

## FINAL REPORT

**Organization:** Women and Health Alliance (WAHA) International

**Name of Project:** Increasing capacity to effectively identify, manage and refer Ebola Virus Disease patients by supporting primary and secondary health facilities on triage and infection prevention and control.

**Agreement No.:** AID-OFDA-F-16-00001

**Grant Dates:** August 17, 2015 – March 31, 2016

**Location:** Guinea, Kindia, Boke & Forecariah Prefectures

| Number of People Targeted  |     | Cumulative Reached |     |
|--|-----|--------------------|-----|
| Total  | IDP | Total              | IDP |
| 131 400<br>initial estimation  |     |                    |     |
| <b>97 328</b> after establishment of baseline, considering the increase of the project from 6 to 7.5 months and that 6 health centres have not been supported for the last 1.5 months of the project | 0   | 116 784            | 0   |

### Programmatic Achievements

#### Implement effective triage of patients:

Set up the triage in all the targeted health structures.

| Region | Prefecture | Name of Hospital(s) | Progress made | Health Center names   | Progress made  |
|--------|------------|---------------------|---------------|---|--|
| Boke   | Boke       | Regional de Boké    | Implemented   | Bintoumodia   | Implemented  |
|        |            | ANAIM de Kamsar     | Implemented   | Kayenguissa<br>Dibia,<br>Sangarédi<br>Kanfarandé<br>Sansalé<br>Koulifanya | Implemented<br>Implemented<br>Implemented<br>Implemented*<br>Implemented*<br>Implemented |
| Kindia | Forécariah | Prefectoral         | Implemented   | Maferinya<br>Farmoriah<br>Sikhourou<br>Commune Urbaine<br>Benty           | Implemented<br>Implemented<br>Implemented<br>Implemented                                 |
| Kindia | Kindia     |                     |               | Mambia<br>Friguigbé<br>Manquépas<br>Cassia<br>Madina Oula                 | Implemented*<br>Implemented*<br>Implemented<br>Implemented*<br>Implemented*              |

\* Activities at these health facilities stopped as of February 17, 2016

In the health facilities patients are screened for fever with digital forehead thermometers and checked for other symptoms at the entrance (i.e. diarrhoea, vomiting, nausea, muscle pain, joint pain, and cough). If the temperature is 37.5°Celsius or higher, they are evaluated as an at-risk patient and if needed isolated and assessed for suspected Ebola infection.

Health workers are equipped with personal protective equipment (PPE) and have no direct physical contact with the patients. Health workers are supervised by project staff that guides them through their work on a daily basis.

### **Improve IPC through the provision of training, equipment and supplies, with ongoing mentoring and supportive supervision**

#### **Training:**

**IPC:** out of 350 staff targeted to be trained in the initial project development phase, only 103 proved to be actually directly involved by IPC activities. We have trained 12 of these, as the other 91 IPC staff had in the meantime already been trained by the National Coordination of Ebola Response, WHO and JHPEIGO.

**Triage:** out of 200 total staff targeted to be trained in the project development phase, only 133 are actually directly involved with triage activities. We have trained 88 persons, as the remaining 45 triage staff had been already trained by the National Coordination of Ebola Response, WHO and JHPEIGO.

#### **Equipment and Supplies:**

100% of equipment and supplies have been bought and distributed to the targeted health structures.

As of February 17, 2016 no more new equipment and supplies have been provided to the following health facilities: Kanfarandé, Sansalé, Mambia, Madina Oula, Cassia and Friguigbé.

#### **Mentoring and Supervision:**

Continuous mentoring and supervision has been performed by our supervisors once a week per health facility on specific IPC and triage themes (use of thermo flash, use of protective equipment, interview techniques etc.).

A detailed evaluation is conducted each month.

