



Ministry of Health

HIGHLIGHTS OF THE EBOLA VIRUS DISEASE PREPAREDNESS IN UGANDA

16th November 2018 (12:00 HRS) – UPDATE No 56

a) SITUATION UPDATE FROM DEMOCRATIC REPUBLIC OF CONGO FOR 15th November 2018, WITH DATA UP TO 14th November 2018

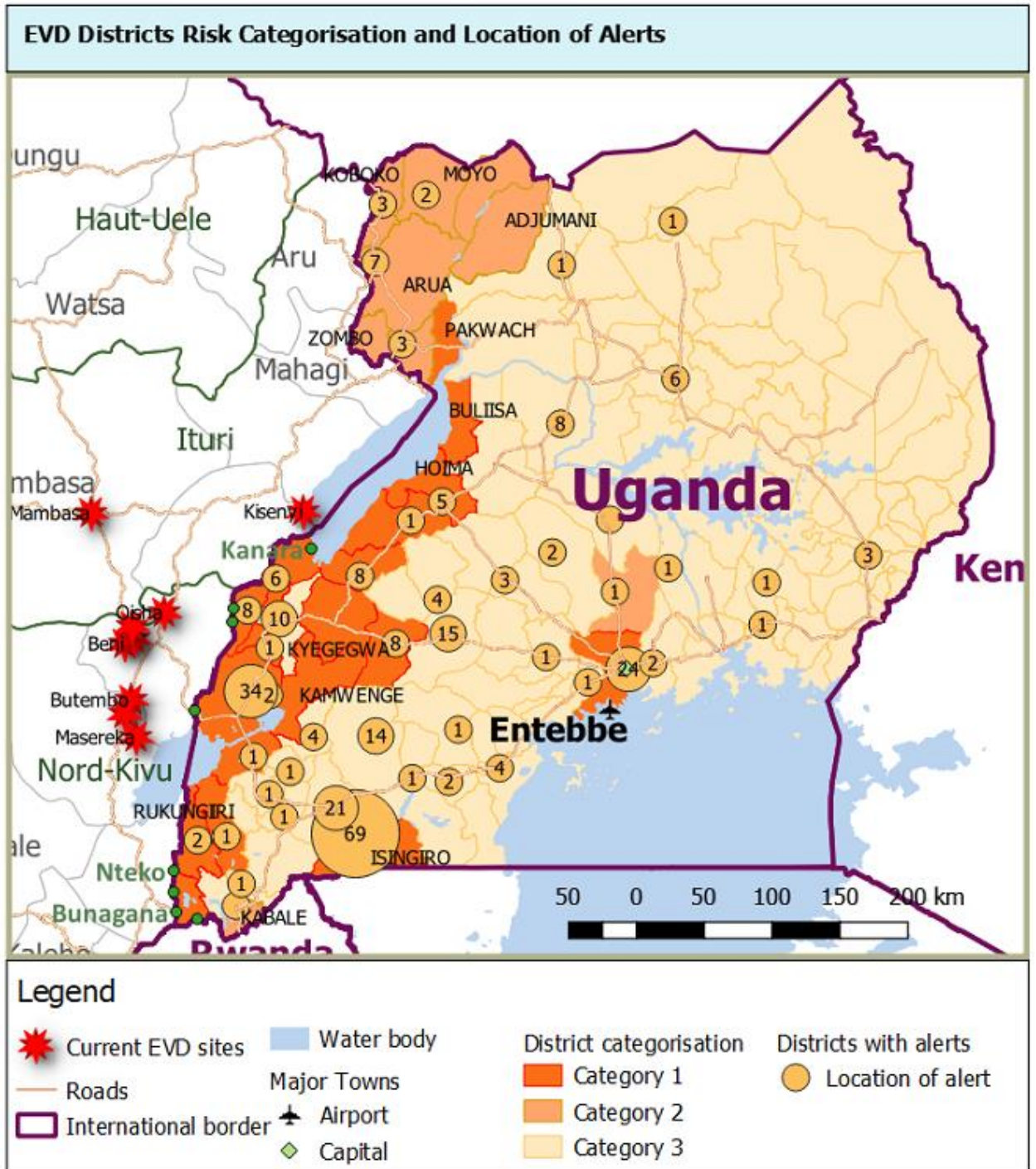
- Cumulative cases: 344
- Confirmed cases : 304
- Probable : 40
- Total deaths : 202
- Suspect Cases under investigation :45
- Areas affected : Two provinces
 - North Kivu - Mabalako; Butembo; Ocha; Musienene; Beni and Bingo
 - Ituri- Mambasa, Mandina, Tchomia
- Health and front line workers vaccinated

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.**



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c) PREPAREDNESS ACTIVITIES IN THE FIELD AND NATIONAL (PROGRESS AND GAPS)



