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Emergency Plan of Action (EPoA) Senegal: Ebola Virus Disease

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation	Operation n° MDRSN010 ; Glide:EP-2014-000039-SEN
Date of issue: 8 September, 2014	Date of disaster: 29 August, 2014
Operation manager: Momodou Lamin Fye, Regional representative, Sahel Regional Representation Office.	Point of contact: Aissa Fall, Health Manager, Sahel Regional Representation Office.
Operation start date: 8 September, 2014	Expected timeframe: 3 months
Overall operation budget: CHF 253,515	
Number of people affected: 1,000,000 (in Dakar, Thiès, Kaolack, Fatick, Louga, Saint Louis, Matam, Diourbel and Kaffrine)	Number of people to be assisted: 500,000 (65,000 Households) in 9 different regions.
Host National Society presence (n° of volunteers, staff, branches): 1,000 volunteers, 9 branches, 25 NS staff in the field, and 5 (health) National Disaster Response Team (NDRT) members.	
Red Cross Red Crescent Movement partners actively involved in the operation: ICRC, Spanish RC, Danish RC, French RC	
Other partner organizations actively involved in the operation: MoH, WHO, UNICEF, UNOCHA, MSF	

[<click here for the DREF budget; here for contact details and here for the map>](#)

A. Situation analysis

Description of the disaster

On 29 August 2014, the Ministry of Health in Senegal confirmed the first case of the Ebola virus in country, after laboratory tests showed that a young patient traveling from Guinea and who was seeking for medical cures after entering into Senegal had contracted the virus. The patient was immediately referred to the national hospital of Hann in Dakar and it is estimated that he was in direct contact with about 68 to 75 persons before isolation. The patient is recovering well and the contacts he made before being treated (34 family members in Dakar and about 36 health care workers located in 5 different sanitary districts in the greater region of Dakar) are under surveillance with the support of the Senegal Red Cross.

The Senegalese Red Cross (SRC) immediately met with the Senegal National Crisis Committee for EVD, including the Ministry of Health, WHO, MSF, Institut Pasteur and UNICEF amongst others partners. The recommendations that came out from the committee in support of the National Society focused on response activities, community monitoring, sensitization and contact tracing. The national capacity for case management is currently very limited (9 beds in Fann hospital isolation unit). MSF international plans for a field isolation unit which could be in place in about 1 to 2 weeks. The Personal Protective Equipment (PPEs) provided by WHO are too small and with insufficient protection. There is also limited stock of body bags. Contact tracing has started but is not fully operational. Most contacts are being followed up daily.

Since the confirmation of the Ebola virus disease in Guinea, a [regional response framework](#) has been envisaged. The regional response framework includes supporting the National Societies of the affected countries and countries with a physical border to the affected countries. Latest regional update done at the end of August 2014 shows 646 cases (430 deaths) in Guinea, 967 cases (407 deaths) in Sierra Leone, 1086 cases (754 deaths) in Liberia and 17 cases (6 deaths) in Nigeria.

The main activities the IFRC is supporting in the affected National Societies include:

- Strengthening National Society volunteer and coordination networks through logistics and training support.

- Clinical case management, support with isolation and life-support.
- Contribution to epidemiological investigation and epidemic control measures.
- Case finding, contact tracing, disinfection and dead body management.
- Information, education and communication to the population and reduction of stigma.
- Psychosocial support; coping with crisis, grief and loss.

Summary of the current response

The proposed activities planned with this operation are aligned to the IFRC regional response framework to the Ebola virus. In April 2014, the Senegalese Red Cross has received a contribution from the DREF fund to be able to implement EVD preparedness activities in country, as part of the IFRC support to countries neighbouring EVD affected countries. The Ebola preparedness operation has ended, and volunteers already trained are still in the field for sensitisation activities in collaboration with the Ministry of Health (in the 5 specific areas bordering Guinea, which do not include the 9 additional areas this operation is covering).

This current response is planned after one case has been tested EVD positive. The MoH, together with all its partners, including the Senegalese Red Cross, is committed to limit the spread of the Ebola virus.

Overview of Host National Society

The Senegalese Red Cross has experience in managing epidemics, such as cholera and yellow fever. The National Society has strong experience in community epidemics management with well-trained people (13 NDRT Health members). However, it is the first time the country is experiencing Ebola, and strong support is needed to conduct effective staff and volunteers training to be able to cope with the virus.

The National Society's planned activities include social mobilisation with community awareness campaigns, contact tracing (with active cases or suspected cases) and referral, disinfections of affected households as well as dead body management. 30 volunteers are supporting the contact tracing team established by the Government. Community leaders and religious leaders have been identified as key targets for advocacy and social mobilisation activities because of their influential role in fighting misconceptions on the Ebola virus.

