

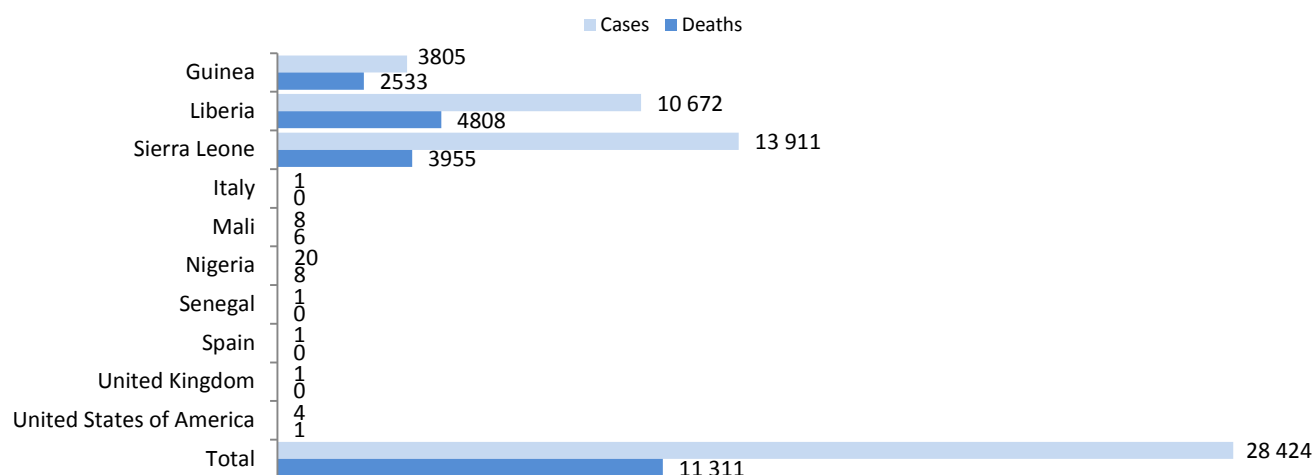
SUMMARY

- There were 4 confirmed cases of Ebola virus disease (EVD) reported in the week to 27 September, all in Guinea. Case incidence has remained below 10 cases per week since the end of July this year. Over the same period, transmission of the virus has been geographically confined to several small areas in western Guinea and Sierra Leone, marking a transition to a distinct, third phase of the epidemic. Improvements to case investigation and contact tracing, rapid isolation and treatment, and effective engagement with affected communities have all played a part in reducing case incidence to its current low level. A refined phase-3 response¹ coordinated by the Interagency Collaboration on Ebola² will build on these measures to drive case incidence to zero, and ensure a sustained end to EVD transmission. Enhanced capacity to rapidly identify a reintroduction (either from an area of active transmission or from an animal reservoir), or re-emergence of virus from a survivor, improved testing and counselling capacity as part of a comprehensive package to safeguard the welfare of survivors, and the increased use of innovative technologies—from vaccines to rapid diagnostic tests—are central to the phase-3 response framework.
- All 4 confirmed cases reported from Guinea this week had symptom onset in Forecariah, and are registered contacts of a 10-year-old girl who sought treatment in Forecariah after traveling from the Ratoma area of the capital, Conakry. She subsequently died on 14 September in the Forecariah sub-prefecture of Kaliah. Two of the 4 new cases are traditional healers who are reported to have treated the girl. Over 450 contacts are under follow-up in Guinea, including 1 in the prefecture of N'Zerekore due to the movement of a contact associated with the Ratoma chain of transmission. The majority of contacts (311) are located in Forecariah, with 147 in Conakry. All contacts are associated with the Ratoma chain of transmission. From 28 September to 1 October an active case-finding operation is taking place in the Conakry districts of Dixinn and Ratoma during which approximately 900 households will be visited.
- No new confirmed cases were reported from Sierra Leone in the week to 27 September: the second consecutive week with zero cases. Over 700 contacts remain under follow-up in Bombali related to the last reported case on 13 September. All contacts associated with the Kambia chain of transmission were scheduled to complete follow-up on 28 September.
- Robust surveillance measures are essential to ensure the rapid detection of any reintroduction or re-emergence of EVD in currently unaffected areas. A total of 784 samples were tested by 8 operational laboratories in Guinea in the week to 27 September. Analyses of the geographical distribution of samples collected indicate that 18 of 34 Guinean prefectures did not collect any samples from either live or dead suspected cases of EVD over the 1-week period. In Liberia, 1373 samples were collected from 100% (15 of 15) of counties in the week to 27 September. Laboratory capacity in the country has increased following the opening of a laboratory in Montserrado, bringing the total number of operational laboratories in the country to 4. Over the same period, 1969 samples were collected from 100% (14 of 14) of districts in Sierra Leone and tested by 9 operational laboratories. Surveillance in the three countries will be enhanced in line with the phase-3 response framework.

¹ Ebola response phase 3: Framework for achieving and sustaining a resilient zero: <http://www.who.int/csr/resources/publications/ebola/ebola-response-phase3/en/>

² See: <http://www.who.int/csr/disease/ebola/situation-reports/ice-reports/en/>

Figure 1: Confirmed, probable, and suspected EVD cases worldwide (data up to 27 September 2015)



COUNTRIES WITH WIDESPREAD AND INTENSE TRANSMISSION

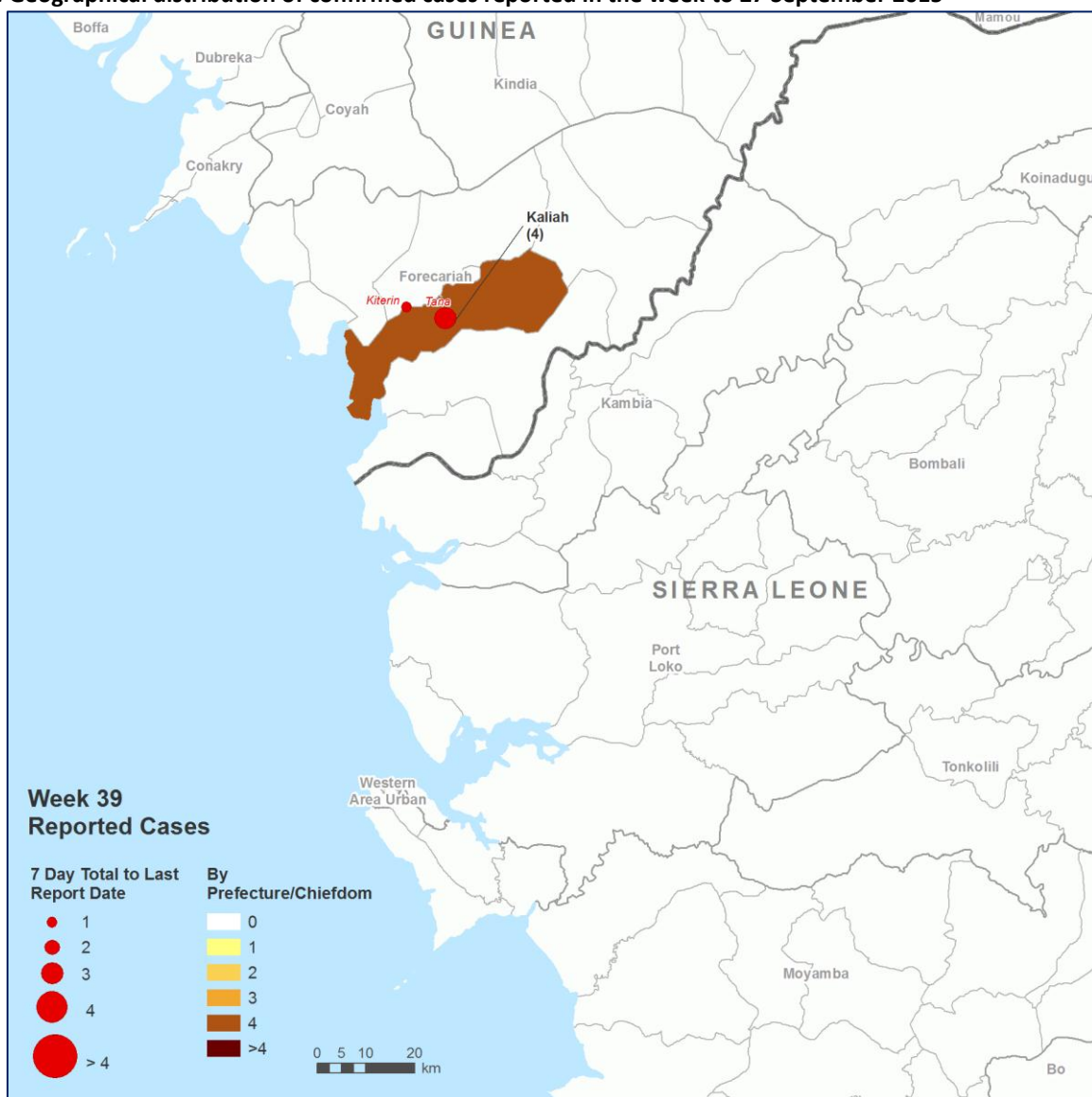
Table 1: Confirmed, probable, and suspected cases in Guinea, Liberia, and Sierra Leone

