

☒ Rwanda has been working on improving its preparedness in the event of an Ebola outbreak and many medical staff have technical training, for immediate emergency response and communication on Ebola case handling.

Kagabo John is a regional trader carrying out cross border transactions in Rwanda and Congo. Like many people living near Ebola-affected countries, he is concerned the disease will enter his own country, “I always cross from the town where I grew up here in Gisenyi and Goma and I always wondered what would happen if Ebola were to hit us here, would we be ready for it?”

Experts at WHO have the same concerns – and they are transforming these into action. Ebola has already been exported, albeit resulting only in small outbreaks, from the three most-affected countries to the neighboring countries of Mali, Nigeria and Senegal.

As a follow up of the training, the, Ministry of Health on the 29 October 2018 conducted a Rapid Response Team simulation exercise at Rugerero Health Centre (Ebola treatment center) or ETC located in Rubavu district.

Placed under the leadership of Gisenyi hospital, the exercise involved the Ministry of Health, Rwanda Migration Department, the Rwanda National Police , Rwanda red cross and the media.

The purpose of the exercise was to assess the operational readiness of Rwanda to respond to disease outbreaks. The simulation involved social mobilization experts, laboratory technicians, clinicians, ambulance technicians, epidemiologists and logisticians.

A replica of an Ebola Treatment Unit (ETU) was set up and health workers went through the steps of responding to a viral hemorrhagic fever outbreak. They covered coordination and communication, contact tracing, social mobilization, laboratory investigation and sample transportation, isolation and transportation of the patient, treatment and safe dignified burial.

The emergency simulation was organised based on the scenario “a probable/confirmed case of Ebola has just arrived at the border of Rwanda and DR Congo”, accompanied by the application of the following pre-established emergency measures:

Exercise scenario

At around 12:15 pm, the head of immigration at Gisenyi border was informed by the health personnel carrying out cross border travelers screening for higher fever at the border that one of the passengers entering Rwanda from Congo was presenting symptoms of the Ebola virus (fever over 39.5 temperature).



Travelers being tested for Ebola symptoms at the Gisenyi Goma border

In addition, the traveler confirmed that he had stayed during the last three weeks in a country where the Ebola virus is present.

The incident manager of the Health Inspection Department of Gisenyi hospital was alerted by the immigration officer via Radio Call and requested, based on the information that was provided, that the 'suspected case of an infectious disease at the border' be isolated and evacuated to the ETC .

As soon as the order was given, the victim was isolated, the medical inspectors arrived with an ambulance to examine the patient; after they declared it to be a probable case of Ebola, he was whisked away to the Ebola treatment facility in Rugerero using the Emergency and Ambulance Service of the Gisenyi Hospital.

After reaching the Ebola treatment Center in Rugerero, a specialist team (Rapid response team) wearing personal protective equipment(PPE) took over the probable case of the Ebola virus and transferred the patient to the male ward for more checkups(Laboratory workouts) to confirm the viral hemorrhagic disease.

Latter the patient was discharged after it was discovered that he had no Ebola despite having had a high temperature.

The second scenario was from the community where a case was reported by community health workers about a couple that had symptoms of Ebola and was in dire need of medical attention.

After the Center for Ebola treatment was alerted plus the police and all the concerned partners, an ambulance was dispatched with trained medical personnel equipped with personal protection gear ready to practice the different procedures

laid out in the Ebola emergency response plan.



After reaching the treatment facility, the internal clinical health procedures for such an event were followed and the patients were handled with all the necessary precaution to avoid contamination of the deadly Ebola virus by going through a disinfection procedure at site(Infection prevention & control) Or IPC's

According to this scenario, the wife survives the ordeal but the husband after three days succumbs to the deadly virus and is buried according to the procedures in order for the body not to contaminate the health workers ,the relatives and community



According to Gisenyi Hospital Director general, Lt Col Dr. William Kanyankore, the Ebola outbreaks and response in affected countries showed the world that the disease can be stopped if a country is adequately prepared from the onset that is why World health Organization (WHO) is now working with all countries at-risk list to help them meet the same standards for preparedness and response and simulation exercises for skills perfection and contamination risk reduction.

"In Rwanda, health teams have been provided with trainings on how to handle Ebola cases if they may so arise and this is why we are having these simulated exercises in hospitals and technical training, for immediate emergency response" said Dr William Kanyankore.

He added that these simulation exercises are being carried out throughout the whole country to help the country identify opportunities for improvement in order to strengthen Rwanda's preparedness in the event of an outbreak.

"The mission is timely, as Rwanda prepares for any Ebola outbreak. It has revealed a lot about our strengths and where more efforts are needed for us to do better, particularly in the area of coordination. It is every ones duty to report any suspect cases to help us to quickly respond and fight the deadly virus and save lives"

Assessment

According to the Director of Gisenyi Hospital, the exercise took place without

affecting people arriving and leaving the Gisenyi-Goma border and the surrounding border community.

The exercise enabled the participants to practice the different procedures laid out in the Ebola emergency response plan and to control the flow of information, from the immigration authorities at the border to those in charge at the Hospital, as well as the Health Inspection Department, the police and the residents of Gisenyi town in Rubavu District.

The simulation exercise contributed to the reinforcement of response capacities at the National and District level by testing the interactions and commentaries within the national health system.

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