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## HIGHLIGHTS OF THE EBOLA VIRUS DISEASE PREPAREDNESS IN UGANDA

22<sup>nd</sup> AUGUST 2018 (12:00 HRS) – UPDATE No 16

### **Situation Update from Democratic Republic of Congo as on 22<sup>nd</sup> August 2018**

- Cumulative cases: 102
- Confirmed cases : 75
- Probable : 27
- Total deaths : 59
- Suspect Cases under investigation : 09
- Areas affected : Two provinces
  - North Kivu - Mabalako; Butembo; Ocha; Musienene; Beni and Bingo
  - Ituri- Mambasa, Mandina

### **EVD Preparedness in Uganda**

#### **Note :**

- 1. There is no suspected or confirmed case in Uganda**
- 2. Three alert cases in Kasese District currently under investigation**

#### ***Coordination***

- Health Cluster coordination meeting held in Kyangwali, participants were UNHCR, WHO, UNICEF, AAH, MTI, IDI Care and Kikuube district local government. The following were agreed upon.
  - IPs to support



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intensification of community engagement on EVD o Screening new arrivals from DRC at all POE in Hoima and Kikuube district i.e Nsonga, Sebigoro and Kaiso. o UNHCR surveillance team team to make a follow on new arrivals/ refugees coming from high risk areas in DRC for 21 days.

- MTI to support deployment of two health workers at each POE of Nsonga and Kaiso in Kikuube and Hoima district respectively.
- Kikuube district is expected to hold weekly DTF meeting on Monday 27th August
- Kikuube is a new district; the District Health Department doesn't have even a single car to coordinate response activities.
- The costed Kikuube district EVD preparedness and response plan has been finalised waiting for CAOs signature for submission.

### *Bundibugyo District*

- The DHO's office is mobilizing health workers for case management, surveillance, and contact tracing training beginning 23rd August 2018.
- The Director Public Health in the UPDF visited the district and had a brief meeting with the DHO. He pledged support from the UPDF and requested their involvement in the upcoming trainings.





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*Figure 2: The global CDC director, US Embassy Ambassador to Uganda, Minister of health Uganda, WHO Country representative in Uganda, and another official in a high level meeting at the JMEDICC conference room, FPRRH, Kabarole district, August 19, 2018.*

*Ntoroko*

- The committee convened a meeting where the various committee reported on the implementation state after two weeks of the Ebola preparedness activities. It is reported that 9 hand washing facilities were installed in the district as of date. All health facilities were given some sensitization and hand washing facilities reinforced. Also the case management center is established among others. It was agreed the coordinating committee for the past two weeks has not been active as expected but from now on shall be more active as promised by the committee. The meeting was informed of the presence of UNHCR, Safe the Children and UNICEF now on the ground to support the district while WHO has been giving the support since from the onset of the preparedness. The coordination committee promised to mobilize transports and also invite the IPs to the next meeting scheduled for Monday 27 August for better coordination.
- The district and UNHCR have organized a 5-day case management training from 22nd – 26th August 2018. The district is discussing with the MoH possibility of postponing the training that were scheduled to start 23rd August, 2018.



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*Bunyangabu*

- The technical team visited a total of thirteen (13) health facilities (9 Health Centre III and 4 Health Centre II) which are at risk of getting imported cases from DRC and provided orientation and mentorship to 85 health personnel and 20 VHTs both male and female. These staff were in the category of Medical Records Officers, Nursing Officers, MCO, Nursing Assistants, LRA, Midwives, and Enrolled Nurses.
- In each facility visited, the team; Oriented HW in EVD case definition; Oriented VHTs in community case definition of EVD; Precautionary measures of how to protect themselves while in the field; Reporting and referral systems; Contact of the surveillance term and alert term; Proper hand washing technique; Distributed Ebola posters on how to identify EVD symptoms in English and Retoro
- The surveillance team also visited a number of schools (Primary and Secondary), communities, churches and Uganda Wild life officers. Below are the list of schools, communities and others officers visited.  
Schools including: Good Sharped Primary School; Nyakatonzi Primary School; Ntanda Primary School; Kiyombya Primary and Secondary School; Kanyamukale Primary School and 3 Sub-county Offices of Rubona; Kiyombya and Rwimi

***Laboratory investigations/Surveillance***

- UNHCR successfully trained 43 health workers on Ebola rapid response in Kamwenge district. This included district health team and implementing partners staff doing Water, sanitation and hygiene. The



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training in Kyegegwa district is still on going and will end of Thursday 23rd August

