Ebola Virus Disease Preparedness

EVD Preparedness Meeting: Check List and Dashboard

14-16 January 2015









Outline of the Presentation

- The revised checklist
- Design of the dashboard
- Utility of the dashboard
- Discussion and questions

Revised Checklist









Co	E		e to text based	Tasks Systems (IMS) to ensure a coordina	ted respor	nse to
	on feedback from PST			Within days	Yes /No	
	missions			ion and incident management to Visaster Management Structures, m for strategic, operational and .nunication channels within	30	
	EOC/N een EOC/IMS, partners and the p		een EOC/IMS, partners and the pu			
		support 🔪	ntry level.			
	1.2	Test coordin.	and operations through simulation	exercises and drills.	30	
	1.3	Contingency o	ergency plans exist and are fully budgeted for fund identification.			
	1.4		view of current policy and legislative frameworks to ensure that they will provide the thorization for the preparedness measures that are proposed.			

dditional Preparedness Requirements					
			days	/No	
5	Membership	te Committee / Ebola Task Force at national and in "at-risk" districts	30		
	are review	updated.			
6	Identify	designate Incident Manager / Operations Manager who are	30		
	empo	ke operational decisions.			
7	Estz	personnel at the subnational / district level for localized EOC/IMS	30		

Id level

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nittee / Ebola Task Force at the 30

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National Emergency

Preparedness plan Operational Plan

Materials for EOC

Logistics (office, vehicles,

supplies, communication

Categorisation into minimum and addition requirements

- Dedicated representatives from line and technical ministries
- ٠ Partners

- sup-national incident Manager /Operations Manager
- Local focal point person from line and technical ministries
- Representatives from community leaders (religious, women's, youth etc.)

Updates to reference materials Equipment / Materials:

30

- ٠ MoH ٠ WHO equipment, computers etc.) CDC ٠ IANPHI . WCC
 - OCHA ٠

- Key reference documents
- Ebola response road map WHO 2014.
- Ebola and Marburg virus disease epidemics preparedness, alert, control and evaluation, WHO 2014.
- EOC-Net.
- WHO Preparedness ٠ Dashboard

Revised Checklist





Component - 11 Logistics

11.11

Description: Logistics capacities are

Description and Tasks place to provide cross functional support.

Minimum Preparedness Requirem Within Yes days /No 11.1 Implement logistics componen 1S coordination level (National and sub-30 national), to define and put in p uested means within the stipulated time frame and quality standards. 11.2 Evaluate storage capacities and th rement system in place, identify 30 stockpile needs across all management system if re essential element (see re Addition of Logistics as a ng 11.3 Identify and ensure all tra 60 to needs and security rec separate functional area should be identified and (driver should be trained 11.4 Evaluate if the existing th 30 Identify and establish an national and international levels from the point of origin to the reference lab, including the financial resources for such activities. 11.5 Identify and assess potential isolation structures in respect to: infection control and 30 adequate isolation possibilities, waste management, water and power supply. Identify and train the human resources required to ensure all activities can be 11.6 60 implemented (logistics, drivers, safe burial teams, security, administration, procurement, storekeeper, etc.). 11.7 Map out all available resources including localisation of new potential with possible capacities. 11.8 Identify suppliers of standard essential items for emergency response locally/ internationally. Assess their delivery capacity/time. It may be worth to develop presupply agreement. **Additional Preparedness Requirements** Within Yes days /No Identify supply needs (23 essential items), optimise supply chains, define and 30 11.9 implement supply SOPs, to reduce delivery time and improve replenishment processes. 11.10 Evaluate the communication network capacity and if required establish a 60 telecommunication system (radio, Vsat, GSM, etc.) to ensure all operations.

Ensure identified medical structures are functioning according to infection control

guidelines, with adequate isolation, waste management, water and power supply,

Key reference documents

- technical specifications for PPE, waste management and isolation centres
- Management of dead bodies,
- Supply chain planning and calculator tool
- SIMS,

30

- Guideline on transport for sample collection
- List and ratio for the 23 essential items for Ebola management

What does it do, who is if for?







No activities within the functional area yet started One or more activity started 75% or more of agragated activities within a functional area comlpeted

Tracks aggregates progress on checklist activities

How is it constructed?

