WEEKLY HIGHLIGHTS

- On 12 January, IOM conducted an Emergency Simulation Exercise at Lungi International Airport to test and improve the entry and exit health screening process and general health security throughout the airport. IOM staff ran teams through six pre-planned scenarios to test the response of the various airport agencies in simulated health emergencies. About 100 people from medical screeners, port health, cleaners, army, police and Westminster Aviation Security Services, a private airport security provider, participated in the exercise. To bring as much reality as possible to the simulations, five Ebola survivors were recruited as ‘actors’ in the exercise.

- IOM conducted field visits to Port Loko and Makeni on 15 and 16 January 2015 to meet with implementing partner Oxfam at their field offices to map out next steps on training and coordination with each District Ebola Command Centre (DERC). Delivery of interim home care kits to partners’ field warehouses was finalized on 16 January 2015.

- The National Training Academy held one 3+2 day Clinical Infection Prevention & Control (IPC) simulated patient training course for 20 African Union health professionals from Kenya and a UNDP Medical Services team. A Training of Trainers was also held for two new modules to be delivered by WHO and the US Centers for Disease Control and Prevention (CDC) on the collection of swabs by burial teams and the collection of suspected cases by ambulance drivers.

- IOM’s Community Sensitization Exercise targeting coastal slums in the Freetown will continue through this week with 30 staff members are conducting door to door sensitization and community engagement activities.
**National Ebola Training Academy**

**Operational Highlights**

- 1x 3+2 day Clinical Infection Prevention & Control (IPC) simulated patient training was held for AU volunteers from Kenya and a UNDP Medical Services team.
- A compressed 1 day clinical IPC+ 2 day simulated patient course was provided for Partners in Health (PIH) in order to facilitate rapid deployment.
- 4x 3 day Infection Prevention & Control/ Personal Protective Equipment (IPC/PPE) courses were held. IPC/PPE training for survivors was recommended by PIH for placement in Ebola facilities in non clinical training roles.

**Curriculum Development**

- WHO photographed all stages of the PPE donning for the revised IPC module
- A meeting was held with WHO to review progress on corrections to the IPC module
- Permission was granted to include CDC’s curriculum web link on the IOM site. This endeavour is aimed at providing graduates with opportunities for continued learning.
- The student to trainer ratio is currently 4 to 1. This ratio facilitates the required hands-on instruction necessary to effectively deliver the practical 2 day component of the clinical session, and addresses the needs of illiterate students particularly in the basic IPC course.
- A Training of Trainers was held for two new modules to be delivered by WHO and CDC—collection of swabs by burial teams, and collection of suspected cases by ambulance drivers.
- Ongoing collaboration with CDC to provide a 2 day epidemiology training for AU volunteers—non-clinicians; public health, epidemiologists, pharmacists, humanitarians, and lab technicians. More than half of the AU members will deploy to the field to support ETCs, Holding Centres, case investigations, contact tracing, and outbreak investigations.

**Governance Development**

The inaugural Board of Governors meeting was held on January 16 at the National Ebola Response Center. The meeting was attended by the United Nations Mission for Ebola Emergency Response, the World Health Organisation, the UK Department for International Development, King’s Sierra Leone Partnership, Sierra Leone College of Medicine and Allied Health Sciences and IOM.

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**Cumulative Training Academy operational data for 01 December 2014 – 18 January 2015**

(weekly number in brackets)

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Number of courses run</th>
<th>Total number of National students</th>
<th>Total number of International Students</th>
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<tr>
<td>3 day Ebola clinician IPC</td>
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<td>44 (29)</td>
<td>145 (21)</td>
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<td>2 day simulated patient</td>
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<td></td>
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<tr>
<td>1 day Ebola clinical IPC</td>
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<td>17 (14)</td>
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<tr>
<td>2 day simulated patient</td>
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<td></td>
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<tr>
<td>1 day clinical augmentation</td>
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<td>3 day basic IPC/PPE</td>
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<td>1513 (217)</td>
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<tr>
<td>Total</td>
<td>30 (6)</td>
<td>1854</td>
<td>249</td>
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</table>
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**Distribution of Emergency Interim Care Packages for suspected Ebola cases**

IOM’s implementation partners held a training of trainers (TOT) of health promotion staff on 13 January 2015. The training was facilitated by Oxfam and ACF, with one session supported by IOM.