Country	Case definition	Cumulative cases	Cases in past 21 days	Cumulative deaths
Guinea	Confirmed	3344	6	2080
	Probable	453	*	453
	Suspected	8	*	‡
	Total	3805	6	2533
Liberia**	Confirmed	3151	-	‡
	Probable	1879	-	‡
	Suspected	5636	-	‡
	Total	10 666	-	4806
	Confirmed	6	0	2
	Probable	*	*	‡
	Suspected	‡	*	‡
	Total	6	0	2
Sierra Leone	Confirmed	8704	5	3589
	Probable	287	*	208
	Suspected	4920	*	158
	Total	13 911	5	3955
Total	Confirmed	15 205	11	‡
	Probable	2619	*	‡
	Suspected	10 564	*	‡
	Total	28 388	11	11 296

Data are based on official information reported by ministries of health. These numbers are subject to change due to ongoing reclassification, retrospective investigation and availability of laboratory results. *Not reported due to the high proportion of probable and suspected cases that are reclassified. ‡Data not available. **Cases reported before 9 May 2015 are shaded blue. Due to ongoing surveillance and retrospective validation of cases and deaths, these totals may be subject to revision. Liberia was declared free of Ebola virus transmission in the human population on 3 September 2015, and has now entered a period of heightened surveillance.

- Since the beginning of the outbreak there have been a total of 28 388 reported confirmed, probable, and suspected cases³ of EVD in Guinea, Liberia, and Sierra Leone (figure 1, table 1) up to 27 September, with 11 296 reported deaths (this total includes reported deaths among probable and suspected cases, although outcomes for many cases are unknown). Four new cases, all from Guinea, were reported in the week to 27 September.
- The total number of confirmed cases is similar in males and females (table 2). Compared with children (people aged 14 years and under), adults aged 15 to 44 years of age are approximately four times more likely to be affected in Guinea and Liberia, and three times more likely to be affected in Sierra Leone. Adults aged 45 years and above are approximately five times more likely to be affected in Guinea, and approximately four times more likely in Liberia and Sierra Leone.
- No new health worker infections were reported in the week to 27 September. Since the start of the outbreak a total of 881 confirmed health worker infections have been reported in Guinea, Liberia, and Sierra Leone; there have been 513 reported deaths (table 5).

Figure 2: Geographical distribution of confirmed cases reported in the week to 27 September 2015



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

³Case definition recommendations for Ebola or Marburg Virus Diseases: <http://www.who.int/csr/resources/publications/ebola/ebola-case-definition-contact-en.pdf?ua=1>

Table 2: Cumulative number of confirmed cases by sex and age group in Guinea, Liberia, and Sierra Leone

Country	Cumulative cases				
	By sex* (per 100 000 population)		By age group‡ (per 100 000 population)		
	Male	Female	0–14 years	15–44 years	45+ years
Guinea	1596 (29)	1742 (32)	532 (11)	1902 (41)	861 (55)
Liberia [§]	1911 (96)	1838 (93)	561 (33)	2060 (121)	703 (132)
Sierra Leone	4823 (169)	5118 (176)	1992 (82)	5636 (218)	2140 (290)

Population figures are based on estimates from the United Nations Department of Economic and Social Affairs.⁴ These numbers are subject to change due to ongoing reclassification, retrospective investigation and availability of laboratory results. *Excludes cases for which data on sex are not available. ‡Excludes cases for which data on age are not available. §Data are until 9 May 2015.

Table 3: Cases and contacts by district/prefecture over the past 3 weeks

Prefecture/ District	Week		21	22	23	24	25	26	27	Week 39	Contacts under follow up*	
	37	38	Sept	Sept	Sept	Sept	Sept	Sept				
	Guinea	Conakry	0	2	0	0	0	0	0			0
	Forecariah	0	0	0	0	0	0	0	2	2	4	311
	N'Zerekore	0	0	0	0	0	0	0	0	0	0	1
Subtotal		0	2	0	0	0	0	0	2	2	4	459
Sierra Leone	Bombali	1	0	0	0	0	0	0	0	0	0	781
	Kambia	4	0	0	0	0	0	0	0	0	0	14
Subtotal		5	0	0	0	0	0	0	0	0	0	795
Total		5	2	0	0	0	0	0	2	2	4	1254

Data are based on official information reported by ministries of health. These numbers are subject to change due to ongoing reclassification, retrospective investigation and availability of laboratory results. *Data as of 27 September 2015 for Guinea and Sierra Leone.

GUINEA

- Key performance indicators for the EVD response in Guinea are shown in table 6.
- Four new confirmed cases were reported from Guinea during the week ending 27 September (table 3, table 4, figure 2, figure 3). All 4 cases were reported from Forecariah, and are registered contacts of the 10-year old girl who was identified as an EVD-positive community death in Forecariah the previous week. She had travelled with her family to Forecariah after developing symptoms at home in the Ratoma area of the capital Conakry, and visited traditional healers in the Forecariah sub-prefecture of Kaliah before her death on 14 September. Two of the 4 new cases (both males, 26 and 46 years of age) are traditional healers. A wife of one of the traditional healers also tested positive for EVD a day after her husband. The remaining case is the sister of the 10-year-old girl. There are over 300 contacts (table 3) who have been identified in Forecariah in association with the movement of the 10-year-old girl, with approximately 150 contacts in Conakry associated with same chain of transmission.
- The *Ebola ça suffit!* ring vaccination trial is continuing in Guinea. All rings comprised of contacts and contacts of contacts associated with confirmed cases now receive immediate vaccination with the rVSV-ZEBOV Ebola vaccine. Previously, rings were randomly allocated to receive either immediate vaccination or vaccination 21 days after the confirmation of a case. On 1 September, the eligibility criteria for the trial were amended to allow the vaccination of children aged 6 years and above.
- From 28 September to 1 October Operation Porte-a-Porte will take place in the Conakry districts of Dixinn and Ratoma. Approximately 900 households will be visited during the operation, which will focus on active case

⁴ United Nations Department of Economic and Social Affairs: <http://esa.un.org/unpd/wpp/Excel-Data/population.htm>

finding and community engagement. Infection prevention and control (IPC) teams will also visit all health facilities within the area of operation to strengthen IPC capacity.

- 458 contacts were under follow-up on 27 September in Guinea in two adjacent prefectures, Conakry (147 contacts) and Forecariah (311 contacts). The prefecture of N'Zerekore also hosts a single contact. All contacts in Guinea are associated with the Ratoma chain of transmission.
- There was 1 (0.2%) unsafe burial reported in Guinea out of 521 reported community deaths during the week to 27 September, compared with 4 (0.8%) unsafe burials out of 520 reported community deaths during the previous week.
- Including both initial and repeat testing, a total of 784 laboratory samples were tested in the week to 27 September. Most tests (82% in the week to 27 September) are of post-mortem swabs taken to rule out EVD as the cause of death (figure 7, figure 8). Analyses of the geographical distribution of samples tested indicate that no samples from live or dead suspected cases of EVD were tested from over half (18 of 34) of Guinean prefectures during the week to 27 September (figure 7, figure 8). Most of the 18 prefectures with zero samples tested are located in the north and east of the country. Locations of the 8 operational laboratories in Guinea are shown in figure 8.
- Locations of the 8 operational Ebola treatment centres (ETCs) are shown in figure 6. No health worker infections were reported in the week to 27 September.

