



**UN EBOLA RESPONSE MPTF
FINAL PROGRAMME¹ NARRATIVE REPORT - VERSION 1
DATE: 21 JUNE 2016**

<p style="text-align: center;">Project Number(s) and Title(s)</p> <p>#41- Ebola Response Interagency Stewardship 00096704 (Gateway ID)</p>	<p style="text-align: center;">Recipient Organization(s)</p> <p>RUNO(s) Project Focal Point: Name: _____ E-mail: _____</p>
<p style="text-align: center;">Strategic Objective & Mission Critical Action(s)</p> <p>SO (STEPP) No – SO 5 Prevent Further Spread MCA No – 13 Multi-faceted preparedness</p>	<p style="text-align: center;">Implementing Partner(s)</p> <p>National counterparts (Government, private, NGOs & others) and/or other International Organizations</p>
<p>Location:</p> <p>Guinea, Sierra Leone</p>	<p>Sub-National Coverage Area:</p> <p>All provinces – Guinea, Sierra Leone, and Regional Coordination across Ebola Affects countries</p>
<p style="text-align: center;">Programme/Project Cost (US\$)</p> <p>Total approved budget as per project proposal document: MPTF²: USD 119,000</p> <ul style="list-style-type: none"> • <i>by Agency (if applicable)</i> Agency Contribution • <i>by Agency (if applicable)</i> Government Contribution (if applicable) <p>Other Contributions (donors) ECHO: USD 445,651 DFID : USD 548,001 USAID-OFDA : 477,712 TOTAL: 1,590,364</p>	<p style="text-align: center;">Programme Duration</p> <p>Overall Duration (8 months) Project Start Date³ 24 August 2015</p> <p>Originally Projected End Date⁴ 31 January 2016 Actual End date⁵ 31 March 2016</p> <p>Agency(ies) have operationally closed the programme in its(their) system Yes</p> <p>Expected Financial Closure date⁶: 30 June 2016</p>
<p style="text-align: center;">Programme Assessment/Review/Mid-Term Eval.</p> <p>Evaluation Completed <input type="checkbox"/> Yes <input type="checkbox"/> No Date: dd.mm.yyyy Evaluation Report - Attached <input type="checkbox"/> Yes <input type="checkbox"/> No Date: dd.mm.yyyy</p>	<p style="text-align: center;">Report Submitted By</p> <ul style="list-style-type: none"> ○ Name: Sarah Kline ○ Title: Resource Mobilization Lead i-a. ○ Date of Submission: 30 June 2016 ○ Participating Organization (Lead): WHO ○ Email address: klinesa <p>Signature: _____</p>

¹ Refers to programmes, joint programmes and projects.

² The amount transferred to the Participating UN Organizations – see MPTF Office GATEWAY.

³ The date of the first transfer of funds from the MPTF Office as Administrative Agent. The transfer date is available on the online MPTF Office GATEWAY.

⁴ As per approval of the original project document by the Advisory Committee.

⁵ If there has been an extension, then the revised, approved end date should be reflected here. If there has been no extension approved, then the current end date is the same as the originally projected end date. The end date is the same as the operational closure date, which is the date when all activities for which a Participating Organization is responsible under an approved project have been completed. As per the MOU, agencies are to notify the MPTF Office when a programme completes its operational activities. Please see MPTF Office Closure Guidelines.

⁶ Financial Closure requires the return of unspent funds and the submission of the Certified Final Financial Statement and Report.

PROJECT/PROPOSAL RESULT MATRIX

Project Proposal Title: Ebola Interagency Stewardship						
Strategic Objective to which the project contributed						
Zero Ebola Cases in Guinea, Sierra Leone and across Region (including Liberia)						
Effect indicators	Geographical Area (where the project directly operated)	Baseline ⁷ In the exact area of operation	Target	Final Achievements	Means of verification	Responsible Organization(s)
Zero Ebola Cases	Guinea, Liberia, Sierra Leone, and Region	2, 1, 1	0, 0, 0	0, 0, 0	WHO situation reports; Ebola Crisis Managers (ECMs), Regional Interagency Ebola Coordination Lead (RIECL)	
MCA [13] ⁸						
Output Indicators	Geographical Area	Target ⁹	Final Achievements		Means of verification	Responsible Organization(s)
Stakeholders contribute to the National Ebola Response: Stakeholders contribute to the formulation of the Ebola Response Country Operational Plans	Guinea, Sierra Leone	70% stakeholders attend participate	Stakeholder participation and attendance was at or above 70% for the duration of the response period.		Reported by Government and UNSGE office	ECMs, RIECL
Cross-border, regional and international coordination maintained: Ebola Response Coordination Board functioning successfully	Guinea, Sierra Leone	70% stakeholders attend meetings	Stakeholder participation and attendance was at or above 70% for the duration of the response period		Notes of weekly stakeholder meetings; board meetings	ECMs, RIECL

⁷ As at 1 August 2015.

