

# IOM Sierra Leone Ebola Response

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SITUATION REPORT | Issue 31 | 28 June- 4 July 2015



IOM's Dr John Bua instructs 27 newly inducted IOM Health and Humanitarian Border Management (HHBM) monitors and emergency interim care kits field assistants on Infection Prevention and Control measures on 2 July 2015 in Makeni, Bombali district. IOM will open up a new sub-office in the Kamakwie community, northern Bombali in support of its HHBM and emergency care kits activities this week.

### SITUATION OVERVIEW

- A total of 8 confirmed cases were reported from Kambia, Port Loko, and Western Area Urban in the week to 28 June.
- Both cases in Kambia were reported from Tonko Limba chiefdom, which has been the primary focus of transmission in Kambia for the past 3 weeks. Both cases are registered contacts and were residing in a quarantined dwelling at the time of symptom onset.
- Two cases were reported from Port Loko. The first, from Kaffu Bullom chiefdom, was a registered contact residing in a quarantined home. The second, reported from the chiefdom of Masimera, has an epidemiological link to the Magazine Wharf chain of transmission in Freetown.
- Four cases were reported from the Magazine Wharf area of Freetown. All of the cases have an epidemiological link to previous cases in the cluster, though only one of the cases was a registered contact, and one case was only identified after post-mortem testing. The origin of the index case of the cluster is not known.
- Overall, 4 of the 8 cases reported from Sierra Leone in the week to 21
  June were registered contacts of a previous case. As at 28 June, total of
  1489 contacts were being monitored in 3 districts: Kambia, Port Loko,
  and Western Area Urban.
- In the week to 28 June, 99.8% of 520 credible reports of sick people with possible EVD-like symptoms were responded to within 24 hours. 69% of reports came from Freetown and the surrounding rural area. In addition, 1665 reports of deaths were received during the same period, 99.5% of which were responded to within 24 hours.

## Weekly Highlights

- IOM continues to respond to the Magazine Wharf outbreak with 15 staff providing daily mentoring to local healthcare workers and medical supply restock in 7 community Peripheral Health Units 7 days per week. A rapid needs assessment of community handwashing stations was carried out on 1 July and continued community outreach is ongoing.
- On 3 July, the 4th Emergency Simulation Exercise was held at Lungi International Airport and NERC CEO Paolo Conteh paid an informal visit to IOM's Kambia sub-office.
- Over the past week IOM's Health and Humanitarian Border Management (HHBM) project established 5 Flow Monitoring Points in Kambia and in Freetown. Collected data will be shared with the NERC and used to support surveillance and contact tracing activities.
- From 1-2 July, a two day mobile training on Infection Prevention and Control was held for 27 newly recruited IOM emergency care kits field monitors and HHBM monitoring staff in Makeni.

teams to report back on progress and ongoing needs in the Kambia and the Prison and Police Hospitals. facilities. 6 facilities have since been restocked with medi- Mobile training for new IOM inductees tional Development.

1400 daily. After the facilities close IOM staff in partnership ing"; "hand washing"; "gloving techniques"; "chlorine with Concern are linking up with Community Health Work- preparation"; "site and spill clean up and waste manageers and other local stakeholders to discuss needs in the ment"; and "donning and doffing of Personal Protective community; conduct aware raising; educate on health Equipment". Trainees were evaluated through pre- and screening and early reporting of symptoms and other post-tests, competence assessments on practical skills and health promotion messaging.

#### Health screening needs assessment concluded

On 1 July, IOM's Senior Public Health Coordinator, Dr Aurelien Pekezou conducted a needs assessment of health next mobile training is in Kambia during the week of 13 screening stations in the Magazine Wharf area. It was noted that while handwashing stations are located in strategic areas to capture a high number of local residents, many of the stations were not functioning correctly and very few were using soapy water or chlorine; there were almost no thermometers and a majority of the handwashing stations had no shelter from the sun and rain. A general lack of crowd control was also a key finding- densely crowded streets can make enforcing handwashing and other health screening protocols difficult.

