

HIGHLIGHTS OF THE EBOLA VIRUS DISEASE PREPAREDNESS IN UGANDA

7th March 2019 (12:00 HRS) - UPDATE No 97

a) SITUATION UPDATE FROM DEMOCRATIC REPUBLIC OF CONGO FOR 6th March 2019 WITH DATA UP TO 5TH March 2019

Cumulative cases: 907

Confirmed cases: 841

Probable: 66

Total deaths: 569

b) EVD SITUATIONAL UPDATE IN UGANDA

- There is NO confirmed EVD case in Uganda.
- Active case search continues in all communities, health facilities and on formal and informal border crossing in all districts especially in the high-risk ones.
- Alert cases continue to be picked, isolated, treated and blood samples picked for testing by the Uganda Virus Research Institute (UVRI). The alerts are highlighted in the specific district reports below under the Surveillance section.
- c) PREPAREDNESS IN THE FIELD (PROGRESS AND GAPS)

COORDINATION

Bunndibugyo District

Gaps and Challenges

- Printer/photocopier/scanner required to assist in documentation and sharing of information.
- Activities heavily reliant on WHO transport; DHO's vehicle requires tyres and servicing.
- Poor attendance of District Task Force meetings.
- Load shedding affecting coordination in the DHO's office.
- Inconsistent sub-committee meetings.



Ntoroko District

Gaps and Challenges

Delayed submission of accountabilities hindering the acquisition of more funds.

Kabarole District

RDCs office continues to provide airtime for EVD messages.

Gaps and Challenges

- Airtime for co-ordination
- Transport: fuel for designated vehicles and motorcycles for the response and surveillance teams and ambulance.

SURVEILLANCE ACTIVITIES

Kasese District

- Surveillance subcommittee held their weekly meeting. Action Points:
 - The sustainability plan was not drawn thus the District Health Team should plan for surveillance activities.
 - DHO should discuss with WHO to forge way forward on sustainability plan
 - Health Sub District to continue conducting active case search within their means.
 - WHO Field Coordinator to assist with follow up of the 3 months work plan.
 - The WHO field vehicle will support Surveillance, IPC and Risk Communication pillars on Wednesdays and Fridays.
 - District should liaise with Uganda Red Cross Society (URCS) on expected support during Ebola preparedness phase.
 - District and URCS should meet the staff at ETU and PoEs to forge away forward.

Number of people screened at selected PoEs in Kasese District on 6th March 2019

No	PoE site	No of persons screened



Ministry of Healtl

	Total	1,293
6	Kithoma	731
4	Kisolholho	139
3	Mirami	330
2	Kayanzi	15
1	Katwe	78

Gaps and Challenges

- Resources to conduct EVD active search and support supervision.
- Facilitation for health workers at screening points and ETU.

Hoima and Kikuube Districts

- No alert cases reported in Hoima and Kikuube districts on 6th March 2019. Village Health Teams and Health workers remain vigilant for community-based and health facility-based surveillance respectively.
- 93 new arrivals were screened at Sebagoro, Kaiso and Nsonga PoEs. No alert cases detected among them.
- Waiting tents at Sebagoro and Kaiso PoEs await repair after they were destroyed by a storm.

No of People Screened at PoEs in Hoima and Kikuube Districts on 6th March 2019

Port of entry	District	Number of new arrivals screened
Nsoga/Buhuka	Kikuube	21
Sebagoro	Kikuube	72
Kaiso	Hoima	00
Total	1	93

Bundibugyo District



- Engaged in supportive supervision and EVD active search at Nyahuka HC IV. No unreported or missed cases of EVD at the facility.
- 7 health care workers and 78 community members mentored and sensitized on EVD.
- On-the-Job training conducted for the District Surveillance Focal Person on the use of the ODK.

Gaps and Challenges

- Telephone airtime.
- Field allowance for surveillance officers.
- Laptop for field work and preparation of reports.

Ntoroko District

Gaps and Challenges

- Lack of allowances for the 15 volunteers at the district manned PoEs. Volunteers from Fridge,
 Kigungu, Haibale south and Kayanja I PoEs have tentatively withdrawn from work demanding for their pay.
- Lack of field allowances for surveillance officers.
- Lack of transport and computer to do the field activities and prepare reports.
- Remote areas inaccessible by ambulance to collect alert cases.

Kabarole District

- Active case search is ongoing.
- There was one alert case at Muhooti currently admitted at Fort Portal Regional Referral Hospital.
 Sample taken to Uganda Virus Research Institute (UVRI) for testing.

Gaps and Challenges

Lack of transport facilitation and coordination airtime for the teams.

Bunyangabu District



- Ongoing active case search and support supervision.
- mTrac reminder messages sent to health workers for immediate reporting of suspected cases.

CASE MANAGEMENT AND INFECTION PREVENTION AND CONTROL (IPC)

Kasese District

Gaps and Challenges

- Facilitation for health workers at the ETU.
- Lack of surgical gloves in ETU.
- Lack stand by vehicle to transport alert or suspects to the ETU

Bundibugyo District

No case admitted in the ETU

Gaps and Challenges

Lack of supplies especially surgical gloves in ETU.

Ntoroko District

Gaps and Challenges

- Structural and environmental improvements still needed at the ETU.
- Inadequate drugs and supplies such as triple packaging, linen at the ETU.
- Lack of stationery such as registers and case investigation forms.
- No food for patients admitted in the ETU.
- Insufficient security at the ETU that attracts petty thieves.

Kabarole District

Achievement:



- There is one a alert case admitted at FFRH
- Case management team in place and conducts weekly drills on Fridays supported by JMEDICC

Gaps and Challenges

- Stock out of PPEs
- No isolation center yet apart from the JMEDICC facility which can handle just a few cases
- Team lacks facilitation in terms of fuel and allowances

Bunyangabu District

- Conducted IPC assessment and orientation for 5 health workers.
- Conducted health education session for 7 ANC attendees on IPC basics(hygiene and hand washing as well as disposing domestic wastes)
- Took coordinates for ODK

Gaps and Challenges

- Some staff not vaccinated against hepatitis B
- The IPC committee not active
- No schedule for daily cleaning
- No IPC SoPS
- Inadequate PPEs
- Unfenced burn pit
- Mixed wastes
- Generate wastes from the point of generation

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT

Kabarole District

- URCS volunteers carried out house-to-house EVD sensitization.
- They oriented 598 (283 boys and 315 girls) at Kamengo Primary School on EVD.



• Radio talk shows and distribution of IEC materials on going.

Gaps and Challenges

- IEC materials in Rutooro and Runyoro languages.
- Facilitation for the team

-End-

For more information, please contact:

Dr Issa Makumbi – <u>issamakumbi@gmail.com</u>

Dr. Allan Muruta – <u>allanmuruta@yahoo.com</u>