COORDINATION

Kabarole District

- The District Task Force (DTF) meeting took place and the following were noted:
 - The patient with Crimean Congo Haemorrhagic Fever was discharged from Fort Portal Regional Referral Hospital and reintroduced into her community.
 - UNICEF agreed to supply 30 schools with hand washing facilities
 - WHO will support training of ten (10) people from the district on Community-based surveillance and Community engagement (CE). They will include security officers and other technical officers.
 - The EVD readiness funds have finally reached the district account as confirmed by the Finance officer

Bundibugyo District

- DTF meeting was held chaired by the Resident District Commissioner and attended by representatives from WHO, UNICEF, Uganda Red Cross Society (URCS) and Save the children. The following were noted:
 - Money sent from the MoH for EVD preparedness activities not yet accessible.
 - Radio talk shows supported by UNICEF are going to resume as the funding issues have been sorted.
 - Listing and GPS mapping of all Points of Entry (PoEs) ongoing.
 - URCS will support volunteers at 5 PoEs including Kasili and Kazaroho that were opened recently.
 - WFP was requested to deliver smaller customized tents for the new PoEs including mobilets.
 - WHO briefed the DTF about DFID high-level visit which will take place on 21st November, 2018.
 - WFP completed delivery of Infection Prevention and Control (IPC) supplies received from WHO to all health facilities.
 - Save the Children agreed to provide fuel to DTF to conduct support supervision as MoH funds are processed.



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- UNICEF will support water supply in a number health centres which is still a big challenge.

Kasese District

- WHO and UNICEF met the DHO and discussed details of the DFID visit next week. Talking points will be prepared for Resident District Commissioner and Chief Administrative Officer who are new in the district.

Bunyangabu District

- There was DTF meeting which noted the following:
 - UNICEF approved funding for training of 300 VHTs and orientation of Health workers on risk communication
 - WHO will support a ToT on Community-based surveillance and risk communication from Monday 19th to Friday 23rd November 2018.
 - Baylor to support training of other remaining 300 VHTs
 - URCS will support an additional 15 volunteers in 5 sub counties.

SURVEILLANCE ACTIVITIES

Hoima and Kikuube Districts

- The laboratory results for the EVD alert detected in Kitongole village were PCR negative. Unfortunately the patient died and a safe and dignified burial was conducted 14th November 2018.
- There was an alert case detected in Kinsaya West village, Kinsaya parish, Kigwera subcounty in Hoima district. He is 29 year male who complained of fever, general joint and body pains. RDT for malaria was positive, antimalarials were administered and the patient discharged on the 12th November 2018 from Bulisa HC IV. On the 13th November 2018, his general condition worsened and he was admitted to Bulisa general hospital with a history of passing bloody stool and vomiting blood. He was the referred to Hoima Regional Referral Hospital with upper Gastral intestinal blood (GIT) where he died on 14th November 2018. He had no history of travel to an EVD outbreak area or attendance of burial for alert or suspect cases.
- The President of Uganda His Excellency Yoweri Kaguta Museveni visited Hoima district to officiate at an education function. He advised the public on EVD emphasizing the importance of regular and proper hand washing.



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- UNCHR provided eight (8) hand washing facilities, soap and JIK to Hoima District local government.
- There were 39 new arrival at Sebagoro, Nsonga and Kaiso PoEs. There were no EVD alert or suspected cases among them.

Ntoroko District

- The surveillance team conducted supportive supervision at Ntoroko H/C III and Stella Maris H/C III and updated health workers on EVD, surveillance, need for community engagement and prompt reporting of alert cases.

Kabarole District

- No alert cases reported in the district
- Active case search ongoing

Bunyangabu District

- No alert cases reported in the district
- Active case search on-going

Kasese District

- A 33 year old female presented to Katungulu HCII with fever, vomiting blood and bleeding from the nose. She was assessed and referred to Bwera Hospital ETU for management and sample collection. The sample was sent Uganda Virus Research Institute (UVRI) for testing.

Bundibugyo District

- There were no alerts from the community and all health facilities.
- At Busoru HC II and Kisuba HC III:
 - Six (6) Staff and one (1) VHT Parish Coordinator were sensitized on EVD surveillance and appropriate response activities.
 - Patient registers for the past three months were reviewed and no EVD alert cases identified.



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- Two bleeding cases were recorded at Kisuba HC III. However, the patients didn't meet the EVD case definition and were treated appropriately and discharged.

Gaps:

- Both health units don't have Health Facility Surveillance Focal Persons.
- EVD posters were not displayed at Kisuba HC III.

Actions:

- Staff of the health units were urged to have a high index of suspicion for EVD, observe IPC guidelines and promptly report alert or suspected cases.
- Posters and leaflets with key messages on EVD were provided to the health facilities.

