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IOM Sierra Leone Ebola Response

SITUATION REPORT | Issue 13 | 22-28 February 2015



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Dr Desmond Maada Kangba of IOM's Training Academy in Freetown stresses correct Infection Prevention and Control procedures during the second Emergency Simulation Exercise held at Lungi Airport on 23 February.

SITUATION OVERVIEW

- The steep decline in case incidence nationally in Sierra Leone from December until the end of January has halted. Weekly case incidence has stabilized at between 60 and 100 confirmed cases. **A total of 63 cases were reported in the week to 22 February.** The total for the previous week has been revised up to 96 confirmed cases, after missing laboratory data was included. Transmission remains widespread, with 8 districts reporting new confirmed cases. A significant proportion of cases are still arising from unknown chains of transmission.
- There has been a sharp increase in reported confirmed cases in the northern district of Bombali, with 20 confirmed cases reported in the week to 22 February. **The outbreak is reportedly linked to the cluster of cases in the Aberdeen area of Freetown. A response team continues to trace and monitor over 2000 contacts associated with the cluster.** The neighbouring districts of Kambia (8 confirmed cases) and Port Loko (15 confirmed cases) also report persistent transmission. The capital, Freetown, reported 14 new confirmed cases.
- Transmission is also reported in several other regions of the country, including the eastern districts of Kenema and Kono, which each reported 1 case in the week to 22 February.
- In the 3 days to 19 February, a total of 9 confirmed cases were identified after post-mortem testing of dead bodies found in the community indicating that a significant number of individuals are still either unable or reluctant to seek treatment.

HIGHLIGHTS

- **IOM's National Ebola Training Academy has now trained over 4,000 health care workers as of 28 February. A week long mobile training course is ongoing in Bombali district for two teams of 27 decontamination workers.**
- **IOM's Health and Humanitarian Border Management team successfully concluded a second Emergency Simulation Exercise on 23 February. The team will now lead a rapid two day border assessment to Kambia district on 2-3 March involving a number of government and UN agencies. Four additional rapid assessment missions will be held during March.**
- **IOM continues interim home care kit distribution through implementing partner, Oxfam's in the Western Area in, with a total of 202 kits distributed to date. IOM and its' implementation partners, Oxfam and ACF, held a lessons-learned meeting on 24 February. The objectives were to spread best-practices and increase the responsiveness of distribution to epidemiological trends.**
- **IOM and World Hope International's social mobilization pillar support teams in Bombali district continue intensive community engagement in Rosanda in Paki Masabom chiefdom and Kapethe in Biriwa chiefdom. As an Ebola hotspot, ten homes have been quarantined in Rosanda and the entire village of 36 homes was put under isolation on 25 February. In the past 72 hours there has been a spike of 31 cases in the area.**

National Ebola Training Academy & Mobile Training

Operational Highlights

One 3+2 day clinical Infection Prevention and Control simulated patient training course was held for trainees from the Police Training School, the Ministry of Health and Sanitation, Connaught Hospital and the Adventist Development and Relief Agency International (ADRA).

Deployment of one 4 person rapid response mobile team to Makeni in Bombali district to train 27 members of two house decontamination teams is ongoing. The teams are being guided through a 5 day course which includes 2 days of IPC, 2 days of decontamination and 1 day of practical home decontamination.

