Transition Planning for Fleet Management in Post-Ebola Sierra Leone

Project Location: Sierra Leone

Project Start Date: July 2015

Project Duration: 3 weeks

Introduction:

The Ebola Virus Disease (EVD) epidemic has had a devastating impact on Sierra Leone. It has infected almost 13,000 people in the country and directly caused almost 4,000 deaths. The UK has led the international response to this crisis committing £427 million for the treatment for EVD patients, burial teams, training frontline staff, providing laboratories to test samples and delivering the assets and systems necessary to eradicate the disease.

As the Ebola response changes in line with the epidemiology, the UK's Department for International Development (DfID) is planning for the responsible transitioning of these assets and systems to ensure Sierra Leone has the capabilities, processes and structures in place to facilitate the recovery of the health sector from Ebola, and for future emergency response. DfID sought to redeploy assets, including vehicles, to support the effective functioning of the District Health Management Teams (DHMTs) in all 14 districts of Sierra Leone. To ensure this is sustainable, DfID is considering supporting district fleet management for two years to maintain and operate these assets.

There is a clear recognition amongst all stakeholders that an opportunity exists to a) strengthen the health system through the development of effective fleet management systems for health vehicles and b) build resilience and a level of preparedness for a future EVD outbreak.

Methodology:

DfID contracted a Technical Team comprising of a Transport Management Specialist (Transaid) and a Health Services Specialist (Oxford Policy Management Ltd. – OPML) who spent two weeks in Sierra Leone (21st July – 2nd August 2015). During this time they met with and interviewed a series of stakeholders including government representatives at national and district level, INGO teams, donors and related parties. During the assignment the team travelled to the districts of Western Rural, Western Urban, Port Loko, Bombali and Kono.

DfID requested the team to visit representative districts to:

- Analyse the existing district and national level fleet management infrastructure, systems and structures, including those for the EVD response;
- Assess the transport requirements necessary for the efficient work of the DHMTs including regular supervision, training, and ambulance services across the district;
- Assess the requirements necessary to rapidly scale up fleet management infrastructure, systems and structures in order to respond to future emergency needs across Sierra Leone;
- Recommend appropriate asset and fuel usage monitoring, tracking and recovery systems; including systems for mitigating against fraud;
- Propose options of delivery models for district level fleet management including value for money assessments and a high level assessment of potential delivery partners;
- Interview stakeholders including relevant Government of Sierra Leone ministries and agencies, donors, and international and national level delivery partners including the SMART (Social Mobilisation and Respectful Burials Through faith-based alliance) consortium (who were managing the majority of DfID's donated vehicles), DHMTs and the District Ebola Response Centres;
- Support recommendations with evidence and lessons from other contexts and countries.

Based on their findings the overall objective of the assignment was for the Technical Team to undertake an analysis and produce recommendations based on a low-resource, medium-resource, and high resource model for:

- The wind down of the EVD response fleet and transition into longer term fleet management solution;
- Fleet management systems and structures necessary to support DHMT response capability in all 14 districts of Sierra Leone over a period of two years.

Alongside standard interviews, the team also utilised Transaid's "Transport Management Assessment Tool". This tool provides a framework with which to interview key stakeholders, collect primary and secondary data, and understand the systems and processes already in place. The tool includes the following sections:

- Documentation
- Situation Analysis
- Policy
- Operational Management
- Fleet Management
- Management Information
- Human Resources and Structure

Cost data relating to current fleet management costs was collected and was utilised to draw up models for future investment.

Outcomes:

The existence of an effectively managed and well maintained health fleet is an essential component of a functioning health system. Equally, such a fleet is vital for the prompt and coordinated response

required during public health emergencies such as the recent outbreak of the Ebola Virus Disease (EVD) in Sierra Leone.

Findings showed that during the recent EVD outbreak hundreds of vehicles, including ambulances, utility vehicles, motorcycles and boats were donated to support the response. Structures and systems were put in place to support the management of these vehicles. Post-EVD, the responsible transitioning of these assets and systems to the District Health Management Teams provides an opportunity to build a foundation of good fleet management practices which can be used to support ambulatory services, patient referral, pharmaceutical distribution, and emergency response. It was evident from the assessment on the ground that this was an opportunity which could easily be missed.

The final report produced by the Technical Team includes a series of recommendations for a responsible transition of these assets, but also a number of risks if the transition is delayed or does not receive the requisite investment.

Following fleet management assessments, and interviews with 44 stakeholders, the Technical Team made the following findings:

- The District Health Management Teams lack the systems, structures and capacity to manage health vehicles effectively
- The majority of stakeholders are averse to the DHMT being given responsibility to maintain and fuel vehicles if a cost effective alternative can be found
- The SMART Alliance and Handicap international have illustrated that with the necessary funding and expertise large fleets of vehicles can be effectively managed in Sierra Leone
- There is currently little basis on which to calculate health vehicle demand be it from an operational perspective or a public health priority perspective
- There are a large number of risks relating to a slow or insufficiently resourced transition
- Concurrent to this assignment a number of stakeholders are working towards the design and implementation of a National Ambulance Service

Conclusion:

Based on the findings above, the Technical Team have made the following recommendations:

- The Technical team have provided four recommendations base on low, medium and two high resource options
- The Technical Team strongly recommend the high resource option which features the following:
    - Transition of the DfID fleet to DHMTs
    - Contracting of an organisation/s to support the DHMTs and to maintain and fuel the vehicles as well as reporting on comprehensive Key Performance Indicator (KPI) information
    - That DfID budget for vehicle depreciation in order that the current fleet can be replaced when it reaches its Economic Point of Replacement
    - The two high resource options will not only provide a foundation for health services across the country, it will also represent emergency response capacity in case of a future EVD-type outbreak.

Tools Utilised: Transport Management Assessment Tool

Partners: This assignment was conducted by a team of two; one Health Services Specialist from OPML and one Transport Management Specialist from Transaid.

During the assignment in-country interviews were conducted with representatives from the following organisations;

DFID, Sierra Leone Red Cross, Western Urban District Ebola Response Centre, Port Loko District Health Management Team (DHMT), Bombali DHMT, Bombali SMART Alliance Office, Kono SMART Alliance Office, the World Health Organisation, E-Health Africa, Koinadugu SMART Alliance Office, the National SMART Alliance Team, the Health Systems Strengthening Hub, National Mnistry of Health and Sanitation (MoHS) Garage, Riders for Health, MoHS – Directorate of Planning, the National Ebola Response Centre (NERC), the Health Systems Strengthening Hub, Handicap International, the World Bank, Irish Aid, USAID/OFDA

About Transaid:

Transaid is an international UK development charity that aims to reduce poverty and improve livelihoods across Africa and the developing world through creating better transport. Transaid was founded by Save the Children and the Chartered Institute of Logistics and Transport. Our Patron is HRH The Princess Royal. Transaid specializes in the following:

- Building the capacity of public health authorities to provide effective, safe and cost efficient transport management systems to promote equitable access to primary health care services.
- Developing and improving logistics and supply chain systems to enhance the delivery of medicines, equipment and relief services to vulnerable communities.
- Promoting effective partnerships to support and enhance community participation in developing sustainable transport solutions in rural areas.
- Developing and delivering transport and logistics training and qualifications for public and private sector operators.

Transaid has the capacity and reach to lead projects throughout the developing world, but is equally capable of providing niche technical assistance to large scale health systems strengthening projects. Transaid maintains strong relationships with a number of leading international organizations including donor agencies such as DfID, DANIDA and USAID, and implementing organizations such as Health Partners International, Options Consulting, John Snow Inc. and Management Sciences for Health.