

## **"The Libyan experience in the face of the COVID-19 pandemic"**

### **"Oversight of government response policies and mechanisms for dealing with the COVID-19 pandemic"**

#### **Introduction: -**

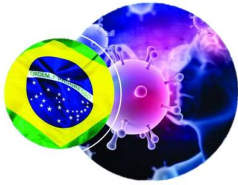
The Libyan Audit Bureau exercises its duties and functions by Law No. (19) of 2013 AD regarding its reorganization, regulations, and amendments, given that it is authorized to perform the functions of oversight functions in the three areas of control (financial control, compliance control and performance control); And what is stipulated in the international laws regulating financial and supervisory work.

And based on the belief of the Libyan Audit Bureau in what Standard No. (12) issued by the International Organization of Supreme Audit Institutions on enhancing the value and benefits of supreme audit institutions to make a difference in the lives of citizens and achieve a positive impact on them.

The Libyan Audit Bureau has worked to employ all its legal and regulatory powers and take all measures that enhance its effectiveness in launching the national emergency response, supporting the capabilities of state institutions, and supporting them in times of crises and disasters, and enhancing accountability and accountability. Transparency considering the exceptional circumstances that the world has experienced during the period of facing the Corona virus pandemic. Rather, the Libyan Audit Bureau was the first institution at the level of the Libyan state to sound the alarm and issue the first warning to confront the epidemic and stress the need for the state to declare a state of health emergency and take the necessary measures. The necessary measures and steps to do so.

Accordingly, the Libyan Audit Bureau took the initiative towards precautionary steps and addressed all concerned parties to declare a state of health emergency at the beginning of January of the year 2020, and directed the need to take all necessary health measures and stand on the state's strategic stock of medical and primary preventive supplies and warn against smuggling them or carrying out negative storage operations Speculation in prices and other factors that affect citizens and limit their ability to protect themselves.

And his direct practice of oversight work in all fields, which made the audit experience of the Libyan Audit Bureau during the epidemic period a qualitative experience, as it works to evaluate performance in parallel with the financial audit



according to the concepts of strengthening government support and protecting public money, according to the following oversight objective: -

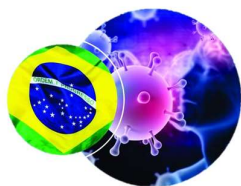
“Determining the government’s response and evaluating its policies in dealing with the epidemic and the measures it has taken within the framework of precaution, prevention, preparedness, and containment to limit the spread of the epidemic, enhance response and reach the stage of recovery. In accordance with the strategic and operational requirements of crisis management, risk distribution, and activating the principle of shared responsibility among the relevant parties”.

Which has been translated into several auditing objectives and sub-questions that enabled him to achieve the general objective of the audit process as efficiently as possible as follows:-

- The extent of the government's response according to the chronology of the development of the epidemiological situation globally.
- The efficacy of government policies and procedures after recording the first cases of infection and the development of the epidemiological situation.
- The extent of efficiency and effectiveness in the policies and procedures taken by the Higher Committee and the Scientific Advisory Committee.
- Evaluating the policy of the Supreme Committee to Confront the Pandemic and the Scientific Advisory Committee in managing the file of those stranded abroad.
- Monitoring the dimensions of coexistence with the pandemic.

This is according to the following methodologies: -

- The problem-based approach to the considerations of the pandemic at that time, as it is a problem that strikes the whole world, and its management is accompanied by great challenges and risks that require emergency action plans that simulate the work environment in the country, and the level of readiness of the health sector to provide the necessary.
- The results-based approach considering that the oversight process works to determine the government’s response and the steps taken by it, according to comparisons between government performance at the level of decisions, funds, recruitment of human cadres and their business outputs to identify deviations and immediately alert them.



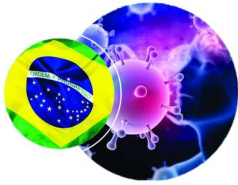
“The scope of the relevant parties' responsibility for the stages of precaution, prevention, preparedness and recovery”

donors	Main Supporting Entities	Entities with direct responsibility
Precautionary and prevention phases		
Supporting and supportive bodies	The main components of the government sector	components of the health sector
In addition to the scope of responsibility for the stages of precaution and prevention some parties overlap the scope of responsibility for the stages of preparedness and recovery		

Therefore, to enrich the oversight work, the Bureau focused, during the audit process, to consider flexibility as much as possible in order to enhance and support the governmental response, by employing a package of legislation and laws regulating work, and by relying on standards for monitoring and evaluating performance, while integrating standards of compliance control and international standards issued regarding oversight in a difficult climate and environment. Instability and dealing with disasters, considering the benefit from the experiences of the other country, the publications and guidelines of the World Health Organization, and the specific characteristics of the Libyan state at the time, especially (security situations).