Table 4: Location and epidemiological status of confirmed cases reported in the 3 weeks to 27 September 2015

Country	Prefecture/ District	Sub- prefecture/ Chiefdom	Week 37	Week 38	Cases	Week 39 (21 - 27 September 2015)				Date of last confirmed case
			(7 - 13 Sept 2015)	(14 - 20 Sept 2015)		On contact list	Epi- link*	Unknown source of infection [†]	Confirmed community death [‡]	
Guinea	Conakry	Ratoma	0	1						16/09/2015
		Dixinn	0	1						19/09/2015
	Forecariah	Kaliah	0	0	4	4				27/09/2015
Subtotal			0	2	4	4	0	0	0	
Sierra	Bombali	Bombali Sebora	1	0						13/09/2015
Leone	Kambia	Tonko Limba	4	0						09/09/2015
Subtotal			5	0	0	0	0	0	0	
All			5	2	4	4	0	0	0	

Sub-prefectures/chiefdoms that reported one or more confirmed cases in the 7 days to 27 September are highlighted. *Epi-link refers to cases who were not registered as contacts of a previous case (possibly because they refused to cooperate or were untraceable), but who, after further epidemiological investigation, were found to have had contact with a previous case, OR refers to cases who are resident or are from a community with active transmission in the past 21 days. [†]Includes cases under epidemiological investigation. [‡]A case that is identified as a community death can also be registered as a contact, or subsequently be found to have had contact with a known case (epi-link), or have no known link to a previous case.

SIERRA LEONE

- Key performance indicators for the EVD response in Sierra Leone are shown in table 7.
- No new confirmed cases were reported from Sierra Leone in the week to 27 September. This is the second consecutive week that the country has recorded zero cases.
- The *Ebola ça suffit!* ring vaccination Phase 3 efficacy trial of the rVSV-ZEBOV vaccine has now been extended from Guinea to Sierra Leone. Contacts and contacts of contacts associated with new confirmed cases and who meet the trial's eligibility criteria will therefore be offered the vaccine.
- Over 750 contacts have been identified in association with the single case reported from Bombali on 13 September (table 3): a 16 year-old girl identified as EVD-positive after post-mortem testing. All contacts associated with the Kambia chain of transmission were scheduled to complete follow-up on 28 September.
- Locations of the 10 operational Ebola treatment centres (ETCs) in Sierra Leone are shown in figure 6. No health worker infections were reported in the week to 27 September.
- Laboratory indicators continue to reflect a heightened degree of vigilance, with 1969 new samples from all 14

Sierra Leonean districts tested in the week to 27 September (figure 7, figure 8). Most tests (77% in the week to 27 September) are of post-mortem swabs taken to rule out EVD as the cause of death (figure 7, figure 8).


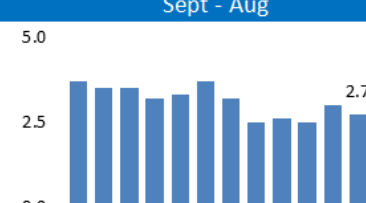

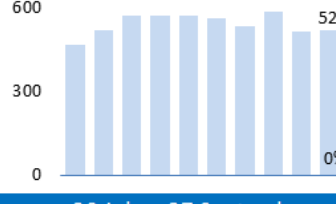
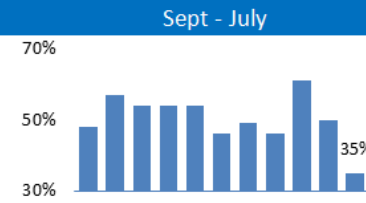
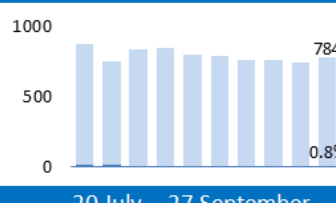
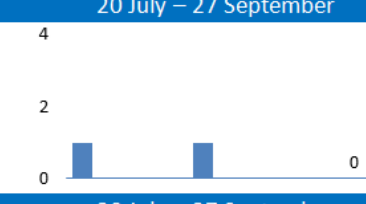

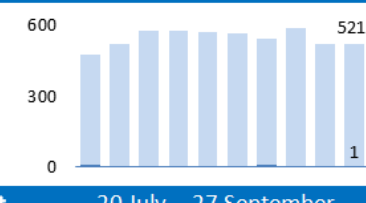
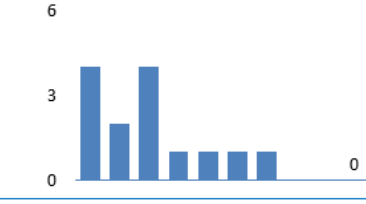
- In the week to 27 September there were 199 alerts of people who showed any symptom compatible with EVD, all of which were responded to within the same day. During the same period, there were 1647 notifications of burials, of which 1617 (96%) were responded to within the same day.
- Locations of the 8 operational laboratories in Sierra Leone are shown in figures 7 and 8.

Table 5: Ebola virus disease infections in health workers in Guinea, Liberia, and Sierra Leone

Country	Cases	Deaths
Guinea	196	100
Liberia*	378	192
Sierra Leone	307	221 [‡]
Total	881	513

Data are confirmed cases and deaths only, apart from deaths in Sierra Leone, which include confirmed, probable, and suspected deaths. *Data are until 9 May 2015. [‡]Data as of 17 February 2015.

Table 6: Key response performance indicators for Guinea

Indicator	Target	20 July – 27 September	Indicator	Target	Sept - Aug
Cases and deaths			Hospitalization		
Number of confirmed cases	Zero		Time between symptom onset and hospitalization (days) [‡]	<2 days	
Number of confirmed deaths	Zero		Outcome of treatment		
Proportion of EVD-positive reported community deaths	Zero		Case fatality rate (among hospitalized cases) [#]	<40%	
Diagnostic services			IPC and safety		
Number of samples tested and the percent of positive EVD results*			Number of newly infected health workers	Zero	
Contact tracing			Safe and dignified burials		
Percent of new confirmed cases from registered contacts	100%		Number of unsafe burials and the reported number of community deaths	Zero	
Community engagement			Community engagement		
			Number of districts with at least one security incident or other form of refusal to cooperate	Zero	

