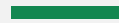




INVESTMENT FOR SUSTAINABLE HEALTH SECURITY IN NIGERIA

2020 ANNUAL REPORT





Investment For Sustainable Health Security In Nigeria


Maiden Annual Report (2020)

Regional Disease Surveillance Systems Enhancement (REDISSE) Project

Nigeria

REDISSE

Strengthening Collaborative Disease Surveillance and Response in Africa.

s The 2014–2016 Ebola outbreak in West Africa exposed the need for more resilient health systems, multi-sector engagement, and collaboration among neighboring countries to prevent, detect, and respond to the threat of emerging and epidemic-prone diseases. The Ebola outbreak overwhelmed the public health systems especially in the worst affected countries- Guinea, Liberia, and Sierra Leone, allowing for rapid escalation and geographic spread of the outbreak. This also led to the disruption of essential and life-saving health services during the emergency. The World Bank launched the Regional Disease Surveillance Systems Enhancement (REDISSE) project in 2016 to respond to the challenge and help protect countries from infectious disease epidemic threats like Ebola and future epidemics. Consequently, African countries participating in the REDISSE project were better positioned to mount an early and effective response to COVID-19. Prior to the pandemic, the program was building capacity for disease surveillance and epidemic preparedness. As the threat of COVID-19 began to escalate, the REDISSE project provided more than \$200 million for the response in 13 countries in West and Central Africa. The REDISSE project became effective in Nigeria on the 13th of February 2018, and is jointly implemented by the Nigeria Centre for Disease Control (NCDC), Federal Ministry of Health and Federal Ministry of Agriculture and Rural Development. The Project Coordinating Unit (PCU) is hosted at NCDC.

PROJECT FACTSHEET

PROJECT TITLE	The Regional Disease Surveillance Systems Enhancement (REDISSE) Project in West Africa
CREDIT REFERENCES	P159040
CREDIT AMOUNT	US\$ 90 million
PROJECT APPROVAL DATE	01 March, 2017
DATE OF SIGNATURE OF LOAN AGREEMENT	02 November, 2017
EFFECTIVE DATE	13 February, 2018
CLOSING DATE	31 December, 2023
DATE AND PLACE OF PROJECT LAUNCH	27 April, 2018. Abuja
EFFECTIVE START DATE OF THE PROJECT	27 April, 2018
PROJECT DEVELOPMENT OBJECTIVE	<ul style="list-style-type: none"> a. To strengthen national and regional cross-sectoral capacity for collaborative disease surveillance and epidemic preparedness in West Africa, thereby addressing systemic weaknesses within the animal and human health systems that hinder effective disease surveillance and response; and b. In the event of an Eligible Emergency, to provide immediate and effective response to said Eligible Emergency
PROJECT COMPONENTS	<p>Component 1: Surveillance and Health Information</p> <p>Component 2: Strengthening of Laboratory Capacity</p> <p>Component 3: Preparedness and Emergency Response</p> <p>Component 4: Human Resource Management for Effective Disease Surveillance and Epidemic Preparedness.</p> <p>Component 5: Institutional Capacity Building, Project Management, Coordination, and Advocacy.</p>
IMPLEMENTING AGENCIES	<p>Nigeria Centre for Disease Control</p> <p>Federal Ministry of Health</p> <p>Federal Ministry of Agriculture and Rural Development</p>

TABLE 1: REDISSE PROJECT NIGERIA FACTSHEET

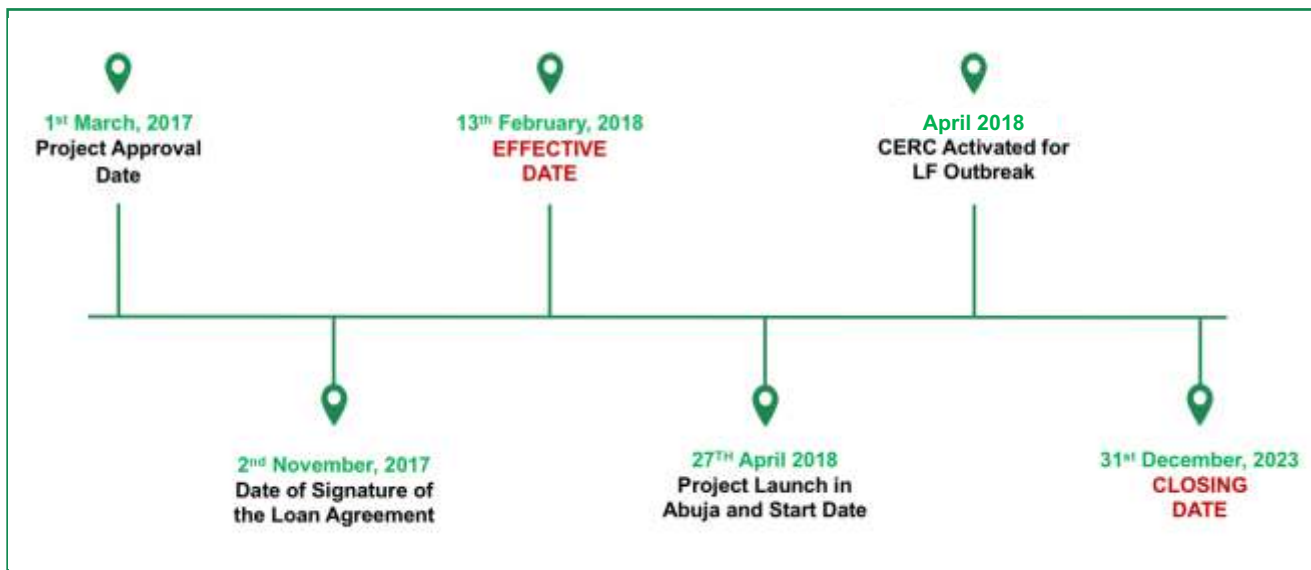
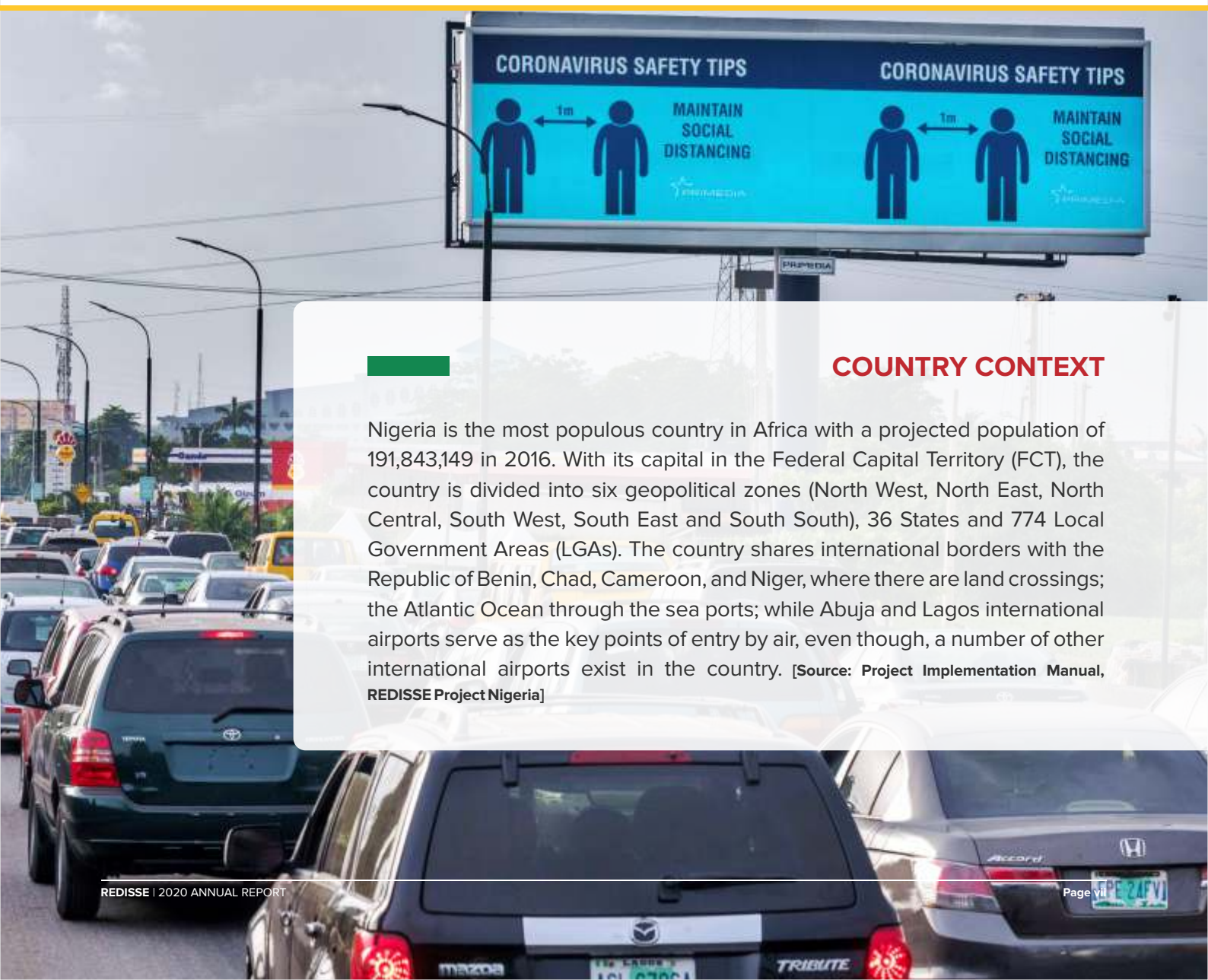


FIGURE 1: REDISSE PROJECT NIGERIA TIMELINE



COUNTRY CONTEXT

Nigeria is the most populous country in Africa with a projected population of 191,843,149 in 2016. With its capital in the Federal Capital Territory (FCT), the country is divided into six geopolitical zones (North West, North East, North Central, South West, South East and South South), 36 States and 774 Local Government Areas (LGAs). The country shares international borders with the Republic of Benin, Chad, Cameroon, and Niger, where there are land crossings; the Atlantic Ocean through the sea ports; while Abuja and Lagos international airports serve as the key points of entry by air, even though, a number of other international airports exist in the country. [Source: Project Implementation Manual, REDISSE Project Nigeria]

Summary of REDISSE Project Nigeria 2020 Achievements

The REDISSE Nigeria work plan for 2020 received approval and a no-objection from the World Bank in February 2020. However, due to the COVID-19 pandemic and Nigeria's first case in the same month, the 2020 work plan was temporarily suspended. In its place, an emergency response plan was developed to support the national response to the pandemic. In September 2020, the 2020 work plan was revisited, and activities reviewed and reprioritised. The table below reflects the reprioritised activities from the 2020 work plan. A detailed breakdown of prioritised project activities, as well as activities for the COVID-19 emergency response, is captured in chapter three of this report.