IOM attended the Social Mobilization Pillar messaging sub-committee meeting on 14 January 2015 to submit IEC materials and flipcharts for review by the sub-committee.

IOM conducted field visits to Port Loko and Makeni on 15 and 16 January 2015 respectively where staff met with Oxfam’s field offices to map out next steps on training and coordination with each District Ebola Command Centre (DERC). Key DERC staff and partners were engaged in each district to coordinate interim home care kit initiatives to ensure that implementation will fit into on-going Ebola response services. Issues around district-specific directives regarding waste disposal were discussed.

IOM finalized delivery of interim home care kits to partners’ field warehouses on 16 January 2015. Oxfam field offices will continue to liaise with each DERC and District Health Management Team (DHMT) to ensure follow up and relevant data capture. A field report on the visit has been drafted and shared with partners.

**Health and Humanitarian Border Management**

On 12 January, IOM implemented an Emergency Simulation Exercise in Sierra Leone’s Lungi International Airport to test and improve the entry and exit health screening process and general health security throughout the airport.

A recent increase in Ebola cases in Sierra Leone’s Port Loko District, notably among the approximately 85,000 inhabitants of Kaffu Bullom Chiefdom near the airport, has led to increased scrutiny of procedures for airport workers.

On 2nd January, a case of Ebola was confirmed among airport workers, raising the risk of spread of the disease between workers and travelers. With an estimated 1,500 people working in airport, the main health threat is that of airport staff moving in and out from hot-spots to their work place.
To face the challenge of airport workers’ movements and the prospect that more flights and airlines will operate at the airport in future, IOM plotted six possible response scenarios to run consecutively to test the operation of the various airport agencies in simulated health emergencies.

About 100 people from medical screeners, port health, cleaners, army, police and Westminster Aviation Security Services, a private airport security provider, participated in the exercise. By displaying simulated symptoms of Ebola, giving support, taking control of the simulated situation, then disinfecting quarantined areas, units worked with an eye towards improving collaboration between airport agencies.

To bring as much reality as possible to the simulations and to rigorously test the airport’s health security process, five Ebola survivors were recruited as ‘actors’ in the exercise. Their participation also was an attempt to help them to escape the associated stigma of the virus.

Identifying gaps in health defence systems, and highlighting and targeting areas for further training were among the objectives of the exercise to improve the airport’s security. “In health emergencies, the greatest challenge is swiftly organizing the medical professionals to assume command and control of the situation, requiring confidence, communication and practice,” said IOM Health and Humanitarian Border Management Project Manager Ben Potter.

“The emergency simulation exercise provides the perfect environment to rehearse and refine these skills. Knowledge is great, but in an emergency, if you can’t perform under pressure it is worthless.”

—Ben Potter, IOM Project Manager—

News Headlines (click links for story/video):

Ebola survivors in Sierra Leone key in training health providers, CBC, 13 January
The role of survivors has proven invaluable to health care professionals taking part in training courses run by IOM and the World Health Organization (WHO)

‘We Found 244 Ebola Patients Through House-to-House Searches’, Ebola Deeply, 13 January
Sierra Leone’s National Ebola Response Center (NERC) has launched phase two of an operation designed to curb the spread of Ebola in the western part of the country.

IAEA Project to Train African Doctors in Ebola Diagnosis, Voice of America, 15 January

In Sierra Leone, Sexual Transmission of Ebola Threatens to Undermine Progress, Ebola Deeply, 15 January— Authorities in Sierra Leone have raised concerns about the sexual transmission of Ebola, in the period after male survivors of the disease have been discharged from treatment centers.

Ebola is leaving a new generation of orphans, Public International Radio, 16 January