Movement Coordination

The Senegalese Red Cross is supported by the IFRC through its regional office in the Sahel, as well as by the ICRC, Danish RC, Spanish RC and French RC. Regular Movement Coordination meetings and joint activities are in place with partners to monitor the development of the EVD spreading situation. The SRC keeps all Movement actors informed of activities carried out by the Ministry of Health and by Social Action. The IFRC Sahel regional representation office is supporting with information gathering and dissemination, as well as with technical and financial support to this operation.

On 5 September 2014, a movement partner coordination meeting was planned at IFRC to discuss on EVD and on the role the SRC is taking up to handle the EVD response operation.

Overview of RCRC Movement in country

For this operation, 1,000 volunteers will be deployed in the 9 regions which were not yet covered with activities implemented with the previous Ebola preparedness DREF allocation. Up to 500 volunteers (out of 1,000) will be mobilised in Dakar where there is a confirmed case, and 500 other volunteers will be mobilised in other 8 branches not yet covered by training activities, namely Thies, Diourbel, Kaolack, Kaffrine, Fatick, Louga, Saint Louis and Matam, depending on the risk and exposition to the virus. The 5 remaining regions have been covered already with preparedness activities implemented through the previous DREF allocation in April.

Overview of non-RCRC actors in country

The SRC is coordinating with its partners under the coordination of the Ministry of Health. The Ministry of Health and Social Action work alongside the World Health Organisation in Senegal on managing epidemics. WHO, MSF, UNICEF, Institut Pasteur amongst others are working closely together to address the issue of the Ebola virus. The MoH has offered to train 30 SRC volunteers to start contact tracing in areas which are most at risk, and training to health workers will be also provided for case management. All partners are in strict contact through the Senegal National Crisis Committee for EVD, composed by the MoH, WHO, MSF, as well as NGOs focused on health activities and administrative authorities.

UNOCHA conducted a health technical meeting (and IFRC was also participating) circulating a document called "Survey of Survey" to all humanitarian partners for Ebola response. Inputs and feedback from partners including IFRC were requested. At country level, the Senegalese RC is part of the working group and is attending all meetings together with other humanitarian partners.

Needs analysis, beneficiary selection, risk assessment and scenario planning

Needs Assessment

This is the first time Senegal copes with Ebola, the population has limited knowledge of the virus, including mode of transmission and proper behaviours to avoid risks. Due to the highly-infectious nature of the disease, it is important to reduce rumours and misconceptions related to contracting the virus, as well as to control the transmission of the virus in order to avoid new infections. Effective communication and social mobilisation activities are key in order to increase community sensitisation. As per Senegal's statistics data, 1 household comprises 7-8 persons. For this reason, the Senegalese Red Cross has planned to reach 500,000 beneficiaries, meaning approximately 65,000 households.

Risk Assessment

The Senegalese Red Cross is fully committed to support the Ministry of Health and Social Action on social mobilisation activities, so to limit the spread of the disease in the country. In order to reduce risks for staff and volunteers working on the operation, the National Society will ensure that personal protective equipment is properly used and personnel adequately trained. The SRC also plans to support the government in patient transport, disposal of bodies, disinfection of houses and direct psychosocial interventions and economical support to families who have lost relatives or a significant amount of items or income.

B. Operational strategy and plan

Overall objective

This operation aims at helping to prevent and reduce morbidity and mortality due to the outbreak of the Ebola virus in Senegal.

Proposed strategy

The proposed strategy is in line with the IFRCs regional response framework for affected countries namely Guinea, Sierra Leone, Liberia and Nigeria. The planned activities will focus on:

- Capacity building of the National society through volunteer training in communication around epidemics and behavioural change.
- Contact tracing with referral to the nearest health facilities in case of suspected cases.
- Support to the Ministry of Health in prevention activities and social mobilisation.
- National Society capacity building through volunteer training in communication around epidemics and behavioural change.
- Pre-positioning personal protective equipment and ensuring adequate training in place.
- Dead Body Management (DBM).
- Adaption and dissemination of information, education and communication material link to community social mobilisation activities.
- Procurement of vests, disinfection solutions, ECV manuals, megaphones, flyers and posters.
- Community mitigation and reduction of stigma.
- Psychosocial support.
- Target health professionals, women and community leaders.
- Target religious leaders to conduct advocacy and social mobilisation activities.

Operational support services

Human resources

SRC is planning to deploy 1,000 volunteers, 25 National Society staff and 5 NDRT health personnel to support with the operation. IFRC will be supporting the SRC with deployment of 1 RDRT to support and ensure quality implementation. Up to 500 volunteers will be trained on awareness raising, contact tracing and DBM to be mobilized in Dakar, while the other 500 will be trained to conduct activities in the other targeted regions.

