# **REPUBLIC OF SOUTH SUDAN**



MINISTRY OF HEALTH

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

Update # 37

Date: 25 May 2019

## 1. Highlights of the week

⇒ A suspected EVD alert was reported in Yambio in Gbudue state. A patient presented to a health care facility with typical malaria symptoms – fever and general body pains. She was treated for malaria. Her condition worsened and she was transported to the Isolation Unit for further investigation but unfortunately she died. The state Rapid Response Team (RRT) investigated, collected oral swabs samples, listed all contacts, and advice the community on preventive measures. The GenXpert test was negative for Ebola Zaire strain. The sample was sent for Polymerase Chain Reaction (PCR) test at the Uganda Virus Research Institute (UVRI) and the results is pending.



- A total of 650 frontline and health care workers in Jubek state have now been vaccinated. The cumulative number of frontline health workers vaccinated nationally to date is 2,554.
- OM established a new point of entry at Bori, in Kajo Keji county, bordering with Uganda and closer to the Democratic Republic of Congo in week 20, bringing the total number of screening points to 31.

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

- ⇒ As of 23 May 2019, a total of 1,800 confirmed cases and 1,254 deaths (case fatality ratio of 69.7%) have been reported.
- Some 149 new cases and 107 deaths were reported from 15<sup>th</sup> to 23<sup>rd</sup> May 2019, indicating that the outbreak is not under control. Figure 1 below shows the trend of new Ebola cases from 16th April to 20th May 2019.

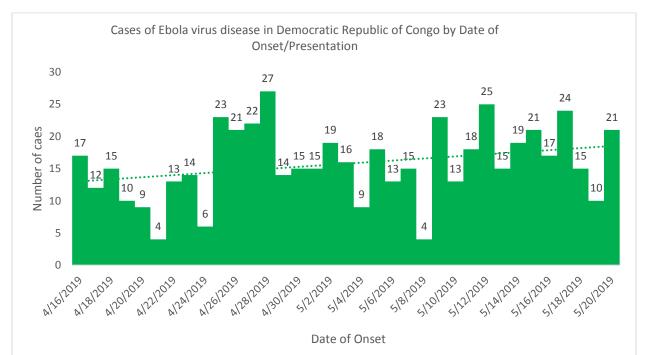
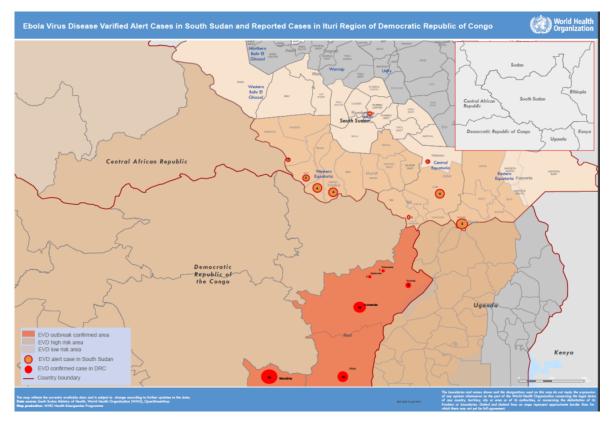


Figure 1: Epi-cure of Ebola virus disease in Democratic Republic of Congo by date of onset

Figure 2: map showing Ebola virus disease verified alerts in South Sudan and reported cases in DRC



### 3. Public Health Preparedness and Readiness

### 3.1. Coordination and personnel deployment

- The National Task Force (NTF) meeting was not conducted on 23 May 2019 because the day was declared a national public holiday to commemorate the 36 anniversary of the founding of the Sudan People's Liberation Army/Movement a liberation army/movement which latter turned into a national army and the name changed to South Sudan peoples' Defence Force (SSPDF).
- Coordination meetings were conducted by Ebola taskforce in Jubek, Yambio, Yei and Nimule/Torit states.
- ➡ Weekly meetings were also conducted by the Technical Working Groups to provide technical guidance and support to the respective preparedness pillars.

## 3.2. Resource mobilization

- ⇒ The NTF published a second National EVD Preparedness Plan, April –September 2019. The plan costed at around US\$ 12.2 million, the purpose of the plan is to optimize EVD preparedness and response by implementing prioritized activities.
- Some US \$12.8 million (78%) was mobilized against US \$16.3 million in the first National EVD Preparedness Plan from August 2018 − March 2019. A gap of 12% unfunded activities was carried over from the first national preparedness plan.