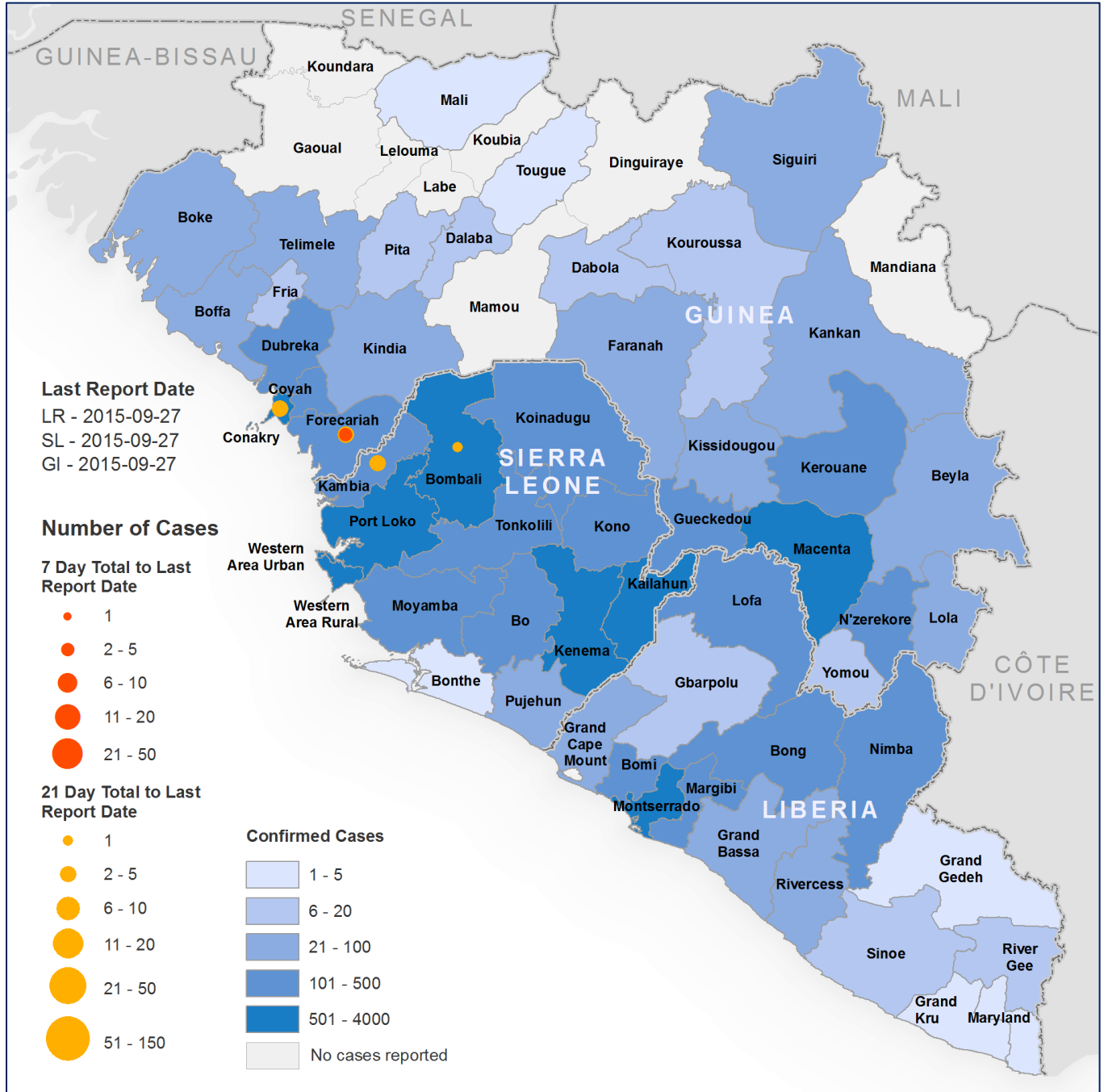
For definitions of key performance indicators see Annex 2. Data are given for 7-day periods. *Includes repeat samples. [‡]Data missing for 0–3% of cases. [#]Outcome data missing for 0–3% of hospitalized confirmed cases.

Table 7: Key response performance indicators for Sierra Leone

Indicator	Target	20 July – 27 September	Indicator	Target	Sept - July
Cases and deaths			Hospitalization		
Number of confirmed cases	Zero		Time between symptom onset and hospitalization (days) [‡]	<2 days	
Number of confirmed deaths	Zero		Outcome of treatment		
Proportion of EVD-positive reported community deaths	Zero		Case fatality rate (among hospitalized cases) [#]	<40%	
Diagnostic services			IPC and safety		
Number of samples tested and the percent of positive EVD results			Number of newly infected health workers	Zero	