Summarizing the above, the course of the supervisory work was closer to a mixture of supervisory powers and various methodologies to achieve the greatest possible professional benefit under the current circumstances and to enhance government support according to the following: -

Input	Process	Output
<ul style="list-style-type: none"> <li>Global timeline of the evolution of the epidemiological situation.</li> <li>Decisions made by the government.</li> <li>Decisions of the committees formed and the minutes of their meetings.</li> <li>WHO bulletins.</li> </ul>	<ul style="list-style-type: none"> <li>Study and desk evaluation procedures.</li> <li>Time comparisons between epidemiological developments globally and locally.</li> <li>Evaluation of the electronic systems used.</li> <li>Control manuals for the collection and analysis of data and information.</li> </ul>	<ul style="list-style-type: none"> <li>A phased assessment of the epidemiological situation of the Libyan state, the extent of the government's response and its procedures, and its readiness to coexist and move to the stage of recovery, and to provide monitoring recommendations to correct any deviations</li> </ul>

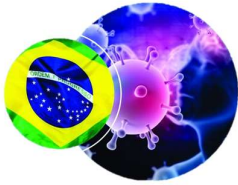


<ul style="list-style-type: none"> <li>• Decisions and actions taken by all relevant parties.</li> <li>• Specifically prepared plans.</li> <li>• Media reports and bulletins.</li> </ul>		
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This made the Libyan experience gain its importance in terms of the results, conclusions and recommendations incorporated in the control represented in the following: -

The first stage of assessment is the lack of government response: -

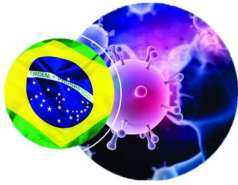
1. The absence of any government role at the level of the executive authority as a whole, and the beginning of the response was through the letter of the Libyan Audit Bureau to the competent authorities of the Ministry of Health and the National Center for Disease Control on January 26, 2020, starting with the declaration of a state of emergency by the Chinese Health Committee NHC regarding the high Disease prevalence rates and the rate of transmission of the disease between humans.
2. Directing to reduce the conflict of competences between the various bodies of the scope of responsibility and the components of the health system in the Libyan state, and to reduce the process to decision-making centers.
3. Loading the Libyan National Center for Disease Control as one of the components of the health sector with the scope of its responsibilities in accordance with its establishment resolution No. (227) for the year 1993 AD and its amendments, as it has the sole competence to take precautionary measures, prevention, preparedness and early warning of any challenges and risks associated with the pandemic and directing the Ministry of Health and all parties related to the government To take the necessary measures to avoid the disaster before it occurs. The shortcomings of the Center's performance were as follows: -
  - Not employing donor support.
  - Failure to identify the country's operational and strategic stock of personal protective materials and disinfectants related to preventive measures and infection control requirements in light of the high rates of global demand and the increase in prices at rates exceeding 200% per day.
  - Failure to provide a quantitative and qualitative picture of the medical materials, personal protection supplies, and health isolation needs necessary to confront the pandemic.



- Failure to provide programs for preparing and qualifying human cadres at the Centers for Disease Control.
  - Not preparing, approving, and circulating guidelines or brochures, or offering workshops more than 40 days after the onset of the epidemic.
  - Not paying attention to citizens who suffer from diabetes, blood pressure, cancer, and other chronic diseases, and guiding them on how to prevent, prevent and deal with the virus.
4. .Charging the Libyan Ministry of Health with the scope of its responsibilities under the terms of reference entrusted to it as indicated in the texts contained in Law No. (106) of 1973 regarding the health system and Presidential Council Resolution No. (1400) of 2018 regarding the adoption of the organizational structure and internal organization of the ministry, which resulted in a lack of performance on the as follows: -
- The Director of the Department of Curative Affairs and the Director of the Inspection and Follow-up Department did not respond to correspondence from hospitals, health centers and the National Center for Disease Control regarding the lack of departments prepared for health isolation.
  - The failure of the Inspection and Follow-up Department at the Ministry of Health, hospitals, health centers and the medical supply system to perform its role in inspecting and following up warehouses, inventorying their contents, and determining the quantity of the state's stock of warehouses. Disinfectants, medical and preventive resources related to strengthening preventive measures to confront the pandemic, in the context of preparing to provide an urgent and strategic stockpile by identifying items that have a shortage.