Addition of weighting

Closing borders

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	COMPONENT	Chec klist	Minimum Requirement for Global Preparedness	Weighting	
		1.1	Establish coherent plans and procedures for coordination and plant management to include liaison between the Health EOC and National Disaster Management Structures, as a minimum this should include: ToRs and Organigram for strategic, operational and tactical levels of coordination and management; Communication channels within EOC/IMS and between EOC/IMS, partners and the public; Coordination for donor support at the country level.	30%	In Process
	Coordination	1.2	Test coordination and operations through simulation exercises and drills.	30%	Not Started
1		1.3	Contingency or emergency plans exist and are fully budgeted for fund identification.	20%	Completed
		1.4	Review of current policy and legislative frameworks to ensure that they will provide the authorization for the preparedness measures that are proposed.	20%	In Process
					20%

Country assessment made by the PST

Percentage of completed activities

How is it constructed



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NENT	Chec klist	Minimum Requirement Tasks for Global Preparedness	Weighting	
	1.1	Establish coherent plans and procedures for coordination and incident management to include liaison between the Health EOC and National Disaster Management Structures, as a minimum this should include: ToRs and Organigram for strategic, operational and tactical levels of coordination and management; Communication channels within EOC/IMS and between EOC/IMS, partners and the public; Coordination for donor support at the country level.	30%	In Process
	1.2	Test coordination and operations through simulation exercises and drills.	30%	Not Started
dination	1.3	Contingency or emergency plans exist and are fully budgeted for fund identification.	20%	Completed
	1.4	Review of current policy and legislative frameworks to ensure that they will provide the authorization for the preparedness measures that are proposed.		In Process
				2007
				20%
	Chec	Additional Requirement Tasks for Priority Countries	Weighting	

klist	Additional Requirement Tasks for Phoney countries	weighting	
1.5	Membership to the Committee / Ebola Task Force at national and in "at-risk" districts are reviewed and updated.	25%	Completed
1.6	ldentify, train and designate incident Manager / Operations Manager who are empowered to make operational decisions.	20%	In Process
1.7	Establish EOC/IMS personnel at the subnational / district level for localized EOC/IMS coordination and management.	20%	Not Started
1.8	Implementation of a multisectoral and functional committee / Ebola Task Force at the national and subnational / district levels.	20%	Not Started
1.9	Identify a physical location for the Health EOC.	15%	Completed
			40%

Aggregation of minimum and additional activities



How is it accessed?



Global Level



Country level by 11 Functional areas

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👍 🧉 Home - Ebola Data Hub					
	1			English (date format: en-US)
World Health Organization	Info Hu	b (Ebola)			
Organization					
					_
Home Site Admin Datasets Admin Datasets Analysis Progress Surveys About					
					_
Ebola preparedness / MLI, as of ()				Facts sheet	
	Minimum	Additional		Contact: a contactMailto	
		Preparedness Requirements		Training resources	
Overall rating	0%	0%	0%	0	
Coordination	30%	75%	52%		
Rapid Response Team (RRT)	0%	20%	10%		
Public Awareness and Community Engagement	50%		50%		
Infection Prevention & Control (IPC)	30%	100%	65%		
Case Management	0%	0%	0%		
Safe and dignified burials Epidemiological Surveillance	50%	35%	42%		
Contact Tracing	60% 50%	0%	25%		
Laboratory	75%	0.76	75%		
Travel/Point of Entry(PoE)	70%	50%	60%		
Budget	70%	50%	60%		
Logistics	0%	0%	0%		
			,		
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					🔍 100% 🔻 .

Country level by activities

http://localhos	t:25479/survey/public/16/ML	# P -	🖒 <i> (</i> WHO Ebola Hub	×	☆☆
🦻 🍯 Home - Ebola Data Hul)				
		World Health Organization	Info Hub (Ebola)		Reporting
Home Site Admin Datasets A <u>Ebola preparedness</u> / M		Progress Surveys About		Facts sheet	
Overall	Coordination Case Management	Rapid Response Team (RRT) Safe and dignified burials	Public Awareness and Communit	Contact: a contactMailt	0
Contact Tracing	Laboratory	Travel/Point of Entry(PoE)	Budget		
Logistics Infection Prevention & Control Minimum Preparedness	(IPC)	Additional Preparedness	55%		Quick navigation
Requirements Strengthen infection prevention and control guidelines and SOPS in all health facilities.	missing comments	Requirements Identify and equip health facilities in setting up basic isolation un (2 beds) for potential EVD cs in	missing comments	_	
Provide health facilities with basic hygiene, sanitation, disinfection, PPE including running water and electricity. Priority should be given to hospitals; then health centres in priority	missing comments	regional and district hospitals and all designa. points of entry.			On going status updates
districts. Equip and adequately train healthcare workers including environmental health personnel, hygienists / cleaners on additional IPC	missing comments		guide	ages to too lines, train ckages etc.	ning

Dashboard Updates

	alhost:25479/survey/validate/16/MLI# ♀ ✔ ⊘ ▼ ♂ ⊘ WHO Ebola Hub × ☆
Home - Ebola I	
	English (date format: en-US) World Health Organization Info Hub (Ebola)
	asets Admin Datasets Analysis Progress Surveys About Task: Provide health facilities with basic hygiene, sanitation, disinfection, PPE including running water and electricity. Priority should be given to hospitals; then health centres in priority districts.
Activity status	Rating: O No O Partly Ves Please comment your rating
	missing comments
	Save, Next Save, Close Close
	Ongoing updates and document uploads
	• • 100% •:



Closing borders Cases 1.093

Questions



KEEP CALM AND DON'T SHOOT THE MESSENGER