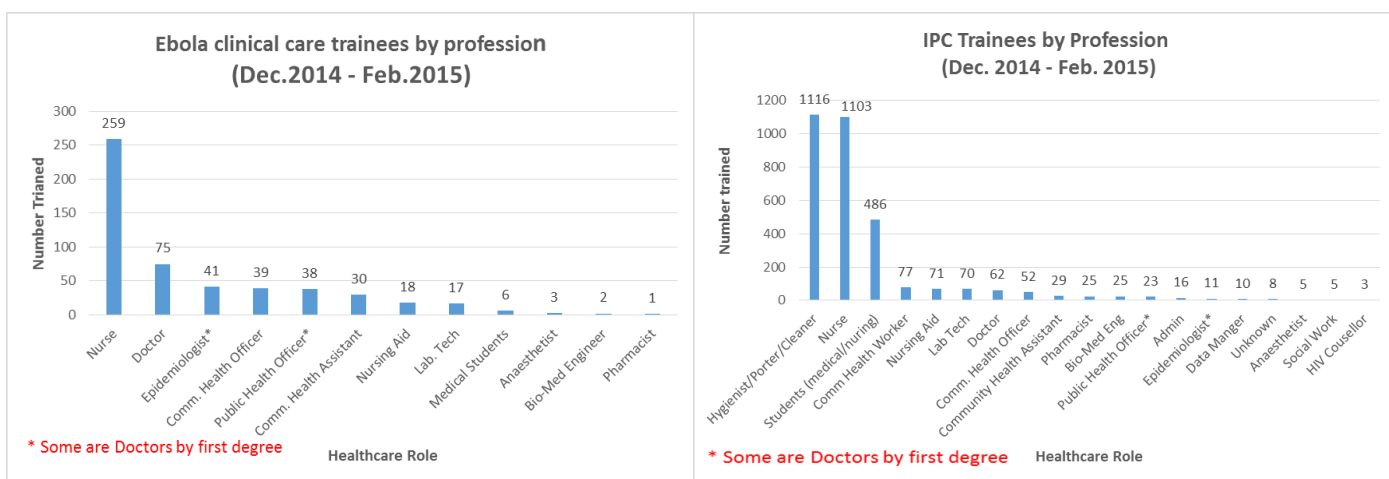
Two 3 day basic IPC courses were held for 292 students from, the 34th Military Hospital, Wesleyan Hospital, the Marbella Community Health Centre,



Jasmine Riley, Training Coordinator, prepping Academy staff for interviews with the British Forces Broadcasting Service.

Gbanalol Holding Centre, Rokupa Government hospital, ADRA, Lakka Government Hospital, the Ola During Children's Hospital, the Police Training School and the Ministry of Health and Sanitation.

Clinical care vs. Infection Prevention and Control Trainees by profession



Cumulative Training Academy operational data for 01 December 2014– 28 February 2015 (weekly number 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	11 (1)	245 (30)	300 (13)	545
1 day Ebola clinical IPC 2 day simulated patient	4	26	59	85
1 day clinical augmentation	2	25	41	66
3 day basic IPC/PPE	34 (2)	3079 (292)	49	3128
Mobile Training 1 day IPC	5 (1)	202 (27)	0	202
Total	56 (3)	3577 (349)	449 (13)	4026

Emergency Care Kits

IOM and implementation partners, Oxfam and ACF, held a meeting on 24 February 2015. The objectives were to share and document lessons-learned from the current project to spread best-practices, increase the responsiveness of distribution to epidemiological trends and to determine ways forward. 25 Community Health Workers, members of Community Health Committees (CHCs), field staff, coordinators, and project managers were in attendance to ensure a broad sharing of views and experiences. Highlights included improving uniformity of approach, including the criteria for kit distribution and accessing quarantined households. Strategies on how to respond to current and future trends in transmission were also discussed including expanding geographical coverage, working more closely in support of community-based health systems, and better response for quarantined areas.

Oxfam continues interim home care kit distribution through their community-based active

case finding activities in the Western Area in seven wards, with a total of 202 kits distributed to date. Oxfam's teams are meeting with the Western Area District Health Management Team (DHMT) to liaise on contingency planning and preparedness in the Western Area, specifically in Oxfam's areas of operation which includes 11 peripheral health units (PHUs).



IOM, Oxfam and ACF lessons-learned meeting held on 24 February to discuss responsiveness of distribution to the latest transmission trends.

Health & Humanitarian Border Management

On 23 February IOM's Border Management Team held the second Emergency Simulation Exercise at Lungi International Airport. As a vulnerable yet extremely important asset to the continued economic livelihood of Sierra Leone, the airport's necessity as a transport hub is unparalleled.