Contact tracing			Safe and dignified burials		
Percent of new confirmed cases from registered contacts	100%		Number of reports of unsafe burials [§]	Zero	
			Community engagement		
			Number of districts with at least one security incident or other form of refusal to cooperate	Zero	

For definitions of key performance indicators see Annex 2. Data are for 7-day periods. [§]One unsafe burial reported in the district of Pujehun. [‡]Data missing for 7–14% of cases. [#]Outcome data missing for 0–77% of hospitalized, confirmed cases.

Figure 3: Geographical distribution of new and total confirmed cases in Guinea, Liberia, and Sierra Leone



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Figure 4: Confirmed weekly Ebola virus disease cases reported nationally and by prefecture from Guinea

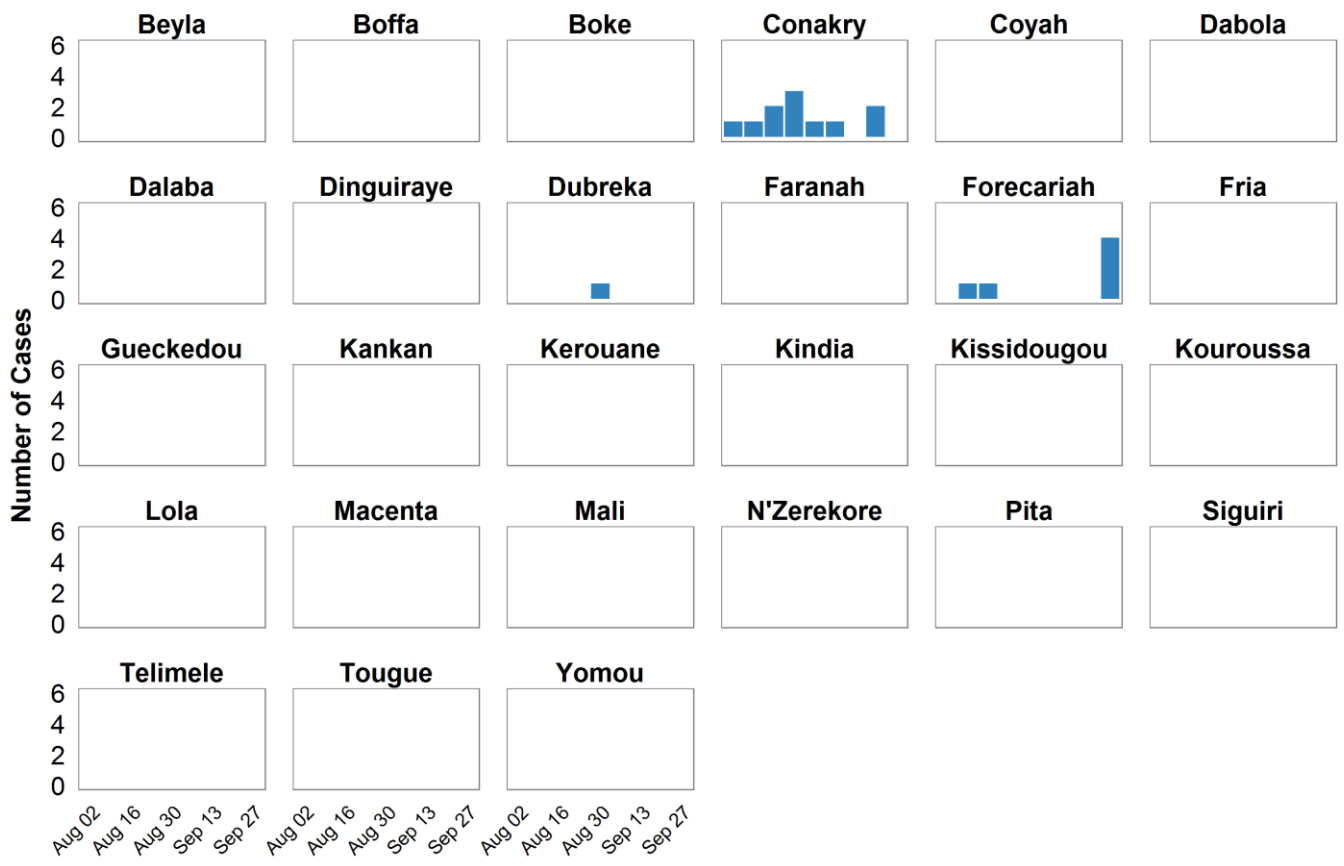
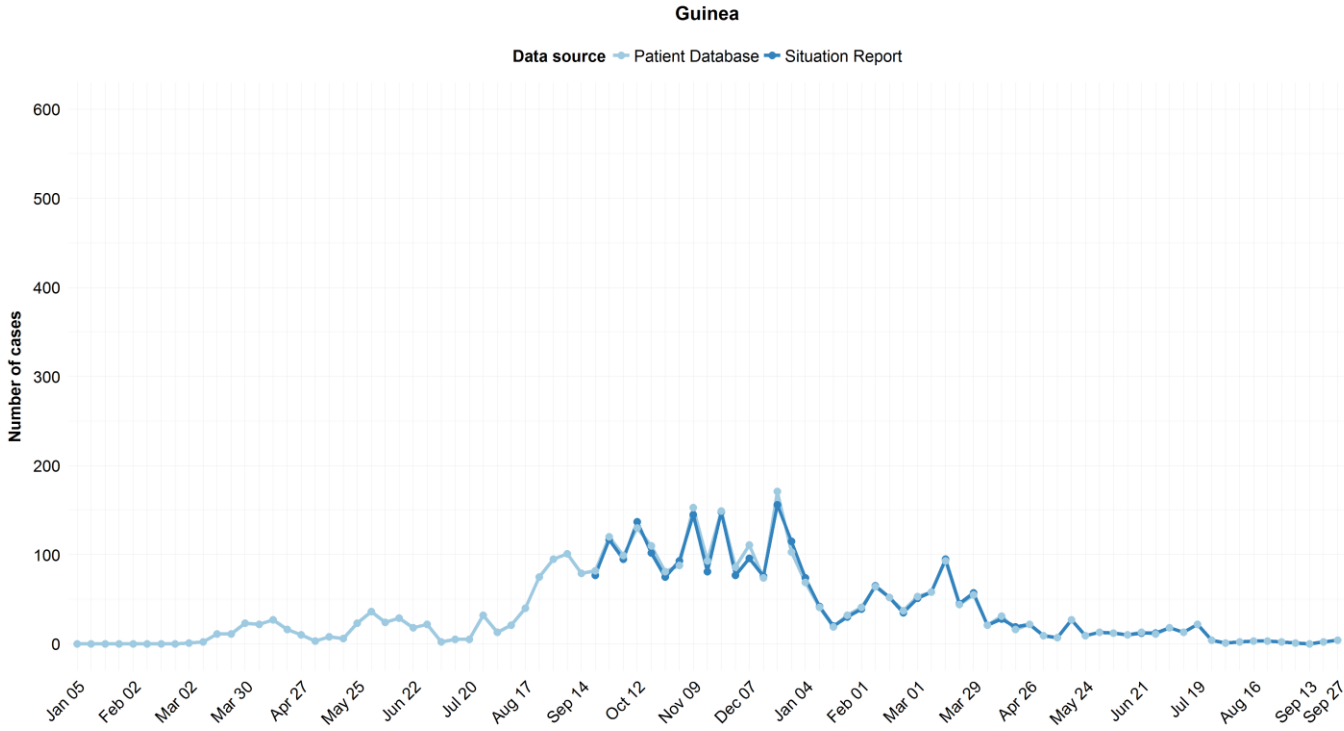