⁸ Project can choose to contribute to all MCA or only the one relevant to its purpose.

⁹ Assuming a ZERO Baseline

FINAL PROGRAMME REPORT

Background and Situational Evolution

On 1 August 2015 the Interagency Collaboration on Ebola (ICE), led by WHO, took over the task of coordinating the overall Ebola response from the UN Mission on Emergency Ebola Response (UNMEER). From August 2015 onwards ICE convened regular meetings of stakeholders in order to optimize coordination between partners, and ensure that the Ebola-affected countries — Guinea, Liberia, and Sierra Leone — achieved one of the primary objectives of the WHO Phase 3 Ebola Response framework: to interrupt all remaining chains of Ebola virus disease (EVD) transmission.

On 29 December 2015, WHO declared the end of EVD transmission in Guinea linked directly to the original outbreak, marking a major milestone for the international Ebola response. Liberia and Sierra Leone had both already made similar declarations earlier in the year, so the 29 December declaration signalled the first time that all three countries had interrupted human-to-human transmission. After over 2 years and almost 29 000 confirmed, probable, and suspected cases, the unprecedented efforts of affected communities, their governments, and an international coalition of responders had paid off.

The positive news at the end of December was tempered by the acknowledgement that there remained a significant residual risk of further outbreaks caused by the re-emergence of virus that had persisted in a small proportion of survivors. Accordingly, the proposed end date of MPTF funding for ICE was extended from 31 December 2015 until the end of March 2016, in order to ensure that each country built and retained the capacity to respond rapidly to any new outbreaks.

Liberia had already had to respond rapidly to an isolated cluster of two cases in November 2015, and on 14 January 2016 had just confirmed the end of transmission linked to that cluster when Sierra Leone announced the detection of and rapid response to what would also prove to be a two-case cluster. Transmission linked to that cluster would be declared to have ended on 17 March – the same day that Guinea announced that its surveillance system had detected a cluster of two confirmed and three probable cases in the southeast of the country. In each case, interagency rapid response capacity planned and coordinated through regular meetings of the ICE board ensured that outbreaks were rapidly detected and contained.

Detecting a case requires robust surveillance systems to be in place, entailing the routine collection of blood samples from live patients and swabs from dead bodies in cases where EVD is a possible cause of illness or death, followed by the rapid laboratory analysis of samples to confirm or discard EVD. Once a case of EVD is confirmed a multifaceted rapid response is initiated. Within 48 hours capacity to manage EVD cases in isolation, trace and monitor all potentially exposed contacts, assess and strengthen infection prevention and control measures at local healthcare facilities, and inform and engage with local communities must be deployed. This was the case in each outbreak since the declaration by Guinea in December. Such rapid, coordinated action was only possible due to the clear delineation of roles and responsibilities established by ICE, and due to adherence to the interagency response plans developed through ICE mechanisms.

This practical evidence of the ability of resilience to new outbreaks in Guinea, Liberia, and Sierra Leone contributed to the decision of the ninth meeting of the International Health Regulations (2005) Emergency Committee regarding EVD in West Africa to recommend that the Public Health

Emergency of International Concern (PHEIC) regarding the Ebola virus disease outbreak in West Africa be lifted. WHO Director-General Dr Margaret Chan subsequently ended the PHEIC on 29 March 2016.

- **Key Achievements:**

- The Ebola outbreak in West Africa has been declared to have ended after all three affected countries interrupted human-to-human transmission linked directly to the original outbreak, and demonstrated the capacity to respond rapidly to new outbreaks. The Public Health Emergency of International Concern regarding the Ebola virus disease outbreak in West Africa was lifted on 29 March 2016.
- The Interagency Collaboration on Ebola, led by WHO, succeeded in fostering cooperation between partners in the response, facilitated the achievement of the strategic objectives of WHO's phase 3 response plan, played a coordinating role in successful rapid response operations to new outbreaks in Guinea, Liberia, and Sierra Leone, and ensured that interagency rapid response plans are in place in the event of further isolated outbreaks of cases.

Report reviewed by *(MPTF M&E Officer to review and sign the final programme report)*

- Name:
- Title: M&E -
- Date of Submission:
- Email address:

Signature: