

**Ebola virus disease
preparedness
strengthening team**

Mali country visit

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Executive summary

As recently demonstrated in Mali, the evolving outbreak of Ebola virus disease (EVD) in West Africa poses a considerable risk to countries in close geographical proximity to those with intense, widespread transmission. If there is an adequate level of preparation, introduction of the virus can be contained before a large outbreak develops. WHO, with partners including the United States Centers for Disease Control and Prevention (CDC), is deploying international “preparedness strengthening teams” to help unaffected countries build on their current preparedness and planning.

In August 2014, the WHO Director-General declared the EVD outbreak a public health emergency of international concern under the International Health Regulations (2005) (IHR). The IHR Emergency Committee recommended that unaffected states with land borders adjoining states in which there was Ebola transmission should urgently establish surveillance for clusters of unexplained fever or deaths due to febrile illness; establish access to a qualified diagnostic laboratory for EVD; ensure that basic infection prevention and control measures are in place in health care facilities and that health workers are aware of and trained in the appropriate procedures; and establish rapid response teams with the capacity to investigate and manage EVD cases and their contacts.

EVD preparedness is also supported by the United Nations Mission for Emergency Ebola Response, the five strategic pillars of which are to: stop the outbreak, treat infected patients, ensure essential services, preserve stability and prevent further outbreaks. A consultation between WHO and partners on EVD preparedness and readiness, held in Brazzaville on 8–10 October 2014, agreed on intensified, harmonized, coordinated support to currently unaffected countries. WHO is intensifying preparedness to ensure immediate outbreak response capacity in Benin, Burkina Faso, Cameroon, the Central African Republic, Cote d’Ivoire, the Democratic Republic of the Congo, Gambia, Ghana, Guinea Bissau, Mali, Mauritania, Nigeria, Senegal and Togo.

The immediate objective of the country visit to Mali was to ensure that Mali is as operationally ready as possible to effectively and safely detect, investigate and report potential EVD cases and to mount an effective response that will prevent a larger outbreak. During the country visit, Mali confirmed its first case of EVD. The joint team for strengthening preparedness for EVD was composed of representatives of Mali’s Ministry of Health, WHO, CDC, the National Public Health Institute in Quebec (Canada), Johns Hopkins University and other partners.

After technical working group meetings, field visits, a “table-top” exercise and a hospital-based simulation exercise were undertaken. Key strengths and weaknesses were identified, and specific areas for improvement were proposed to the Ministry of Health, as follows:

1. Coordination

- Establish an operational system for coordination of technical teams under a command-and-control structure.
- Establish an emergency operations centre with a functional organigram to coordinate technical operations and implement preparedness and response activities.
- Establish technical teams by Ministerial decision or decree, nominate official focal points with operational decision-making authority, and nominate team members with clear terms of reference.
- For the incident management structure and the emergency operations centre:
 - Integrate all the human resources required for preparedness and response under the structure and chain of command.
 - Strengthen technical capacity and reinforce human resources within the structure.
- Ensure that logistical support is available to technical teams (including sampling equipment, means for infection prevention and control, transport, infrastructure and telecommunications).

2. Surveillance
 - Establish and strengthen a call centre to manage functioning hotlines 24 h/24 h, 7 d/7 d.
 - Enhance community surveillance and sensitization for rapid detection of suspected EVD cases.
 - Create a data management team in the emergency operations centre, with a standard database and tools for data collection.
3. Contact tracing
 - Prepare standard operating procedures for the identification and follow-up of contacts.
 - Train community focal points in contact tracing.
 - Decentralize contact-tracing teams.
4. Infection prevention and control
 - Accelerate the establishment of minimum standards for infection control (standard precautions) in all health care facilities in Mali.
 - Develop and implement specific EVD standard operating procedures for infection prevention and control in all health centres and hospitals.
5. Rapid response teams
 - Strengthen membership of the national rapid response team.
 - Establish rapid response teams at regional and district levels where necessary.
6. Case management

Ebola treatment centres:

 - Increase the number of Ebola treatment centres (two in Bamako and one in each region), and urgently:
 - Complete the two centres in Bamako (at the Centre pour le Développement de Vaccins/Centre national de l'Appui à la Lutte contre la Maladie (CVD/CNAM) and Mali Hospital) and make them operational according to international standards.
 - Establish Ebola treatment centres in Kayes and Sikasso.

Observation sites:

 - Reorient the current isolation sites to temporary observation sites or holding centres for patients before their transfer to regional or national Ebola treatment centres.
 - Establish two-bed observation rooms in each district referral centre, with the necessary infection control and case management resources.

Safe, dignified burials:

 - Establish teams responsible for conducting safe burials according to WHO guidelines.
7. Social mobilization
 - Integrate community health staff (“relais communitaires”) in the detection of cases in the community.
 - Sensitize all Malians to the basic signs and symptoms of EVD and the risk of transmission; use sensitization activities to dispel myths and misconceptions.
8. Laboratory
 - List all laboratory technicians who are trained in procedures for confirming the presence of Ebola virus.
 - Strengthen procedures for the transport of samples in triple packaging.
9. Points of entry
 - Strengthen procedures and means for transporting suspected cases from points of entry to observation centres or Ebola treatment centres.

10. Budget

- Update detailed budgets of the contingency plan, the incident management structure and the emergency operations centre structure.
- Present the budgetary deficit to partners for financial support.
- Ensure funds for pre-positioning material at field level.

With the Ministry of Health and local partners in Mali, WHO, CDC and international partners will facilitate implementation of the national EVD action plan by:

- providing immediate and longer-term technical support to Mali to achieve 30-, 60- and 90-day goals, with follow-up visits by experts in the fields of infection prevention and control, clinical management and surveillance;
- finalizing and costing the operational action plan for strengthening preparedness and response in the national contingency plan;
- preparing and implementing a comprehensive plan for training at national, regional and local levels with WHO reference materials and tools;
- cooperating closely with the United Nations country team to support and monitor technical progress; and
- providing logistic support for the necessary preparedness and response operations at country level.

These follow-up steps are already being implemented in the country.

Introduction

Given the evolving situation of Ebola virus disease (EVD), there is a considerable risk that cases will appear in currently unaffected countries. With adequate preparation, introduction of the virus can be contained before a large outbreak develops. WHO is currently deploying international “preparedness strengthening teams” to help unaffected countries strengthen or plan preparedness. The teams are formed with national and international partners and networks such as the Global Outbreak Alert and Response Network, the International Association of National Public Health Institutes and the United States Centers for Disease Control and Prevention (CDC). The teams visit countries to support them in developing operational readiness for EVD to the greatest degree possible.

In August 2014, the WHO Director-General declared the EVD outbreak a public health emergency of international concern under the International Health Regulations (2005) (IHR). The IHR Emergency Committee recommended that unaffected states with land borders adjoining states with Ebola transmission urgently establish surveillance for clusters of unexplained fever or deaths due to febrile illness; establish access to a qualified diagnostic laboratory for EVD; ensure that basic infection prevention and control measures are in place in health care facilities and that health workers are aware of and trained in appropriate procedures; and establish rapid response teams with the capacity to investigate and manage EVD cases and their contacts.

In particular, the IHR Emergency Committee recommended that countries:

- establish alert systems at:
 - major land border crossings with already affected countries (which are currently Guinea, Liberia, Nigeria and Sierra Leone) and
 - the airport, seaport (if any) and health care facilities, especially major hospitals, in the capital city;
- activate their epidemic management committee and rapid response teams;
- ensure that adequate infrastructure and supplies for infection prevention and control are available in health care facilities;
- ensure that health care workers have received training in the application of standard precautions and appropriate use of personal protective equipment (PPE); and
- consider activating public health emergency contingency plans at designated points of entry.

EVD preparedness is also supported by the United Nations Mission for Emergency Ebola Response, which has five strategic aims: to stop the outbreak, treat infected patients, ensure essential services,

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