#### **Improvements of WASH infrastructure:**

14 triage units were rehabilitated and WASH activities were conducted. At these health facilities a triage unit was ensured in accordance with national standards/regulations and we thus completed existing infrastructure including for WASH and sanitation to ensure the availability of:

- A dressing zone
- An undressing zone
- A room for protective equipment
- A consultation room
- An isolation room
- A toilet

Description of the work in each health facility:

|                   | Health facility     |  | Activities done   |                     |   |
|-------------------|---------------------|--|---|---------------------|---|
| <b>Boké</b>       |                     |  |   |                     |   |
| 1                 | Boké Hospital       | Hospital and Triage Unit Rehabilitation  | Triage unit (TU) walls, wood, doors and windows painted | WASH and sanitation | Triage unit floor tiles                         |
|                   |                     |  | Patient circuit arrangement                             |                     | TU toilets walls tiles                          |
|                   |                     |  | Guard shelter rehabilitation                            |                     | TU toilets floor tiles                          |
|                   |                     |  | Glass window for interview                              |                     | Bio medical waste dust bins                     |
|                   |                     |  | External consultation room painted                      |                     |   |
| 2                 | ANAIM Hospital      | Hospital and Triage Unit Rehabilitation  | TU Walls, wood, doors and windows Paint                 | WASH and sanitation | Changing area (2,5mx2,5m)                       |
|                   |                     |  | Glass window for interview                              |                     | Toilet in isolation room (1,5mx1,5m)            |
|                   |                     |  |   |                     | Sewage Pit (1,5mx2mx3m)                         |
|                   |                     |  |   |                     | Concrete beam on sewage gutter                  |
|                   |                     |  |   |                     | Bio medical waste dust bins                     |
|                   |                     | Water pipe connection to existing system |   |                     |   |
| 3                 | CS Bintoumodia      | Triage Unit Rehabilitation               |   | WASH and sanitation | TU toilets walls tiles                          |
|                   |                     |  | Triage unit fencing with wire mesh                      |                     |   |
| 4                 | CS Kayenguissa      | Triage Unit Rehabilitation               |   | WASH and sanitation | TU toilets walls tiles                          |
|                   |                     |  | Triage unit fencing with wire mesh                      |                     |   |
| 5                 | CS Dibia            | Triage Unit Rehabilitation               |   | WASH and sanitation | TU toilets walls tiles                          |
|                   |                     |  | Triage unit fencing with wire mesh                      |                     |   |
| 6                 | CSA Sangaredi       | Triage Unit Rehabilitation               | Patient entry door                                      | WASH and sanitation | TU toilets walls tiles                          |
|                   |                     |  | Wooden sheet external covers                            |                     | TU toilets floor tiles                          |
|                   |                     |  | Triage unit fencing with wire mesh                      |                     | Bio medical waste dust bins                     |
|                   |                     |  |   |                     | Water pipe connection to existing system        |
| 7                 | CS Koulifanya       |  | Sanitary blocs rehabilitations (tiles, paint, doors...) | WASH and sanitation | Triage unit floor tiles                         |
|                   |                     |  |   |                     | TU toilets floor tiles                          |
|                   |                     |  |   |                     | Bio medical waste dust bins                     |
|                   |                     |  |   |                     | Waste area (incinerator, laundry, bin, pits...) |
| <b>Forecariah</b> |                     |  |   |                     |   |
| 8                 | Forecariah Hospital | Hospital and Triage Unit Rehabilitation  | Wooden sheet external covers                            | WASH and sanitation | Triage unit floor tiles                         |
|                   |                     |  | External consultation room paint                        |                     | TU toilets walls tiles                          |
|                   |                     |  | Lighting panels in hospital                             |                     | TU toilets floor tiles                          |

|               |               |                            |   |                     |   |
|---------------|---------------|----------------------------|---|---------------------|---|
|               |               |                            |   |                     | WC  |
|               |               |                            |   |                     | Water pipe connection to existing system        |
|               |               |                            |   |                     | Bio medical waste dust bins                     |
|               |               |                            |   |                     | Waste area (incinerator, laundry, bin, pits...) |
| 9             | CS Mafarenyah | Triage Unit Rehabilitation | Sanitary blocs rehabilitations (tiles, paint, doors...) | WASH and sanitation | TU toilets walls tiles                          |
| 10            | CS Faramoriah | Triage Unit Rehabilitation | Wooden sheet external covers                            | WASH and sanitation | TU toilets walls tiles                          |
| 11            | CS Sikhourou  | Triage Unit Rehabilitation | Wooden sheet external covers                            | WASH and sanitation | TU toilets walls tiles                          |
| 12            | CSU           | Triage Unit Rehabilitation | Wooden sheet external covers                            | WASH and sanitation | TU toilets walls tiles                          |
|               |               |                            | Triage unit fencing with wire mesh                      |                     | Bio medical waste dust bins                     |
| 13            | CS Benty      | Triage Unit Rehabilitation | Wooden sheet external covers                            | WASH and sanitation | TU toilets walls tiles                          |
|               |               |                            | Triage unit fencing with wire mesh                      |                     | Bio medical waste dust bins                     |
|               |               |                            |   |                     | Waste area (incinerator, laundry, bin, pits...) |
| <b>Kindia</b> |               |                            |   |                     |   |
| 14            | Manquépas     |                            |   | WASH and sanitation | Toilets floor tiles                             |
|               |               |                            |   |                     | Toilets paint                                   |
|               |               |                            |   |                     | Waste area (incinerator, laundry, bin, pits...) |