Figure 5: Confirmed weekly Ebola virus disease cases reported nationally and by district from Sierra Leone

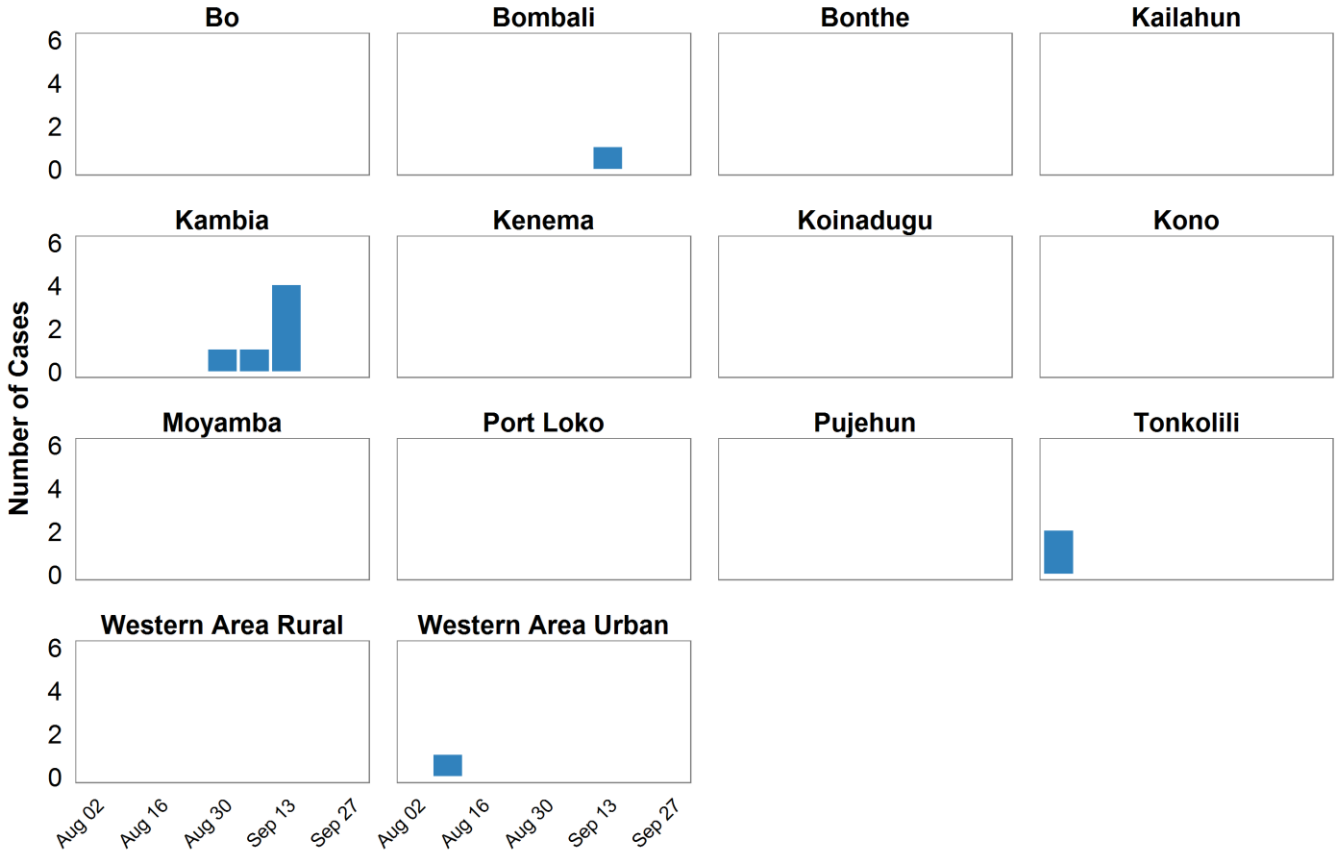
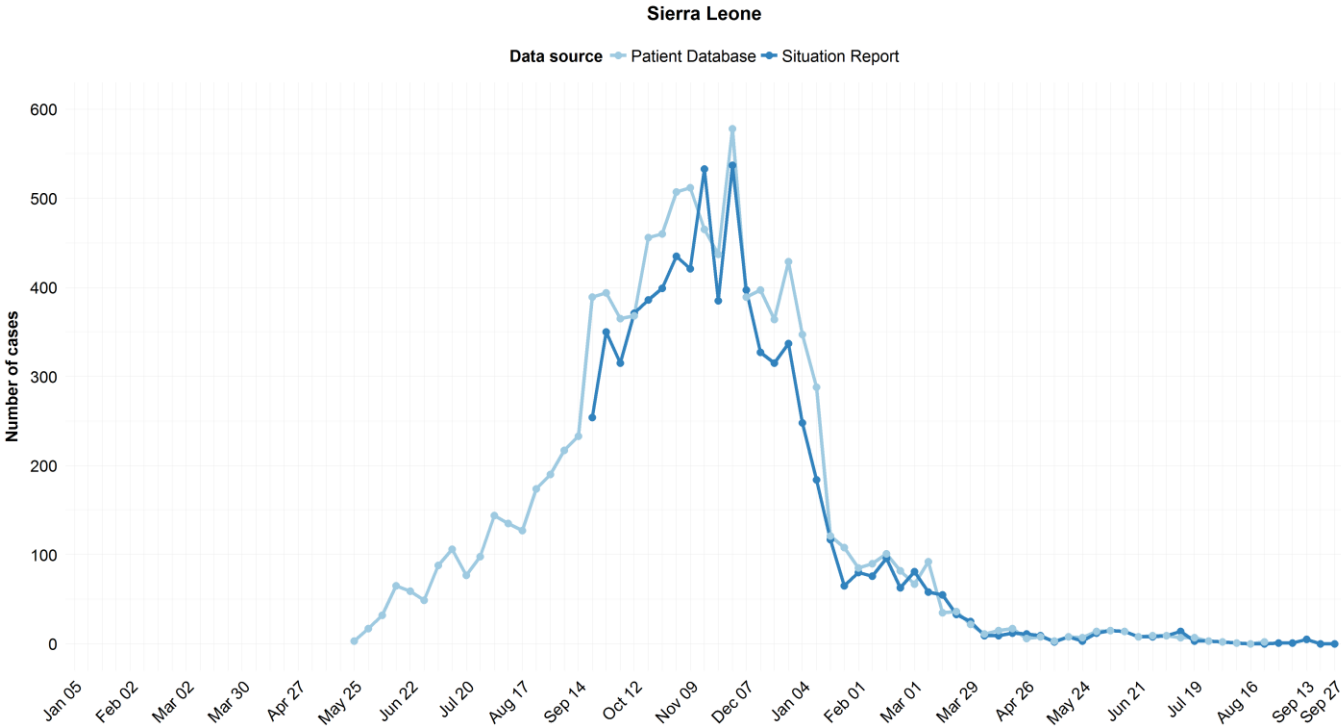
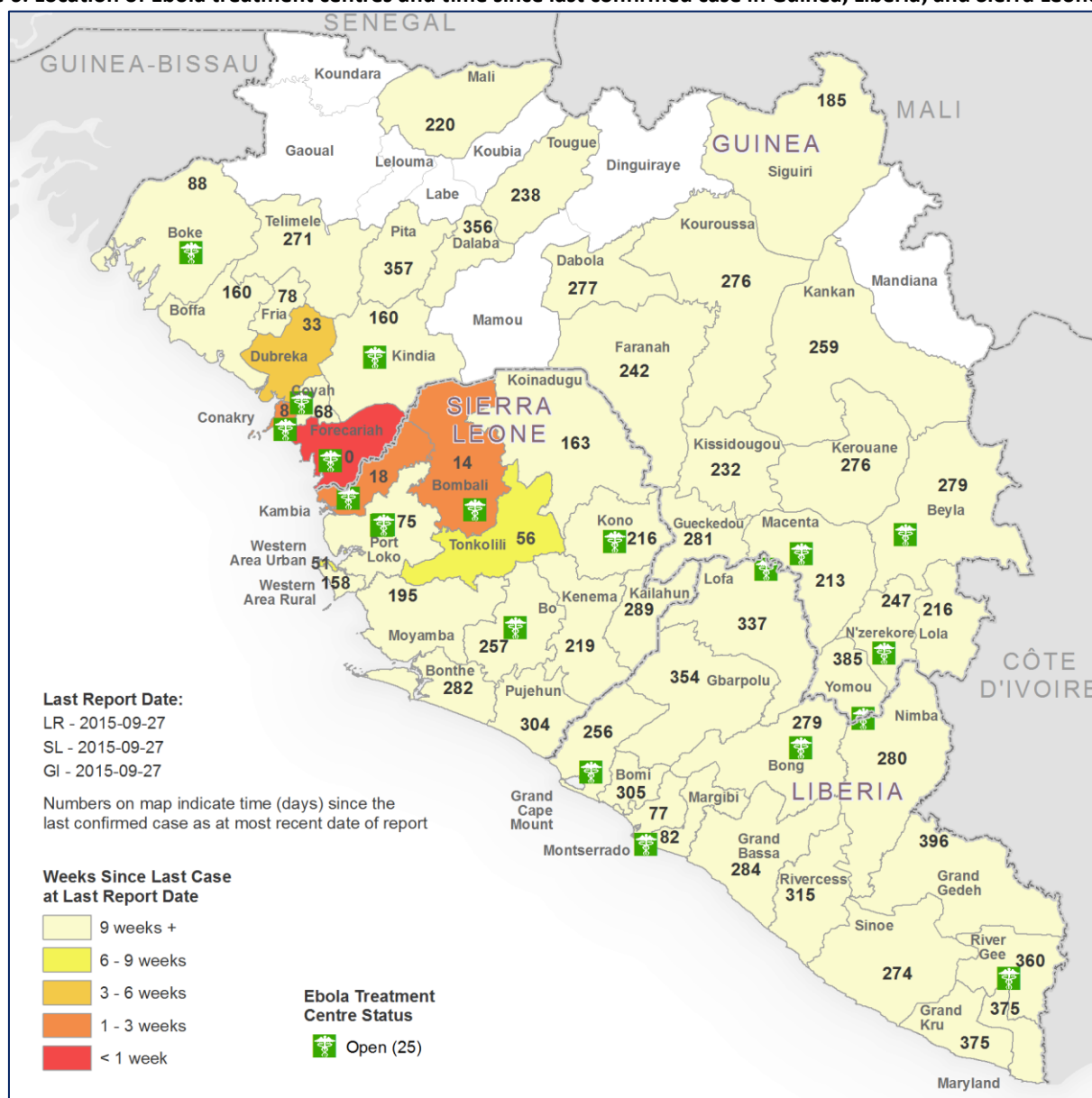


Figure 6: Location of Ebola treatment centres and time since last confirmed case in Guinea, Liberia, and Sierra Leone

