



| Situation Report                  |                           |                                      |                           |
|-----------------------------------|---------------------------|--------------------------------------|---------------------------|
| <b>Enhanced Preparedness Name</b> | Ebola                     | <b>District and Country affected</b> | Arua, Uganda              |
| <b>Date &amp; Time of report</b>  | 6 <sup>th</sup> July 2019 | <b>Investigation start date</b>      | 1 <sup>st</sup> July 2019 |
| <b>Prepared by</b>                | DHT Arua                  |                                      |                           |

## 1. HIGHLIGHTS

- No current confirmed EVD case in Arua
- No alert report today
- Daily coordination meeting started at 7:30am and well attended by district and other o
- Vaccination started at Yinga, kuluva and Adumi with 190 people vaccinated. The team is back to handle the balance in Kuluva and Yinga

## 2. INTRODUCTION

### Descriptive epidemiology

Arua District is currently stepping up its response to a possible Ebola spill over following a case that died on 30 June 2019 in Ariwara Health Zone of DRC, that is located 8 kilometres from Uganda border. The confirmed case in Ariwara is known to have used several means of transport while enroute to Ariwara and received treatment from several public and private health facilities on the way and on arrival. The case is known to have had contact with over 200 people including many in the communities bordering Arua District.

The risk of importation of the virus into Arua is very high. Communities from the affected areas share many social services, which includes markets, churches, schools, transportation facilities and the use of health facilities on the Ugandan side by Congolese.

The District mapped a total of 11 Sub counties as high-risk location with 25 health facilities based on population mobility assessment, which include: health facilities frequented by Congolese population, location hosting refugees proximity to the affected area.

As of 3rd July, there were no suspected cases under investigation in the ETU in Arua district.

### Summary of cases

|          |                                |           |
|----------|--------------------------------|-----------|
| <b>1</b> | <b>New suspect cases today</b> | <b>00</b> |
| <b>2</b> | New deaths                     | 00        |
| <b>3</b> | Cumulative cases               | 00        |
|          | Suspect                        | 00        |



|           |  |    |
|-----------|--|----|
|           | Probable   | 00 |
|           | Confirmed  | 00 |
| <b>4</b>  | Cumulative deaths (suspect, probable & confirmed cases) in         | 00 |
|           | Health Facilities  | 00 |
|           | Community  | 00 |
| <b>5</b>  | Total number of cases on admission                                 | 00 |
|           | Cumulative cases discharged  | 00 |
|           | Confirmed cases that have died                                     | 00 |
| <b>6</b>  | Current admissions of Health Care Workers                          | 00 |
| <b>7</b>  | Number Health workers discharged today                             | 00 |
| <b>8</b>  | Cumulative cases Health workers discharged                         | 00 |
| <b>10</b> | Confirmed cases Health workers that have died                      | 00 |
| <b>11</b> | Cumulative deaths of Health Care Workers                           | 00 |
| <b>12</b> | Runaways from isolation  | 00 |
| <b>13</b> | Number of contacts listed  | 00 |
| <b>14</b> | Total contacts that completed 7 days                               | 00 |
| <b>15</b> | Contacts under follow-up   | 00 |
| <b>16</b> | Total number of contacts of followed up today                      | 00 |
| <b>17</b> | Contacts no longer to be followed because the case tested negative | 00 |
| <b>18</b> | Suspect specimens collected and sent to UVRI                       | 00 |
| <b>19</b> | Cumulative specimens collected                                     | 00 |
| <b>20</b> | Cumulative cases with lab. confirmation (acute)                    | 00 |
| <b>21</b> | Cumulative cases with lab. confirmation (convalescent)             | 00 |
| <b>22</b> | Specimens with pending results                                     | 00 |
| <b>23</b> | Date of discharge/death of last confirmed case                     |    |

## PUBLIC HEALTH ACTION / RESPONSE INTERVENTIONS

### COORDINATION

- Coordination meeting conducted and well attended by district staff and partners.
- All subcommittee members attended and put in their daily submissions.
- The surveillance teams were urged to step up their specific tasks and share the contacts of the DHO, Surveillance Focal Person and District Health Inspector.

### SURVEILLANCE AND LABORATORY

- Investigated and discarded (2) two alerts
- Held a preparatory meeting for the mass gathering surveillance during the sub regional football match scheduled for 7/7/2019



- Obtained daily reports from the 13 high risk health facilities with no reported suspected cases
- Sensitized and trained the (10) ten staff of Bagdad (Busy restaurant in Arua town) on case identification, how to isolate suspect cases and report.

### **Planned activities for 7/7/2019**

- Orient trained VHTs in 6 (six) high risk H/F on case identification, isolation of suspected cases and reporting
- The surveillance and laboratory teams into four groups for an effective response and coordination, with one group responsible for Arua Municipality
- Obtain daily situation reports from all the health facilities.

### **CASE MANAGEMENT**

- Mobilised health care workers at Oli isolation facility for case management refresher training.
- Commenced the set-up isolation facility to be ready to receive suspected cases.
- Stock taking of IPC materials and other isolation facility equipment's and took the inventory of what is missing
- Set-up of the appropriate place for triage/screening tent at Oli HCIV.
- Duty roaster of the daily staff attendance was to be provided by In-charge Oli HC IV
- Planned drills to start on doffing and doning in subsequent days starting
- Orientation of mentors shall start Sunday at Oli HCIV

### **RISK COMMUNICATION, COMMUNITY ENGAGEMENT & SOCIAL MOBILISATION**

The team divided into two groups with one group visiting Ejupala market and a video hall with the other Okufura secondary school and the following activities where done.

- An estimated 600 people were reached and 80 posters and other IEC materials in the three locations
- Successful sensitization was done in one school with 140 students and teachers reached with EVD messages. Questions asked were answered.
- The school had printed messages that emphasized hand washing at the entrance
- One community dialogue at Aruaca Trading centre was successfully conducted with 200 people reached,
- In Nyio market, they had adequate knowledge about ebola, and recalled about suspected cases that happened



## **LOGISTICS**

- The team in store has continued to update the stock status for the MCM commodities.
- The stock status of MCMs in Oli HCIV has been established and a request for the gaps have been compiled in a list for the attention of the DTF

## **VACCINATION**

- Three facilities were reached and front line health workers and health care workers were immunised. The numbers per facility were as follows in Adumi 60 and Kuluva 70 and Yinga 60
- Planned for 7<sup>th</sup> July 2019 - team one shall back to ADUMI, team two, back to YINGA and team three back to Kuluva

## **3. CHALLENGES/GAPS**

- There is limited means of transport for the various sub committees to effectively respond and execute planned activities
- Absence of upfront cash is hampering effective execution of planned activities

## **4. RECOMMENDATIONS & PRIORITY FOLLOW UP ACTIONS**

- There is need for some upfront amounts of cash for immediate response
- There is need for transport for the various sub committees to effectively respond