

REPUBLIC OF SOUTH SUDAN



MINISTRY OF HEALTH

Weekly Update on Ebola Virus Disease (EVD) Preparedness for South Sudan

Update # 6
Date: 8 October 2018

1. Highlights

- WHO has elevated the risk assessment of EVD spread in the region from “High” to “very High”. This implies that South Sudan and other three neighboring countries (Uganda, Rwanda and Burundi) have to develop and test operational readiness for a potential EVD response.
- Two additional screening sites i.e. Nimule River Port and Yei Airport have started entry screening of travelers, given the a total number of screening sites to 10.
- One suspected EVD death alert from Yei was investigated. The RRT and other partners in Yei state were not able to locate the residence of the dead man. However, the WCO was later informed that the dead man has been buried. The Yei Task Force and the health workers were asked to intensify active search for suspected EVD cases in Yei.

2. Ebola Situation update from North Kivu of Democratic Republic of Congo

2.1. Latest updates

- The EVD outbreak is still ongoing, and nine health zones in the two provinces are affected:
 - North-Kivu Province: Beni, Butembo, Oicha, Mabalako, Kalunguta and Musienene.
 - Ituri Province: Mandima, Komanda and Tchomia.
 - Two cases have been confirmed in Tchomia, almost 200 km (125 miles) away from the nearest other known cases in the Ituri province. Tchomia is nearer to Uganda border along lake Albert.
 - Three contacts of the above-mentioned cases have been identified in Sebago Landing site, in Kikuube District on the Ugandan side; they are Congolese Refugees who went to visit one of the cases while she was still alive.
- As of 2nd October 2018
 - A total of 162 cases of EVD have been reported, of which 130 are confirmed and 32 are probable. Of the 130 confirmed, 106 died, and 24 were cured. Cumulative deaths are 104.
 - Over 5700 contacts have been line listed since the start of the Outbreak, of which 75-97% are being followed up daily in the past week.
 - Since the beginning of the outbreak on 1st August, 2018, 12,940 people have been vaccinated, including 3,547 Healthcare workers.

3. Public Health Preparedness and Readiness

3.1. Coordination

- Two national taskforce meetings chaired by the Hon. Minister of Health and co-chaired by the Incident Manager were held on 2nd and 4th October 2018 at the PHEOC in Juba. The major themes of discussion included scheduling rapid response team (RRT) refresher training and all technical working groups to train a dispatch team in Juba to support response activities in case of an EVD outbreak.

- Health Cluster contacted ALIMA for their involvement in EVD case management due to the uncertainty of MSF to support EVD case management preparedness activities. HC confirmed ALIMA's interest; discussions are on-going with Samaritan Purse.
- Planned weekly meetings for all thematic pillars (Case Management and Infection Prevention and Control, Epidemiology and Surveillance, border points and ports of entry, Laboratory, Risk Communication and Community Engagement and Personnel Safety and Security) were conducted as scheduled.
- A database to capture alerts and trainings conducted especially on EVD related is being developed.
- WCO Considering opening a temporary coordination office in Yei to support EVD preparedness and response.



The weekly National Task force Meeting on EVD at the PHEOC.
Photo: WHO

3.2 Resource mobilization

- As South Sudan works to step up EVD preparatory activities, the United Nations, INGOs, NGOs and the Government of South Sudan have completed a joint proposal that outlines the overall funding requirement for a multi-sectorial response
- The United Nations and partners urgently require 13.1 million in order to ensure South Sudan is operationally ready & prepared to prevent importation of Ebola virus disease or should it be imported to adequately mount up a comprehensive multi- sectorial response.
- In order to solicit and raise funds to support the EVD preparatory activities, the United Nations and the Multi-sectorial National Task Force is requesting all national and international philanthropic and donors organizations to attend a donor pledging conference scheduled for Wednesday, 10th October 2018 at the offices of the United Nations Office for Coordination & Humanitarian Affairs (UNOCHA) in Juba.