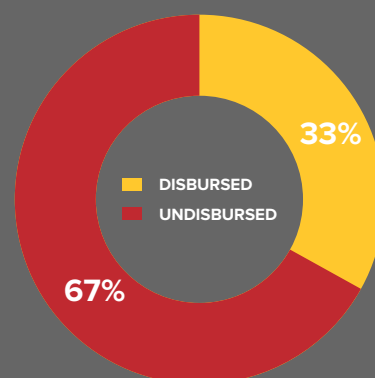


FIGURE 2:
LOAN DISBURSEMENT STATUS FOR
THE REDISSE PROJECT NIGERIA

**USD90M LOAN
DISBURSEMENT (DEC. 2020)**
Disbursement Rate increased by 22%

CODE	COMPONENTS	PLANNED ACTIVITIES	ACTIVITIES COMPLETED	ONGOING ACTIVITIES	COMPLETION RATE [COMPLETED + ONGOING] (%)
1	Surveillance and Health Information	12	1	4	42%
2	Laboratory Capacity Building	10	0	5	50%
3	Emergency Preparedness & Response	17	1	11	71%
4	HRM for Effective Surveillance	10	0	7	70%
5	Institutional Capacity Building	69	43	12	80%
TOTAL		118	45	39	71%

TABLE 2: REPRIORITISED ACTIVITIES FROM THE REDISSE PROJECT NIGERIA 2020 WORK PLAN

REDISSE NIGERIA RESPONSE TO THE COVID-19 PANDEMIC

SUPPORT OBJECTIVE		SUPPORT PROVIDED
 TREATMENT CENTRES	<p>To support NCDC's strategy to strengthen states' capacity to prevent, prepare for, detect and respond to infectious disease outbreaks like COVID-19</p>	<ul style="list-style-type: none"> Construction and equipping of COVID-19 isolation/ treatment centres across five states: Lagos, Rivers, Enugu, Kwara, Kano. (status: ongoing). Procurement and distribution of Infection, Prevention and Control (IPC) materials to states, Ministries, Departments and Agencies (MDAs), treatment centres and Federal Teaching Hospitals. Procurement of ambulances for point of entry, treatment centres.
 LABORATORY	<p>To support the expansion of Nigeria's laboratory testing capacity for detection of COVID-19 and other priority diseases</p>	<ul style="list-style-type: none"> Technical support for the Laboratory Information Management System (LIMS) and improving testing capacity for detection of priority diseases. 10 ad-hoc laboratory staff engaged (4 on the diagnosis bench) to improve diagnosis of COVID-19 within the country. Essential testing equipment, consumables, and reagents procured to support diagnostic activities for COVID-19 and other priority diseases. Support still ongoing.
 PHEOCs	<p>To support Emergency Operations Centre (EOC) operations and response to COVID-19 and other public health events and emergencies in the states</p>	<ul style="list-style-type: none"> 22kVA generators delivered to all states to support PHEOCs operations. Toyota Hilux vans delivered to PHEOCs in 20 states and the national EOC to support operations. Video conferencing equipment delivered to PHEOCs in 10 states to support communications. Engagement of ad hoc staff at National EOC (data officers, communication officers).
 NCDC CONNECT CENTRE	<p>To support the large number of calls received at the Connect Centre due to the COVID-19 pandemic</p>	<ul style="list-style-type: none"> 80 volunteers were recruited to the Connect Centre (call centre) to support the large number of calls received due to the pandemic. Provision of additional 20 laptops and other ICT equipment to expand the capacity of the connect center.
 SORMAS	<p>To support case-based reporting and enhanced decision making in managing disease outbreaks at the national and state level</p>	<ul style="list-style-type: none"> Travel and accommodation costs for training facilitators and participants across nine states: Abia, Adamawa, Gombe, Benue, Kogi, Osun, Ekiti, Yobe and Kwara. 106 laptops and 690 tablets procured along with accessories (pouches, screen guards, power banks) for the nine states. Supported deployment, including training of health workers, of SORMAS to nine States eventually ensuring SORMAS is deployed in all 36+1 States. Provided necessary ICT equipment for implementation of SORMAS, including 106 laptops and 690 tablets, in the nine states. Engagement of SORMAS Support officers for 22 States and 62 data officers for all the 36+1 States
 ₦100M COVID-19 GRANT + TA SUPPORT TO STATES	<p>To support implementation of high impact, time-bound interventions identified in states' COVID-19 incident action plans (IAPs)</p>	<ul style="list-style-type: none"> ₦100 million COVID-19 grant to each state and the FCT to support the implementation of Incident Action Plans (IAPs) developed by the States. Technical advisors deployed to all the 36+1 States to assist with the effective implementation of the IAPs developed by each State

TABLE 3: REDISSE PROJECT NIGERIA COVID-19 PANDEMIC INTERVENTION

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ABBREVIATION AND ACRONYMS

AHS	-	Animal Health Sector
AHSC	-	Animal Health Sector Coordinator
AMR	-	Antimicrobial Resistance
ASF	-	African Swine Fever
CDC	-	United States Centers for Disease Control and Prevention
CERC	-	Contingency and Emergency Response Component
COVID-19	-	Coronavirus Disease 2019
DSNOs	-	Disease Surveillance Notification Officers
EOC	-	Emergency Operation Centre
ESMF	-	Environmental and Social Management Framework
FAO	-	Food and Agriculture Organization
FMARD	-	Federal Ministry of Agriculture and Rural Development
GHS	-	Global Health Security
GHSA	-	Global Health Security Agenda
HCWMP	-	Health Care Waste Management Plan
HHS	-	Human Health Sector
HHSC	-	Human Health Sector Coordinator
HPAI	-	Highly Pathogenic Asian Avian Influenza
HRM	-	Human Resource Management
IAP	-	Incident Action Plan
IDSR	-	Integrated Diseases Surveillance and Response
IHR	-	International Health Regulations
IPC	-	Infection Prevention and Control
IPVMP	-	Integrated Pest and Vector Management Plan
JEE	-	Joint External Evaluation
NSC	-	National Steering Committee
NRL	-	National Reference Laboratory (two campuses: NRL Abuja and NRL Lagos)
NTC	-	National Technical Committee
MDAs	-	Ministries, Departments and Agencies
NADIS	-	National Animal Disease Information Service
NAPHS	-	National Action Plan on Health Security
NCDC	-	Nigeria Centre for Disease Control
OIE	-	World Organisation for Animal Health
PAD	-	Project Appraisal Document
PCU	-	Project Coordination Unit
PDO	-	Programme Development Objectives
PFMU	-	Project Finance Management Unit
PHEIC	-	Public Health Emergency of International Concern
PHEOC	-	Public Health Emergency Operation Centre
PIM	-	Project Implementation Manual
PPSD	-	Project Procurement Strategy for Development
PVS	-	Performance of Veterinary Services
RAHC	-	Regional Animal Health Center
REDISSE	-	Regional Disease Surveillance System Enhancement
SORMAS	-	Surveillance Outbreak Response Management and Analysis System
STEP	-	Systematic Tracking of Exchanges in Procurement
UHC	-	Universal Health Coverage
VTH	-	Veterinary Teaching Hospital
WB	-	World Bank
WBG	-	World Bank Group
WB-TT	-	World Bank Task Team
WP	-	Work Plan
WAHO	-	West African Health Organisation
WHO	-	World Health Organization



DR. OSAGIE EHANIRE

*Honourable Minister
of Health, Nigeria*

As **Nigeria** strives to achieve **universal health coverage**, an integral part of this effort is **investing** and building strong **national health security**, through robust disease surveillance systems.

MESSAGE FROM:

The Honourable Minister of Health

CHAIR, NATIONAL STEERING COMMITTEE, REDISSE PROJECT NIGERIA

Nigeria has made significant progress in health security in recent years, but not without challenges. The periodic occurrence of infectious disease outbreaks in Nigeria and the West African sub-region reflects the realities of public health challenges that we face. Our country and indeed the West African region is at risk of infectious disease outbreaks given our tropical climate, population size and certain social practices which can contribute to rapid spread of diseases across country borders.

The West Africa Ebola epidemic and the COVID-19 pandemic have demonstrated the socio-economic damage that large scale epidemics can create. These periodic outbreaks we record, further highlight critical capacities that countries, including Nigeria, must continue to develop to protect their citizens. It is on this premise that a remarkably unique project like the Regional Disease Surveillance Systems Enhancement (REDISSE) project was founded.

As Nigeria strives to achieve Universal Health Coverage, an integral part of the effort is investing in and building strong national health security through robust disease surveillance systems for prevention, detection, and rapid response, components needed to control disease outbreaks from within and outside our borders.

The REDISSE project has been under implementation in Nigeria since it became effective in February 2018. During this time, it has strengthened disease surveillance and response systems in Nigeria and other benefiting countries in the Phase 2 of the project. The project has strengthened regional level collaboration (information exchange), coordination (regional policies and technical strategies) and resource sharing (training institutions and reference laboratories). It is also providing support for the implementation of Nigeria's multi-sectoral National Action Plan for Health Security, which has the potential to rapidly scale up our capacity to prevent, detect and respond to infectious disease outbreaks.

In keeping with Nigeria's commitment to the International Health Regulations (IHR, 2005) and Global Health Security Agenda (GHSA), the REDISSE project can strengthen Nigeria's capacity to prevent avoidable catastrophe.



ALH. MUHAMMAD S. NANONO

Honourable Minister of Agriculture and Rural Development, Nigeria

The FMARD envisions an **integrated disease surveillance approach**; one that fosters necessary collaboration with relevant MDAs and international organisations for **timely prevention and control of zoonoses and other emergencies.**

MESSAGE FROM:

The Honourable Minister of Agriculture and Rural Development

CO-CHAIR, NATIONAL STEERING COMMITTEE, REDISSE PROJECT NIGERIA

The Federal Ministry of Agriculture and Rural Development (FMARD) is saddled with the mandate of implementing policies on agriculture to provide an enabling system and environment for the attainment of food security, food safety and security of Nigeria's food economy. This is a priority area for the FMARD, approached through strategic engagement with state and non-state actors to facilitate programmes for improved animal health surveillance, which contributes immensely towards ensuring the nation's food and health security.

The exponential population growth in Nigeria and the world at large means people move around even more and are interconnected in more ways than previously seen. This interconnectedness which revolves around humans, animals and the environment has increased interaction between the human, animal and plant interface, multiplying the risk of human exposure to new diseases that are infectious in nature. We see more the emergence of these infectious diseases — the zoonoses — a trend that is likely to continue.

In delivering on our mandate and to achieve animal health security, the FMARD envisions an integrated disease surveillance approach; one that fosters necessary collaboration with relevant Ministries, Departments and Agencies across the country, and international organizations including the FAO, OIE and WAHO for timely prevention and control of zoonoses and other emergencies. The Regional Disease Surveillance Systems Enhancement (REDISSE) project has provided a unique opportunity to strengthen our overall surveillance systems and achieve more towards a sustainable and strong national health security. The project is achieving its development objective to strengthen national cross-sectoral capacity for collaborative disease surveillance and epidemic preparedness in Nigeria.

I commend everyone on the REDISSE Project for their commitment to a stronger health security in Nigeria



DR. CHIKWE IHEKWEAZU
Director General, NCDC

For the **first time**,
we have an
opportunity to
bring together
**health and
agriculture** in a
truly **One Health
response** and
commit funding
behind our
collective effort to
**protect the health
of our people.**

KEYNOTE BY:

The Director General, Nigeria Centre for Disease Control

CHAIR, NATIONAL TECHNICAL COMMITTEE, REDISSE PROJECT NIGERIA

The Nigeria Centre for Disease Control is Nigeria's national public health institute with the mandate to lead the prevention, preparedness for, detection and response to infectious disease outbreaks.

Every year, Nigeria records annual outbreaks of infectious disease outbreaks. The Joint External Evaluation (JEE) of IHR core capacities conducted in June 2017 highlighted critical gaps in Nigeria's health security system, providing an opportunity to understand these gaps and identify priorities to mitigate them. Following this, we worked with various stakeholders to develop a National Action Plan on Health Security, as a framework to implement the One Health approach for health security. A midterm JEE in 2019 highlighted improvements in our health security, but noted the need to strengthen our health security capacity across human and animal health sectors.

The NCDC has been working closely with the Federal Ministry of Agriculture and Rural Development and other government institutions in addressing these gaps, through opportunities such as the REDISSE project. We have developed targets to achieve this including full digitalisation of all Integrated Disease Surveillance and Response (IDSR) reporting and feedback, delivery of a laboratory network that can support surveillance to achieve 80% confirmation of priority diseases, and investment in workforce development at institutions and through the Nigeria Field Epidemiology Training Programme (NFETP). With support from the REDISSE project, we have remained within reach to achieve these targets in a timely and effective manner.

The REDISSE project is niched in its provision of support to the prevention, detection, and the response to infectious disease outbreaks and across relevant sectors at the same time. It has provided a unique opportunity to strengthen what we have already defined as our priorities for national health security. For the first time in recent history, we have an opportunity to bring together health and agriculture in a truly One Health response and commit funding behind our collective effort to protect the health of our people.

We are grateful to the World Bank for support through the REDISSE project and will continue working with other government institutions towards our goal of stronger health security in Nigeria.



DR. OLANIRAN ALABI

*Chief Veterinary Officer, Nigeria/
Director, Department of
Veterinary & Pest Control Services*

The **REDISSE project** has come as a much-needed boost to the various aspects of our work. From **strengthening of human resource capacities**, to **supporting prevention, detection** and response efforts in Nigeria's **animal health surveillance**.