### 3.3. EPI/Surveillance and Laboratory

- The EPI/Surveillance and Laboratory TWG continue to received inputs to the list of health facilities for joint assessment visit. The TWG drafted a checklist for supportive supervision at health facilities, with inputs from the infection prevention and control (IPC/WASH) and risk communication TWGs. The purpose of the supportive supervision is to provide real time feedback and support to the health workers at any given facility regarding the extent and quality of preparedness measures being implemented.
- Continued with updating of Standard of Operation Procedures. Each pillar is finalizing their own document and representatives from each pillar will meet to ensure harmonization across pillars.
- A suspected EVD alert was received from Yambio on May 21. Oral swab samples were received at the National Public Health Laboratory, NPHL, on 22-May. GenXpert analysis results were negative for Ebola virus. Samples have been shipped to UVRI for PCR analysis. We await the analysis results.
- Training of frontline healthcare workers on EVD case detection, reporting and investigation was concluded in Yei River state on 23<sup>rd</sup> may 2019.

### 3.4. Port Health and Screening

- Some 71,980 incoming travelers were screened for EVD at 31 points of entry for the reporting week 20, bringing the cumulative number of travellers screened since August 2018 to 2,201, 833. See table 1 below for more information.
- □ IOM established a new point of entry at Bori, in Kajo-Keji county, bordering with Uganda and closer to the Democratic Republic of Congo in week 20, bringing the total number of screening points to 31.
- Border Health and Point of Entry (POE) Technical Working Group finalised plan for Joint functionality assessments at the POE sites. The scheduled has been shared.

Table 1: Summary of screenings from 31 points of entry

Primary screened		Secondary screened		Alerts	
Reporting Week	Cumulative	Reporting Week	Cumulative	Reporting Week	Cumulative
71, 980	2,201,833	46	694	0	19 generated, 6 met case definition

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

- ◆ Analysis of Infection Prevention, and Control/WASH assessment for 30 health facilities in the high-risk sates was completed.
- ⇒ A document to guide on Personal Protective Equipment (PPE) was developed and shared with Logistics TWG.
- ◆ A suspected Ebola case was managed in Yambio isolation facility.
- Training of frontline healthcare workers on EVD case isolation, infection prevention and control and other safety measures until transferred to standard isolation units was concluded in Yei River state on 23<sup>rd</sup> may 2019.

### 3.6. Risk communication, community engagement and social mobilization (RCCE&SM)

- Community engagement activities, rumor tracking, and radio broadcasts are ongoing in the field.
- ⇒ Final version of evidence review briefing paper on socio-economic/cultural dynamics related to consumption of bush meat by SSHAP and *Anthrologica* was received. RCCE&SM is ready to make a short summary presentation at next National Task Force meeting to highlight findings/Recommendations from the document

# 3.7. Logistics

- Airlifted Mobile Storage Unit (MSU) to support the EVD preparedness activities in Nimule.
- **⇒** Finalized plan to commence modification works at the isolation units in high-risk states by next week.
- Drafted Standard Operating Procedures on Personal Protective Equipment's requirements, approval & release procedures.

### 3.8. Vaccines and Therapeutics

➡ EVD vaccination in Jubek States is ongoing. As of 23<sup>rd</sup> May a total of 650 frontline health workers in Jubek State have now been vaccinated. To date a total of 2, 554 frontline health workers have been vaccinated in South Sudan. So far there is no serious adverse effect reported.

# 4. Challenges/Gaps

- Lack of funds to operationalize the National EVD Preparedness Plan 2.
- Access to areas outside Yei River County due to insecurity.
- **□** Limited joint supportive supervision of health facilities from national to state level. The joint supportive supervision started in Juba last week.
- Long porous border with Ituri Province of Democratic Republic of Congo and the likelihood of importation of EVD into the Republic of South Sudan.

# Donors and partners involved in EVD preparedness and readiness

MOH, Germany, USAID/OFDA, CERF, SSHF, DFID, ECHO, GAVI, UNICEF, HPF, Canada, WHO and UNHCR, World Bank, JICA, IRC, IFRC, DFCA, AAH, ACROSS, AMLIMA, AMREF, ARC, CDC, CMMB, CONCERN, COPE, CORDAID, CUAMM, ECSS, GOAL, HELP, HLSS, IFRC, IMC-UK, Internews, IOM, MEDIAR, MSF, OXFAM, REACH, SAC, Samaritan's

Purse, Save the Children, Solidarity International, SPLA, Ministry of Interior, SSDO, SSRC, SSUHA, TRISS, UMCOR, UNCHR, UNDP, UNICEF, UNMISS, UNOCHA, WFP, WHO, WVSS.

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