The IFRC regional office will support with monitoring of the plan of action, guidance, procurement and other logistics-related issues, as well as financial and narrative reporting.

Logistics and supply chain

All PPEs requested with the DREF preparedness allocation have been purchased from the IFRC Logistics Unit and were delivered to the National Society. A total of 60 PPEs have been provided to the MoH when the first Ebola case was reported. Up to 300 High Personal Protective Equipment (PPEs) will be procured by IFRC (200 distributed in country and 100 will be stocked, may further requests arise) to ensure they meet the necessary standards. All other required items will be procured locally with the support from the IFRC regional office to ensure agreed procedures are followed.

Information technologies (IT)

The country office team will ensure best use of its IT equipment at disposal for the operation.

Communications

Visibility of the work of Red Cross volunteers will be ensured during the operation through local media and distribution of communication materials. A proper documentation and reporting to allow for lessons learnt will be ensured as well. The Senegalese Red Cross will provide regular updates on the operation.

Security

There are no security issues in the country at the moment. Security risks will be monitored and addressed accordingly. IFRC has prepared a security brief for its staff deployed in the country, and close consultations will be carried out with SRC and ICRC who has permanent presence in Senegal.

Planning, monitoring, evaluation and reporting (PMER)

The National Society, in close cooperation with the Sahel Regional Office, will monitor the progress of the operation and provide necessary technical expertise. The monitoring and reporting of the operation will be undertaken by the National Society. Brief weekly updates will be provided to the IFRC on general progress of the operation, and regular monitoring reports will provide detailed indicators tracking.

The IFRC has protocol in place for deployment of resources to Ebola affected countries which will be followed for this operation. The evolving Ebola outbreak and its effects on the security situation in the affected countries is monitored by the IFRC security unit and personnel health functions.

Administration and Finance

The National Society has a permanent administration and finance department which ensures proper use of financial resources, in accordance with the Memorandum of Understanding between the Senegalese Red Cross and the IFRC Sahel Regional Representation. Financial resource management will be done according to the National Society's regulations and DREF guidelines.

The Secretary General has the overall responsibility of managing and coordinating the entire operation.

<p>places, in houses of patients affected by Ebola and manage contaminated house facilities (mattresses, blankets, clothing, etc.) that need to be replaced and destroyed.</p>																
<ul style="list-style-type: none"> Sensitization of affected households/villages. 																

Contact information

For further information specifically related to this operation please contact:

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- **Regional Logistics Unit (RLU):** Rishi Ramrakha; Phone +254 20 283 5142, email: rishi.ramrakha@ifrc.org

For Resource Mobilization and Pledges:

- **IFRC West and Central Africa:** Elisabeth Seck, Resource Mobilization Officer; phone:+221 33 869 36 60; email: elisabeth.seck@ifrc.org

For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

- **In IFRC Zone:** Robert Ondrusek, PMER Coordinator; Phone: +27 11 303 9700; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

