

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)	No data/Not applicable
World Bank rating on public sector mgmt and institutions 2014 (CPIA Cluster D)	2.2
Commodities Financed, Implementation and Malaria Impact	
LLIN financing 2015 projection (% of need)	56
Public sector RDT financing 2015 projection (% of need)	100
Public sector ACT financing 2015 projection (% of need)	100
Operational LLINIRS coverage (% of at risk population)	65
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	
PMTCT coverage 2014 (% pregnant HIV pts receiving ARVs)	2
% deliveries assisted by skilled birth attendant	78
Exclusive breastfeeding (% children < 6 months)	55
Vitamin A Coverage 2012 (2 doses)	83
DPT3 coverage 2013 (vaccination among 12-23 month olds)	93
Postnatal care (within 48 hrs)	27

Malaria transmission in Sudan is low-to-moderate and occasionally epidemic. The annual reported number of malaria cases in 2013 was 989,946 with 685 deaths.

Key

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

Progress

Sudan has made steady progress in scaling-up malaria control interventions and has, in particular, been successful in attracting resources through the Global Fund. The country has also introduced Community Case Management for the treatment of malaria and banned oral artemisinin-based monotherapies. Sudan has secured the resources required to sustain universal coverage of RDTs and ACTs in 2015. Sudan has achieved high coverage of the tracer MNCH indicator DPT3 vaccination and vitamin A vaccination and has recently increased coverage of skilled birth attendants and exclusive breastfeeding.

Impact

Reports from the Ministry of Health show a decline in reported malaria deaths from the levels in 2000. Progress in reducing cases has been reported sub-nationally where interventions have been intensified. The annual reported number of malaria cases in 2013 was 989,946 with 685 deaths.

Key Challenge

- Delays in disbursement of funds.
- Insecticide resistance threatened vector control effectiveness.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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	Q2 2014		No progress reported

Sudan has responded positively to the recommended actions addressing low coverage of PMTCT and the policy on CCM malaria and continues to track progress as these actions are implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
MNCH ¹ : Optimise quality of care	Identify and address underlying reasons for the decreasing coverage of vector control	Q3 2016

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/iERG