



**PROPOSAL MONTHLY PROGRESS UPDATE**  
as of 28 February 2015

<b>Recipient UN Organization(s):</b>	WHO	<b>SOs</b> Strategic Objective(s)	<b>SO N: STEPP</b>				
		<b>MCAs</b> Mission Critical Action(s)	<b>MCA0n:</b> <b>MCA0n:</b>				
<b>Implementing Partner(s):</b>	n/a						
<b>Project Number:</b>							
<b>Proposal Title:</b>	<b>UN EBOLA RESPONSE MPTF</b>						
<b>Total Approved Proposal Budget:</b>	<b>US\$ 118 million</b>						
<b>Total Approved Project Budget:</b>		<b>Project</b>	<b>Budget Approved</b>				
	<b>MCA0n:</b> MCA01 #16 GIN EPIDEM DIST MNGM	00093251	US\$ 3,816,377				
	<b>MCA0n:</b> MCA03 #16 GIN IPC DISTRCT MNGM	00093254	US\$ 1,860,168				
	<b>MCA0n:</b> MCA09 #16 GIN DISTRICT LOGISTI	00093526	US\$ 2,447,346				
	<b>MCA0n:</b> MCA11 #16 GIN DISTRICT SOCIAL	00093970	US\$ 533,447				
	<b>Total</b>		<b>8,657,338 US\$</b>				
<b>Geographical Focus Area</b>	<input checked="" type="checkbox"/> Guinea <input type="checkbox"/> Liberia <input type="checkbox"/> Sierra Leone <input type="checkbox"/> Common Services	<b>Geographical Local Area</b> (Counties-Districts-Prefectures)	<input checked="" type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural <input checked="" type="checkbox"/> Border				
<b>Outbreak Hot Zones</b>	Please select one from the following <input checked="" type="checkbox"/> Yes (Y) <input type="checkbox"/> No (N)						
<b># Direct Beneficiaries</b> (Ensure the information below indicates both the total number of beneficiaries ensure inclusive participation and non-discrimination of the vulnerable and at-risk groups)	<b>Total Beneficiaries</b>						
	Women :						
	Girls:						
	Men:						
	Boys:						
<b>Project Duration (months):</b>		<b>Starting Date:</b>	1 March 2015	<b>Completion Date:</b>	31 May 2015	<b>Delay (months)</b>	<b>3</b>
<b>Proposal Title:</b>							
<b>Funds Committed:</b>	<b>US\$ 8 657 338</b>			<b>% of Approved:</b>	<b>100%</b>		
<b>Funds Disbursed:</b>	<b>US\$ 1,471,660</b>			<b>% of Approved:</b>	<b>17%</b>		

**PROPOSAL – MONTHLY PROGRESS UPDATE RESULT MATRIX**

Strategic Objective to which the Proposal is contributing <sup>1</sup>					
MCA [ 1 ]	Identify and trace people with Ebola				
Output Indicators	Geographic Focus Area	Target (as per Proposal Matrix)	Quantitative Results achieved at Month 1	Planned % Delivery Rate	Effective % Delivery Rate at Month 1
<b>Prompt case investigation, identification of all potential contacts, effective data integration</b>					
1. Proportion of suspect cases investigated within 24 hours of notification	Guinea	≥ 90%	5-6 days		
1. Weekly average of proportion of contacts monitored	Guinea	≤ 95%	97%		

Strategic Objective to which the Proposal is contributing <sup>2</sup>					
MCA [ 3 ]	Care for persons with Ebola and infection control				
Output Indicators	Geographic Focus Area	Target (as per Proposal Matrix)	Quantitative Results achieved at Month 1	Planned % Delivery Rate	Effective % Delivery Rate at Month 1
<b>Health Care workers trained on IPC and adhere to correct IPC guidelines, are mentored on the job and receive adequate supervision on the application of IPC practices and remain free of Ebola.</b>					
2. Number of new health care workers infected by district	Guinea	0	6		

<sup>1</sup> Proposal can only contribute to one Strategic Objective

Strategic Objective to which the Proposal is contributing <sup>3</sup>					
MCA [ 9 ]	Reliable supplies of materials and equipment				
Output Indicators	Geographic Focus Area	Target (as per Proposal Matrix)	Quantitative Results achieved at Month 1	Planned % Delivery Rate	Effective % Delivery Rate at Month 1
Continuous availability of supplies and logistics for EVD public health intervention at district level, proper and effective use of supplies and logistics, proper and effective management of the supply chain					
Incidences of stock out of PPEs	Guinea	0	0		