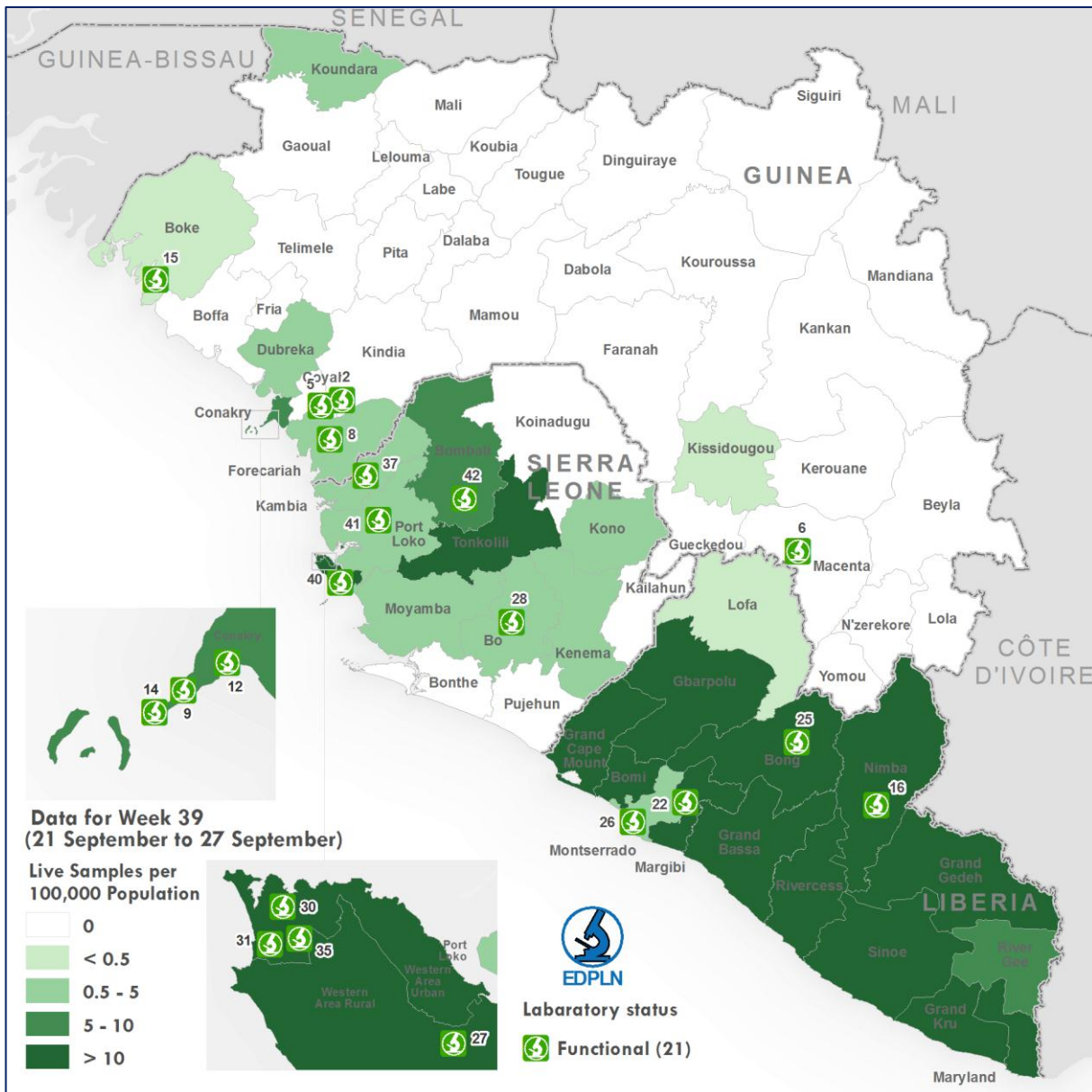


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OTHER AFFECTED AND PREVIOUSLY AFFECTED COUNTRIES

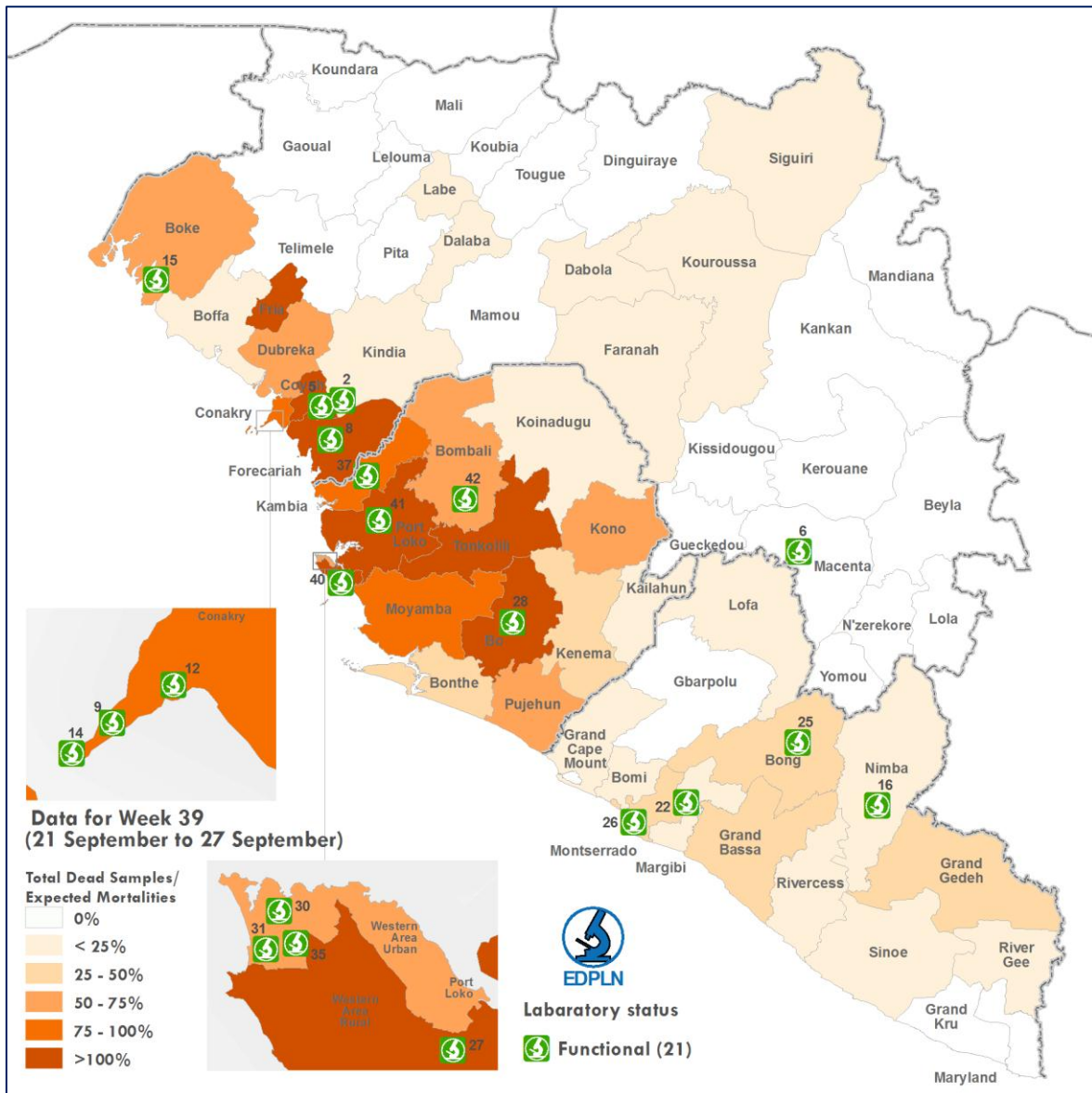
- Liberia was declared free of Ebola virus transmission in the human population on 3 September 2015, 42 days after the country's last laboratory-confirmed case completed treatment and was confirmed as EVD-negative. It is now 78 days since symptom onset of the last reported confirmed case (figure 6). The country has now entered a 90-day period of heightened surveillance. 1373 samples were collected from all of the country's 15 counties in the week to 27 September. Laboratory capacity in the country has increased following the opening of a laboratory in Montserrado, bringing the total number of operational laboratories in the country to 4. 88% of samples were blood samples taken from live suspect cases in the week to 27 September.
- Seven countries (Italy, Mali, Nigeria, Senegal, Spain, the United Kingdom, and the United States of America) have previously reported a case or cases imported from a country with widespread and intense transmission.

Figure 7: Location of laboratories and geographical distribution of samples from live patients in Guinea, Liberia, and Sierra Leone



The analysis includes initial and repeat samples but excludes samples with unknown and incorrect testing weeks and samples with unknown or incorrect location information. EDPLN=Emerging and Dangerous Pathogens Laboratory Network. The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. 2=CREMS Lab – Kindia; 5=EU Mobile Lab – Coyah; 6=IP France – Macenta; 8=K-Plan Mobile Lab – Forecariah; 9=IP Dakar – Conakry; 12=REDC Lab – Conakry; 14=K-Plan Mobile Lab – Conakry; 15=Boke Mobile Lab; 16=Tappita Lab – Nimba; 22=LIBR National Reference Lab/USAMRIID; 25=OIC-NMRC Mobile Lab Bong; 26=MOH Lab – Montserrado; 27=US-CDC Lab – Bo; 28=China-CDC Lab – Jui; 30=CPHRL/DTRA – Lakka; 31=EMDF/NICD – Lakka; 35=MOH/Emergency – PCMH/Freetown; 37=Nigeria Mobile Lab – Kambia; 40=PH England Mobile Lab – Kerry Town; 41=PH England Mobile Lab – Port Loko; 42=PH England Mobile Lab – Makeni.

Figure 8: Location of laboratories and geographical distribution of samples from dead bodies in Guinea, Liberia, and Sierra Leone



The analysis includes initial and repeat samples but excludes samples with unknown and incorrect testing weeks and samples with unknown or incorrect location information. EDPLN=Emerging and Dangerous Pathogens Laboratory Network. The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. 2=CREMS Lab – Kindia; 5=EU Mobile Lab – Coyah; 6=IP France – Macenta; 8=K-Plan Mobile Lab – Forecariah; 9=IP Dakar – Conakry; 12=REDC Lab – Conakry; 14=K-Plan Mobile Lab – Conakry; 15=Boke Mobile Lab; 16=Tappita Lab – Nimba; 22=LIBR National Reference Lab/USAMRIID; 25=OIC-NMRC Mobile Lab Bong; 26=MOH Lab – Montserrado; 27=US-CDC Lab – Bo; 28=China-CDC Lab – Jui; 30=CPHRL/DTRA – Lakka; 31=EMDF/NICD – Lakka; 35=MOH/Emergency – PCMH/Freetown; 37=Nigeria Mobile Lab – Kambia; 40=PH England Mobile Lab – Kerry Town; 41=PH England Mobile Lab – Port Loko; 42=PH England Mobile Lab – Makeni.

