

## GLOBAL CONTEXT

On August 1<sup>st</sup>, 2018, an Ebola outbreak was declared in Eastern DR Congo. As of 28<sup>st</sup> August, there were 28 probable and 84 confirmed cases, with 18 suspected cases currently under investigation, including two in Goma. There have been 75 deaths (according to the Ministry of Health Situation Report, 28<sup>nd</sup> August). Under the leadership of the Congolese Ministry of Health and the World Health Organisation, Medair and other partners are working to prepare and respond.

## WEEKLY UPDATE

From 22<sup>th</sup> August to 28<sup>st</sup> August:

- There have been 8 new confirmed cases, and 20 deaths.
- Mabalako health zone remains the place where the majority of cases are emerging.
- Vaccinations are still ongoing in the Nord-Kivu. So far 4,511 people have been vaccinated in Mabalako, Beni, Mandima and Oicha, where cases have been confirmed the areas.

## MEDAIR RESPONSE SUMMARY

Medair supports 51 health facilities in Eastern DR Congo, with Health, Nutrition, and WASH related interventions. Medair's first priority is to ensure that suspected Ebola cases can be safely identified, isolated and referred at these health facilities, in order to:

- 1) Ensure suspected Ebola patients receive timely care
- 2) Prevent further spread of Ebola Virus Disease
- 3) Enable affected populations to continue to access quality primary health care in a safe environment

Beginning with areas where the risk is most elevated, Medair is ensuring that supported health centres are equipped to triage patients at the entrance to the health centre before isolating suspected Ebola cases in a temporary isolation area, while arranging for referral.

Health centre staff are being trained on how to consistently implement screening, isolation and referral without exposing themselves or other patients to the risk of being infected with Ebola Virus Disease. To support this, they are being equipped with personal protective equipment and receive instruction - derived from the WHO guidelines for responding to Ebola in DR Congo - on how to safely screen and isolate suspected Ebola patients.

In addition to support health centres covered by pre-existing projects, Medair has prioritised and begun working in seven additional health centres to be supported as part of the Ebola response where there is the highest risk of suspected cases emerging; in the past week, the team has started working in five of them. This includes a package of Infection Prevention and Control (IPC) measures, and water, sanitation, and hygiene support both in the health facilities and surrounding communities.

The health centres that Medair supports are included as an annex.



Insecurity on the road means that the team has a short time window to complete their daily activities. Health Project Manager Rebecca urges her team to get on the road as quickly as possible.

#### PROGRESS UPDATE: BENI

- The Ebola Coordinator has arrived to Beni in order to coordinate the effort of both the Beni and Bunia teams to jointly respond to the Ebola crises. In addition, new national staff (one logistics officer, one storekeeper, and one cleaner) have been hired to add capacity for the response. Additional staff have signed their contract and will shortly join the team.
- Some job descriptions are being finalized for positions such as screeners and hygienists.
- Two projects have been revised in light of the additional health facilities that Medair is supporting:
  - The first project (ECHO-SDC) has been revised in order to prevent the expansion of the epidemics around Oicha General Hospital where two cases have been confirmed. The modification includes a ring-IPC strategy around the Oicha General Hospital in the following health centres: Mabasele, Mambabeka, Ngandilama and Ngele (the other facilities in the ring around the hospital are also supported by Medair through the OFDA project).
  - The second has been revised in order to ensure that all health facilities supported by OFDA are effectively equipped to ensure that suspected Ebola cases can be identified, isolated and referred.
- The focus continues to be on the training of health care workers on Ebola and its transmission, as well as the implementation of screening and isolation areas in health facilities. In the past week, five new health centres have been supported; out of them, three are located in Oicha health zone (including Oicha General Hospital) and two in Beni health zone.

### PROGRESS UPDATE: BUNIA

- One person died Saturday, August 25<sup>th</sup> in Bunia, after showing similar signs of Ebola; that suspected case turned out to be negative. However, this caused increased tensions in town.
- Two new WASH staff have joined the team.
- The isolation structure model has been revised based on the Provincial Health Department and MSF recommendations, and in the context of the epidemics as a good quality temporary structure that provides dignity and full privacy to the suspected Ebola cases.
- The team set up the screening and temporary isolation areas at the Luna health facility. In addition, 31 people (composed of health facility workers and RECO) were trained on Ebola and triage.