- **Monitor and evaluate triage protocols and systems:**

Triage protocols and systems implemented are those recommended by IPC Cluster.

- **Referral**

- Referral training has been provided to as to 12 male ambulance drivers.
- Monitoring that IPC protocols are correctly implemented for preparation and transportation of cases: IPC protocols are respected. We put at disposal of the Coordination one moto-ambulance per hospital that is to be used as needed in addition to the hospital's own ambulances.
- Establishment of monitoring systems for all referrals of suspected or confirmed cases that are made, and ensure follow up of ambulances between their departure and arrival points: The tools to ensure the data collection of referrals are in place.

## **Description of assessments and surveillance data used to measure results.**

Project staff has conducted assessments and used surveillance data to measure results in all the supported health facilities. Among the tools that have been used were weekly surveillance reports, weekly EVD triage reports as well as weekly and monthly supervision forms to assess triage and IPC activities.

Evaluation forms have been used to assess IPC and triage activities according IPC norms and protocols, triage staff management, hand washing, triage zone environment, bio-medical waste management and decontamination.

The forms used were approved by the National Coordination for Ebola Response.

EVD epidemic data are collected daily and shared during coordination meeting with all partners. These data are:

- Number of alerts
- Number of suspected cases
- Number of referred cases
- Number of contacts
- Number of followed contacts
- Number of contacts discharged
- Number of community deaths
- Number of community burial

## **Success stories and an explanation of successes achieved, constraints encountered, and adjustments made for achieving the project's objective.**

### Success stories:

Due to the successful triage system and IPC implementation we have been able to increase preparedness for immediate and save EVD detection at the targeted health facilities with as an immediate effect, minimizing the risk for health workers and non-EVD patients contracting the virus.

At project end efficient triage systems are been operational in all the targeted health facilities and triage staff is well trained in triage and IPC.

As part of this work we have carried out seven training sessions with pre-and final exit-tests showing 97% of trainees have fully acquired the necessary skills during this training.

While the majority of staff had received basic training in IPC from other providers, we have been able to further strengthen their capabilities through triage modules which include supervision of the correct application of the temperature measurement techniques, hand washing and overall agreed standard precautions as well as case definition and management of bio-medical waste. This support was mainly done during ongoing supervision and technical assistance of our team regarding the correct application of protocols.

As an essential element of triage and successful IPC relevant equipment has been provided and required infrastructure strengthening has been carried out.

Our project teams have mentored, accompanied and supervised different groups at triage units for the respect and implementation of the PCI norms and protocols in collaboration with the Ebola National Coordination and other International Organization.

As a result and IPC and related protocols are being respected in the targeted health facilities and as such all attendants (including patients, visitors, deliveries, etc.) to the health facilities are being

screened and all sick persons are being interviewed for check up for EVD case definition. During the 7.5 months of the project 116.784 users of the targeted health structures profited from these measures. During this period zero contamination to Ebola virus disease were reported.

At project start we noticed very low uptake of health facility based care and even medical staff at times did not access their place of work in fear of Ebola. With triage systems implementation in the targeted health facilities and training provided to medical and non medical staff on triage and IPC, the populations regained confidence to access the health facilities as shown by an increase of health facility use throughout the targeted health facilities.

### **Constraints encountered:**

The start of activities had been delayed in two health facilities due to geographic reasons - difficult access during the rainy season - : Sansalé and Kanfarandé

With regards to challenges in building the required semi-permanent triage infrastructure, it has been decided with the OFDA Guinea and Washington teams to stop all support activities at the following health facilities of Kanfarandé, Sansalé, Mambia, Madina Oula, Cassia and Friguiagbé as of February 17, 2016.