PREPAREDNESS OF COUNTRIES TO RAPIDLY DETECT AND RESPOND TO AN EBOLA EXPOSURE

- The introduction of an EVD case into unaffected countries remains a risk as long as cases exist in any country. With adequate preparation, however, such an introduction can be contained through a timely and effective response.
- WHO’s preparedness activities aim to ensure all countries are ready to effectively and safely detect, investigate, and report potential EVD cases, and to mount an effective response. WHO provides this support through country support visits by preparedness-strengthening teams (PSTs) to help identify and prioritize gaps and needs, direct technical assistance, and provide technical guidance and tools.

Priority countries in Africa

- The initial focus of support by WHO and partners is on highest priority countries – Côte d'Ivoire, Guinea-Bissau, Mali, and Senegal—followed by high priority countries—Benin, Burkina Faso, Cameroon, Central African Republic, Democratic Republic of the Congo, Ethiopia, Gambia, Ghana, Mauritania, Niger, Nigeria, South Sudan, and Togo. The criteria used to prioritize countries include the geographical proximity to affected countries, the magnitude of trade and migration links, and the relative strength of their health systems.
- Since 20 October 2014, PSTs have provided technical support in Benin, Burkina Faso, Cameroon, Central African Republic, Côte d'Ivoire, Ethiopia, Gambia, Ghana, Guinea-Bissau, Mali, Mauritania, Niger, Senegal, South Sudan, and Togo. Technical working group meetings, field visits, high-level table-top exercises, and field simulations have helped to identify key areas for improvement. Each country has a tailored plan to strengthen operational readiness.
- From October 2014 to September 2015, WHO has undertaken 286 field deployments to priority countries to assist with the implementation of national plans.
- WHO provides personal protective equipment (PPE) modules containing minimum stocks to cover staff protection and other equipment needs to support 10 patient-beds for 10 days for all staff with essential functions. PPE modules have been delivered or are in the process of being delivered to all countries on the African continent. In addition, all countries have received a PPE training module.
- Contingency stockpiles of PPE are in place in the United Nations Humanitarian Response Depots (UNHRD) in Accra and Dubai, and are available to any country in the event that they experience a shortage.

Follow-up support to priority countries

- Following initial PST assessment missions to the 14 priority countries in 2014, a second phase of preparedness-strengthening activities have provided support on a country-by-country basis. Activities in the week to 30 September are highlighted below.
- In Guinea-Bissau, preparedness support continues to be provided at the central level, and in two priority regions (Tombali and Gabu) through WHO sub-offices. Significant improvements in waste management and infection prevention and control have been noted at the regional health centres, and training will be provided on the use of incinerators and waste management in the coming week.

EVD preparedness officers

- Dedicated EVD preparedness officers have been deployed to support the implementation of country preparedness plans, coordinate partners, provide a focal point for inter-agency collaboration, offer specific technical support in their respective areas of expertise, and develop capacity of national WHO staff. Preparedness officers are currently deployed to Benin, Burkina Faso, Cameroon, Central African Republic, Côte d'Ivoire, Ethiopia, Gambia, Ghana, Guinea-Bissau, Mali, Mauritania, Niger, Senegal, and Togo.

Training, exercises, and simulations

- Priority countries that have achieved a minimum of 50% implementation of preparedness checklist activities are encouraged to undertake a series of drills on elements of an EVD response and a functional exercise to test the coordination of the Ebola operations centre.
- Simulation exercises aimed at testing preparedness capabilities are being planned in Benin, Burkina Faso, Ethiopia, Ghana, Guinea Bissau, Mauritania, Niger and Togo and will start in the coming weeks or months.
- Logistics training is currently being organised in collaboration with the Bioforce Institute, and is planned for mid-November and December. The training will involve ministry of health logisticians, and will help to strengthen the ability of a country to implement relevant logistics capacities swiftly and efficiently, in the event of an outbreak.

Surveillance and preparedness indicators

- Indicators based on surveillance data, case-management capacity, laboratory testing, and equipment stocks continue to be collected on a weekly basis from the four countries that share a border with affected countries: Côte d'Ivoire, Guinea-Bissau, Mali, and Senegal.
- An interactive preparedness dashboard based on the WHO EVD checklist⁵ is available online.

ANNEX 1: COORDINATION OF THE EBOLA RESPONSE

WHO continues to work with many partners in response to the EVD outbreak, including the African Union, the Economic Community of West African States, the Mano River Union, national governments, non-governmental organizations, and UN agencies, and technical institutions and networks in the Global Outbreak Alert and Response Network (GOARN). Agencies responsible for coordinating 4 key lines of action in the response are given below.

Lines of action	Lead agency
Case management	WHO
Case finding, laboratory services, and contact tracing	WHO
Safe and dignified burials	International Federation of Red Cross and Red Crescent Societies (IFRC)
Community engagement and social mobilization	UNICEF

⁵ See: <http://who.int/csr/resources/publications/ebola/ebola-preparedness-checklist/en/>

⁴ See: <http://apps.who.int/ebola/preparedness/map>

ANNEX 2: DEFINITION OF KEY PERFORMANCE INDICATORS FOR PHASE 2 OF THE EBOLA RESPONSE

Indicator	Numerator	Numerator source	Denominator	Denominator source
Cases and deaths				
Number of confirmed cases	# of confirmed cases	Guinea: Daily WHO situation reports Sierra Leone: Daily Ministry of Health Ebola situation reports	N/A	N/A
Number of confirmed deaths	# of confirmed deaths	Guinea: Daily WHO situation reports Sierra Leone: Daily Ministry of Health Ebola situation reports	N/A	N/A
Number of confirmed deaths that occurred in the community	# of deaths that occurred in the community with positive EVD swab results	Guinea: Weekly WHO situation reports Sierra Leone: Daily Ministry of Health	N/A	N/A
Diagnostic Services				
Number of samples tested and percentage with positive EVD results	# of new samples tested # of new samples tested with a positive EVD result	Guinea: Laboratory database Sierra Leone: Daily Ministry of Health Ebola situation reports	N/A # of new samples tested	Guinea: Laboratory database Sierra Leone: Daily Ministry of Health Ebola situation reports
Contact tracing				
Percent of new confirmed cases from registered contacts	# of new confirmed cases registered as a contact	Guinea: Weekly WHO situation reports Sierra Leone: Weekly Ministry of Health Surveillance Report	# of new confirmed cases	Guinea: Daily WHO situation reports Sierra Leone: Daily Ministry of Health Ebola situation Reports
Hospitalization				
Time between symptom onset and hospitalization (days)	Time between symptom onset and hospitalization of confirmed, probable or suspected cases (geometric mean number of days)	Clinical investigation records	N/A	N/A
Outcome of treatment				
Case fatality rate (among hospitalized cases)	# of deaths among hospitalized cases (confirmed)	Clinical investigation records	# of hospitalized cases (confirmed) with a definitive survival outcome recorded	Clinical investigation records
Infection Prevention and Control (IPC) and Safety				
Number of newly infected health workers	# of newly infected health workers	Guinea: Daily WHO situation reports Sierra Leone: Daily Ministry of Health Ebola situation Reports	N/A	N/A
Safe and dignified burials				
Number of unsafe burials reported	# of reports/alerts of burials that were not known to be safe	Guinea: Daily WHO situation reports Sierra Leone: Ministry of Health situation reports	N/A	N/A
Social mobilization				
Number of districts with at least one security incident or other form of refusal to cooperate	# of districts with at least one security incident or other form of refusal to cooperate in the past week	Guinea: Daily WHO situation reports Sierra Leone: UNICEF	N/A	N/A