3.3 Surveillance and Laboratory

- On 3rd October 2018, the Public Health Emergency Operations Center (PHEOC) received a call at 3:30 pm reporting a suspected Ebola death from Yei state. The deceased was a 29 years old South Sudanese who was a refugee in DRC for 21 months. He returned to South Sudan on 30th September 2018 and was reported to manifest the following symptoms: bleeding from eyes, general body pain, and blood in urine. He died at home on 3rd October, 2018.
- The national rapid response team was quickly mobilized at 4:00 pm on 3rd October, 2018. An airplane was chartered at 4:30 pm same day; the NRRT was dispatched to conduct an epidemiological investigation and obtained an oral swab and cardiac blood for laboratory testing on 4th October, 2018. The national and state RRT, Yei Task Force members and other partners in Yei could not locate the dead body or his family in Yei. None of the people met had knowledge of the death alert or his residence. The NRRT returned to Juba at 5:00 pm on 4th October 2018. However, the NRRT was later informed that the dead man was already buried.

- The national and state RRT sensitized the health workers and community members in Yei on EVD case definition and the need to intensify active search for suspected EVD cases. They also paid advocacy visits to community and opinion leaders in Yei to continue to support the EVD preparedness activities.

3.4 Port Health and Screening

- Currently entry traveler screening for Ebola exposure and symptoms is ongoing at ten of the 39 mapped points of entry. These include: Juba International Airport, Nimule ground crossing and River Port, Yambio Airport, Sakure, Gangura border areas, Yei Airstrip, and Wau International Airport, Kaya and Yei RRC office.
- Planning to conduct IDSR/RRT training for partners in Yei and other locations to timely respond to EVD alerts and verification. Training dates are tentatively scheduled from 7th to 12th October 2018.
- WHO/CDC team trained 40 master trainers on SOPs on screening of travelers at points of entry. The trainers will receive tool kits and cascade the training to screeners and non-health partners.
- WHO printed and distributed job-aid materials on screening to 40 Master trainers
- CUAMM is planning to setup a screening site at Maridi Airstrip.
- The electronic EWARS platform is being used to capture, aggregate, and analyze points of entry screening data with the table below, summarizing the number of travelers screened in week 39 at the active points of entry.



Port of entry personnel being trained on the basics of secondary screening. Photo: WHO




Practical training on donning and doffing of PPEs. Photo: WHO



Practical session on primary screening. Photo: WHO

South Sudan Ebola Response Monitoring of EVD screening activities at Points of Entry in countries prioritized for Ebola preparedness activities						
Year: 2018						
Week number: W39		From: 2018-09-24		To: 2018-09-30		
Name of PoE	Passengers Screening Information			EVD Alerts		
	# screened	# isolated	# under Voluntary Home Quarantine	# reported	# validated	# suspects
Bazi Border	0	0	0	0	0	0
Gangura Border	0	0	0	0	0	0
Juba International Airport	4,287	0	0	0	0	0
Kaya	547	0	0	0	0	0
Kaya Border	0	0	0	0	0	0
Nimule Border	36,959	1	0	0	0	0
Sakure Border	0	0	0	0	0	0
Wau Airport	87	0	0	0	0	0
Yambio Airport	0	0	0	0	0	0
Yei Airport	27	0	0	0	0	0
Yei RRC	0	0	0	0	0	0
South Sudan	41,907	1	0	0	0	0

Note
This table is generated automatically from EWARS South Sudan. It has been deployed since December 2013, following the eruption of political violence. From May 2017, it has been scaled up to provide support to all 80 counties across the country. It is supporting MoH and partners to strengthen integrated disease surveillance and response (IDSR). <http://ss.ewars.ws/login>



3.5. Case Management, Infection Prevention and Control, Safe Dignified Burial and WASH

- Minimum Standards for isolation facilities were developed, reviewed and approved by TWG
- Minimum Standards for POE developed. To be reviewed by TWG
- Training curriculum/PPT developed and under review. Plan to roll out ToT in progress
- Soft copies for hand hygiene posters are developed. They are being reviewed before printing
- IPC guidelines and policy are being developed.
- Architectural and structural plan for Isolation Facilities developed and shared with relevant agencies (WFP and UNICEF) and partners working in the high risk areas
- SDB sub group created. Focal persons that will select SDB members at high risk states had been identified.
- Planning to conduct the following trainings: EVD case management for partners in Yei and other locations prone to EVD outbreak; and Safe and Dignified Burial to support the burial of deaths related to EVD in Yei and other locations. Training dates to be communicated on Tuesday, 9th Oct, 2018
- Support for the development of the minimum standards for WASH is on-going.