### PROGRESS UPDATE: NATIONAL / GLOBAL LEVEL

- In coordination with the key commissions including IPC, Medair has established a phased approach for primary health care facilities based on priority and proximity to the epicentre of the outbreak. This approach includes the five following phases<sup>1</sup>:
  - 1) Initial briefing of health care workers on Ebola, its transmission, and on IPC
  - 2) Training, equipment, and supplies including light Personal Protective Equipment (PPE) to ensure safe triage and screening
  - 3) Perimeter to enable a single entrance to enhance screening and identify a zone of isolation for suspect patients to rest while awaiting alert validation and transport to the Ebola Treatment Centre (ETC)
  - 4) Building of isolation structure in facilities with high risk of cases as well as high potential for delayed transport to the ETC
  - 5) Full isolation package including nursing support in some facilities

### PLANNED ACTIVITIES

In addition to the health facilities Medair supported before the outbreak, seven health facilities in the highest risk areas have been added, evaluations of these health facilities has been conducted in all health centres and safe screening and isolation has already been established in five of them with the final two to be completed this week.

Medair also continues to carry out ongoing supervision in supported health facilities to ensure compliance and improve upon IPC practices in the health facilities.

Medair is participating in the coordination of the Ebola response, helping to ensure coverage and avoid duplication of activities. It is liaising closely with partners to ensure that its work achieves its objective of stopping disease spread and complements that of other humanitarian organisations.

### CHALLENGES & NEEDS

- **Supplies:** As NGOs are scaling up their activities, some supplies are starting to get scarce and the logistics team foresees that the price of the items may increase in the following weeks. Also, the flight chartered from Nairobi to bring essential supplies has still not been able to depart, because of delays in obtaining the landing permissions on the Congolese territory. The flight will land in Bunia on August 29<sup>th</sup>. In the midst of these challenges, Medair is grateful for its good

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<sup>1</sup> Phases 3) to 5) will be implemented on a case by case basis in health facilities depending on the proximity to confirmed or probable cases.

collaboration with WHO and UNICEF, which released some of their supplies to Medair warehouse in Beni on the 28<sup>th</sup>, including PPEs, thermoscans and WASH items.

- **Staff:** Staff involved in the response continue to work extra hours to implement all ongoing and new projects. Additional staff (both international and national) coming from Goma and Kirumba are helping to offload some of the work. Bringing new staff and swiftly onboarding them to add capacity remains a challenge with the current work load. As the support to the Beni team has increased in the last week, the team is also starting to draft vacation planning to enable critical staff to get appropriate rest.
- **Space:** As the number of staff in Beni increases, spacing for the base staff and office is becoming quite challenging. The logistics team is currently looking for an additional office and/or team base. However, finding a big enough space in town remains difficult taking into account the activities of other NGOs. Consequently, additional means of transportation will need to be found through the purchase or hire of new cars and/or motorbikes, currently, staff movement is limited by the number of vehicles available in the base.
- **Collaboration:** In Bunia, Medair is receiving a lot of positive feedbacks from the Division Provinciale de la Santé (DPS), the Médecins Chef de Zone (MCZ) and partners including UN agencies; these are asking the team to do more than it can. In Beni, Medair has received a great support from WHO The team met with the Assistant Director General for emergencies in WHO and the Team Lead for VHF at WHO, who have been really supportive and introduced our team to the DG from DPS, the Head Office for UNICEF, and the Head of Security for the UN missions in Beni. They have offered their support in order to enable Medair to continue our work in Oicha health zone.
- **Security:** There have been repeated security incidents over the past week, which had an impact on Medair's planned activities around Beni on two occasions. This has caused delays in the implementation of the screening and isolation areas of health facilities that already have regular limited access due to insecurity.

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*Medair is a humanitarian organisation striving to relieve human suffering in some of the world's most remote and devastated places. We bring relief and recovery to people in crisis, regardless of race, creed, or nationality. In Eastern DR Congo, Medair is supporting 51 health centres, with funding from OFDA, ECHO, SDC, UNICEF, the Common Humanitarian Fund and private funders.*

**Annex I: New health facilities to be supported as part of Ebola response<sup>2,3</sup>**

#	Province	Health Zone	Health Area	Trained on case definition & surveillance?	Can screen, isolate & refer?			Funding Partner
					Yes	No	No	
1	Nord Kivu	Oicha	Oicha*	Yes	Yes	Yes	Yes	ECHO-SDC
2	Nord Kivu	Oicha	Mabasele	Yes	Yes	Yes	Yes	ECHO-SDC
3	Nord Kivu	Oicha	Mambabeka	Yes	Yes	Yes	Yes	ECHO-SDC
4	Nord Kivu	Oicha	Ngandilama	No	No	No	No	ECHO-SDC
5	Nord Kivu	Oicha	Ngele	No	No	No	No	ECHO-SDC
6	Nord Kivu	Beni	Rwangoma	Yes	Yes	Yes	Yes	ECHO-SDC
7	Nord Kivu	Beni	Sayo	Yes	Yes	Yes	Yes	ECHO-SDC

All health facilities are primary health facilities, unless indicated with a \* (referral centres)

