates/programs and DHMT

COORDINATION MECHANISM

The coordination Mechanism with the DHMT and Local councils seeks to synchronize activities, increased information exchange and stronger partnership between MISL and MOHS, as well as alignment with the national development priorities 2025.

The main objectives of the Coordination Mechanism are to:

- To ensure better use of scare resources, alignment and harmonization
- Provide common answers to common problems.
- Address common issues (Gender, Water, Training etc.)
- Address specific regional issues (Malaria, TB HIV & Aids etc.)
- Speak with "one voice"
- Avoid overlap
- Build capacity and experience.

Exchange of experience, knowledge and objectives of the National Health policy and the National Health Sector Strategic Plan.

Important functions of this process are, enhancing communication and collaboration with DHMT; aligning; harmonizing and mapping partner's (MISL) activities and resources with government plans and policies.

Due to resource constraints, carrying out these engagements with the DHMTs and District Councils within one month period is not feasible and as a result these sessions are extended to last three months, September to November, 2024.Communication with especially the DHMT continues.

MEETINGS

MISL has commenced organizing the DHMT and Local Council (health partners') coordination meetings and also supports focal persons for TB, Malaria, and HIV Aids EPI program organize meetings and workshops.

COORDINATING DISTRICTS HEALTH TEAMS AND DISTRICTS LOCAL COUNCILS

The organization MISL through Local Councils is liaising with the DHMT to coordinate and open new negotiation for the incoming 2025 project contract, a new batch of implementation package.

The District Medical Officers (DMOs) in each of the districts received a letter from the Administrative Officer/secretary, Madam Mariama Kargbo for the permission to conduct meetings and based line survey on health and health related priorities in the approved districts of MISL operations.

In the surveys to be conducted in all the six operational districts is with the aim of gathering data from purposeful selected respondents is to gain understanding on the designated districts health priorities.

Contribution from the private sector, religious bodies, charities and bilateral support is about 10% to 15% and there is a rise in the number of private clinics and health care delivery centres mainly in the capital of Freetown and also in regional and districts headquarters towns.

RENEWAL and REGISTRATION

The cooperation and adherence of NGOs and other stakeholders (Councils, District Health Management Team, Donors, Ministry of Planning, and Economic Development and SLANGO) in the annual process of renewing existing NGOs and registering new NGOs has improved. One of the criteria in the process of registration and renewal is obtaining attestation from line ministry. The Ministry developed a criteria list which guides IPs when submitting requests for renewal or registration.

The coordination Mechanism in the Ministry seeks to synchronize activities, increased information exchange and stronger partnership between partners and MOHS, as well as alignment with the national development priorities.

The main objectives of the Coordination Mechanism of MISL stakeholders and Partners are to:

- To ensure better use of scare resources, alignment and harmonization
- Provide common answers to common problems.
- Address common issues (Gender, Water, Training etc.)
- Develop common approaches (e.g. ethics, standards)
- Address specific regional issues (Lasser Fever, Cholera etc.)
- Speak with "one voice"
- Avoid overlap
- Build capacity and experience.
- Exchange of experience, knowledge and good practices.

Important functions of this process are, enhancing communication and collaboration with partners; aligning; harmonizing and mapping MISL's activities and resources with government plans and policies.

MONITORING, SUPERVISION

ACHIEVEMENTS

-Communication between Kambia DHMT Local Council and the Ministry for implementation and support, has improved considerably through this strategic engagements. There is an increase of requests and clarifications from DHMT, with a high rate of resolution and satisfaction.

-Interaction and communication has improved between the DHMT, Local Council and MISL.

Collection of data and accommodation approach from DHMT has improved as the adherence through the process for registration of MISL and provide information from submitted documents.

CHALLENGES

A major constraint to the effective coordination, and evaluation of activities in the country especially in the rural areas is that MISL is seriously understaffed with only an admin officer who also supports the head Quarters level to mention an instance.

The capacity of the MISL to effectively perform its coordination functions especially at the district level, need to be strengthened. This means that the organization will also involve recruiting key personnel at National and District level to improve coordination and information exchange at the national and district levels.

Effective coordination with implementing MISL is a priority for the MOHS, said the M & E Officer. The mechanisms for consultation, collaboration and coordination are established on technical matters, but

the DHMT needs support both in terms of funding and technical assistance to facilitate and enhance the achievement of goals, he continued.

Though concerted efforts are being made by the Kambia DHMT heads of unit and various focal persons, but the Problems of resource predictability in terms of the amount, quality and timing of support, will halt or slow down the implementation of activities. However, with the assumptions that MISL will amass huge support which situation enhance and accelerate project activities; Project Manager II responded. He further assured the attendees that will set timetable.

Immediate: Provide funding to bridge the gap on required resources at all levels, Head Quarters and district level

Short Term: Align the MISL monitoring and evaluation framework with the DHMT M&E systems.

• Follow guidelines developed by MOHS when initiating assistance to the communities.

<u>Medium Term</u>: Develop standard procedures to be followed and monitored by the Partners and the Government.

• Develop a working programme with defined steps and responsibilities among different stakeholders involved in the budget support process;

CONCLUSIONS

Sierra Leone's health sector is heavily dependent on international assistance. Though considerable effort has been made to align interventions to district and national strategic plans, unfortunately, the sector is still characterized by off-project aid and inadequate monitoring.

This means that while progress has been achieved with respect to communication, collaboration and harmonization and alignment to DHMT health plan, a lot more needs to be done.

Health partners must share an interest in the concept of aid effectiveness as being important for keeping development efforts on-track, for drawing attention to outcome and impact level results, and for drawing lessons of good practice from accumulated experience.

When the government takes the lead, and partners collaborate constructively, dramatic results can be achieved in a limited timeframe.

Key documents that facilitates the activities of the health partners' coordination office (HPCO) with partners (MISL).

NGO POLICY REGULATIONS –Policies and guidelines for the operations of nongovernmental organizations in Sierra Leone.

The Basic Package of Essential Health Services (BPEHS) – The BPEHS defines a functional and resilient national health system, which is the guiding document for service delivery in all primary and secondary public health care settings.

NATIONAL HEALTH SECTOR STRATEGIC PLAN (NHSSP) - The National Health Sector Strategic Plan provides a common strategic framework to guide interventions by all actors at all levels of the health system in Sierra Leone.

The guideline for donations and duty free concession provides an oversight and management for donations and requests for duty free.

NGO criteria document informs implementing partners in Health on the documents to be submitted or completed to obtain an attestation from the Ministry for annual renewal of registration or for new registration.

PROPOSED PROJECT INTERVENTION APPROVAL FORM – The project intervention form is approved by the Directorate of the program, project or activities to be implemented. This document is required for registration or renewal process.

DISTRICT HEALTH MANAGEMENT TEAM (DHMT) PROJECT APPROVAL FORM - The DHMT project form is approved by the DMO of the district where the program, project or activities are to be implemented by the Implementing partners after discussions and agreement on the activities, location/s and the period. This document is required for registration or renewal process.



| Activity | Direct Beneficiary | Indirect Beneficiary | Total Beneficiary | Location |
|--|-----------------------|-------------------------|----------------------|-------------------------|
| Engagement with Kambia District Health Management Team (DHMT) on Health Priorities for 2024 Interventions | 30 | 300 | 900 | Kambia DHMT |
| Meeting with Kambia District Council for MISL districts operations Registration | 5 | 10 | 50 | Kambia District Council |
| Total | 5 | 310 | 950 | |

Direct Beneficiary: 33

Indirect Beneficiary: 310

