



SOUTH SUDAN EVD TASKFORCE MEETING

27TH SEPTEMBER 2018

**Update on South Sudan's preparedness and response
readiness capacities**

NTF Meeting Agenda; 27/09/2018

Item	Description	Time	Responsible person
1	<ul style="list-style-type: none"> Self Introduction Communication from the Hon. Minister 	2:00-2:05 pm	Dr Riek Gai Kok
2	Review of action points from previous meeting	2:05-2:20 pm	NTF Secretariat
3	<ul style="list-style-type: none"> Update on EVD outbreak in DRC Update on suspected EVD Alert in Juba Audit report for suspected EVD alert in Yambio Discussion 	2:20-2:40 pm	Mathew Tut Korsuk Scopas Angelo Goup
4	Health Cluster partners' mapping for EVD preparedness capacities and gaps	2:40-3:20 pm	Health Cluster and Partners
5	A.O.B <ul style="list-style-type: none"> Training on SOP for screening points (3/10/2018) 	3:20-3:30 pm	All



Key action points from meeting held on 20/9/2018

Action	Description	Responsible
1	Send out the operational plan to donors and heads of agencies, requesting for their specific commitments for the EVD preparedness.	WHO
2	Share the facility lay out, structural plan and specification for the materials required for the 10 isolation centers	WHO
3	Lead health partners in the following states; Tambura and Yambio (WVSS), Yei (AAH), Torit (CORDAID) and Maridi (CUAMM) to identify the needs and gaps required in the EVD preparedness and response in their respective states, and make a presentation to NTF on 27 th Sep. 2018	HC and Lead agencies
4	Fast track the establishment of a safety and security-working group with clear terms of reference	NTF Secretariat
5	Audit report on the EVD suspect sample management to be presented to NTF on 27 Sept 2018	Surveillance & Laboratory TWG
6	Health Cluster to recirculate the partner-mapping template for the benefit of those who did not receive it.	HC



HC Partners Mapping For EVD

- Partner Commitments to support EVD Preparedness- 8 Partners to date (World Vision, Save the Children, ARC. CUAMM,CORDAID, TOCCA,TRISS, HLSS, WHO and IOM)
- MSF Family- Part of the Preparedness discussions and who will be part of the response.
- Process of mapping the partners to prioritized sites is still ongoing
- Inter cluster Commitments to EVD Response
 - Scheduled meeting on Tuesday morning with various Clusters on their support to the EVD operational Plan.



Partners Mapping Summary

Partners	Locations	Preparednessh		Case Management		Logistics		Case Mangement		IPC	
		Ability	Intrested	Ability	Intrested	Ability	Intrested	Ability	Intrested	Ability	Intrested
ARC	KajoKeji, Nemole	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
CUAMM	Edi	Yes	Yes	Yes	Yes	No	No	No	No	Yes	Yes
WVSS	Nabiapai, Nyaka, Gangora PHCC, Sakure PHCC, Tore	Yes	Yes	No	No	Yes	Yes	Yes	No	No	Yes
TRI-SS	Kajo-Keji, Kaya, Nemole, Bazi	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
SCI	Kaya, Nemole	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	No
CORDAID	Nemole	Yes	Yes	Yes	Yes	No	Yes	Yes	No	Yes	Yes
HLSS	Juba	No	Yes	No	No	No	Yes	No	Yes	No	Yes
TOCCA	Rasolo, Wudabi, Kaya, Brigo, Nabanga, Edi	Yes	Yes	No	No	No	No	Yes	Yes	No	No