3.6. Risk communication, community engagement and social mobilization

- The risk communication, community engagement and social mobilization activities continue to be implemented to increase risk perception and enhance public awareness on Ebola prevention.
- Radio talk shows continue to be aired with support from UNICEF at the national and sub-national level in English, Arabic, Zande and other local dialects.
- Radio jingles with messages on Ebola are running on 13 radio stations in English and 3 local languages.
- Ebola prevention IEC materials have been developed in English and have been translated from English to Arabic. Translation into other native languages is planned.
- The use of the toll-free line is increasing with an average of 200 calls received daily seeking for information on EVD and also reporting suspected Ebola alert cases.

- As part of the ongoing community engagement and sensitization in the high-risk states, WVI supported the distribution of 469 Ebola brochures in Yambio.
- At least 10,086 people were reached with information on Ebola prevention in Yambio and Nzara county through community engagement with households, community health workers, and mother-to-mother support groups.
- WHO is also working with UNOCHA and other partners on information dissemination strategy to amplify the preparedness activities and enhance public awareness.

3.7. Logistics and Personnel deployment

- Three International consultants have been deployed by WHO to support the taskforce to enhance capacities for infection prevention and control, surveillance and overall coordination of Ebola preparedness activities.
- Ensure that, staffs conducting screening in points of entry especially Nimule and Wau, receive their salary and on time
- Follow up on the funds meant to support EVD preparedness and response are active in the financial management system
- Follow-up on the PO for the EVD visibility materials is finalized

3.8. Vaccines and Therapeutics

- The Vaccine and Therapeutics TWG has reached out to WHO Vaccine team in Geneva to provide guidance with the development of protocol for compassionate use of the Ebola vaccine as well as the development of the necessary in-country capacity (Human and cold chain).
- WHO Regional Office for Africa has initiated an integrated approach for the 4 priority countries neighboring DRC (South Sudan, Rwanda, Burundi and Uganda) to prepare for the Ebola vaccine use. This will ensure that all the four countries are at the same level of support given the limited resources.
- WCO reached out to WHO Regional Office for Africa for immediate deployment of a vaccine expert to support the Ebola vaccine preparedness activities in South Sudan.
- MoH to fast track the finalization of the vaccine protocol and set timeline for the Vaccination campaign against Ebola. The MoH delegation to Uganda on Ebola vaccine use will brief the National Task Force on Tuesday, 9 October 2018.

3.9. Safety and Security

- The Government is coordinating with the relevant sectors to improve access to high-risk locations that are currently inaccessible due to insecurity.
- UNOCHA and UNDSS have activated safety and security TWG.

4. Challenges/Gaps

The critical preparedness gaps currently entail:

- The absence of a designated isolation facility in Juba or any of the high-risk states is of great concern due to the current categorization of South Sudan as “Very High Risk”
- The slow pace of Ebola preparedness activities due to limited resources available in-country.
- Human resource gap to support EVD preparedness activities.

- Inadequate structures to support the SIMEX.

5. Recommendations and priority follow up actions

- WHO to engage different actors (WFP, UNICEF and other partners) to fast-track the establishment of isolation facilities.
- WHO to continue to advocate for additional resources from funding agencies to support the EVD preparedness and readiness activities.
- WHO to request for more consultants to support the EVD preparedness activities.
- WHO to continue to support the MoH and partners for the completion of structures for EVD preparedness activities.
- WHO to coordinate a joint Simulation Exercise involving the army and other relevant stakeholders to test the activation of PHEOC and its coordination function, alert management and RRT deployment as part of EVD preparedness.

6. Conclusion

- The focus for the NTF in the coming week is the mobilization of resources to facilitate the implementation of priority activities of the Case management, IPC, safe and security and Safe and dignified burial technical working group.

7. Partners involved in EVD preparedness and readiness

MOH, WHO, Health Cluster partners, UNICEF, CDC, USAID, DFID, JICA, ECHO, World Bank, UNHCR, UNOCHA, Health Pool Fund, IOM, AWG, WASH Cluster partners, SSRC, WFP, Min of Interior, AMREF, MSF family, IMC, ICRC, ALIMA, IRC, World Vision, America Refugee Committee, SCI, UNMISS, UNDSS, SPLA, LS, DFCA, ARC, Samaritan Purse and UNHASS.

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