- UNHCR chief of Public Health is in field conducting readiness/preparation assessment and ensuring surveillance in the refugee settlements are up and running to monitor any outbreaks of diseases. Currently, House to house surveillance by VHTs are on-going in the communities.
- UNHCR is supporting point of entry screening for Kikuube district at the lake shores at 3 entry points in Sebagoro and Kahuka
- Screening continued to take place at Sebigoro landing site (a refugee entry point) and a total of 30 new arrivals from DRC were screen on Tuesday 21st August 2018.
- WHO and UNHCR supported KDLG to activate screening site at Nsonga landing site in Buhuka parish in Kyangwalis sub county. Nsonga is another major entry point for new arrivals from DRC, and at 18:00 hour on 21st August 2018 nine (9) new arrivals had crossed to Uganda.
- MTI to support deployment of two health workers at Nsonga POE
- IDI to support Kikuube district improve data quality and reporting rates through mtrac and HIMS.
- WHO and KDLG have scheduled surveillance Training of 2 health workers from each of the 26 HFs on Wednesday 22 nd August 2018.
- The UNHCR team manning screening at Sebigoro now share surveillance information with Sebigoro HCIII and the district



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- The surveillance team held a meeting with immigration and Uganda Police marines. Immigration and police agreed to ensure that all new arrivals from DRC use point of entry where screening is conducted

*Kasese:*

- Continued with screening at Mpondwe border point with 114281 persons Screened as of now and 15,406 screened yesterday. 12 Suspects have identified for further investigation with 9 testing negative for Ebola and 3 results pending.
- Three more screening points point will be equipped and commissioned today. (Kayanzi, Kithoma and Kithololo) with support from WHO, Bailer, UNICEF and Red Cross.
- Discussed with the UPDF and they provided 12 soldiers to support crowd control at this point and stop people who have been avoiding screening. UPDF soldiers will be oriented on EVD and personal precautions to take as they support the screening process at Mpondwe screening point.
- Reached out to 7 more health facilities with surveillance tools and briefly oriented them on how to detect and handle Ebola suspects.

*Bundibugyo*

No alerts reported yesterday. The Surveillance team continues to move to health facilities to strengthen surveillance systems.

*Kabarole*



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- No new Alert in the district however active case search is ongoing.
- WHO and DHO team visited 3 health facilities, Mugusu HC III, Karambi HC III, and Mucwa HC III. Orientated a total of 26 HCWs on the alert case definition, signs, symptoms, treatment and prevention of Ebola. They were advised to report any alert case to the DRRT immediately.

### Ntoroko

- No alerts have been reported.
- The team was in the communities of Kamuga and Rwangara for community case search and surveillance activities were been monitored and supervised in various facilities. The surveillance system is believed to be gaining strength as the facilities and community members are informed more on surveillance and case search on Ebola and other VPDs.
- Screening facilities have been opened up in Rwangara landing site. This includes hand washing and temperature checks as well as history of travel to DRC.

### ***Risk Communication***

- Ebola awareness campaigns are on-going using the VHTs and aired radio spot messages in Arua, Isingiro, Kamwenge and Kyegegwa districts
- RDC's Office Hoima & Kikuube districts has offered airtime for EVD messages on local FM station between 20:00 to 21:00 hours on Monday.
- UNICEF supported Radio shot spots messages on Ebola continue to be played on liberty local FM stations.
- UNICEF supporting distribution of all EVD IEC materials in Kikuube district.



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- Kikuube DLG has held 2 radio talk shows

*Kasese:*

- A radio talk show was held on one of the local F.M stations with support from UNICEF
- Distribution of IEC materials continued in the communities and Red Cross volunteers continued to reach out to communities with EVD messages with support from UNICEF

*Bundibugyo*

- Radio talk shows continue to be aired on radios in Bundibugyo in both Rukonjo and Rubwisi languages with support from UNICEF. The field teams have been distributing IEC materials wherever they go.

*Kabarole*

- HCWs were briefed on the EVD outbreak situation in DRC and the potential risk of spread of the outbreak to Uganda.
- All the visited health facilities were given IEC materials.

All HCWs were advised to follow the proper channels of communication in case of any alert case.

**Ntoroko**

- The communication team were today supported by UNICEF and together they were in the communities sensitizing on risk communication.