KEYNOTE BY:

The Chief Veterinary Officer of Nigeria

CO-CHAIR, NATIONAL TECHNICAL COMMITTEE, REDISSE PROJECT NIGERIA

The Department of Veterinary and Pest Control Services (DVPCS) has a mandate to oversee all animal health, safety and wholesomeness of food of animal origin for human consumption and Pest Control Services. It is involved in the prevention, control and eradication of transboundary animal diseases, as a core component of Nigeria's national health security infrastructure. Leading the animal health component of Nigeria's One Health strategy, the DVPCS has been working closely with the Nigeria Centre for Disease Control and other relevant Ministries, Departments and Agencies to realise Nigeria's One Health Strategy.

The REDISSE project has come as a much-needed boost to the various aspects of our work. From strengthening of human resource capacities, to supporting prevention, detection and response efforts in Nigeria's animal health surveillance. Key areas of intervention the REDISSE project is currently supporting in the animal health sector includes the strengthening of capacities for improved animal health surveillance across the States through training and retraining of trainers, step down trainings and active surveillance. We now have a large pool of disease surveillance agents and community animal health workers spread across Local Government Areas in all 36 States of Nigeria; this is in addition to the procurement of passive disease surveillance materials in line with the World Organisation for Animal Health (OIE) performance of veterinary services (PVS) recommendation.

Also, the animal health laboratory network has received a tremendous boost in the last one year where, for the first time and among other successes, a technical working group (TWG) was formed and has become very active and successful in tackling major challenges that have hindered progress in that area.

The REDISSE project has also supported sustainability and increased coverage of our annual anti-rabies campaign to parts of the nation experiencing such outbreaks on a yearly basis. The project also funded the update of the National Animal Diseases Information System (NADIS) database to enhance effective animal disease surveillance in the country. Other areas include support to the National Veterinary Research Institute (NVRI) laboratory and her outstations, support to the various Veterinary Teaching Hospitals (VTHs) in the country, and support for risk communication activities to improve awareness on animal health diseases.

Indeed, the REDISSE project, in accordance with its project development objectives to strengthen effective animal disease surveillance and response, has become a crucial to our efforts to develop early warning and reaction systems.



KEMI LADEINDE

*Project Coordinator,
REDISSE Nigeria*

**Support from the
REDISSE project
has grown rapidly
to become a
major contributor
to national efforts
in detection,
prevention,
preparedness
and response to
disease threats of
public health
importance.**

WELCOME BY:

The Project Coordinator, REDISSE Project, Nigeria

It is my pleasure to present the first annual report on the Regional Disease Surveillance Systems Enhancement (REDISSE) project in Nigeria. The report provides an overview of the REDISSE project, highlighting key achievements of the project in Nigeria in the last one year and notable achievements since it became effective in Nigeria. Guided by the project development objectives, the REDISSE project provides support to strengthen collaborative disease surveillance across the human, animal and the environmental health sectors.

The REDISSE project intervention which has been effective in Nigeria since 2018, became even more crucial in the wake of the Coronavirus Disease 2019 (COVID-19) outbreak in Nigeria. Premised on five key components, REDISSE project interventions for the COVID-19 pandemic response in Nigeria spread across the federal level with strengthening of capacities for disease surveillance and laboratory services, to state levels with the strengthening of response infrastructure, and provision of facilities, equipment and human resource, to ensure states are better able to mount effective response at the sub-national level. A grant of N100,000,000 given to each state further boosted response at the sub-national level, providing support to implement Incident Action Plans developed by the states for high impact, time-bound interventions.

In this report, we share progress made since the project began in Nigeria including support for the complete digitalisation of Nigeria's infectious disease case-based surveillance system, establishment of the first veterinary laboratory network in Nigeria, progress towards increased government ownership of the Nigeria Field Epidemiology Training Programme, joint training for military officials on health emergencies amongst other activities.

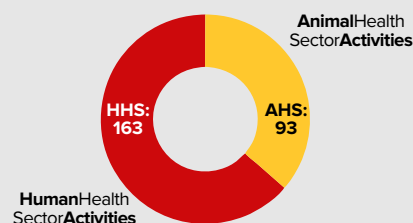
In three years, the REDISSE project in Nigeria has made significant progress that can serve as learning points to other beneficiary West African countries. The fund has been used in initiating rapid response to critical public health emergencies. On the 6th of April 2018, the Contingent Emergency Response Component (CERC) of the project was activated in response to a Level-3 outbreak of Lassa fever. It is worthy of note that the REDISSE project CERC activation was the first time that the CERC will be activated for a health project.

As we approach the mid-term review of the five-year REDISSE project in Nigeria, further support to the human and animal health sector will be geared towards building sustainability for Nigeria's health surveillance systems and the entire health security apparatus.

I hope you find this report rich and informative. Once again, I welcome you to share in our success as we strengthen collaboration for the work to build a model national health security system for Nigeria as part of the West African sub-region.

Executive Summary

2020
WORK PLAN
256
ACTIVITIES



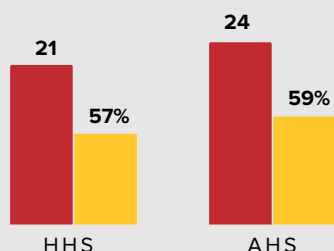
The Regional Disease Surveillance Systems Enhancement (REDISSE) project became effective in Nigeria in February 2018 and was officially launched on April 27, 2018. The project aims to strengthen national and regional capacity for collaborative disease surveillance and epidemic preparedness across human and animal health sectors. This is the first annual report of the REDISSE project in Nigeria, describing the project achievements in the year 2020.

At the beginning of 2020, Nigeria developed its project work plan in alignment with the National Action Plan for Health Security (NAPHS) and the REDISSE project result framework. The plan had a total of 256 activities with 163 and 93 activities for the human and animal health sectors, respectively. However, the implementation of this plan was disrupted by the COVID-19 pandemic. Therefore, the project workplan was reviewed with the COVID-19 response as a major priority.

The Human Health Sector (HHS) led by NCDC developed a COVID-19 Emergency Response Plan with focus on interventions for the control of the pandemic. The activities centered around immediate pandemic response and control, as well as the development of sustainable capacity for future disease outbreaks. Of the 39 activities in the plan, 28 were completed with a completion rate of 71.8%. Some of the project achievements include commencement of construction for COVID-19 infectious disease treatment centres across five states; distribution of a Toyota Hilux van and a 22kVA power generating set to all 37 State Public Health Emergency Operations Centres (PHEOCs) across the country to support operations; disbursement of a grant of N100 million COVID-19 support fund to state governments; deployment of one Technical Advisor to each state to assist with the effective implementation of incident action plans (IAPs) developed by the state for COVID-19 preparedness and response; training and equipment support for the deployment of the Surveillance, Outbreak Response Management and Analysis System (SORMAS) across nine states; as well as recruitment of staff and volunteers for the NCDC's national call centre, the NCDC Connect Centre.

In addition to the COVID-19 response, the REDISSE project in Nigeria supported the review of the curriculum for Integrated Training of Surveillance Officers in Nigeria (ITSON), as well as engagement of ad hoc laboratory staff and procurement of essential equipment consumables and reagents to support routine diagnostic activities. Importantly, the project provided support for the training of 44 residents in the Advanced Field Epidemiology Training Programme, as well as engagement of technical assistants for operational management of the programme.

The Animal Health Sector (AHS) led by FMARD implemented 12 activities within the annual work plan. Some of these includes the training of disease surveillance agents for community-based surveillance of zoonotic and non-zoonotic animal diseases; procurement of disinfectants and veterinary stockpiles to contain outbreaks of African Swine Fever (ASF) in Lagos and Ogun



2020
WORK PLAN
45
PRIORITISED
ACTIVITIES

■ PRIORITISED ACTIVITIES
■ COMPLETION RATE

States; and enhanced biosecurity measures along livestock value chains against emerging zoonotic diseases. In the course of the year, the animal health sector successfully responded to outbreaks of African Swine Fever (ASF) and rabies.

This report provides details on the project's activities in 2020, achievements, lessons learned and reflections as well as priorities for the coming year.

REDISSE Project Nigeria Achievements: 2020 at a glance

- Commencement of construction for COVID-19 infectious disease treatment centres across five states
- Distribution of a Toyota Hilux van for outbreak response to all 36 states and FCT
- Distribution of 22KVA power generating set to all 37 State Public Health Emergency Operations Centres (PHEOCs)
- Disbursement of a grant of N100 million COVID-19 support fund to State Governments
- Training and equipment support for the deployment of the Surveillance, Outbreak Response Management and Analysis System (SORMAS) across nine states
- Recruitment of staff and volunteers for the NCDC's national call centre, the NCDC Connect Centre
- Recruitment of surge capacity at the NCDC National Reference Laboratory
- Support for the establishment of the first Veterinary Laboratory Network
- Training of 120 military officers on health emergencies
- Support for review of the Integrated Training of Surveillance Officers in Nigeria (ITSON) curriculum
- Procurement of essential equipment, consumables and reagents to support diagnostic activities across the public health laboratory network
- Training of 44 residents in the Advanced Field Epidemiology Training Program
- Training of disease surveillance agents for community-based surveillance of zoonotic and non-zoonotic animal diseases
- Procurement of disinfectants and veterinary stockpiles to contain outbreaks of African Swine Fever (ASF) in Lagos and Ogun States and enhanced biosecurity measures along livestock value chains against emerging zoonotic diseases
- Response to outbreaks of ASF and rabies
- Provision of motorcycles and tricycles to states to improve animal health surveillance
- Training of port health officials on port-of-entry measures for the COVID-19 pandemic

The REDISSE project is designed as a multi-sectoral, One Health project, crafted as an interdependent series of project, being implemented across the human and animal health sectors, in four phases across Africa.

HOW WE WORK



chapter ONE

Project Background

The Regional Disease Surveillance System Enhancement (REDDISSE) project is a World Bank credit, aimed at strengthening countries in the Economic Community of West African States (ECOWAS) sub-region following the 2014 West African Ebola crisis.

The REDISSE project is designed as a multi-sectoral, One Health project. Designed as an interdependent series of project, it is being implemented across the human and animal health sectors, in four phases across West Africa. The second phase, being implemented in Nigeria, was approved by the Executive Board of the World Bank on March 2, 2017. The project became effective in Nigeria on the 13th of February 2018, following the signing of the financing agreement and issuing of a legal opinion by the Government of Nigeria. Nigeria has received \$90 million credit towards the project.



FIGURE 3: REDISSE PROJECT IMPLEMENTATION COUNTRIES (COURTESY: RESOLVE TO SAVE LIVES)

REDISSE Project in Nigeria

The REDISSE project became effective in Nigeria in February 2018 and was officially launched on the 27th of April 2018. The first work plan was conditionally approved in June 2018, the first procurement plan cleared in October 2018, and project implementation effectively began in November 2018. The project implementation stalled for several months while the project coordinating unit was

being established at NCDC. The routine implementation of the project was impacted by an unprecedented outbreak of Lassa fever in the beginning of 2018, and the subsequent triggering of the Contingency Emergency Response Component (CERC) to respond to the epidemic.

The REDISSE project in Nigeria aims to achieve

sustainable impact on the capacity for disease surveillance and response in the country. The project is guided by the findings and recommendations of the 2017 Joint External Evaluation (JEE) and the National Action Plan for Health Security (NAPHS). The NAPHS provides a framework for strengthening health security based on the One Health

approach of human, animal and environmental health. Finally, the REDISSE project is championing interconnectedness and integration of national disease surveillance systems across sectors in Nigeria

Project Structure

The guiding documents of the project are the Project Appraisal Document (PAD) and the Project Implementation Manual (PIM). These documents codify the project objectives and implementation arrangements. However, an internal review of the project indicators was conducted in order to be in alignment with the JEE results for Nigeria; this affected the baseline for the project; also, the West Africa Health Organisation (WAHO) requested alignment of the end targets for all countries for ease of comparison. Following the end of the 2018 Lassa fever outbreak which triggered the CERC, the project was restructured, and the fund was redistributed.