CASE MANAGEMENT AND IPC

Kabarole District

- Twenty four (24) health workers and nineteen (19) VHTs in Kataraka HC IV, Ibaale HC II, and Mucwa HC III were mentored on EVD, IPC and surveillance.

Bunyangabu District

- Forty seven (47) health workers and twenty three (23) VHTs from Trivest medical center, Kisomoro HC III, Nightingale HC II, and Rubona medical center were mentored EVD, IPC and surveillance.

Kasese District

- There was an alert case admitted in Bwera Hospital ETU in stable condition.
- Thirty five (35) staff of Rwakingi and Rwenzori Mountain National Park were oriented on EVD.
- IPC assessment at Katungulu HC II was 42% which calls for mentorship of health workers at the facility. This will be done next week.
- Bwera ETU and Bwera Hospital were given more tips on medical waste segregation. Job aides on Steps of hand washing and 5 moments of hand hygiene at the water sinks inside the hospital will be provided next week. PPEs such as surgical masks, face shields and hand sanitizers are also needed.



Ntoroko District

- No alert or suspected cases in isolation on 15th November, 2018.
- IPC supportive supervision conducted at Ntoroko H/C III and Stella Maris H/C III. The facility staffs were reminded about EVD and were asked to adhere to the IPC principles. Personal protection was emphasized.

Bundibugyo District

- There is no alert or suspected case admitted in the ETU.

RISK COMMUNICATION/SOCIAL MOBILIZATION

The following risk communication and social mobilisation activities were implemented in the district with UNICEF support

- Public awareness
 - 1 radio talk show per week conducted. 17 Talk shows since August
 - 6,238 (2789 posters & 3449 Leaflets) distributed since August 2018
 - Additional IEC materials delivered to district for distribution on 15th November 2018 (1,276 English, 14,284 translated to local language)
- Social mobilization (Oriented formal and informal leaders as detailed below);
 - URCS has increased volunteers from 30 to 90 for community engagement
 - Engaged Town council leaders (Town Clerk-Member of DTF)
 - 20 Religious leaders
 - 20 cultural leaders
 - 20 Teachers
 - 20 LC1s
 - 20 Traditional herbalists
 - 20 CBOs
 - 20 Local transporters
 - LC1s engaged in each village during household visits
- Community engagements



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- 6,219 Households visited since August reaching 33,260 individuals including 10,200 males, 15,463 females and 7,597 children
- Engaged 327 community groups (schools, women & youth groups), reached 43,550 individuals including 17,822 males, 23,722 females and 2,006 children
- Screened individuals at 5 entry points including handwashing, footbath, and temperature measurement reaching 717,619 individuals from August to 14th November 2018
 - a. Capacity building
 - Orientation schedule for Sub-county leaders, religious and cultural leaders, school women and men teachers, head teachers, LC1S and VHTs developed and schedules starting 26th November 2018.
 - b. Monitoring and evaluation
 - Tally sheets being used at all entry points

Weekly excel sheets in place to track individuals reached

Kabarole District

- URCS volunteers visited 209 households and reached 460 people with EVD messages. They distributed 117 posters and demonstrated proper hand washing to community members.
- The volunteers also supported distribution of IPC materials provided by WHO and delivered by WFP.
- UNICEF participated in then Kabarole Risk communication and social mobilization committee and supported the preparation of subcommittee report that was shared during DTF

Ntoroko District

- UNICEF supported the district to conduct a rapid assessment of states of preparedness in 2 schools (Ntoroko Primary, Kanara Seeds Secondary), 2 health facilities (Stella Maris HC III, Ntoroko HC III), and 3 landing and transition centres (Ntoroko and Twanzane landing site, Kanara MTI transition centre).
- UNICEF supported the orientation on IYCF-Ebola context for 4 staffs out of 16 ETU members at



Rwebisengo HCIII in Ntoroko district.

- UNICEF supported the district health inspector to conduct a Rapid assessment of states of preparedness in ETU and health facilities (Rwebisengo ETU, Karugutu HC IV, and Rwangara HC III).
- On-site mentorship on sodium hypochlorite generator was conducted, and 20 liters of solution was distributed to Rwebisengo ETU.

Bundibugyo District

- - UNICEF supported the District Health Educator and Health inspector to develop a comprehensive micro plan – mapping out numbers of Sub counties, parishes, POEs, villages, VHTs, schools, Churches/mosques, informal and formal groups, security groups/settlements.

Bunyangabu District

- The URCS volunteers reached 174 individuals in 74 homes with EVD messages. They also conducted one community meeting at Kabonero sub-county where they reached 98 people.

LOGISTICS

- WFP distributed IPC and vaccination materials to health facilities in Kasese district where immunization was done.

-End-

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