Cleaners wearing PPE move to decontaminate a surface during the simulation.

their knowledge and responsiveness.

The exercise was made up of three pre-planned scenarios and employed IOM expert patients, who are Ebola survivors, from the IOM Training Academy in Freetown to add realism to the activities.

As with the first exercise on 12 January, a number of areas for improvement were highlighted including the need for

regular Emergency Simulation Exercises are an essential training tool for airport staff to ensure their own safety along with the security of the airport facility and its passengers, while enhancing

IPC and Clinical training courses that better reflect the unique environment of the airport site. The HHBM team is linking with Academy to fill this need.

Nevertheless, since the initial exercise the airport staff-security guards, cleaners, doctors, front gate health care workers, and IOM monitors- made major improvements in both preparedness and response time.

From Monday, 2 March, the HHBM project manager is leading a rapid border assessment team made up of multi-sector stakeholder experts. This pilot assessment will target land border crossing points in Kambia district. The assessment, broken down into five areas, includes district and community focus group discussions, and WASH, technical IBM and health facility investigations.

Once completed, the refined from the results of the Kambia mission the rapid assessment model will be used to investigate the land borders of other districts in Sierra Leone. These assessments will provide the foundation for upcoming HHBM initiatives to get to zero Ebola cases while reinforcing border security.



Security guard responds to suspected Ebola case during emergency exercise.

Social Mobilization targets Bombali flare up

This week at the Kono District Emergency Response Center's (DERC) Social Mobilization Pillar meeting, Wellbody Alliance's team of field Community Health Workers (CHWs), were commended for their initiative to decommission two Community Care Centers (CCCs). The CHWs traced seven contacts of an Ebola case to a remote village, inaccessible by ambulance, and supported them to move to a house in Koidu city, where they are under observation. CHWs are monitoring and supporting the seven and will continue to do so until the 21 day period where they may develop symptoms of Ebola has passed. The Kono CHWs are beginning to shift into health messaging towards long-term health system strengthening. CHWs are finding increasing numbers of persons with general health problems, in addition to those suspected of Ebola. The CHWs are focused on rebuilding social support and referral to community-based care, in particular for HIV/AIDS and tuberculosis patients.

IOM and World Hope International's social mobilization pillar support teams in Bombali district have continued intensive community engagement in Rosanda in Paki Masabom chiefdom and Kapethe in Biriwa chiefdom. Last week an infected fisherman from a quarantined community in Freetown sought treatment from traditional healers in his home village of Rosanda in Bombali district near Makeni.

Unfortunately, shortly thereafter the man passed away

and the community experienced a spike of 31 new Ebola cases within 48 hours. The village and neighbouring area has been placed under strict quarantine and the army has been deployed.

On Sunday, March 1, IOM staff visited the village which is now said to have 46 cases with 10 deaths in the past two days where tragically, a single household has lost five family members. IOM and World Hope International are responding with social messaging focused on infection prevention and control, staying safe while you wait at home and hygiene promotion.



Social mobilizers in Rosanda village, Bombali responding to Ebola spike.

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News Headlines (click links for story/video):

[Sierra Leone village in lockdown after 31 new cases recorded, Guardian, 27 February](#)
Flare up of virus outside of Makeni with WHO linking cases to man who escaped quarantine in Freetown.

[Ending the Ebola outbreak, NY Times, 24 February](#)
Months of declining cases have fed hopes that the Ebola outbreak might finally be ending.

[Sierra Leone eyes post Ebola recovery, Financial Times, 25 February](#)

[In Sierra Leone Ebola survivors begin to find acceptance, UNICEF, 23 February](#)

[People with disabilities look to an Ebola-free future, All Africa, 24 February](#)

[Red Cross Ebola soap opera engages and educates communities, IFRC, 24 February](#)

[Sierra Leone mining sees revival after Ebola wanes, Bloomberg, 25 February](#)

[Sierra Leone quarantines Ebola-hit orphanage, Japan Times, 24 February](#)

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