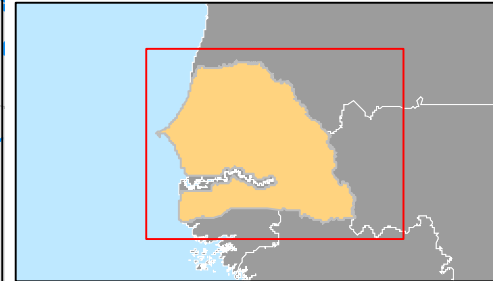
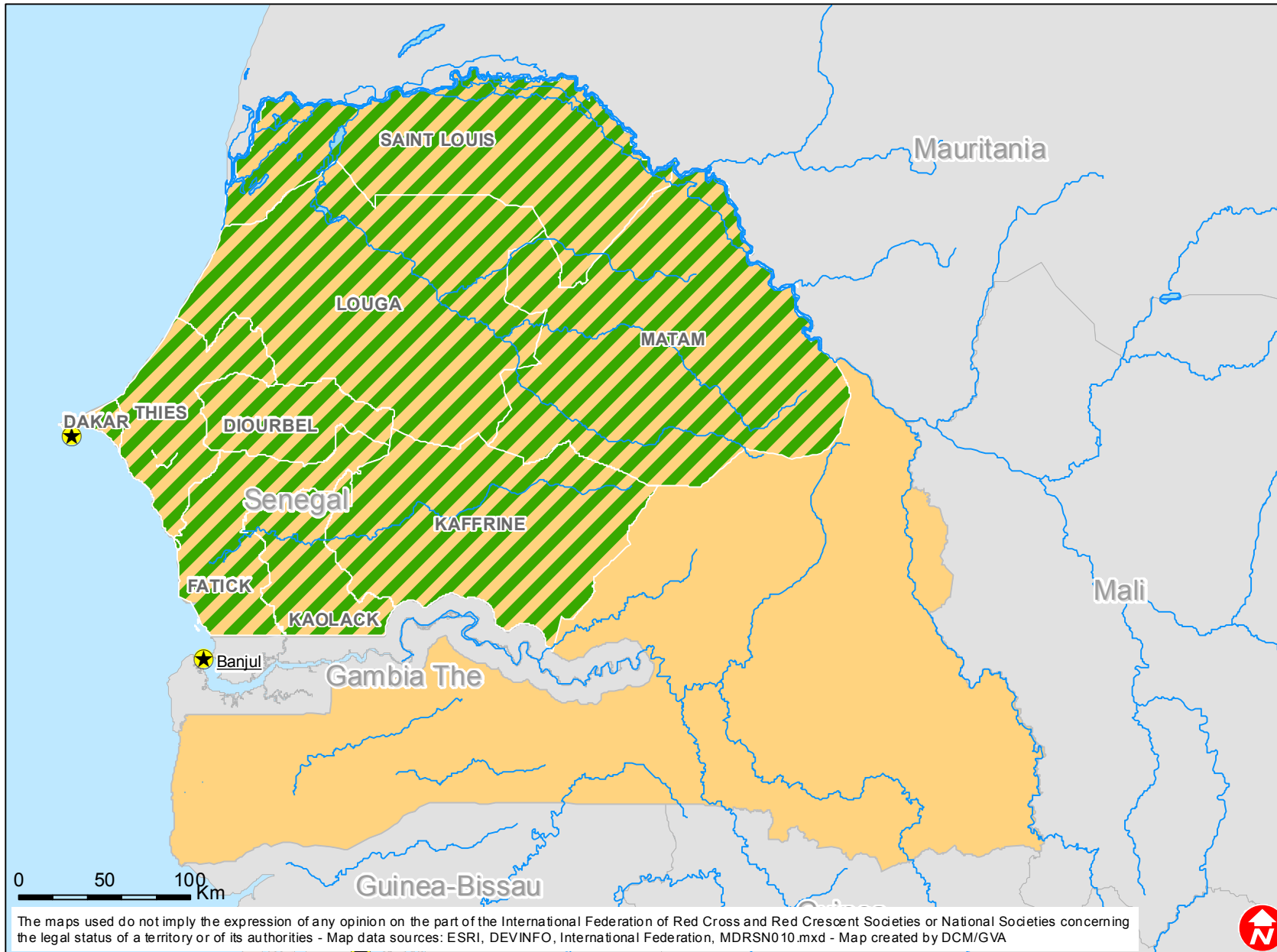
1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.


Senegal Ebola outbreak budget

Budget Group	Multilateral Response	Budget CHF
Shelter - Relief	0	0
Shelter - Transitional	0	0
Construction - Housing	0	0
Construction - Facilities	0	0
Construction - Materials	0	0
Clothing & Textiles	0	0
Food	0	0
Seeds & Plants	0	0
Water, Sanitation & Hygiene	6,226	6,226
Medical & First Aid	73,081	73,081
Teaching Materials	6,586	6,586
Utensils & Tools	0	0
Other Supplies & Services	0	0
Emergency Response Units		0
Cash Disbursements	0	0
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	85,893	85,893
Land & Buildings	0	0
Vehicles Purchase	0	0
Computer & Telecom Equipment	0	0
Office/Household Furniture & Equipment	0	0
Medical Equipment	0	0
Other Machinery & Equipment	0	0
Total LAND, VEHICLES AND EQUIPMENT	0	0
Storage, Warehousing	0	0
Distribution & Monitoring	0	0
Transport & Vehicle Costs	9,532	9,532
Logistics Services	0	0
Total LOGISTICS, TRANSPORT AND STORAGE	9,532	9,532
International Staff	12,000	12,000
National Staff	1,057	1,057
National Society Staff	23,792	23,792
Volunteers	72,448	72,448
Total PERSONNEL	109,297	109,297
Consultants	0	0
Professional Fees	0	0
Total CONSULTANTS & PROFESSIONAL FEES	0	0
Workshops & Training	3,321	3,321
Total WORKSHOP & TRAINING	3,321	3,321
Travel	0	0
Information & Public Relations	19,999	19,999
Office Costs	5,660	5,660
Communications	3,208	3,208
Financial Charges	1,132	1,132
Other General Expenses	0	0
Shared Support Services		
Total GENERAL EXPENDITURES	29,999	29,999
Programme and Supplementary Services Recovery	15,473	15,473
Total INDIRECT COSTS	15,473	15,473
TOTAL BUDGET	253,515	253,515
NET DREF NEEDS	253,515	253,515



Senegal: Ebola Virus Disease (EVD)



 Affected regions