### IOM lead trainers begin support to Connaught

On Monday 6 July, IOM will commence support to the Connaught Hospital Infection Prevention and Control training

IOM's Magazine Wharf response begins week 2 programme in partnership with the King's College of Lon-Over the past week IOM scaled up its staff presence to 15 don Sierra Leone Partnership. Initially, IOM staff will obto form 7 teams that provide mentoring to local health serve the US CDC/MoHS approved IPC training for clinicare workers on the health screening process in 7 Periph- cians and support staff in order to learn the modules beeral Health Units that border the Magazine Wharf hotspot fore joining the training team the following week. In close area in Freetown. During this period regularly scheduled collaboration with MoHS, the Ebola Response Consortium Academy based trainings on Infection Prevention and Con- and hospital administrators, IOM will provide similar IPC trol are postponed. A rapid assessment tool including an training support for hospital personnel will later be providinventory checklist is being employed each day by the ed to Ola During Children's, Princess Christian Maternity,

cal supplied delivered by the UK Department for Interna- A basic IPC course was delivered to 27 newly-recruited IOM staff members who received training and simulations Teams are in operation during opening hours from 0830- on "understanding Ebola"; "principles of ETUs and screenan end of course evaluation. The pre and post-test marks showed strong progress in trainees' understanding of key concepts as the average grade rose from 73% to 87%. The



Mobile training in Makeni for newly inducted IOM staff on 2 July 2015.

Cumulative Training Academy/Mobile Training operational data for 01 December 2014– 04 July 2015 (weekly numbers in brackets)				
Course Name	Number of courses run	Total number of National students	Total number of International Students	Cumulative Total
3 day Ebola clinician IPC 2 day Simulated Patient care	23	589	355	944
1 day Ebola clinical IPC 2 day Simulated patient care	4	26	59	85
1 day clinical augmentation	2	25	41	66
3 day basic IPC/PPE/3 day WHO Ebola basic IPC	66	5,850	51	5,901
Mobile Training 3 day IPC/PPE/Clinical Decontamination/2 day modified IPC	32 (1)	1,150 (27)	0	1,150
1 day clinical pilot/RING IPC	2	65	33	98
Total	128 (1)	7,705 (27)	539	8,244

#### 4th Emergency Simulation Exercise held at Lungi International Airport

simulations seek to i) Test and improve the Entry and Exit Health Screening process and general health security throughout the airport; ii) Test the reaction and response of agencies at the airport in case they encounter a EVD sympthe airport; iii) Determine the level of coordi-



tomatic passenger or IOM's Dr Aurelien Pekezou evaluating a decontamination staff member working at clean up during the Airport Emergency Simulation on 3 July 2015.

nation and collaboration between respective agencies at monitoring at Border and Village Crossing Points was emthe airport in case of an EVD emergency; and iv) Identify gaps in airport health security and further training require- they continued into Samu chiefdom; a hotspot in the disments. Ebola survivors who work at the IOM Training trict. Mr Conteh promised to pay a formal visit in the com-Academy in Freetown in the capacity of expert patient simulators have been involved in all 4 Emergency Simulation Exercises held at Lungi Airport. They are able to provide an otherwise unavailable degree of realism to the proceedings and give staff members the best possible environment in which to hone their response actions. As well IOM doctors were present to provide instant feedback to participants. Before the two scenarios began various air-

port agency representatives had а brief meeting to highlight the objectives of the scenarios and expected outcomes.