Preparedness for isolation facilities

Partner	County	isolation center	Support the Isolation facility	Setting up the Slab and Tent/s (and other equipment)	Support Supplies and procurement including IPC supplies	Shipping of supplies from Juba (base) to Site	Provide IPC and WASH support (assessment and upgrades)	Salaries or incentives or allowances	Community level awareness / social mobilization	Border screening sites that feed into the Isolation site	Identify and/or support ambulance linked to this isolation facility and the screening sites	Plans in place for community surveillance
Cordaid	Nimule	Nimule Hospital										
ARC	Nimule	Nimule Hospital	Yes	Yes	Yes	Yes	Yes	partial	Yes	Yes	Yes	Yes
SC	Nimule	Nimule Hospital	No	No	No	Yes	No	Yes	Yes	yes	Yes	Yes
WVSS	Yambio	Yambio Hospital	Yes	Yes	Yes	No	only Wash	partial	Yes	Yes	No	Yes
WVSS	Nazara	Sakure	Yes	Yes	Yes	No	only Wash	partial	Yes	Yes	No	Yes
WVSS	Nazara	Gangura	Yes	Yes	Yes	No	only Wash	partial	Yes	Yes	No	Yes
WVSS	Ezo	Ezo	Yes	Yes	Yes	No	only Wash	partial	Yes	Yes	No	Yes
WVSS		Nyaka	Yes	Yes	Yes	No	only Wash	partial	Yes	Yes	No	Yes
CUAMM (TRI-SS)	Bazi	Bazi	Yes	Yes	Yes	No	Yes	partial	Partial		Yes	
CUAMM (TRI-SS)	Nimule	Nimule Hospital	Yes	Yes	Yes	No	Yes	partial	Partial			
IOM		Border areas	Pending approval									

GAPS and Challenges

- **CORDAID:**

Logistics - An ambulance and a vehicle for screening and referral.

Nimule hospital not ready to manage cases.

Staff orientation is required

Partnership with WASH agencies to support WASH at the hospital.

- **ARC**

On ground and working but require resources for logistics and other activities.

- **Save the Children:**

Current lead until the 1st of October 2018 but will work on the EVD activities in the Nimule area

- **World Vision:**

HR, Funds, Supplies, Training Insecurity, illegal crossing, Infrastructure, logistics.



EVD in DRC

Outbreak declaration

- Ebola outbreak declared in North Kivu province, DR Congo on 1 Aug 2018

Total cases (151) (deaths): (101) as 25th Sept

- 120 Laboratory confirmed cases
- 31 probable cases
- 11,417 people vaccinated

Six health zones affected in two provinces

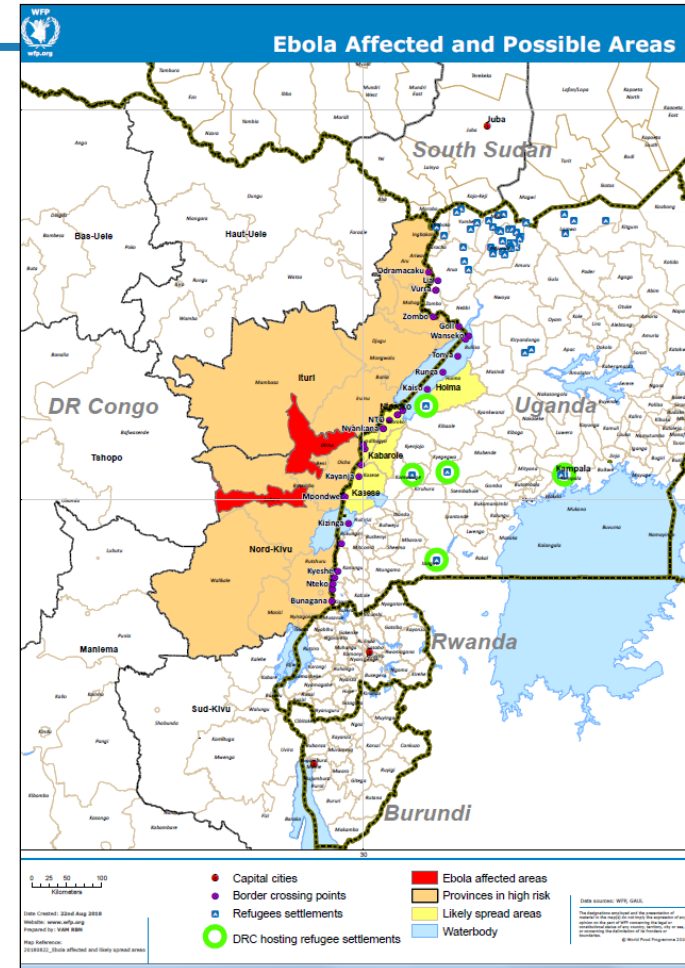
- Beni, Butembo, Oicha, Mabalako, Kalunguta & Musienene in **North-Kivu Province**
- Mandima in **Ituri Province**