The project is being implemented under regular government structures by the Federal Ministry of Health, represented by the Nigeria Centre for Disease Control, and the Federal Ministry of Agriculture and Rural Development, represented by the Department of Veterinary Services. The Nigeria Centre for Disease Control (NCDC) hosts the project coordination unit (PCU), which is staffed by civil servants.

The project also has a regional component anchored by the West African Health Organisation (WAHO) which provides oversight and technical guidance through the coordination of the Regional Steering Committee, the Regional Technical Committee and technical support to countries. WAHO is also implementing some activities directly; these include support to regional laboratories, funding for regional training of residents on the advanced field epidemiology training programme, establishment of the centres for epidemiological surveillance in some countries and capacity building for regional rapid response teams. WAHO also provides technical backstopping in monitoring and evaluation to participating countries and encourage cross-country learning. At the national level the PCUs of the four participating countries in the region would be responsible for collecting and compiling all national level data, with the assistance of external partners through external evaluations, including the United States Center for Disease Control (U.S. CDC), World Health Organization (WHO) for the human health sector, and OIE for the animal health sector.

Project Components, Sectors and Units

The REDISSE project provides access to flexible and easily deployable resources through five components;



Project Governance

Governance for the project is provided by the National Steering Committee (NSC) which is chaired by the Honourable Minister of Health, with the Honourable Minister of the Federal Ministry of Agriculture and Rural Development as a co-Chair. Technical oversight is

provided by the National Technical Committee (NTC) which is led by the Director General of the NCDC, and co-chaired by the Chief Veterinary Officer of Nigeria (Director, Department of Veterinary and Pest Control Services, FMARD).

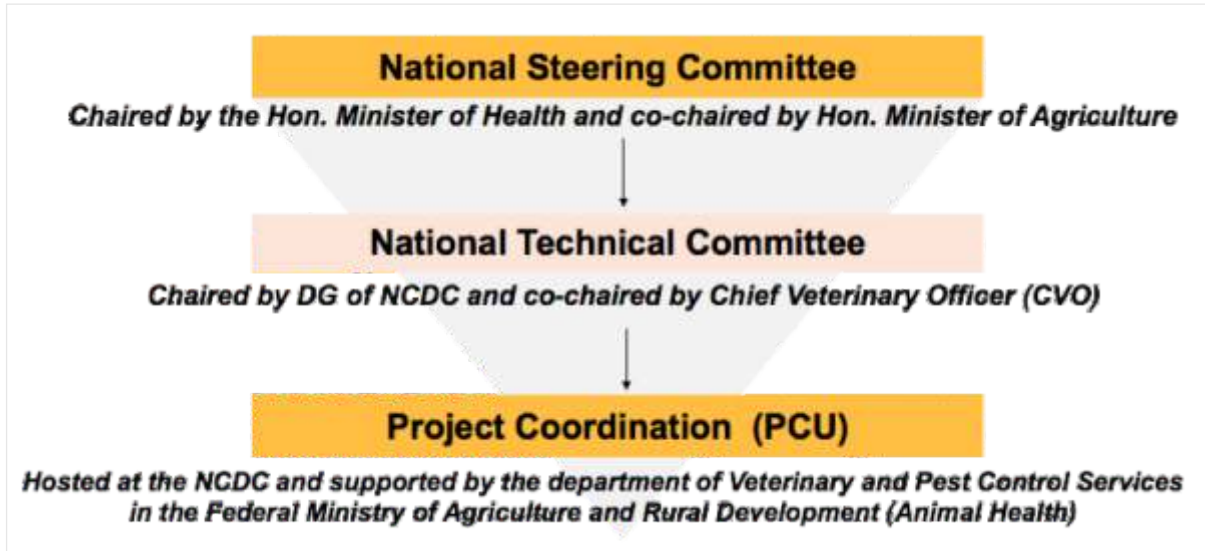


FIGURE 4: REDISSE PROJECT NIGERIA STRUCTURE

PHOTO, L-R: Chair of the National Technical Committee and Director General, NCDC, Dr. Chikwe Ihekweazu; Chair of the National Steering Committee (NSC) and Honourable Minister of Health, Dr. Osagie Ehanire; Chair of the NSC and Honourable Minister, Federal Ministry of Agriculture and Rural Development (FMARD), Alhaji Muhammad Sabo Nanono, represented by the Permanent Secretary, Dr. Muazu Abdulkadir; at the first NSC meeting for 2020 held on Tuesday, 7th of July, 2020.



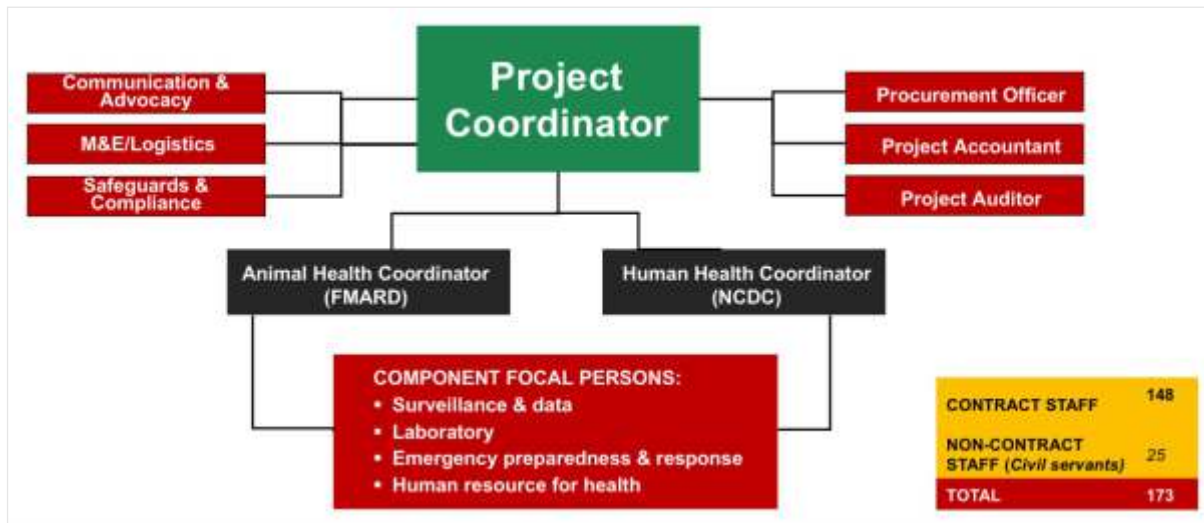


FIGURE 5: REDISSE NIGERIA PROJECT COORDINATION UNIT (PCU)

Project Implementation Stakeholders

The implementation stakeholders for the REDISSE Nigeria project include:

- a. Steering and Technical Committee
- b. Federal Ministry of Finance
- c. Project Facilitators (Federal, State, Operations Officers, Implementing Partners)
- d. Communities and Civil Society Organisations (CSOs)

The COVID-19 pandemic response provided an opportunity for Nigeria and the REDISSE project to invest and further strengthen Nigeria's national health security, and by this contribute to regional health security in West Africa.

BACKGROUND ON PROJECT SECTOR COMPONENTS



chapter TWO



CHIBUZO ENEH

*Lead, Human Health Sector,
REDISSE Project, Nigeria*

Leveraging COVID-19 For Strengthening Nigeria's Health Security System



DR. VAKURU COLUMBA

*Lead, Animal Health Sector,
REDISSE Project, Nigeria*

2020: Strengthening Nigeria's Workforce For Stronger Animal Health Surveillance System.

MESSAGE FROM THE SECTOR LEADS:

The COVID-19 pandemic response provided an opportunity for Nigeria and the REDISSE project to invest and further strengthen Nigeria's national health security, and by this contribute to regional health security in West Africa. The REDISSE project positively impacted Nigeria's response to the COVID-19 pandemic, moving quickly to fill identified gaps during the response, through the financing of the REDISSE COVID-19 Emergency Response Plan. Tasked with managing the human health sector of the project, I worked with component focal leads and Directors of technical departments in NCDC relevant to the project, to develop an annual work plan for the year 2020, concept notes for activities, and terms of references for activities approved on the workplan. As the HHS Lead, I also work with component leads to ensure compliance with World Bank regulations in implementing activities. In addition, I ensure fiduciary compliance of the HHS section of project, in line with the financial regulations of the World Bank and Federal Republic of Nigeria requirements. I welcome you to share in our achievements for the year 2020.

This sums up the year for us at the AHS - strengthening workforce capacity for a more resilient animal health surveillance and response system. Our core focus at the AHS in 2020 was the strengthening of the enabling factors around Nigeria's animal health security systems - skilled workforce, integrated animal disease surveillance system, effective logistics framework for laboratory activities, and more. Chief among these is the availability of a skilled workforce to drive this. The year 2020 to the training of more veterinary doctors and animal health officers, as well as more engagement of these officers in animal health activities, in line with our mandate. We are strengthening our systems to ensure early detection of outbreaks, and a rapid response to potentially serious animal health related events.

Project Components and Sub-components

The REDISSE project has five components with sub-components implemented across the Human Health Sector (HHS) and the Animal Health Sector (AHS). This section describes each component, and describes an impact story based on the activities implemented within the component in 2020.

COMPONENT ONE

Surveillance and Health Information Systems

This component deals with enhancement of national surveillance and reporting systems and their interoperability at the different tiers of the health system.

SUB-COMPONENTS

- Support coordinated community-level surveillance systems and processes across the animal and human health sectors;
- Develop capacity for interoperable surveillance and reporting systems;
- Establish an early warning system for infectious and zoonotic disease trends prediction

Strategies implemented support national and regional efforts, including cross-border coordination, in the surveillance of priority diseases (including emerging, re-emerging and endemic diseases) and the timely reporting of human and animal health emergencies in line with the IHR (2005) and the OIE Terrestrial Animal Health Code. This component also strengthens linkages of surveillance and response processes at the local level (through citizen and community engagement), sub-national and national levels of the health system, to ensure rapid detection of new cases and potential disease outbreaks within high-risk communities through early reporting to local health structures in real-time.



**IMPACT
STORY**

REDISSE Supports Deployment of SORMAS for COVID-19 Response

The 2017 JEE highlighted gaps in Nigeria's disease surveillance infrastructure including poor interlinkages across human and animal health sectors, delayed reporting of data and poor bi-directional information exchange. Based on this, the country identified the urgent need for a scalable system to enhance rapid collection, reporting and analysis of disease data in real-time for appropriate and collaborate public health action.

The Surveillance, Outbreak Response Management and Analysis System (SORMAS) is a system jointly developed by the Nigeria Centre for Disease Control and the Helmholtz Center for Infection Research (HZI) to improve disease surveillance as well as the detection and management of outbreaks in Nigeria. SORMAS was adopted in Nigeria as the national case-based surveillance system for IDSR reporting, and its roll-out began in 2017.

At the beginning of 2020, only 17 states had begun to use SORMAS (not covering all LGAs). However, to scale up real-time COVID-19 data reporting, NCDC moved swiftly to cover all states. By the end of November 2020, all states in Nigeria and the FCT, as well as LGAs had begun to use SORMAS for disease reporting. This has also enabled

rapid analysis of cases, contact tracing and other disease surveillance functions at state and national level.

The REDISSE project supported the deployment of SORMAS to nine states for management of disease outbreaks, engaging support officers, data officers and web developers. Specifically, the project supported travel and accommodation costs for training facilitators and participants across the nine states (Abia, Adamawa, Benue, Ekiti, Gombe, Kogi, Kwara, Osun and Yobe), and procured 106 laptops, 690 tablets and necessary accessories (pouches, screen guards, power banks).

Innovative digital surveillance management tools such as SORMAS are crucial to building resilient health security systems. As part of its project development objectives (PDOs), REDISSE is supporting Nigeria to improve the national surveillance and reporting systems and their interoperability at the different tiers of the health systems. This is to enhance surveillance of priority diseases (including emerging, re-emerging and endemic diseases) and the timely reporting of human public health and animal health emergencies in line with the IHR (2005) and the OIE Terrestrial Animal Health Code.



FIGURE 6: STATUS OF SORMAS DEPLOYMENT IN NIGERIA AS AT DECEMBER 2020

The project continues to support the strengthening of SORMAS and the entire disease surveillance infrastructure in Nigeria such as the Integrated Training of Surveillance

Officers in Nigeria and the full deployment of the Integrated Diseases Surveillance and Response (IDSR) system in Nigeria.