Two scenarios were conducted at the airline check-in counters and the pre-boarding

area of the departures lounge. Feedback provided by the participants and observers highlighted training gaps and immediate areas requiring interventions to enhance preparedness and improve inter-agency cooperation. Based on the Weatherized Flow Monitoring Points in opoutcomes of the exercise IOM will develop and eration in Kambia. deliver a training schedule to train 100 airport

personnel ahead of the next emergency simulation. Lungi International Airport is the main logistical air hub in the country and a vital life line for medical, food and other supplies. Keeping the airport open and commercially viable is the major thrust of HHBM operations in Lungi. Resumption of operations by large commercial airlines such as Kenya Airways in June and Air France in July is an indication of the increased confidence airlines and their passengers have in the efforts made to eradicate EVD and pre-

On 3 July 2015 the fourth Emergency Simulation Exercise vent its export. Challenges to airport security remain as was conducted at Lungi International Airport to assess pre- the immediate airport vicinity continues to record EVD paredness and response of airport agencies in case a per- infections with both Kaffu Bullom and Loko Massama son- passenger or staff member with Ebola-like symptoms. Chiefdoms recording some of the highest national infecwere to appear at the facility. The main aim of the simula- tion rates in recent weeks. As even more airlines consider tion exercises is to ensure adequate preparedness with restarting operations in the near future there is a dire timely and appropriate response. More specifically the need to ensure that successful health screening operations

are sustained.

#### **NERC** CEO visits Kambia sub-office

On his way to Samu chiefdom the NERC CEO Paolo Conteh, in the company of District Coordinator the paid an unannounced visit to the IOM sub-office and expressed his admiration for IOM's frontline border activities. In a brief conversation, the need for continued health screening/

phasized. His team was supplied with rain boots before ing weeks.

#### 5 FMPs set up- 3 in Kambia and 2 in Freetown

Three Flow Monitoring Points have been established at Gbalamuya on the Guinea border and in Mange near the district boundary between Kambia and Port Loko. This migratory flow tracking model will support surveillance along the border and village crossing points. and collect data on points of origin/destination, gender and head count infor-

> This new wave of data collection in combination with surveillance activities will help determine migratory flows and support contact tracing. IOM

> > the FMPs. The data collected (including daily headcounts) is stored in tablets and forwarded to database desk IOM's head office in Freetown. Similarly, the Freetown HHBM team successfully established fully operational Flow



Monitoring Points (FMPs) at Susan's Bay and Port Loko Wharf. Dedicated monitoring and head count data collection continues at the Aberdeen Sea Coach Express, Sea Bird Express, and Kissy Ferry ports. IOM has also given a face lift to health screening points at Kissy Ferry, Susan's Bay and Port Loko Wharf ports.

#### Training roll out on care kits in Kambia continues

Over the past week, IOM in partnership with ACF, ABC Development and the District Health Management Teams continued community-based training for community mem-Mafufuneh, Moribaya, Kychum and Rosinor communities), tors for distribution in 880 communities. Bramaia (Shakaya, Barakuya and Kukuna communities) and

Gbinleh Dixon (Mafaray and Tawuya communities) chiefdoms, Kambia district. IOM field assistants have now been posted to their catchment areas. Trainings will eventually reach all 7 chiefdoms across the district and between 1-3 emergency care kits will be pre-positioned in health care bers and community health monitors in Samu (Mapotolon, facilities where available or with community health moni-



#### Major News Headlines (click links for story):

Two new Ebola cases in Liberia, 7 weeks after country declared virus free, Guardian, I July

Sierra Leone's rich and powerful are breaking the Ebola burial rules, New Republic, 30 June

"We were not expecting Ebola to return to Freetown", Ebola Deeply, 29 June

Ebola survivors may be the key to treatment, Wired, 30 June

Canadian military medical staff end 6 month mission in Sierra Leone, MacLeans, 30 June

Guinea quarantines coastal towns to end Ebola, Voice of America, 29 June

Sierra Leone will jail Ebola law violators, AP, 28 June

Liberia's new Ebola cases rattle neighbouring Sierra Leone, Guinea, CS Monitor, 2 July

#### **IOM Sierra Leone's initiatives are supported by:**













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