Thus, in the first stage, we find that there are no response areas that reflect the procedures and requirements of the management of prevention, prevention, and containment of the disaster before it occurs, and there is no clear action plan that reflects the national response. On the epidemiological response from the first Ministry of Defense and legally authorized by the monitoring, investigation, tracking and early warning procedures represented by the Libyan National Center for Disease Control which is the government's guide at this point, All communications from January 30, 2020 to February 25, 2020 are a disclaimer that does not reflect on-the-ground operational procedures that we can rely on as guidelines, guidelines, workshops, trainings, informational messages, and other actions. Accompanying the response process, in addition to creating points of disagreement between him and the Department of Medical Affairs at the Ministry of Health, considering the outbreak of the epidemic.





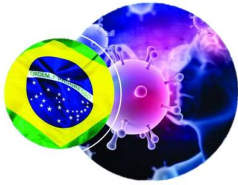
This made the Bureau more adherent to its responsibilities, working to hold a series of intensive meetings, directing correspondence and communications, using all its powers of warning and guidance, and providing advisory support to enhance the government's response and activate the components of the pandemic response.

Phase Two Monitoring the government's response: -

1. The first actual government action was recorded in the letter of the President of the Presidency Council on February 25, 2020, addressed to the Minister of Finance, the Financial Adviser to the Presidency Council, the Undersecretary of the Ministry of Health, and the Head of the Military Medicine Authority regarding compliance with the instructions of the Ministry of Health regarding appropriate preventive measures and measures to confront the Corona virus and the distribution of competencies: -
  - Assigning the Ministry of Health to supply all necessary equipment and preparations recommended by the World Health Organization.
  - Assigning the Military Medicine Service to prepare the isolation and quarantine headquarters by exploiting, modifying and maintaining some ready-made headquarters in accordance with the requirements related to the pandemic, in coordination and cooperation with the Ministry of Health, and the immediate start of implementation, and the supply of special ambulances for isolation at all air and seaports.
  - Monitoring, allocating and disbursing an additional, very urgent, reserve financial value from the medical supply system's allocation budget, estimated at 170 million dl, to increase the readiness of 45 educational and public hospitals within the framework of the regular and exceptional supplies that ensure the full readiness of these facilities.
  - Forming several emergency committees to confront the epidemic from various disciplines according to the requirements of the stage.
  - Formation of the Supreme Committee to Confront the Pandemic According to Presidential Council Resolution No. 207/2020.
  - Declaring a state of emergency according to Presidential Council Resolution 209/2020.

Which the Bureau has evaluated and monitored its performance in parallel and with the greatest flexibility and provided advisory support in a manner conducive to enhancing its capabilities in protecting public money under difficult climate conditions and responding to the nature of the stage, according to the following:-

1. Evaluating and examining the funds allocated to the epidemic during the first half of the year 2020.



The topic	Spend	Estimated
Total financial allocations	415,122,225.000	838,420,498.000

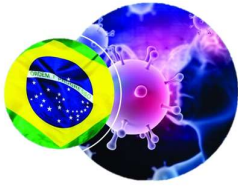
2. Survey on the rise in prices of medical equipment and personal protective equipment.

item	Price during the month of December	Price during the month of March	rate of increase
- N95 masks - The price is for a box of 100 pieces	\$15	\$60	%400
Note: The consumption of one doctor, according to the degree of dealing with the patient, between quarantine and isolation, ranges from 2 to 4 masks during one shift.			
medical examination gloves	\$ 0.08	\$ 0.99	%1137
isolation rooms	\$ 61,000 - 22,000	\$ 149,000 – 89,540	%573