[PHOTO: NATIONAL TRAINING OF TRAINERS ON THE USE OF THE SURVEILLANCE OUTBREAK RESPONSE MANAGEMENT AND ANALYSIS SYSTEM]

Strengthening of Laboratory Capacity

This component involves the identification and establishment of networks of efficient, high quality and accessible public health and veterinary laboratories for the diagnosis of infectious human and animal diseases. It also includes the establishment of a national networking platform to improve collaboration for laboratory investigation in Nigeria.

SUB-COMPONENTS

- Review, upgrade and network laboratory facilities;
- Improve data management and specimen management systems;
- Enhance regional reference laboratory networking functions.



The Technical Working Group (TWG) on Veterinary Laboratory Network – Creating the First Veterinary Laboratory Network in Nigeria

In Nigeria, confirmatory diagnosis of animal diseases including major zoonotic diseases are carried out at the central diagnostic laboratory of the National Veterinary Research Institute (NVRI) in Vom, Plateau State. The NVRI operates a laboratory (with a level-3 biosafety facility), and 23 diagnostic outstations across states in the country. A common challenge across these facilities is the inadequacy of diagnostic equipment. This challenge spreads across the veterinary laboratories in each of the 11 Veterinary Teaching Hospitals (VTHs) across

the country, state-owned veterinary laboratories, and a few species specific (poultry diseases) private veterinary laboratories, resulting in these facilities achieving only limited diagnostic services.

Another key challenge is the lack of communication and exchange between these laboratories. This has led to gaps in communication for referrals, quality control measures, expertise and data sharing. A central coordination of veterinary diagnostic laboratories is critical

to improve networking among the laboratories and establish linkages between veterinary and public health laboratories for data sharing and early detection of major zoonotic diseases.

Based on this, a Veterinary Technical Working Group (TWG) was proposed to work towards filling the identified gaps. The aim of establishing this network was to facilitate prompt response to incidences of emerging and re-emerging zoonotic diseases, maximise prudent utilisation of resources, encourage cross linkages between veterinary and public health laboratories, as well as develop disease pathogen banks for research and vaccine development.

In March 2020, with support from the REDISSE project, the first ever TWG on Veterinary Laboratories Networking was inaugurated in Plateau State, with the objectives to consultatively develop a national strategy for veterinary diagnostic laboratories networking; to harmonise quality

control measures in all veterinary diagnostic laboratories at different levels; to facilitate sample referrals, data and expertise sharing amongst veterinary laboratories; and to improve linkages between veterinary and public health laboratories at all levels. Membership of the TWG includes laboratory diagnosticians from the central veterinary diagnostic laboratory at NVRI in Vom, Veterinary Teaching Hospitals, state owned veterinary laboratories, private veterinary laboratories, public health laboratories and veterinary epidemiologists.

The TWG is coordinated by the NVRI laboratory and tasked with developing and implementing a sustainable national strategy for veterinary laboratories networking, sample referral, data and expertise sharing and cross linkages between veterinary and public health laboratories. The TWG works virtually and meets physically every quarter to review, monitor and report on the progress and achievements of the laboratory networking to the Animal Health Sector Coordinator.

COMPONENT THREE

Preparedness and Emergency Response

This component supports national efforts to enhance infectious disease outbreak preparedness and response capacity by improving local government, state and national level capacities to prepare for impending epidemics in humans and animals, and to respond effectively to disease outbreak threats including the resulting mortality risks posed by infectious diseases.

SUB-COMPONENTS

- Enhance cross-sectoral coordination and collaboration for preparedness and response;
- Strengthen capacity for emergency response;
- Contingency Emergency Response Component (to improve the Government's response capacity in the event of an emergency).

Project interventions under this component provide support to improve country and regional surge capacity to ensure a rapid response during an emergency and, for what concerns the human health sector, a better performance of the healthcare system in service delivery.



IMPACT
STORY

Nigeria Trains 120 Military Medical Commissioned Officers on Health Emergency

Security and health sectors play a key collaborative role in addressing public health issues, such as during Nigeria's polio outbreak response and more recently, the COVID-19 response. Public health emergencies can challenge a country's security in many ways, therefore it is important to strengthen the collaboration between security forces and public health.

The Nigerian Armed Forces and security bodies in Nigeria represent an asset to public health due to their national presence, and their ability to deploy resources to hard-to-reach areas and security compromised areas. To improve the country's response capacity to infectious disease outbreaks, the military public health emergency management capacity needs to be strengthened.

Nigeria's mid-term Joint External Evaluation (JEE) in 2019 revealed commendable progress in the linkage between security and public health, from the 2017 JEE scores. However, certain gaps still exist which the NCDC has begun to address, working closely with security agencies and with support from the REDISSE project.

The NCDC introduced public health emergency operations training and workshops for officers of Nigeria's security agencies. In 2020, a total of 120 commissioned military medical personnel were selected from across the country with at least one personnel from each state. They

were involved in hands-on residential training held in two phases running simultaneously, to allow adherence to COVID-19 protocols. The training held in two regions: Lagos for participants drawn from the South-Western, South-Southern and South-Eastern states, and in the Federal Capital Territory in Abuja for participants drawn from the North-Central, North-Eastern and North-Western states.

The training established a general understanding of emergency operations processes and management, outlining key emergency documents, and sensitising the 120 military personnel on the need to bridge the gap between the public health and military as documented in JEE. Presentations by the Subject Matter Experts (SME) covered key thematic areas of emergency response management, EOC processes and discussions on integrated capacity building through re-training, mentoring, simulation exercises, and collaboration.

Post training, the trained military officers are linked with the respective PHEOCs in their states for mentorship and collaboration. Also, NCDC is working to provide a framework for the integration of military medical emergency operations centres with PHEOCs, to respond to public health emergencies, as well as develop a reporting and information sharing mechanism between state PHEOCs and the military.



[PHOTO: A PARTICIPANT RECEIVING HER CERTIFICATE OF PARTICIPATION AT THE MILITARY MEDICAL COMMISSIONED OFFICERS TRAINING ON HEALTH EMERGENCY IN LAGOS STATE]

COMPONENT FOUR

Workforce Development for Effective Disease Surveillance and Response

This component strengthens government capacity to plan, implement and monitor human resource interventions by establishing long-term capacity for improved management of human resources.

SUB-COMPONENTS

- Healthcare Workforce mapping, needs assessment, planning, and recruitment.
- Enhance Health Workforce training, motivation and retention.

In addition, the component helps in defining a career path for specialised public health expertise within the Nigerian civil service structure and incentivising the environment within which the developed workforce operates to ensure retention/prevent attrition is essential.



IMPACT
STORY

REDISSE Supports Training of 47 Residents In the Advanced Nigeria Field Epidemiology Training Programme



Nigeria has a goal of one trained field epidemiologist (or equivalent) per 200,000 population. To achieve this, a comprehensive national public health workforce training strategy has been developed for expansion, diversification, financial sustainment, and retention of the existing public health workforce. The REDISSE project is supporting institutional

efforts at implementing this strategy and the various programmes therein.

The REDISSE project is actively supporting the implementation and institutionalisation of the Advanced Nigeria Field Epidemiology Training Programme (AFETP), to bolster Nigeria's effort at developing institutionalised



[PHOTO: NCDC DIRECTOR GENERAL, DR. CHIKWE IHEKWEAZU, IN A PHOTOGRAPH WITH NFELTP COHORT 11 RESIDENTS DURING CLUSTER 2 IN-CLASS TRAINING]



[PHOTO: CROSS-SECTION OF NEW RESIDENTS AT THE COHORT 11 WELCOME, AS NCDC DIRECTOR GENERAL, DR. CHIKWE IHEKWEAZU, CHARGES THEM TO RUN AND FINISH STRONG]

and sustainable public health workforce capacity.

The Advanced NFETP is a two-year advanced training programme in applied epidemiology and public health laboratory practice, aimed at building a strong workforce for health security in Nigeria. It primarily targets health workers involved in disease surveillance and response activities at the Federal and State levels. Suitably qualified candidates from relevant governmental Ministries, Departments and Agencies (MDAs), as well as individuals from private institutions, are enrolled through a competitive process with a commitment to prioritise public service.

In 2019, the REDISSE project commenced active support

for the Advanced Field Epidemiology Training Programme (AFETP). Forty-four residents of Cohort 11 of the AFETP (37 from human health and 7 from animal health sectors respectively), were fully sponsored by the REDISSE project. To provide further support, four consultants were recruited by the REDISSE project for operational management of the programme. The project also supported the review and update of a transition plan, to further support the institutionalisation and sustainability of the AFETP, and a consulting firm has been engaged to implement the programme.

In the coming year, the REDISSE project plans to provide continued funding for the programme, including sponsoring of Residents and programme activities.

Institutional Capacity Building, Project Management, Coordination and Advocacy

This component focuses on all aspects related to project management: fiduciary (financial management and procurement), monitoring and evaluation, knowledge generation and management, communication, and management (capacity building, monitoring and evaluation) of social and environmental safeguard mitigation measures.

SUB-COMPONENTS

- Project coordination, fiduciary management, monitoring and evaluation, data generation, and knowledge management
- Institutional support, capacity building, advocacy, and communication at the national and regional levels.

The component provides for critical cross-cutting institutional support, meeting capacity-building and training needs identified in the country on top of specific technical capacity-building activities undertaken within the four technical components (including support to the management of operational research). The component also supports the routine external independent assessment of critical animal health and human health capacities of national systems using reference tools (such as OIE PVS and JEE) to identify weaknesses and monitor progress.



**₦100 Million
COVID-19
Grant and
Technical Support
To States**





One of the roles of NCDC as the national public health institute is to be responsive to the needs of State governments in preparing for, responding to, and building resilience for outbreak preparedness and response.

Prior to the COVID-19 pandemic, NCDC had developed a “Strengthening States for Health Security Strategy”. The COVID-19 pandemic provided an opportunity to accelerate the planned programmes within this strategy. The REDISSE project is supporting this effort to support sub-national health security, towards strengthening national and global health security.

As part of Nigeria's national COVID-19 response, each state was required to develop an Incident Action Plan (IAP) for their response. However, a major constraint was inadequate funding.

Following a request from NCDC and an intervention by Nigeria's Honourable Minister of Finance, Zainab Shamsuna, through a request for undisbursed funds of the REDISSE (II) Nigeria Project to support the State IAP implementation, the World Bank approved for project funds to be used. The REDISSE project supported each state with 100 million naira for immediate implementation of high impact, time-bound interventions identified in the State's IAP. All State Governors in Nigeria were informed of this development on the 1st of May, 2020, and went on to receive the said support based on the following criteria:

- Every state must submit an Incident Action Plan (IAP) for

responding to the COVID-19 pandemic in their state. The IAPs were developed based on the COVID-19 response pillars: Surveillance, Infection Prevention and Control, Case Management, Research, Laboratory, Logistics, Risk Communication, Points of Entry and Coordination.

- Establishment of an Emergency Operation Centre with clear roles and responsibilities
- Opening of an account in a commercial bank
- Every state to sign a grant agreement with the NCDC.

To ensure due diligence and proper utilisation of the funds, the NCDC team reviewed IAPs submitted by each state, making recommendations to the World Bank for further review and approval. Afterwards, a grant agreement was signed, and the grant disbursed to the state. The first state to benefit from this was Ekiti State, with the grant signing done on June 27th, 2020, between the Director General of the NCDC, Dr. Chikwe Ihekweazu, and the Chairman of the Nigeria Governors' Forum and Executive Governor of Ekiti State, Dr. Kayode Fayemi. Maiden disbursement took place on the 1st of July, 2020.