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***Case management***

- MSF to work jointly with UNHCR to fast track completion of EVD treatment unit at Kasonga in Kyangwali sub-county, kikuube district. The district to identify another site for establishment of ETU outside the refugee hosting area in case of EVD outbreak.
- Five days EVD case management training of 25 health care workers ended on Sunday 19th August 2018. The training was supported by supported by UNHCR, MOH and WHO. Participants were 1 medical officer, 8 clinical officers, 1 security guard and 15 nurses in kikuube district.
- 200 overalls (PPEs) available at Hoima District store however face masks, gum boots, gloves, aprons are needed in kikuube district
- Eight people have been trained to operate the hypo chloride production plant donated by UNICEF in Kikuube.
- WHO supported UNICEF in distribution of WASH supplies delivered by UNICEF to health facilities: Kyangwali, Kasonga, Rwanyawawa, Maratatu A and Maratatu D health centres in Kyangwali settlement and at Buhuka and Sebagoro Health centers at the refugee entry points. These included
  - Soap
  - Chlorine powder
  - Aqua tabs
  - Some of the handwashing facilities
- UNHCR supported trainings on Ebola case management and infection prevention and control Kisoro, Kanungu and Ntoroko districts training



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and the trainings started On 21st August running throughout the week. District health team and leaders are part of this training as well and ToTs from MoH are facilitating.

Kasese

- Responded to 3 alerts as below:
- Two of them identified at the screening point, One of them a male aged 50 Ugandan with coming from DRC taken for investigation test positive for malaria and negative for HIV. Sample collected and shipped to UVRI. The second a male aged 27 DRC national temp 40 Degrees Centigrade at time of identification taken for further investigation at isolation unit he test positive for malaria and negative for HIV. Blood sample collected and shipped to UVRI.
- The 3rd alert was a sudden death of a male 32 years old. No history of ill health, died in sleep was reported to be an alcoholic. Body disinfected and put in a body bag, isolated in room waiting safe burial today. House disinfected. Swab taken and shipped to UVRI. The household educated about EVD and contacts listed. All actions done by the Bwera hospital RRT with support from WHO. Signifying some capacity of the case management team.
- Responded to an alert of one case (A child of 6 years old, male, from Kitholholho, Karambi, Subcounty, bordering, DRC, presented with temp. 39.1 was identified nose bleeding, vomiting blood, the child tested



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positive for malaria, sample was taken and shipped to UVRI. The child was retained in isolation on malaria treatment.

- Construction of ETU continued with support from MSF was completed.

*Bundibugyo*

- Save the Children has an Ebola expert in the region. He is going to meet the case management team and give tips on improving patient and bio-hazardous waste flow in the ETU. He will also discuss psychosocial needs of EVD patients and how to mitigate them.

Kabarole:

- All HCWs were advised to be very vigilant and to observe universal precautions at all times.

Hand washing demonstration was done.

*Ntoroko*

- Progress is registered as the case management center is established
- Training of the case management team shall commence on Tuesday 21 August 2018 by UNHCR and WHO
- Hand washing facilities are established on the landing site of the two communities namely Kamuga and Rwangara as well and the communities contributed immensely by providing the shades and identified the personnel to supervise the activities.

*Logistics*

- UNHCR Supported Mbarara regional referral hospital with mattresses, gloves and infra-red thermometers for the treatment centre in Mbarara district



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*Bundibugyo*

- The WHO contractor is currently branding the WHO donated equipment and furniture.
- The WHO has sent the fencing/demarcation material for the isolation unit. The fence will be hoisted tomorrow.

*Ntoroko*

- Efforts are made to mobilize resources at all levels to enhance implementation of activities as planned by various committees but the challenges still remain to fill the gaps. This could be attributed to weak coordination and resource mobilization. The responsible committee promise to intensify efforts to improve on the logistics activities.

**Challenges/gaps**

*Kabarole*

- Some HCWs expressed concerns about lack /inadequate stock of basic protective gear such as examination/surgical gloves and aprons.

*Kasese:*

Challenges at this screening point:

- Inadequate waer supply: National Water and Sewerage Corporation needs to be contacted to see whether they can allow the screening team access water at the nearest point. In order to reduce expenses of moving water from the hospital which is over seven kilometers away.
- Lack of Toilet facilities. Following up discussion with WFP on this matter



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## Bunyangabu

- Facility based surveillance teams not in place and there is no formal training of staff in coordination, surveillance, risk communication and potential case investigation
- No single personal protective equipment (PPEs) in the entire district
- No laboratory staff have been trained in EVD sample taken and no expert training in case management and IPC in all health facilities visited
- District surveillance team not giving their maximum because there is no facilitation

**-End-**

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