

Scorecard for Accountability and Action



Metrics

Policy and Financial Control	
Oral Artemisinin Based Monotherapy Ban status (2015)	Target achieved or on track
Community case management (Pneumonia)(2015)	Target achieved or on track
Community case management (Malaria)(2015)	Target achieved or on track
World Bank rating on public sector mgmt and institutions 2014 (CPIA Cluster D)	1.9
Commodities Financed, Implementation and Malaria Impact	
LLIN financing 2015 projection (% of need)	100
Public sector RDT financing 2015 projection (% of need)	60
Public sector ACT financing 2015 projection (% of need)	100
Operational LLIN/IRS coverage (% of at risk population)	100
On track in 2013 to Reduce Malaria incidence by >75% by 2015 (vs 2000)	No data/Not applicable
Tracer Indicators for Maternal and Child Health	
PMCT coverage 2014 (% pregnant HIV pts receiving ARVs)	18
% deliveries assisted by skilled birth attendant	19
Exclusive breastfeeding (% children < 6 months)	45
Vitamin A Coverage 2012 (2 doses)	70
DPT3 coverage 2013 (vaccination among 12-23 month olds)	65
Postnatal care (within 48 hrs)	No data/Not applicable

Key

Target achieved or on track
Progress but more effort required
Not on track
No data/Not applicable

Malaria transmission in South Sudan is generally perennial, with moderate to high intensity. The annual reported number of malaria cases in 2013 was 1,855,501 with 1,311 deaths.

South Sudan ALMA Quarterly Report Quarter Three, 2015

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Progress

South Sudan has made some progress in scaling-up malaria control interventions. Progress has been made in rolling out Community Case Management of malaria and pneumonia to increase coverage of case management. The country has recently banned oral artemisinin-based monotherapies. The country has secured sufficient resources to achieve universal coverage of LLINs and ACTs in 2015. South Sudan was awarded a 2015 ALMA Award for Most Improved in Malaria Control. South Sudan has recently increased coverage of the tracer MNCH indicator DPT3.

Impact

The annual reported number of malaria cases in 2013 was 1,855,501 with 1,311 deaths.

Key Challenge

- The lack of new resources allocated to malaria in the GF New Funding Model jeopardises the country's ability to sustain the gains made in the fight against malaria.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Work to fill the outstanding gaps required to sustain full coverage of ACTs in 2015	Q1 2016		All ACT gaps have been filled in 2015
Enact high level policy and strategy change	Improve rule-based governance, quality of budgetary and financial management, efficiency of revenue mobilisation, quality of public administration, and transparency and accountability in the public sector	Q3 2016		There has been a 0.1 decrease in Cluster D CPIA rating

South Sudan has responded positively to the recommended actions addressing low coverage of PMTCT and the lack of data for postnatal care and continues to track progress as these actions are implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Work to fill the outstanding gaps required to sustain full coverage of RDTs	Q1 2016

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due