



**UN EBOLA RESPONSE MPTF
PROJECT QUARTERLY PROGRESS REPORT - VERSION 1
Period: June-August 2016**

Project Number and Title: #45- Ebola Survivors- Database Creation; Needs Assessment & Screening; Psychosocial Support & Reintegration into Society	PROJECT START DATE¹: 13-11-2015	AMOUNT ALLOCATED by MPTF 242,000USD	RECIPIENT ORGANIZATION WHO, UNICEF
Project ID: 00096723			
Project Focal Point: Name: E-mail:	EXTENSION DATE: dd-mm-yyyy	FINANCIAL COMMITMENTS	
Strategic Objective (STEPP) SON - Laying the foundation for recovery through the provision of comprehensive package of services to EVD survivors	PROJECTED END DATE: 12-11-2016	EXPENDITURES as of [date]	IMPLEMENTING PARTNER(S): Ministry of Health and Sanitation; Ministry of Social Welfare Gender & Children's Affairs; NGO partners
Mission Critical Action MCAAn - Description			
Location: Sierra Leone	Sub-National Coverage Areas: 12 districts of Sierra Leone (not including Bonthe)		

MONTHLY PROGRESS REPORT RESULTS MATRIX

OUTPUT INDICATORS

Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the (one month) reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
<i>Description of the quantifiable indicator as set out in the approved project proposal</i>					
Number of trained Survivor Advocates and Survivor Advocate Supervisors	12 Districts in Sierra Leone (no Survivors currently in	150 Survivor Advocates and 30 Survivor Advocate	152 Survivor Advocates and 22 Survivor Advocate Supervisors	174 CHWs trained (Survivor Advocates and Survivor Advocate Supervisors)	101% Survivor Advocates 73% Survivor Advocate Supervisor

¹ The date project funds were first transferred.



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	Bonthe)	Supervisors	trained		
10. Number of strengthened peripheral health units	12 Districts in Sierra Leone	104 PHUs strengthened	Following May, no further clinics have been established, as per plan	104 was target, 104 strengthened	
EFFECT INDICATORS (if available for the reporting period)					
% of Survivor Advocates confirming the improved medical services to Survivors in targeted districts	12 Districts in Sierra Leone	100%	Not measured to date.		

NARRATIVE

Situation Update *(please describe critical changes, if any, in the situation that affect the project (1-2 paragraphs))*

WHO assisted the Ministry of Health and Sanitation (MoHS) and the Ebola Survivors Care Consortium (ESCC) in the training of 152 Survivor Advocates and 22 Survivor Advocate Supervisors. A total of 174 CHWs were trained nationally using the training toolkit that was developed by WHO HQ and adapted to the context of Sierra Leone in accordance with the MoHS and partners. In addition, 104 peripheral health units, including CHCs, CHPs, MCHPs, were strengthened.

WHO supported MoHS to participate in monthly meetings with the Sierra Leone Association of Ebola Survivors (SLAES). The six month cycle of activities to meet the milestones set under Key Result Area 3 (KRA3) was put together by the MoHS with technical input from WHO.

Key Achievements *(please use this section to highlight your key achievements for the quarter, using bullet points if preferred)*

During the previous quarter, WHO supported the MoHS in the training of Survivor Advocates and Survivor Advocate Supervisors in the three regional hubs (Western Area, Northern Province and in the Eastern Province, which combined both the East and the South). The three regional trainings were done for the Survivor Advocates to provide Psychosocial First Aid (PFA) to Survivors and for monthly home visits to identify red flags amongst Survivors. Of particular interest in the curriculum was the training on navigating the health system, meaning the referral pathway. Survivor advocates were trained to help Survivors to access care at all the different levels of care within the MoHS system. As noted previously, target facilities and partner commitments have been confirmed in each district. This is essential in ensuring that the delivery of Survivor services and ongoing integration into the primary health service is streamlined and uniformed.

The next steps will be to train the Medical Officers in all 12 District Hospitals, excluding Bonthe. This will take place in the last week of September. The curriculum is currently being finalised.

Consecutively, WHO worked with the Deputy Chief Medical Officer to update the National President's Recovery



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Priorities including the identification of activities, indicators and milestones for implementing and monitoring progress against Key Result Area 3 (KRA3) – Care of EVD Survivors.

Furthermore, five sub-groups of the Survivors Technical Working Group (STWG) meet monthly under the leadership of MoHS and the PIU, with the support of WHO, to finalize key CPES Standard Operating Procedures (SOPs) and policies, which is still ongoing. WHO participated in all 5 STWGs to provide key technical input and support:

1. **Training and Mentorship Package:** This sub group has developed the training curriculum for the Clinical Training Officers (CTOs) and are developing the curriculum for the Medical Officers training.
2. **Human Resources:** Having defined the scope of work and job descriptions of the Survivor Advocates, Survivor Advocate Supervisors, Referral Coordinators, and the CPES District Transition Coordinator, individuals in each district to take up the role of Survivor Advocates have also been defined. The sub group prepared for negotiations on the terms of conditions of the employment of the Survivor Advocates with the government in June.
3. **Supply Chain and Logistics:** The quantification of drugs for the Survivor cohort has been done, which is now part of the free healthcare initiative, under CPES. However, discussions continue to provide solutions to issues of supply and distribution.
4. **Referral pathways:** The referral pathway has been clearly defined from the facility to the District Hospital and on to tertiary care. There are still ongoing discussions regarding referrals between tertiary facilities.
5. **Monitoring, Evaluation and Information Management:** The M&E log frame has been developed and validated by MoHS, with technical support from WHO. The key performance indicators were set for the Presidential Priorities in line with set milestones. Discussion is ongoing regarding reporting pathways and how communication will be facilitated through partners, Government agencies and donors.

Delays or Deviations (if any, briefly describe the delays or changes in focus, approach or targets, and provide a short justification for the change (1-2 paragraphs))

The Medical Officers training has been put on hold pending the approval of the Clinical Guidelines for Survivor Care adapted from the WHO interim Guidelines for the Sierra Leone context by the CMO.

The distinction and parallel programmes of the MoHS and MSWGA continue to pose challenges in coordination, decision making and preparation of training material.

Gender and Environmental Markers (Please provide disaggregated data, if applicable)

No. of Beneficiaries		Environmental Markers	
Women		e.g. Medical and Bio Hazard Waste	
Girls		e.g. Chemical Pollution	
Men			
Boys			
Total			



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Additional Information (*Optional*)