Contextual issues

- North Kivu one of the most populated (8 million people)
- Shares borders with 4 other provinces and 2 countries (Uganda & Rwanda)
- Insecurity & worsening humanitarian crisis (1 million IDPs)
- Efflux of refugees to Uganda, Burundi & Tanzania

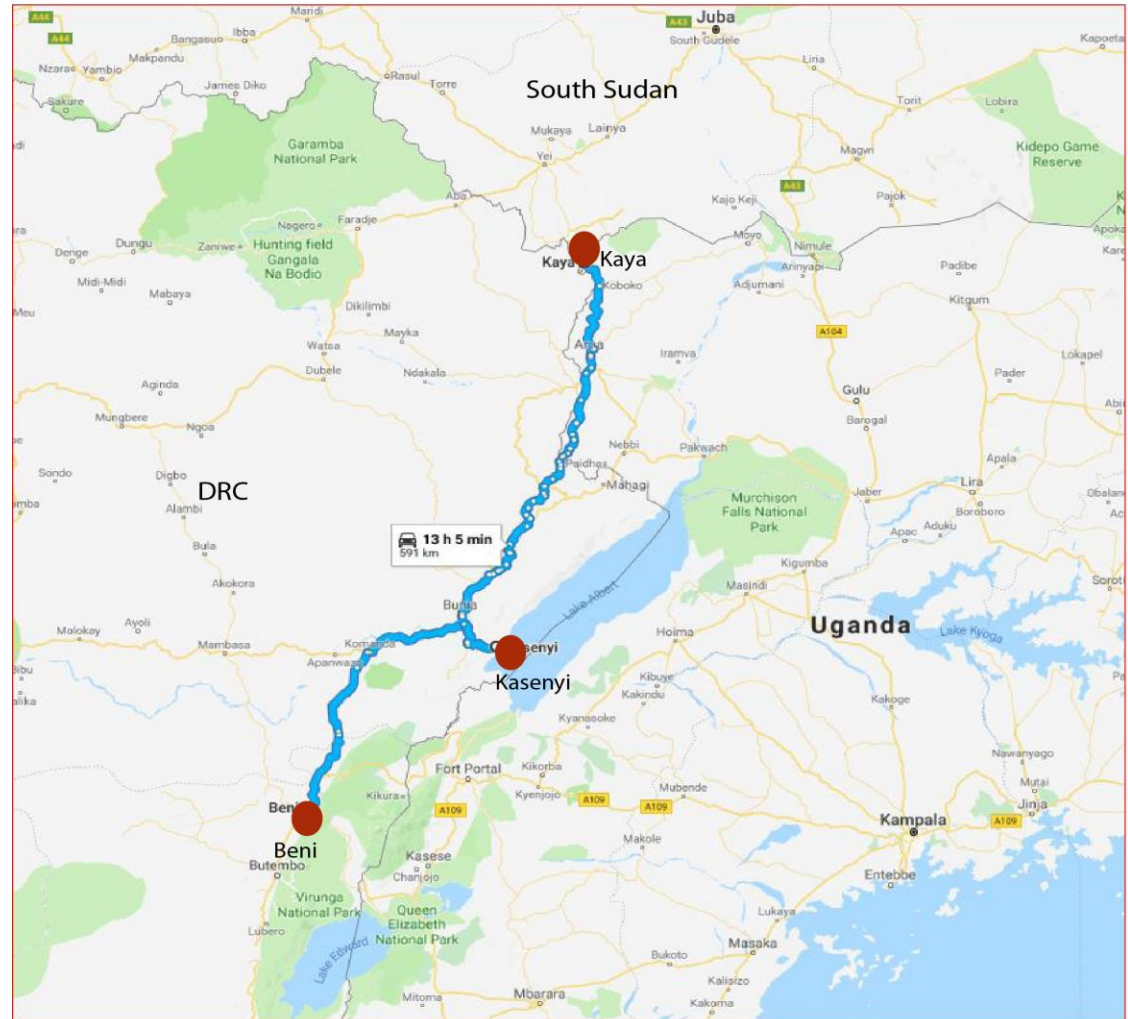
Current risk assessment

- Risk factors for transmission include transport links between affected areas and neighboring countries; IDPs; displacement of refugees to neighboring countries; several epidemics in DR Congo; protracted humanitarian crisis; insecurity.
- Public health risk considered high regionally
- Ituri Province shares border with Yei River state which is currently security Level “White”