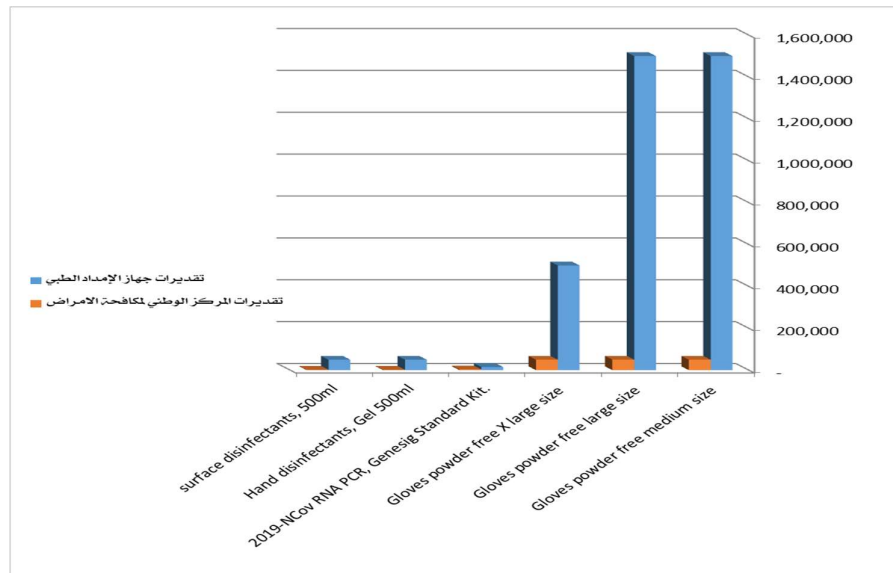
3. A survey of the movement of Libyan border crossings before the state of complete closure and its role in determining the quantities of need.

Total	257,591 citizens
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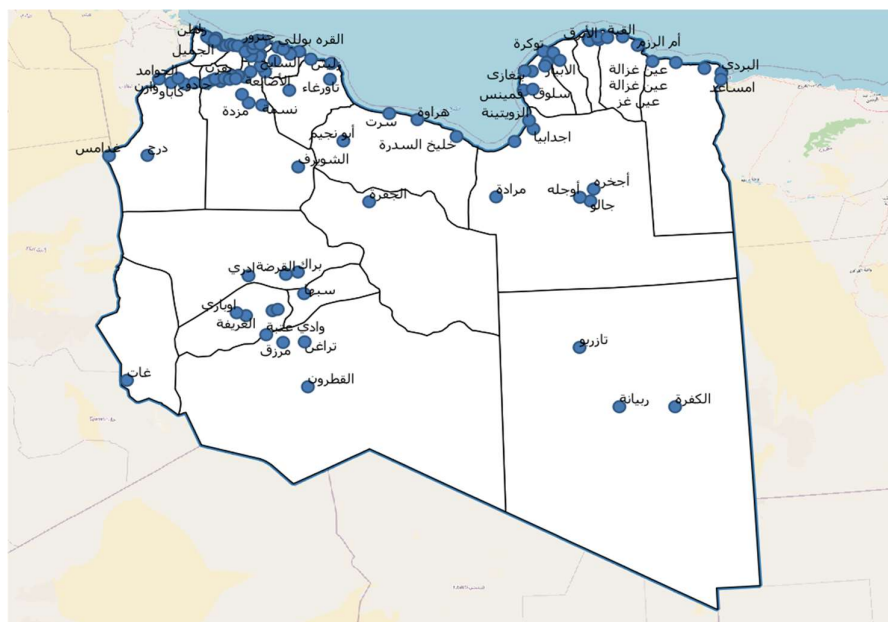
4. Parallel evaluation of the procurement records, which led to the fact that more than two-thirds of the bids and invoices attached to the award minutes have their dates after the date of the award minutes or the same date as the minutes, which means the prior awarding to companies only, and this shows signs of corruption.



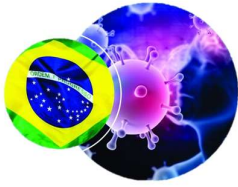
5. The clear imbalance in determining the quantities of need between the main parties (Ministry of Health, the National Center for Medical Disease Control), and the size of the discrepancy as follows: -



6. Establishment of (34) health isolation centers according to the technical specifications and materials designated for health facilities in terms of floors, medical doors, and suspended ceilings, in addition to covering the walls with insulating medical materials and antibacterial properties according to technical reports. Prepared by site administrators.