**Annex II: Health centres supported by Medair's current projects**

#	Province	Health Zone	Health Area	Trained on case definition & surveillance?	Can screen, isolate & refer?			Funding Partner
					Yes	No	No	
1	Ituri	Lita	Katoto	Yes	No	No	No	OFDA
2	Ituri	Lita	Bahwere	Yes	No	No	No	OFDA
3	Ituri	Lita	Zumbe	Yes	No	No	No	OFDA
4	Ituri	Fataki	Jina	Yes	No	No	No	OFDA
5	Ituri	Fataki	Bule	Yes	No	No	No	OFDA
6	Ituri	Nizi	Iga Barrière	Yes	No	No	No	OFDA
7	Ituri	Komande	Luna	Yes	Yes	Yes	Yes	OFDA
8	Ituri	Gety	Bukiringi	Yes	No	No	No	OFDA
9	Ituri	Gety	Kagaba	Yes	No	No	No	OFDA
10	Ituri	Boga	Tchabi	Yes	No	No	No	OFDA
11	Ituri	Rethy	Rethy	Yes	No	No	No	Pooled Fund
12	Ituri	Rethy	Mola	Yes	No	No	No	Pooled Fund
13	Nord Kivu	Oicha	Kainama	Yes	No	No	No	OFDA
14	Nord Kivu	Oicha	Mbau*	Yes	Yes	Yes	Yes	OFDA
15	Nord Kivu	Oicha	Masosi	Yes	Yes	Yes	Yes	OFDA
16	Nord Kivu	Oicha	Kitevya	Yes	No	No	No	OFDA
17	Nord Kivu	Beni	Mukulya	Yes	Yes	Yes	Yes	OFDA

<sup>2</sup> High priority health centres are highlighted in orange. Further health facilities will be identified as 'priority' depending on the direction of outbreak spread.

<sup>3</sup> Following the 2 confirmed cases in Oicha, new health facilities have been identified as a priority for IPC based on proximity to Oicha General Hospital and the patient volume. This table has therefore been revised based on these new priority health centres.

18	Nord Kivu	Beni	Paida	Yes	Yes	Yes	Yes	OFDA
19	Nord Kivu	Kalunguta	Butuhe	Yes	No	No	No	OFDA
20	Nord Kivu	Kalunguta	Mabuku	Yes	No	No	No	OFDA
21	Nord Kivu	Kalunguta	Kalunguta	Yes	No	No	No	OFDA
22	Nord Kivu	Kalunguta	Vurondo	Yes	No	No	No	OFDA
23	Nord Kivu	Kalunguta	Kivethya	Yes	No	No	No	OFDA
24	Nord Kivu	Mutwanga	Lubiriha	Yes	No	No	No	OFDA
25	Nord Kivu	Mutwanga	Luolo	Yes	No	No	No	OFDA
26	Nord Kivu	Kayna	Mulinde*	Yes	No	No	No	ECHO-SDC
27	Nord Kivu	Alimbongo	Bingi*	Yes	No	No	No	ECHO-SDC
28	Nord Kivu	Alimbongo	Kalungu	Yes	No	No	No	ECHO-SDC
29	Nord Kivu	Alimbongo	Alimbongo	Yes	No	No	No	ECHO-SDC
30	Nord Kivu	Alimbongo	Bunyatenge	Yes	No	No	No	ECHO-SDC
31	Nord Kivu	Alimbongo	Lunyasenge	Yes	No	No	No	ECHO-SDC
32	Nord Kivu	Lubero	Bukununu*	Yes	No	No	No	Pooled Fund
33	Nord Kivu	Lubero	Baraka	Yes	No	No	No	Pooled Fund
34	Nord Kivu	Lubero	Kagheri	Yes	No	No	No	Pooled Fund
35	Nord Kivu	Lubero	Kaghuli	Yes	No	No	No	Pooled Fund
36	Nord Kivu	Lubero	Kasima	Yes	No	No	No	Pooled Fund
37	Nord Kivu	Lubero	Kasalala*	Yes	No	No	No	Pooled Fund
38	Nord Kivu	Lubero	Katolo	Yes	No	No	No	Pooled Fund
39	Nord Kivu	Lubero	Kipese*	Yes	No	No	No	Pooled Fund
40	Nord Kivu	Lubero	Kisima*	Yes	No	No	No	Pooled Fund
41	Nord Kivu	Lubero	Kiviriri	Yes	No	No	No	Pooled Fund
42	Nord Kivu	Lubero	Lubero Cité	Yes	No	No	No	Pooled Fund
43	Nord Kivu	Lubero	Mubana	Yes	No	No	No	Pooled Fund
44	Nord Kivu	Lubero	Vukendo	Yes	No	No	No	Pooled Fund
45	Nord Kivu	Lubero	Kisaka	Yes	No	No	No	Pooled Fund
46	Nord Kivu	Kibirizi	Bulindi	Yes	No	No	No	ECHO-SDC
47	Nord Kivu	Kibirizi	Kilambo	Yes	No	No	No	ECHO-SDC