Recent EVD Case close to Uganda border

- Kasenyi village, situated near the shores of Lake Albert on the DRC side of the border, in Ituri Province
- Case died on the 19th of September 2018, at Tchomia General Hospital which is quite close to Uganda
- She was a contact of two previously confirmed cases (her mother and sister), thus a high risk contact
- Recent fighting in Beni has disrupted response efforts



VHF Death suspect Investigation in New site- Northern Bari Payam

- Yesterday the 26/9/2018 the EOC received a call from new Site through the toll free line (6666) that there was a death of suspected VHF in New Site. A RRT team composed of MOH, WHO, SMOH and JTH was deployed to the site to verify the reported death.
- The team found that the deceased was a business man of 25 years old, an Ethiopian by nationality and a resident of New Site. According to the reports the deceased experience signs and symptoms of malaria on 24/9/2018 and he went to one of the nearby clinics in the areas/New Site center and he was treated for malaria and typhoid.
- On 26/9/2018 early in the morning he got up well and opened his shop, suddenly he started vomiting blood and fell down then his neighbors came and tried to take him to the nearby clinic but before reaching the clinic he died, then his body was brought to the mortuary in Juba Teaching Hospital.



Signs and Symptoms reported during the investigation

- The signs and symptoms reported during the investigation include; Fever, cough, back pain, headache, and vomiting blood.



Action Taken by the Team

- Filled the case based investigation form
- Collected 4 samples for laboratory confirmation (2 blood samples and 2 swab samples)
- Packaged the samples and delivered the samples to the National Public Health Laboratory
- Alerted the reference laboratory in Uganda (UVRI)
- Sample transported to UVRI today



Recommendations and way forward

- Decontamination of house of the deceased
- Discourage large gatherings
- Supervise and ensure safe and dignified burial of the body
- Line listing of all suspected contacts to the deceased person
- Risk communication for the family and community



BH&PoE Status update

County	# of Points of Entry Identified	# of Screening Active	# of Screening prioritized	# of people screened	# of Alerts	# of Isolation centers Identified	# of ETUs Identified	Remark
Gbudue	4	3	1	1526	1	0	0	Sakure, Gangura, Yambio Airstrip
Jubek	1	1	0	22,739	0	0	0	JIA
Maridi	5	0	1	0	0	0	0	
Tambura	5	0	1	0	0	0	0	
Torit	8	2	1	155,277	7	0	0	Nimule & Nimule Port River CP
Wau	1	1	0	118	0	0	0	Wau Airport
Yei River	15	1	4	14	0	0	0	
Total	39	8	8	179,674	8	0	0	



Yei Airstrip Screening Point



Nimule River Port Screening Point



Priority locations for isolation facilities

- Juba - Dr John Garang Diagnostic Centre
- Nimule - Nimule Hospital
- Yei - Yei Civil Hospital, Bazi Immigration office, Morobo county Hospital
- Yambio - Yambio Hospital, Sakure PHCC, Ezo PHCC, Makpandu PHCC
- Maridi - Maridi Hospital
- Wau - UNMISS clinic



Risk com/Soc Mob - Progress

- The Risk Com/Social Mob TWG held its meeting today and was well attended
- The weekly update on Ebola preparedness developed and circulated
- UNICEF deployed a team for ten days to Yei to support risk communication and community engagement.
 - Community mobilisers have been trained in Yei – 200
 - 16 Journalist oriented on EVD
- Radio jingles are running on the 13 radio stations.
- Radio talk shows ongoing and different experts are volunteering to participate.
- Translations into Arabic completed, other languages ongoing.
- CDC offered to translate radio jingles into Arabic.
- Funding support for central Equatoria (Yei and Juba) worth USD 76,000 is being processed
- WHO IM team is developing a tool to capture the KAP in the high risk areas to inform the messaging.



TWG meetings

TWG	Day of meeting	Time
Border Health and Points of Entry	Monday	10:00am
Surveillance and Laboratory	Monday	2:00pm
Safe and Dignified Burials	Monday	2:30pm
Risk Communication and Social Mob	Tuesday	10:00am
Vaccination and Therapeutics	Tuesday	10:00am
Case management and IPC	Tuesday	11:00am





Thank you