



UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period: October 2015

Project Number and Title: #17 Establishing Rapid Response and Stabilization teams (RRSTs) in the National Ebola Response Centre Secretariat (NERC)	PROJECT START DATE¹: 01-07-2015	AMOUNT ALLOCATED by MPTF <i>(please indicate different tranches if applicable)</i> \$ 4,501,490.00	RECIPIENT ORGANIZATION United Nations Office for Project Services (UNOPS)
Project ID: 93033			
Project Focal Point: Name: Rose Linda Barbuto E-mail: RoseLB@unops.org	EXTENSION DATE: 31-10-2015	FINANCIAL COMMITMENTS \$1,920,720.00	
Strategic Objective (STEPP) SO5 – Prevent outbreaks in countries currently unaffected	PROJECTED END DATE: 31-10-2015	EXPENDITURES as of 31-10-2015 \$ 3,529,551.97	IMPLEMENTING PARTNER(S): National Ebola Response Centre (NERC)
Mission Critical Action MCA13 – Multi-faceted approach to strengthen preparedness (...)			
Location: Sierra Leone		Sub-National Coverage Areas: All affected districts	

MONTHLY PROGRESS REPORT RESULTS MATRIX

OUTPUT INDICATORS

Indicator	Geographic Area	Projected Target <i>(as per results matrix)</i>	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>					
# of surveillance triggers leading to RRST deployment	National	2 deployments per RRST/6 per month			
# of small, medium and full surge interventions implemented as result of RRST deployment	National	5 No surges, 5 Small, 3 medium, 2 Full Surges implemented	1 Full	2	20% of total

¹ The date project funds were first transferred.



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# of Situation Room and NERC secretary salaries paid	National	100% salaries paid	100% salaries paid	100% salaries paid	100% salaries paid.
EFFECT INDICATORS (if available for the reporting period)					
% EVD surge and spread stopped in locations assessed by RRSTs	National	100%	100%	100%	100%
% of secondary cases	National	<10%	1%	1%	100%
% of tertiary cases	National	0%	0%	0%	100%
% of RRST missions converted to full surge interventions	National	<25%	5%	5%	100%

NARRATIVE

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

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

Activity	Location	Key Achievement
Operation NORTHERN PUSH – Completed Phase 1	Kambia	<ul style="list-style-type: none"> 945 Mobile Phones, CUG and Chargers procured, which has resulted in improved alert reporting and surveillance in Kambia. The 1st Phase completed. The second phase was primarily funded by the World Bank and now 80% complete.
Operation SAFEGUARD – Completed Phase 1	Western Area	<ul style="list-style-type: none"> 906 Mobile Phones, CUG and Chargers procured thus enhancing communication and timely reporting of suspected cases by surveillance officers and community volunteers. The western area safeguard 1st phase enhanced the communication gap between survivors and community stakeholders. Phase 1 completed.
Surge Set-Up – Completed	Tonkolili	<ul style="list-style-type: none"> Payment of hazard allowance for 125 quarantined Nurses and other medical staff in Masanga Hospital to treat sick people while under quarantine. The intervention of the Tonkolili surge increased community awareness and ownership in the district which contributed to eradicating EVD in the district. Surge Completed.
Social Mobilization - Completed	Bombali	<ul style="list-style-type: none"> Increased community engagement and ownership generated through chiefdom and section level meetings in collaboration with Paramount Chiefs and other



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		<p>traditional rulers. This is key to maintaining a resilient zero. Increased community engagement in the district which enhanced community ownership and early warnings and reduction in the risk of complacency. Surge Completed.</p>
Operation TAP EBOLA - Completed	Tonkolili	<ul style="list-style-type: none"> Increased community engagement involving local taskforces security checkpoints, survivors and okada (motor bike) riders. Establishment of multi-pillar teams of surveillance, social mobilization and psychosocial teams to raise alert levels and maintaining resilient zero case. Increased community buy in the in the district. Enhanced the social mobilization and alert level. Surge Completed.
Social Mobilization – Completed	Koinadugu	<ul style="list-style-type: none"> Increased community engagement and ownership generated through chieftdom and section level meetings in collaboration with Paramount Chiefs and other traditional rulers. This is key to maintaining a resilient zero. Increased communities buy in the Koinadugu district. Surge Completed.
Safe and Dignified Burial Operation	Western Area	<ul style="list-style-type: none"> Enhanced safe and dignified burial with a possibility to reduce grief with a cemetery of choice option. Grave diggers were incentivized in the Western Area and proper PPE disposal burning pits constructed in all cemeteries to combat any mode of spread after use of the PPE material.
Silent District Workshop		<ul style="list-style-type: none"> Workshop was done in Freetown hosted all the district coordinators. Information sharing sessions helping DCs mitigate the risk of complacency that will lead to zero cases nationally. It re-energized the spirit to fight the deadly EVD.
Quality Assurance and Preparedness Meeting	Western Area	<ul style="list-style-type: none"> Quality Assurance and Preparedness meeting was scheduled to bring together approximately 130 participants in a central location (All the District Coordinators, District Medical Officers and other stakeholders) for a two days training and information sharing meeting on “Ebola and in silent time” as we head to a national resilient zero to effectively prepare all silent district plans and reduce the risk of complacency in the fight against Ebola.

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))



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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)*