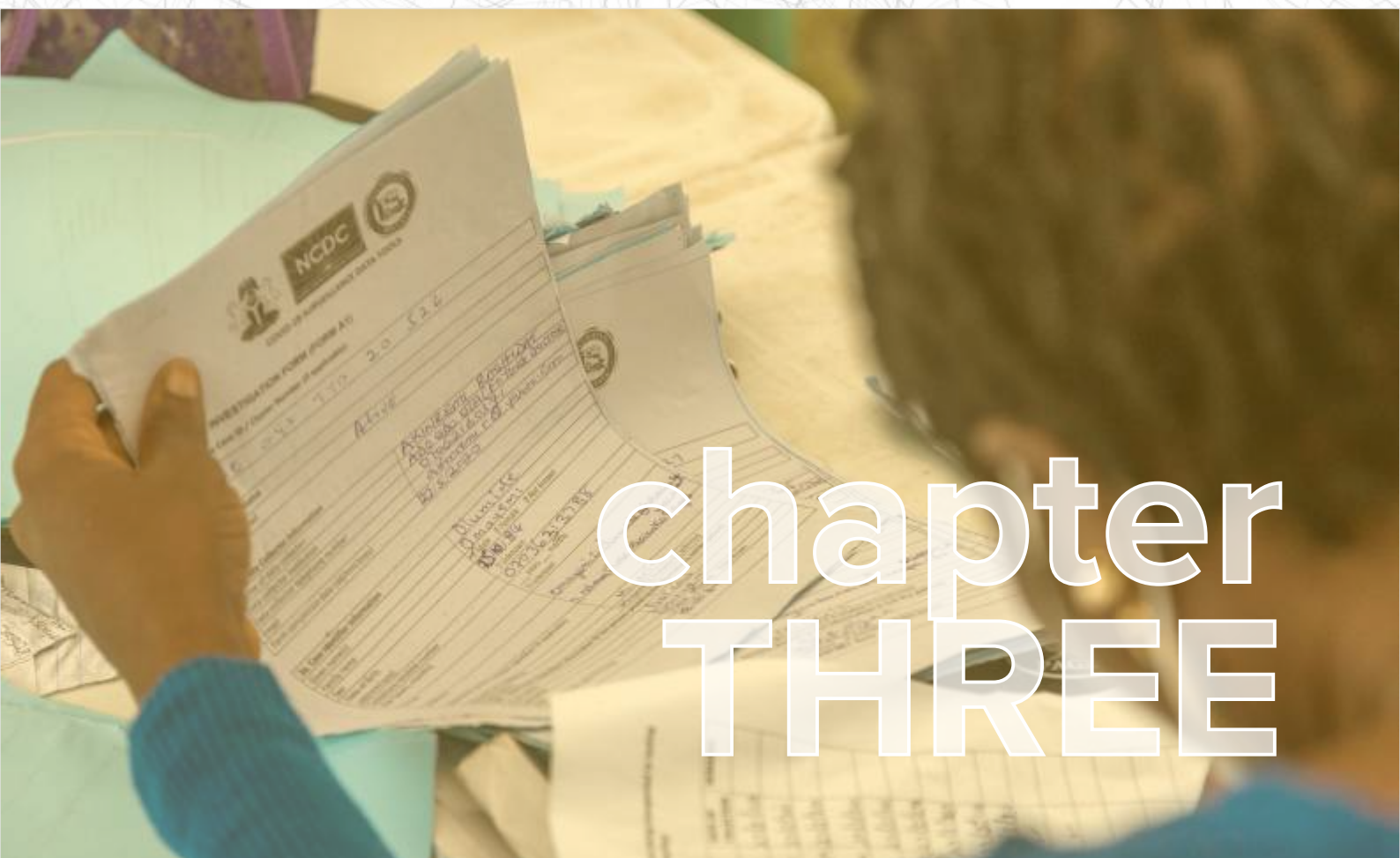
So far, 35 states have gone through the required process and have received the 100 million naira for implementation of their IAPs. The grant has enabled states to hire surge staff for contact tracing, data management and other activities, scale up their risk communications, implement research activities, improve staff efficiency at the COVID-19 EOC and other significant achievements.



[PHOTO: CHIMEZIE ANUEYIAGU, TECHNICAL ADVISOR TO IMO STATE ON STATE COVID-19 IAP IMPLEMENTATION, ON A VISIT TO ONE OF THE TREATMENT CENTRES IN THE STATE]

Despite the disruption caused by the COVID-19 pandemic, the REDISSE project continued to implement routine activities across the human and animal health sectors.

PROGRESS REPORT ON PROJECT PERFORMANCE INDICATORS



chapter THREE



Despite the disruption caused by the COVID-19 pandemic, the REDISSE project continued to implement routine activities across the human and animal health sectors. Given the urgency of need, activities in response to the pandemic were prioritised. A COVID-19 emergency plan was developed by the human health sector.

Prior to the confirmation of the first COVID-19 case in Nigeria, the human health sector implemented the following activities - review of the curriculum for Integrated Training of Surveillance Officers in Nigeria (ITSON), engagement of ten ad hoc laboratory staff and procurement of essential equipment consumables and reagents to support diagnostic activities. Similarly, the project continued the training of 44 residents in the Advanced Field Epidemiology Training Program, engaging four technical assistants for operational management of NFELTP and engagement of AFENET as a firm to implement the NFELTP.

Some of the activities implemented by the animal health

sector include: (i) training of disease surveillance agents for community-based surveillance of zoonotic and non-zoonotic animal diseases; (ii) procurement of disinfectants and veterinary stockpiles to contain outbreaks of African Swine Fever (ASF) in Lagos and Ogun States and enhanced biosecurity measures along livestock value chains against emerging zoonotic diseases.

The animal health sector also responded to outbreaks of ASF and rabies. Given the improvement of disease surveillance activities and a revitalised poultry industry, there has been no reported outbreak of the Highly Pathogenic Asian Avian Influenza (HPAI) in over 16 months.

Out of the 39 planned activities in the COVID-19 emergency plan, 28 were completed with a completion rate of 71.8%.

As at the end of August 2020, the annual work plan was reviewed and activities were reprioritised. This was to guide targeted implementation while recognising the constraints posed by the pandemic and the need for continued strengthening of the public health system.

Monitoring and Evaluation

The REDISSE project Nigeria was designed to help the country fulfil her IHR (2005) obligations. Project indicators are aligned with the JEE indicators, to enable monitoring based on the IHR competencies. The project carries out an annual self-assessment using the JEE tool and the REDISSE results framework to track progress. This is done through transparent assessments by a team of national experts.

Nigeria conducted a Midterm JEE in November 2019 using the new JEE 2.0 tool. Findings from this evaluation, which were used to update the REDISSE result framework in 2019, revealed that despite the stringency of the revised JEE 2.0 tool, Nigeria's JEE readiness score moved by 7 points from 39% (NOT READY) to 46% (WORK TO DO) compared to results from the first JEE conducted in 2017. Nigeria recorded verifiable improvement in 11 technical areas (including those relevant to the REDISSE result framework i.e. laboratory systems, emergency preparedness and emergency response operations).

Similarly, the interventions in the animal health sector aim at improving the quality of veterinary services towards compliance with OIE international standards and align with the abridged JEE tool developed.

An operational plan drawn from the NAPHS was developed based on the findings of the midterm JEE and the activities proposed in the REDISSE 2020 work plan were derived from the plan. In terms of the indicators in the result framework, the target set for Year-2 (2019) was met except for one of the intermediate indicators.

In the 2020 annual REDISSE self-assessment, three out of six project development objective indicators met the targets as set in the REDISSE result framework while three others were below the target.

The COVID-19 pandemic significantly affected the implementation of project activities given the restrictions in place, delays with procurement processes amongst others. Despite this, the project has continued to work very hard to ensure that targets are within reach.

Finally, the REDISSE Nigeria project developed an internal Monitoring and Evaluation (M&E) system to support efficient and effective project implementation. Registers and data collection tools were developed to collect data, followed by analysis of the data that guide knowledge management and decision making.

Project Development Objectives (PDO) Indicators: By Objectives/Outcomes

INDICATOR	BASELINE	YEAR 3 TARGET	CURRENT SCORE	END TARGET	REMARK
OBJECTIVE 1: To strengthen national and regional cross-sectoral capacity for collaborative disease surveillance					
Progress towards establishing an active, functional One Health Network	1	2	3	4	Passed
Laboratory testing capacity for detection of priority diseases	3	4	4	4	Passed
Progress in establishing indicator and event-based surveillance systems	3	4	2	4	Below Target
Availability of human resources to implement IHR core capacity requirements	3	4	3	4	Below Target
Progress on cross-border collaboration and exchange of information across countries	1	2	1	4	Below Target
OBJECTIVE 2: In the event of an Eligible Emergency, to provide immediate and effective response to said Emergency					
Multi-hazard national public health emergency preparedness and response plan is developed and implemented	1	2	2	4	Passed

TABLE 4: PROJECT DEVELOPMENT OBJECTIVES (PDO) INDICATORS - BY OBJECTIVES/OUTCOMES

Intermediate Indicators Results: By Components


INDICATOR	BASELINE	YEAR 3 TARGET	CURRENT SCORE	END TARGET	REMARK
COMPONENT 1: Surveillance and Information Systems					
Timely, interoperable, interconnected electronic reporting system	2	3	3	4	Passed
Surveillance systems in place for priority zoonotic diseases/pathogens	2	3	3	4	Passed
Systems for Efficient reporting to WHO, OIE/FAO	3	4	4	4	Passed
COMPONENT 2: Strengthening of Laboratory Capacity					
Laboratory systems quality	2	3	2	4	Below Target
Specimen referral and transport system	1	2	2	3	Passed
Turnaround time from date of specimen collection to date of results returned for priority diseases	1	2	2	3	Passed
COMPONENT 3: Preparedness and Emergency Response					
Mechanisms for responding to infectious zoonoses and potential zoonoses are established and functional	1	3	3	4	Passed
COMPONENT 4: Human Resource Management for Effective Disease Surveillance and Epidemic Preparedness					
Applied epidemiology training program in place such as FETP	2	3	3	4	Passed
Veterinary human health workforce	3	3	0	4	NA
COMPONENT 5: Institutional Capacity Building, Project Management, Coordination and Advocacy					

TABLE 5: INTERMEDIATE INDICATORS RESULTS - BY COMPONENTS

Despite the disruption caused by the COVID-19 pandemic, the REDISSE project continued to implement routine activities across the human and animal health sectors.

PROCUREMENT & FINANCIAL REPORT





2020 PROCUREMENT REPORT

[PHOTO: DISINFECTANTS AND VETERINARY STOCKPILES PROCURED TO CONTAIN OUTBREAKS OF AFRICAN SWINE FEVER (ASF) IN LAGOS AND OGUN, IN 2020, TO ENHANCE BIOSECURITY MEASURES ALONG LIVESTOCK VALUE CHAINS AGAINST EMERGING ZOO NOTIC DISEASES]



Procurement activities for the REDISSE Project in Nigeria are conducted using the World Bank Procurement Guidelines. All unit activities are conducted by the Procurement Team, with the guidance of a Project Procurement Consultant, and oversight from the Procurement Planning Committee chaired by the REDISSE Project Coordinator. In line with requirements for the REDISSE project, the first procurement plan was developed and approved by the World Bank in November 2018, and implementation began officially. All unit activities are conducted by the Procurement Team, with the guidance of a Project Procurement Consultant, and oversight from the Procurement Planning Committee chaired by the REDISSE Project Coordinator. In line with requirements for the REDISSE project, the first procurement plan was developed and approved by the World Bank in November 2018, and implementation began officially.

Highlights of Procurement Activities for The Year 2020

The implementation of the initial 2020 procurement plan was disrupted by the COVID-19 pandemic, and a COVID-19 emergency procurement plan was developed.

Following the adoption of the COVID-19 emergency response plan, the procurement unit developed and successfully obtained approval for a COVID-19 procurement plan, to support REDISSE project intervention in Nigeria's COVID-19 pandemic response. As part of REDISSE's COVID-19 emergency plan, the procurement plan focused on supporting Nigeria's national response to

the pandemic, while supporting her strategy to build and strengthen sub-national capacity for health security.

To strengthen national capacity for the treatment and management of COVID-19 cases across the country, the REDISSE project funded the construction and equipping of isolation/treatment centres in five states of Lagos, Rivers, Enugu, Kwara and Kano.