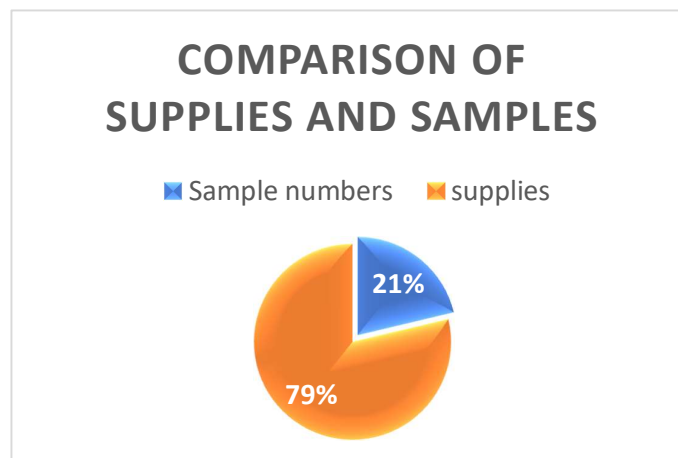


7. Keeping pace with and evaluating the national response plan submitted by the government and warning that it is a general, loose and unrealistic plan that cannot be worked according to at the beginning of the pandemic in the absence of any indicators or standards and not on the date prepared and presented.
8. The return of those stranded abroad, the numbers and amounts of spending, quarantine requirements, and the containment of the epidemiological situation, which cost the Libyan state about 3,6953,651 during the year 2020, in addition to the existing ones. commitments to date.

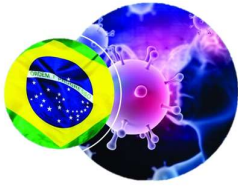
The numbers for the year 2020

the topic	The number of people stuck abroad	Number of citizens who have been returned	Remaining number
Total	27,881	21,414	6,657

9. Comparing the quantities of supplies of PCR operators, the samples used, the volume of losses and leaks to the private sector, that is, the leakage at that time was about 79%.



During this stage, the Bureau made all efforts to free the executive authority from corrupt practices by taking several bold decisions such as sending the Public Prosecution Office, stopping work, limiting disbursed funds and liquidity, and



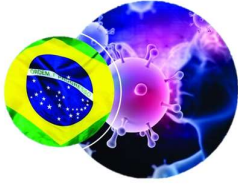
imposing all policies that contribute to protecting funds in a way that does not conflict with the interests of citizens. and their right to protection and prevention. Health.

third level: -

The Bureau has formed committees at the level of the Libyan state for the subsequent review to carry out comparison and actual verification operations according to the largest possible spatial scope, which resulted in the following regarding the pandemic: -

1. The total actual spending of the Libyan state regarding the implementation of its policy to confront the emerging Corona virus pandemic from entities funded in whole or in part by the public treasury and those with legal personality and independent financial disclosure, until 31/12/2020, amounted to more than 1.5 billion dl, in addition to the existing obligations.
2. The value of the awarding business amounted to about 1.3 billion, of which only 45% were approved, and the rest was not officially approved.
3. Only 43.5% are supplies related to the Corona pandemic, while 56.5% are supplies to advance the health sector in general, which reflects the level of readiness of the health sector and its ability to face crises, given the size of the shortage it is going through.
4. Refer to the old supply records within the current supplies to pass amounts of money to unnamed companies, which is one of the corruption practices that the office is exposed to.
5. Overpricing for equipment exceeding 1000%.
6. The value of financial claims submitted on the award report starting from the year 2019 until the end of 2020 in the amount of 740 million LYD as supplies from the local market, while the local market cannot provide this amount and cannot absorb it. Documentary review only.
7. There was no foresight in the recovery phase and strengthening the health system.

From this standpoint, the Bureau took all measures and sent them to the Attorney General and stopped the financial waste in return for stopping the payment of obligations resulting from the epidemic, reviewing, and examining them in



coordination with the relevant authorities, the Ministry of Health. And the supplier companies responsible for inflating prices and any supply operations.

Finally, through this experience, the Bureau focused on several shortcomings in the health sector, which it directed to support and address to reduce them and to strengthen the strength of the health system in Libya.

It is one of the positive experiences of the Bureau for the possibility of a real diagnosis of the effectiveness of its oversight work considering the difficult climate and the training of its cadres on the speed of response.

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مكتب الرقابة على الأداء	الإدارة العامة للرقابة على القطاع السيادي	مكتب الرقابة على الأداء
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