Strategic Objective to which the Proposal is contributing <sup>4</sup>					
MCA [ 11 ]	Social mobilization and community engagement				
Output Indicators	Geographic Focus Area	Target (as per Proposal Matrix)	Quantitative Results achieved at Month 1	Planned % Delivery Rate	Effective % Delivery Rate at Month 1
Effective district level strategies and activities for social mobilization developed and implemented; existence of community engagements and acceptance of EVD public health measures at district level; community level and related challenges are identified and resolved in real time.					
Proportion of incidences of community resistance resolved	Guinea	≥ 90%	98%		

**Qualitative achievements against outcomes and results:**

*Please, describe the achievements including documents, reports, evaluations. Please include pictures if possible*

*Section1: Results and Outcomes expected*

*Section2: Impact on Gender Results*

*Section 3: Environmental Impact Assessment in reference to the proposal*

*Section 4: Describe the conditions based on which the proposal might have change its destination (even partially)*

<sup>3</sup> Proposal can only contribute to one Strategic Objective

## Section: 1 - Expected Results

### **MCA [ 01 ] Identifying and tracing people with Ebola**

WHO has 323 active staff deployed in the country (83 immediate supervisors, 105 district supervisors and 156 Guinean doctors). Contact follow-up is done by personnel directly supported by WHO including 626 community agents. All staff members are trained before deployment in all prefectures in the country. Main products include - Daily surveillance and contact tracing report from each prefecture and Conakry; National databases of cases and of contacts; Identification of transmission chains in most situations; Daily National Situation Report (SitRep); Detailed Weekly SitRep; Cross-border meetings, particularly with Mali, Liberia and Sierra-Leone; Internal epidemiological bulletin (EpiLink) to “keep the surveillance network alive”.

### **MCA [ 03 ] – Care for persons with Ebola and Infection Control**

The activity of the IPC has focused on two main areas – i) the adaptation and discussion of guidance documents to standardize the quality of IPC activities of all partners; ii) the coordination of IPC interventions in the country to reduce the gaps and duplication of efforts. The NERC identified 10 priority districts. In this respect, our main products have been the following: Placement of 5 experts in the MoH to support the elaboration of key foundation documents; Placement of 10 IPC specialists in priority districts for coordination of IPC activities assuring no gaps or duplication in activities and weekly reports are now being received; the development and adoption of SOPs for harmonized national activity; Provision of Leadership and coordination of IPC activities for 16 organizations; Support health care worker training in priority locations; Facilitating the establishment of triage zones, team training and supplies in 10 priority hospitals.

### **MCA [09] Reliable supplies of materials and equipment**

WHO has currently 13 Logisticians working in the various district providing support and assistance to the staff in the field and oversee day-to-day disbursement of essential supplies. A total of 125 vehicles have been rented to provide transport for the staff and a steady supply of fuel is being ensured by the logisticians.

### **MCA [ 11 ] – Social mobilization and Community Engagement**

The office has developed a strong strategic vision to strengthen coordination for systematic and sustained **social mobilization and community engagement**. In this regard, WHO is providing technical support in five administrative communes of Conakry and in six priority prefectures where the Ebola Virus is still circulating. The WHO’ strategy consists of reinforcing the existing approaches and shifting from Media focus to more community based approaches, community dialogues and community engagement.

WHO has recruited 14 national, 5 international social mobilization experts and about 10 national and international anthropologists. WHO is building partnerships and engaging thousands of strategic allies at community level. The objective is to mobilize key community actors to be the agents of change in their own communities: imams, priests, pastors, youth groups, women associations, traditional communicators, traditional leaders, union carriers, traditional healers, football and other sport clubs, teachers, etc. This work is done in close collaboration with our key partners such as MSF, UNICEF, Save the Children, Action Contre la Faim, USAID, CDC ...

## Section: 2 – Deviation of the Proposal from the Original Plan

MCA [ N ] N/A

## Section: 3 - Gender Impact

MCA [ N ]  
(Narrative)

MCA [ N2 ] – If more than one Mission Critical Action  
(Narrative)

## Section: 4 - Environmental Impact

MCA [ N ]  
(Narrative)

MCA [ N2 ] – If more than one Mission Critical Action  
(Narrative)