The project also procured and distributed infection, prevention and control (IPC) commodities, consumables

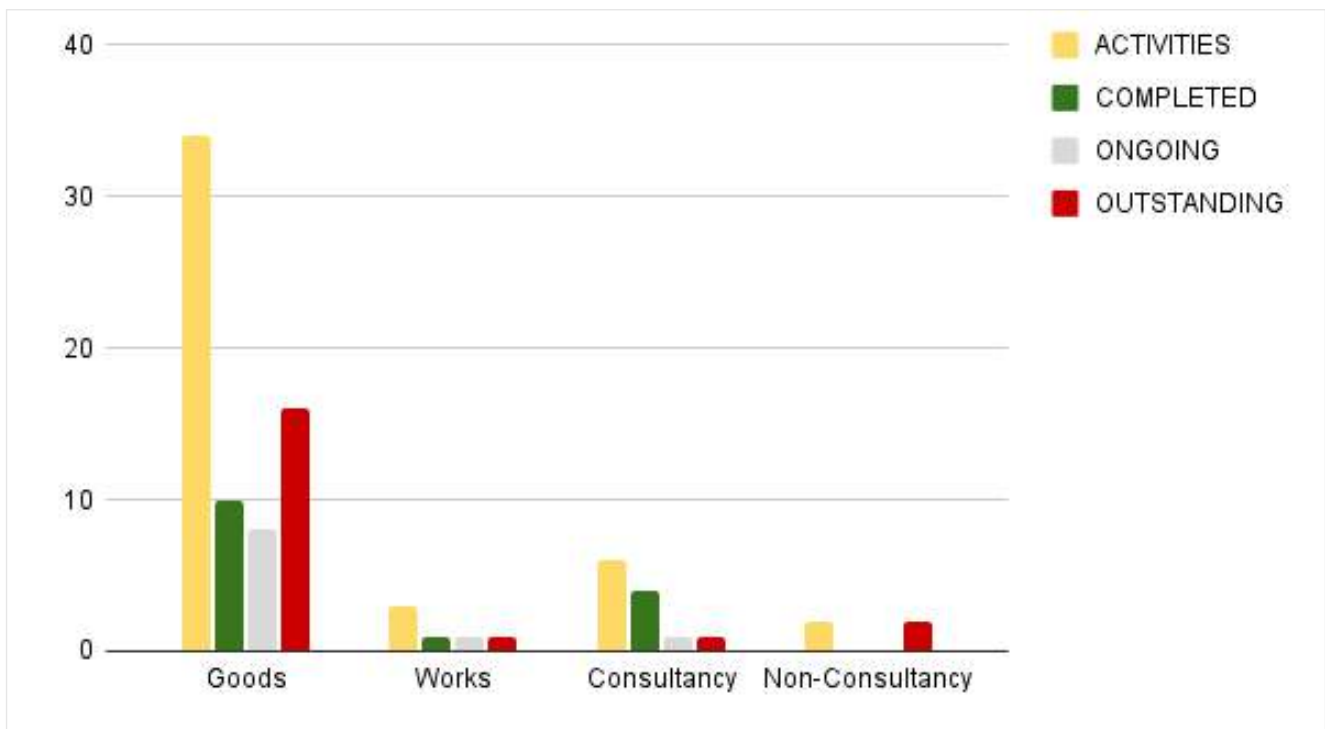


FIGURE 7: SUMMARY BY PROCUREMENT TYPES

and medical supplies across states, Federal Medical Centres, and State Health Facilities. The project procured and distributed 22 kVA generator sets for each of the PHEOCs in the 36 states and the Federal Capital Territory (FCT), in addition to 20 new vehicles and insurance policies for 20 states, to support state operations as they respond to public health emergencies like the COVID-19.

Other key procurement activities include support to the national call centre, the NCDC Connect Centre through the procurement of 20 sets of computers, headsets and electric extension boxes to support event-based surveillance. The project also procured internet and networking infrastructure for the NCDC annex building in Abuja to improve communications at NCDC headquarters.

Project Financials

The Finance Unit of the REDISSE Project in Nigeria is mandated to ensure project compliance with WB financial management procedures and guidelines. The financial management arrangements for the project are anchored on the use of the financial regulations and accounting guidance of the Federal Government of Nigeria and the World Bank financial management guidelines. A Financial Operational Manual was developed for the project and guides the management of project financial transactions. The system of budgetary planning, budget preparation, budget execution, accounting, internal controls, funds flow, financial reporting, external audit and oversight functions

are in accordance with the WB financial management guidelines.

Implementation approach adopted includes:

- Financial efficiency and transparency
- Retirement and documentation
- Quarterly reporting of statements of expenditure & interim financial reports
- Quarterly internal audit reports
- Annual external audit reviews and reports

A key principle of the REDISSE project is to prevent and mitigate any harm to the environment and to people by incorporating environmental and social concerns as an intrinsic part of project cycle management.

PROJECT SAFEGUARDS

**UNDERSTANDING ENVIRONMENTAL AND SOCIAL SAFEGUARDS ACTIVITIES
IN DEVELOPMENT FINANCE INSTITUTIONS SPONSORED PROJECTS:
THE REDISSE PROJECT NIGERIA EXPERIENCE**



chapter FIVE



The need to ensure that impacts of the REDISSE project with respect to the environment and human are identified, evaluated and mitigated has given rise to the development of International Environmental and Social Guidelines, generally referred to as Environmental and Social Safeguard policies.

The Bank requires Environmental Assessment (EA) for all Bank financing projects to ensure they are environmentally sound and sustainable. A key principle of Bank policy is to avoid, reduce, minimize and mitigate any harm to the environment and to people by incorporating environmental and social concerns as an intrinsic part of project cycle management. The safeguard policies focus on identification and management of environmental and social risks with the goal of reducing poverty and increasing prosperity in a sustainable manner for the environment and its citizens. The integration of environmental and social considerations into project aids decision-making process.

The REDISSE II project has been categorised B according to World Bank Operation Policy based on the type, scale, location, sensitivity, nature and magnitude of potential

risk and impacts, as no cumulative, unprecedented and large-scale adverse impacts are envisaged to result from the activities financed under this project. Two World Bank safeguard policies were triggered:

Environmental Assessment (OP/BP 4.01):

Environmental Assessment applies to all projects for which Bank Investment Project Financing is sought and is used to identify, avoid, and mitigate the potential negative environmental and social impacts associated with Bank's lending operations early on in the project cycle. In World Bank operations, the purpose of Environmental Assessment is to improve decision making, to ensure that project options under consideration are sound and sustainable, and that



potentially affected people have been properly consulted and their concerns addressed. This policy is triggered if a project is likely to have potential adverse environmental and social risks and impacts in its area of influence. The EA has various tools that can be used, including amongst others Environmental Impact Assessment (EIA) or Environmental and Social Management Plan (ESMP). In the context of REDISSE, the ESMF and ESMP are the needed tools.

Pest Management (OP/BP 4.09):

This policy is to (i) promote the use of biological or environmental control and reduce reliance on synthetic chemical pesticides; and (ii) strengthen the capacity of the country's regulatory framework and institutions to promote and support safe, effective and environmentally sound pest management. More specifically, the policy aims to (a) Ascertain that pest management activities in Bank-financed operations are based on integrated approaches and seek to reduce reliance on synthetic chemical pesticides (Integrated Pest Management (IPM) in agricultural projects and Integrated Vector Management (IVM) in public health projects. (b) Ensure that health and environmental hazards associated with pest management, especially the use of pesticides are minimized and can be properly managed by the user. (c) As necessary, support policy reform and institutional capacity development to (i) enhance implementation of IPM-based pest management and (ii) regulate and monitor the distribution and use of pesticides.

Implementing the above two triggered policies, the project has prepared five safeguard instruments as required:

- **Healthcare Waste Management Plan:** this outlines technical guidelines, responsibilities, costs and the best environmental practice of handling hazardous waste likely to be generated during the project lifecycle.

- **Integrated Pest Management Plan:** helps the project to manage pesticides, chemicals, herbicides etc procured in a sustainable manner.
- **Environment and Social Management Framework:** identifies the environmental and social risks and impacts of the project, develop guidelines for assessing, monitoring and mitigating such impacts using the mitigation hierarchy. It also provides guidelines and procedures to be followed in undertaking site-specific Environmental and Social Management Plans (ESMPs) during project implementation phase.
- **Environmental and Social Management Plans:** provide site specific mitigation and monitoring plans for sub-projects.
- **Grievance Redress Mechanism:** provides procedure for individuals and communities affected or likely to be affected by project activities with accessible, timely and effective opportunities to submit their complaints, and to ensure that such concerns are promptly heard, analysed and satisfactorily addressed.

These documents which have been prepared and disclosed in-country in line with the Federal Ministry of Environment and would be implemented at different stages during the project lifecycle by the safeguard team. At the implementation stage, the safeguard team would assess the risk levels of different activities, inter alia (i) risks to the environment (ii) humans and their values (e.g. social, cultural, economic) impacts of the project on the human and environmental components (air, land, water and ecosystem). Potential cumulative and induced impacts would be assessed too.

To ensure environmental and social sustainability for the REDISSE project, the safeguards will ensure commitment to the implementation of WB policies as contained in the prepared documents.

More details of the safeguard activities are contained in the Safeguard Progress Reports and the above instruments

Waste Tracking Assessment and Safeguard screening exercise



REDISSE PROJECT NIGERIA SAFEGUARDS TEAM IN CONSULTATION WITH THE COMMISSIONER FOR HEALTH IN KANO STATE



SAFEGUARDS TEAM VISIT TO THE YAR GAYA ISOLATION CENTRE IN KANO STATE



INCINERATOR AT THE YAR GAYA ISOLATION CENTRE IN KANO STATE



AN AUTOCLAVE MACHINE AT THE NATIONAL REFERENCE LAB. IN LAGOS (CPHL), USED FOR STERILISATION OF LAB EQUIPMENT



BACKLOG OF HEALTHCARE WASTE AT AN INCINERATOR SITE IN ONE OF THE COVID-19 TREATMENT CENTRES VISITED



WASTE TREATMENT FACILITY AT ONE OF THE TREATMENT CENTRES VISITED AND ASSESSED BY THE SAFEGUARDS TEAM

The Nigeria COVID-19 Preparedness and Response Project (CoPREP) aims to strengthen states capacity for preparedness and response to the COVID-19 pandemic.

NEW PROJECTS & ACTIVITIES FOR 2021

chapter SIX



Nigeria CoPREP

NIGERIA COVID-19 PREPAREDNESS AND RESPONSE PROJECT



The Nigeria COVID-19 Preparedness and Response Project (CoPREP) aims to strengthen states capacity for preparedness and response to the COVID-19 pandemic. The project is also developed to ensure sustained preparedness in the event of future disease outbreaks by providing support for infrastructural development and procurement of specialised equipment, reagents and consumables needed for surveillance, diagnosis and treatment activities.

On August 6, 2020, the Board of Executive Directors of the World Bank approved a credit in the amount of US\$100 million and a grant in the amount of US\$ 14.28 million for the Federal Republic of Nigeria for the Nigeria CoPREP as part of the Multiphase Programmatic Approach (MPA), supported under the Fast-Track COVID-19 Facility (FTCF).

The World Bank through the MPA has committed substantial resources to complement domestic resources mobilised by countries like Nigeria and activities supported by other partners to help ensure adequate resources to fund a rapid emergency response to COVID-19.

The CoPREP will build on gains made in 2020, to further strengthen subnational health security capacity in Nigeria.

