



**UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period January 2016**

Project Number and Title: #17- Strengthening EVD Surveillance, Community Engagement and Response for getting to and sustaining at Zero Ebola cases in Sierra Leone	PROJECT START DATE¹: 01-08-2015	AMOUNT ALLOCATED by MPTF <i>(please indicate different tranches if applicable)</i> \$ 2,073,205	RECIPIENT ORGANIZATION World Health Organization (WHO)
Project ID: 00096318			
Project Focal Point: Name: Elaina Davis E-mail: davise@who.int	EXTENSION DATE: 30-12-2015	FINANCIAL COMMITMENTS	
Strategic Objective (STEPP) SO1 – Stop the Outbreak	PROJECTED END DATE: 31-03-2015	EXPENDITURES \$1,937,575	IMPLEMENTING PARTNER(S): Ministry of Health and Sanitation of Sierra Leone
Mission Critical Action MCA1 – Identifying and tracing of people with Ebola			
Location: Sierra Leone	Sub-National Coverage Areas: All 14 districts: Western Area Urban, Kambia, Port Loko and Tonkolili; without on-going transmission: Bo, Kailahun, Pujehun, Bonthe, Moyamba, Kono, Kenema, Bombali, Koinadugu, Western Area Rural		

MONTHLY PROGRESS REPORT RESULTS MATRIX

OUTPUT INDICATORS					
Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the (one month) reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
<i>Description of the quantifiable indicator as set out in the approved project proposal</i>					
Proportion of health facilities submitting weekly IDSR reports on time to districts	National	>80%	80.5%	70.3%	88%
% of districts which have functional IDSR systems	National	100%	100%	100%	100%

¹ The date project funds were first transferred.



**UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period January 2016**

OUTPUT INDICATORS					
Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the (one month) reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
% of contacts monitored on a daily basis and reported effectively	National	100%	62%	62%	62%
# of trained community health workers in implementation of community based disease surveillance (CBDS) for sustaining resilient zero	4 districts with on-going transmission	200	0	0	0%
# of border service focal points established and equipped with all necessary tools to ensure effective monitoring	7 Districts	7 in Sierra Leone	2	2	28.57%
# of information exchange sessions (in line with established standards and tools) taken within the timeframe of the project	7 districts	5 in each district (total 35)	3	3	8.57%
# of simulcast communications aired for getting to and sustaining zero	National	30	0	0	WHO do not do simulcast comms
# of people (audience) of simulcasts	National	500,000	0	0	WHO do not do simulcast comms



**UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period January 2016**

OUTPUT INDICATORS					
Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the (one month) reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
EFFECT INDICATORS (if available for the reporting period)					
# of Integrated Disease Surveillance System fully operational in Sierra Leone	National (with primary introduction in 4 districts with on-going transmission)	1	1	1	100%
Proportion of new confirmed cases from known contact lists	National	90%	50%	50% (Jan 2016) 100% (previous outbreak Aug 2015-Nov 2015)	55.56% (Jan 2016)
Number of transmission chains which derive from cross-border contacts	National	0	0	0	100%
# of districts that fully implemented cross-border cooperation mechanisms (including regular exchange of information)	7 Cross border districts	4	2	2	50%
# of escapes (absences) from ETUs and CCCs	4 districts with on-going transmission	0	0	0	100%

NARRATIVE

Situation Update (please describe critical changes, if any, in the situation that affect the project (1-2 paragraphs))



**UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period January 2016**

Establishing robust surveillance systems

All 13 districts and the national level have a functional IDSR system and work is ongoing to implement cross-border surveillance with SOPs on engagement under development. The WHO IDSR team has continued to work with the Ministry on a number of issues including a review of surveillance performance by district, the development of an IHR action plan, and evaluation of district IDSR performance against the 6-9 month Ebola Recovery Strategy.

Responding to an EVD flare up

On the 14th January a new Ebola virus disease case was detected from a positive swab taken from a 22-year-old young woman who died in the Magburaka town of Khalifa Rowollo chiefdom of Tonkolili District. This case occurred more than 60 days after the end of the previous outbreak was declared over in November 2015. This being a new outbreak the indicators related to the number of contacts, transmission chains and new of cases will be calculated afresh but not added on to the ones of the outbreak that ended in November. A total of 126 contacts were line listed for the two cases in the four districts of Tonkolili, Kambia, Port Loko and Bombali and these were closely followed by the contact tracing teams.

Communications on getting to and sustaining ZERO

Given the shortcomings of previous reporting on this specific set of activities WHO wish to provide an extended update on MPTF funded Ebola simulcasts and information exchange activities supported by the Crisis Communication Function. The function has continued to provide updated technical information that appropriately responds to the concerns, fears, and misconceptions of affected communities.