Low literacy levels caused challenges in particular with regards to training activities.

### **Adjustments made:**

Two health centers in Boké prefecture have been changed: Kassopo and Kolaboui, as they were already supported by IMC to perform triage. The Local and National Coordination has asked us to support two other health centers in replacement: Sangaredi Health Center and Bintoumodia Health Centers, both in Boké prefecture.

In view of our inability to carry out rehabilitation works that ensure semi-permanent triage structures in the 6 health facilities where such structures have been available, 6 of the 20 targeted health facilities, these health facilities have stopped to be supported as of February 17, 2016 (Kanfarandé, Sansalé, Mambia, Madina Oula, Cassia and Friguiagbé).

Training modules responded to low literacy rates. Trainers adapted accordingly through using more visual material and supporting trainees with filling out pre- and post-training tests.

### **Discussion of the overall performance of the project, including details of any discrepancies between expected and actual results and any recommendations for improving the design of the program.**

All planned activities have been carried including strengthening of triage systems and Infection Prevention Control, trainings, provision of equipment and supplies as well as infrastructure strengthening of the targeted health facilities.

The main challenges we encountered were with regards to changes in the requirement for setting up semi-permanent triage structures and our inability to respond to these due to the nature of this grant. While these changes have occurred after the project had started, in retrospect we would have considered suggesting in the initial program design the establishment of semi-permanent structures as to ensure the establishment of lasting structures.

The healthcare system in Guinea in terms of infrastructure and the country's ability to cope is still insufficient. Despite joint efforts to fight Ebola in Guinea, the Ebola Virus disease continues to threaten the country as has been shown by the most recent reappearance of the disease. Combined

with the Ebola survivors' potential risk to cause new infections and with regards to continued bad practice within the communities that put them at risk of contracting and spreading the disease, continued support and supervision of triage and IPC seems to be needed.

**Comparison of actual accomplishments, with the established goals and objectives, and expected results.**

| INDICATOR   | TARGET             | RESULT  | BRIEF NARRATIVE  |
|---|--------------------|---------|--|
| 1 No. of Health care facilities supported and/or rehabilitated        | 20 (16)            | 20 (16) | As of Feb 17 2016, 6 health facilities have no longer been supported.  |
| 2. No. of health care providers trained                               | 350 revised to 236 | 236     | The initial estimate of staff in need of training and supervision has been overestimated.<br><br>The majority of staff had already been trained by other providers until the start of our project - we thus trained the remaining staff and ensured that all staff had ongoing technical support, on-the-job training and supervision. |
| 3. No. of health facilities submitting weekly surveillance reports    | 20 (16)            | 20 (16) | As of Feb 17 2016, 6 health facilities have no longer been supported.  |
| 4. No. of positive or suspected cases detected and referred to an ETU | 50                 | 0       | No EVD suspected or positive case has been recorded in the supported health facilities   |
| 5. Increase in health facility utilization                            | 30%                | 20%     | Even though the impact of effective triage and IPC has resulted in re-establishing the population's trust in the safety of health facility use, the short time frame of the project and the initial delays it took with regards to establishing the required infrastructure did not allow us to reach our initial goal.                |

**Reasons why established goals/targets were not met, the impact on the program objective, and how the impact has been/will be addressed.**

As discussed above the main reasons for not achieving all targets have been

a) an overestimation of the number of staff in need of triage and IPC training combined with other actors carrying out training during the evaluation period of the proposal. We reacted to the later through including the already trained staff in our on-the-job training and supervision activities and thus ensured the efficient refreshment and application of skills.

and b) the inability to establish semi-permanent triage structures in 6 of the 20 targeted health facilities. In response there health facilities have been taken out of this program as of February 17, 2016.

**Other pertinent information including, success stories which illustrate the direct positive effects of the program; how unforeseen circumstances affected overall performance compared to original assumptions, how activities were accordingly adjusted or re-targeted.**

Despite Ebola continuing to threatening Guinea the targeted areas of Kindia, Boke & Forecariah Prefectures did not report any cases of Ebola during the project's duration.

Thanks to this program the targeted health facilities and its staff have been enabled to continuously provide effective triage and IPC which should continue to strengthen the target area in their fight against the disease.