OTHER KEY PLANNED ACTIVITIES FOR 2021 BY COMPONENTS

Surveillance & Information Systems

- National Training of Master Trainers for the Integrated Training of Surveillance Officers in Nigeria; Regional Training of Trainers (ToT); and national roll-out of ITSON to all States
- Replication of One Health structure in all the 36 states and the FCT
- Conduct the Annual Disease Surveillance Review Meeting
- Train 774 disease surveillance agents (Community Animal Health Workers) to conduct passive disease surveillance activities and registration of livestock farmers; and 774 expert trainers on proper implementation of biosecurity measures against African Swine Fever (ASF) and Rabbit Haemorrhagic Disease (RHD). These will ensure an establishment of an early warning system and detecting trends for infectious animal disease
- Conduct zonal ToT for veterinary extension workers on surveillance for antimicrobial and pesticides residues in food of animal origin, including honey
- Upgrade the database for Nigeria's National Animal Disease Information Service (NADIS)

Institutional Capacity Building, Project Management, Coordination, & Advocacy

- Development of National Antibiotic Formulary
- Establishment of a national Health Care Acquired Infections (HCAI) surveillance program
- Conduct functional simulation exercise for Multisectoral supply chain management (MCM)
- Construction of incinerators for clustered pig farms and Veterinary Teaching Hospitals (VTHs), for environmentally friendly disposal of animal carcasses
- Rehabilitate 37 state veterinary clinics
- Support for anti-rabies vaccination campaign logistics in high risk states

Preparedness & Emergency Response

- Development of National Antibiotic Formulary
- Establishment of a national Health Care Acquired Infections (HCAI) surveillance program
- Conduct functional simulation exercise for Multisectoral supply chain management (MCM)
- Construction of incinerators for clustered pig farms and Veterinary Teaching Hospitals (VTHs), for environmentally friendly disposal of animal carcasses
- Rehabilitate 37 state veterinary clinics
- Support for anti-rabies vaccination campaign logistics in high risk states

Human Resources Management for Effective Disease Surveillance and Epidemic Preparedness

- Mapping of Human Resource for Public Health at Federal, State and LGA levels (along with needs assessment, gap analysis, development of database and tracking of public health workers)
- Validation and adoption of a National Public Health Workforce Strategy (NPHWFS)
- Conduct Cohort 2 IMPACT (Improving Public Health Management for Action) Distinguished Fellows programme, with a training of trainers (ToTs) component to build core public health management capacities in middle to high level public health management workforce
- FETP: Advocacy for sustained funding for existing programs on the Advanced FETP from external donors; provision of tuition and training support for 40 candidates, Cohort 12 Advanced NFETP; and provision of training support for 15 candidates, Cohort 1 Intermediate NFETP
- Develop a database of all veterinarians and para-veterinarians in Nigeria
- Conduct data management training for 750 public and private veterinarians on the NADIS, real time disease surveillance, reporting and risk assessment

OTHER KEY PLANNED ACTIVITIES FOR 2021 BY COMPONENTS

Laboratory Capacity Strengthening:

- Conduct financing assessment and advocacy for state funds to implement courier services related to sample transportation
- Phased roll-out of the Laboratory Information Management System (LIMS) in laboratories across the country, and National and State Training of Trainers on LIMS
- Remodeling and fitting of 1 state public health laboratory in 10 states
- Procure reagents for the laboratories at the National Veterinary Research Institute (NVRI) and 11 Veterinary Teaching Hospitals (VTHs) across the country
- Procure 11 kVA solar-powered system for 11 NVRI laboratory outstations



The Nigeria COVID-19 Preparedness and Response Project (CoPREP) aims to strengthen states capacity for preparedness and response to the COVID-19 pandemic.

YEAR 2020 PHOTO HIGHLIGHTS





THE WORLD BANK MISSION TO NIGERIA VISITED THE NCDC NATIONAL REFERENCE LABORATORY IN ABUJA, FOR A NEEDS ASSESSMENT TOWARDS COVID-19 & LASSA FEVER OUTBREAK RESPONSE



CHAIRMAN OF THE NIGERIA GOVERNORS' FORUM AND EXECUTIVE GOVERNOR OF EKITI STATE, HIS EXCELLENCY, DR. KAYODE FAYEMI AND NCDC DG, DR. CHIKWE IHEKWEAZU SIGN THE N100 MILLION GRANT TO EKITI STATE



FLEET OF TOYOTA HILUX VEHICLES DONATED TO STATE PHEOCs BY THE REDISSE PROJECT TO SUPPORT EOC OPERATIONS FOR THE COVID-19 PANDEMIC AND OTHER DISEASE OUTBREAKS IN THE STATES



FLEET MOTORBIKES AND TRICYCLES DONATED TO STATES TO IMPROVE ANIMAL HEALTH SURVEILLANCE LOGISTICS ACROSS THE COUNTRY



THE REDISSE PROJECT SUPPORTED THE TRAINING OF 53 PORT HEALTH OFFICIALS IN THE LAGOS, KANO, RIVER AND ABUJA POINTS OF ENTRY (POE) ON COVID-19 CASE IDENTIFICATION AND ROUTINE CONTACT TRACING, AS PART OF SUPPORT TO STRENGTHEN NIGERIA'S RESPONSE TO THE COVID-19 PANDEMIC



PROTOTYPE TREATMENT CENTRE, BUILT AT THE UNIVERSITY OF ABUJA TEACHING HOSPITAL (UATH) IN GWAGWALADA, WAS BUILT BY THE REDISSE PROJECT ACROSS FIVE STATES IN NIGERIA. CONSTRUCTION COMMENCED IN 2020



IN 2020, THE REDISSE PROJECT SPONSORED TRAINERS AND TRAINEES ACROSS NINE STATES IN NIGERIA TO A TRAINING SORMAS, FINANCED PROCUREMENT OF 106 LAPTOPS & 690 TABLETS ALONG WITH ACCESSORIES (POUCHES, SCREEN GUARDS, POWER BANKS) TO SUPPORT THE DEPLOYMENT OF SORMAS IN THOSE STATES



THE REDISSE PROJECT SUPPORTED RECRUITMENT OF 80 VOLUNTEERS TO THE CONNECT CENTRE TO SUPPORT THE LARGE NUMBER OF CALLS RECEIVED DUE TO THE COVID-19 PANDEMIC, FINANCED ALLOWANCES FOR CALL CENTRE STAFF IN THE HEAT OF THE PANDEMIC IN 2020, AND PURCHASED EQUIPMENT FOR USE AT THE CENTRE.



THE FIRST REDISSE NATIONAL STEERING COMMITTEE (NSC) MEETING FOR 2020 HELD ON 7TH OF JULY, 2020, HOSTED BY DR. OSAGIE EHANIRE, HON. MIN. OF HEALTH (HMH) & CHAIR OF THE NSC. CO-HOST, ALHAJI MUHAMMAD SABO NANONO, THE HON. MINISTER, FED. MIN. OF AGRIC. & RURAL DEV. (FMARD), & CO-CHAIR OF THE NSC, WAS REPRESENTED BY DR. MUAZU ABDULKADIR, PERM. SEC. AT FMARD.



ONE OF 37 20KVA POWER GENERATING SETS PROCURED BY THE REDISSE PROJECT TO SUPPORT OPERATIONS AT THE STATE PHECCS ACROSS THE COUNTRY, AS PART OF COVID-19 SUPPORT AT THE SUB-NATIONAL LEVEL.



THE REDISSE PROJECT SUPPORTED THE RECRUITMENT OF 20 VETERINARY OFFICERS TO BRIDGE HUMAN RESOURCE GAP FOR ANIMAL HEALTH RESPONSE IN THE COURSE OF THE YEAR.



STAFF OF THE RENAL UNIT AT THE INSTITUTE OF LASSA FEVER, RESEARCH & CONTROL (ILFRC), IRRUA SPECIALIST HOSPITAL IN EDO STATE, ALONG WITH THE REDISSE SUPPORTED TECHNICAL ADVISOR FOR THE IMPLEMENTATION OF EDO STATE INCIDENT ACTION PLAN (IAP) FOR COVID-19, IN THE DIALYSIS ROOM SHOWING THE DIALYSIS MACHINE DONATED BY NCDC THROUGH THE REDISSE PROJECT TO SUPPORT PATIENT'S TREATMENT, IN THE STATE'S RESPONSE TO THE OUTBREAK OF LASSA FEVER.



AS PART OF REDISSE SUPPORT FOR NIGERIA'S COVID-19 RESPONSE, TECHNICAL ADVISORS WERE DEPLOYED FROM THE NCDC TO ALL STATES TO ASSIST WITH THE IMPLEMENTATION OF INCIDENT ACTION PLANS (IAPS) DEVELOPED BY EACH STATE



THE REDISSE PROJECT SUPPORTED THE RECRUITMENT OF 23 SURGE STAFF TO SUPPORT OUTBREAK RESPONSE FOR LASSA FEVER IN EDO AND ONDO STATES



COHORT 11 TRAINEES OF THE ADVANCED NIGERIA FIELD EPIDEMIOLOGY TRAINING PROGRAM, DURING THE VERIFICATION EXERCISE CONDUCTED BY REDISSE TEAM



TRAINERS AND PARTICIPANTS AT THE ONE-WEEK REFRESHER TRAINING WORKSHOP FOR 20 AD HOC VETERINARIANS TO SUPPORT ANIMAL DISEASE SURVEILLANCE IN NIGERIA



PARTICIPANTS AT THE 3-DAY PERFORMANCE OF VETERINARY SERVICES (PVS) PATHWAY STRATEGIC PLANNING WORKSHOP HELD IN ABUJA (11 – 13 MARCH, 2020) TO SUPPORT NIGERIAN INCORPORATING THE PVS PATHWAY INPUTS ONTO THE NATIONAL VETERINARY SERVICES STRATEGIC PLAN THROUGH THE ACTIVE AND PROGRESSIVE DEVELOPMENT OF AN AGREED TEMPLATE.

ANNEX



Project Work Plan Development and Review:

The project work plan is developed annually, and obligatory to submit a draft by November of the current year, for approval by the National Technical Committee (NTC), and a no-objection by the World Bank. Work plans are developed guided by the parameters: previous results from the performance framework, the National Action Plan for Health Security (NAPHS, 2018-2020) and the Pathway for Veterinary Services Report (PVSR, 2019). Furthermore, a conscious attempt is made to ensure that proposed activities are inter-sectoral and linked with ongoing national strategies, plans, policies and guidelines, such as the National Health Sector Development Plan II (NHSDP II), NCDC Strategy and Implementation Plan (2017-2022), the National Action Plan on Antimicrobial Resistance (AMR), the National Infection, Prevention and Control (IPC) Action Plan, Nigeria Strategy on Immunisation and Primary Health Care Systems Strengthening, among others.

Project Monitoring and Evaluation:

Monitoring and Evaluation is undertaken at two levels for REDISSE project Nigeria - at the Regional Level by WAHO (and Regional Animal Health Center (RAHC)), and at the Country Level, in conjunction with external partners such as WHO, CDC, and OIE. The design of project activities is guided by the National Action Plan for Health Security (NAPHS), and implementation of the activities closely aligned with the indicators of the Joint External Evaluation of the International Health Regulations (IHR 2005). The project indicators are grouped into the Project Development Objectives, which are both national and regional targets, and the Intermediate Objectives. The performance framework for the project was adjusted after the 2017 JEE for Nigeria to modify targets with recommendation from the JEE, and end targets with benchmarks recommended by WAHO. The project will conduct an annual and midterm review to assess implementation progress and address challenges.

Project Procurement:

The project procurement is handled by the project procurement officer, an embedded procurement consultant and two procurement assistants (one each from the AHSC and HHSC) and guided by a procurement plan using the Project Procurement Strategy for Development (PPSD) framework model and the World Bank e-procurement system - Systematic Tracking of Exchanges in Procurement (STEP). The project procurement thresholds and processes are as stipulated in the project appraisal document, and no procurement is undertaken until cleared by the World Bank through surface mail and STEP.



Project Financial Management:

The project financial manual, approved on the 7th of September 2019, guides the management of funds and outlines the responsibilities of the project accountant, auditor, and finance assistants. These individuals constitute the Project Finance Management Unit (PFMU). The financial reporting requirements including the periodicity of the Interim financial reports, the funding flows, levels of financial authorisation and processes for drawdowns are as stipulated in the project financial manual.

Project Safeguards:

In the course of the project development, the environmental safeguards policies triggered by REDISSE [Phase 2] are the Environmental Assessment policy (OP/BP 4.01) and the Pest Management policy (OP 4.09). Each country has prepared three sets of documents: a national Health Care Waste Management Plan (HCWMP), an Integrated Pest and Vector Management Plan (IPVMP) and an Environmental and Social Management Framework (ESMF). The net social impacts and benefits of the project are expected to be positive since it will support the creation of environmentally and socially sound laboratory technologies, surveillance systems, as well as safe and secure mechanisms for disposal of medical waste, all of which will reduce the potential of public health risk.



PROJECT CONTACT:

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