Key Achievements *(please use this section to highlight your key achievements for the month, using bullet points if preferred)*

Establishing robust disease surveillance systems

1. By December 2015, all districts were trained in IDSR and all 13 districts and the national level now have a functional IDSR system.
2. Cross-border surveillance is now on-going in Kambia and Koinadugu, two for the initially intended four districts for cross border activities. The districts also have regular meetings with their counterparts in Guinea, however, the districts have not however held cross-border meetings this year.
3. WHO is providing technical support to the Government in developing a draft International Health Regulations (IHR) plan of action for the period 2016 – 2017. Sierra Leone had never fully implemented IHR 2005. An IHR core capacities assessment conducted in December 2015 generated actionable areas that are informing the process of developing the action plan. This plan will also have a strong component of cross-border surveillance and surveillance at ports of entry.
4. The IDSR team provided technical support to the MOHS during the quarterly surveillance review meeting for the fourth quarter of 2015. During the meeting, the surveillance performance from each of the districts was reviewed, experiences and challenges shared and solutions for challenges generated.
5. Under the leadership of the MOHS, the team evaluated the districts and select health facilities for the level of implementation of post Ebola recovery activities as guided by the Government's 6 – 9 month strategy. The team was pleased with the level of functioning of the IDSR system and Infection Prevention and Control in the assessed districts.
6. The team has continued to provide technical support to production of the weekly epidemiological bulletins. This involved review of the weekly data reported by districts, creation of graphics and editorial work. Feedback from bulletins to districts is helping improve performance.



UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period January 2016

Responding to an EVD flare up

7. WHO initiated a swift and robust response to the new case detected in Tonkolili deploying personnel to a total of four districts related to the case (Tonkolili, Kambia, Port Loko and Bombali districts). Eleven Epidemiologist were deployed to support the case investigation, risk assessment and implementation of control measures. WHO worked with the DHMTs to support 30 contact tracers to provide daily monitoring of the 26 contacts across the four districts. Additionally eight Medical Doctors were recruited and deployed as contact tracing mentors to provide technical supervision and mentorship to the contact tracers across the four districts.
8. WHO deployed four case management experts to provide technical support and mentorship for health care workers manning the isolation and treatment facilities at Magburaka Government hospital and Mateneh Ebola Treatment Centre (for Tonkolili) and Kambia Government Hospital and the Rapid deployable isolation and treatment facility (RDITF) in Kambia, with focus on adherence to clinical care guidelines and infection prevention and control.
9. WHO conducted active case searches in 79 out of 107 peripheral Health Units (PHUs) in Tonkolili and 34 out of 68 PHUs in Kambia to identify possible additional positive cases. Health workers were given on the job training on the EVD case definition, symptomatology to aid detection and the alert process with emphasis on notification for all patients meeting the EVD case definition.
10. The Infection Prevention and Control(IPC) teams in the four affected Districts implemented ring IPC in all the PHUs in the four districts to ensure that in case a suspected EVD case presents in the any of the PHU they are handled in a safe manner that reduces the risk of nosocomial transmission. Additionally WHO conducted EVD ring vaccination for 212 contacts, and contacts of contacts in Tonkolili, Bombali, Port Loko and Lunsar to significantly reduce the risk of further EVD spread among the contacts.
11. WHO's response, working as part of the interagency response, to the recent EVD flare in Tonkolili was a success with the disease being contained at the source with only one secondary case. Rapid deployment of personnel and efficient response activities were key in preventing the spread of the virus to other households or neighboring districts.

Communications on getting to and sustaining ZERO

12. The WHO Crisis Communications function was a major contributor to the National Ebola Response Center's CEO's weekly statement to the press on getting to zero. This consisted of ensuring messages acknowledged anxieties, responded to rumours, gave actionable information on how to get to ZERO and avoiding stigma. This weekly media statement was shared on all the county's written and broadcast media until 3 December.
13. Since that date, the function has continued to be a weekly guest on radio stations, engaging with listeners and their preoccupations around Ebola and its reemergence as well as related issues of denial and mistrust. This direct unmediated access to listeners has become an important strategy to listen, communicate evidence based facts and maintain WHO's technical leadership on the Ebola Virus Disease outbreaks and supporting communities. Additionally, the function has contribute to the Consolidated Ebola Messaging together with the Social Mobilisation Pillar (updated since 7 November 2015).
14. Communications have compiled a communications strategy for engaging with Survivors, and completed messaging on the Virus Persistence Study for media, the general public, study participants and healthworkers.
15. The function has produced advocacy material on various social media platforms (in English and Krio) of examples of the importance of community engagement, including Survivors, and the importance of heightened surveillance and reporting



**UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period January 2016**

of live and death alerts.

- 16. . A total of 6 press conferences have been held since the grants initiation: on Survivors; the preliminary results of the Viral Persistence Pilot Study; the occasion of the declaration of the end of the first outbreak on 7 Nov2015; confirmation of reintroduction of new EVD Case; and the role of the Inter Agency support to the new EVD event 14Jan2016.
- 17. The WHO Communications function also compiled an Inter-Agency Crisis Communications Standard Operating Procedures and checklists in the event of a new EVD event or flareup. These SOPS and checklists are currently informing the Inter Agency response to the EVD event since 14th January.

Delays or Deviations *(if any, briefly describe the delays or changes in focus, approach or targets, and provide a short justification for the change (1-2 paragraphs))*

- 1. The process of developing cross-border engagement SOPS has been delayed by competing activities but is on-going.
- 2. Establishing surveillance at the rest of the cross-border points has also been delayed but will be accomplished once the SOPS are done.
- 3. Misinterpretation of messaging around the end of the Ebola outbreak on the 7th November 2015 produced significant challenges in the engagement of community in the response to the new outbreak on 14th January 2016. This required a heightened period of communications and community engagement to explain that the case was EVD and that this was to be anticipated as part of sustaining a resilient ZERO.

Gender and Environmental Markers *(Please provide disaggregated data, if applicable)*

No. of Beneficiaries		Environmental Markers
Women		<i>e.g. Medical and Bio Hazard Waste</i>
Girls		<i>e.g. Chemical Pollution</i>
Men		
Boys		
Total		

Additional Information *(Optional)*