

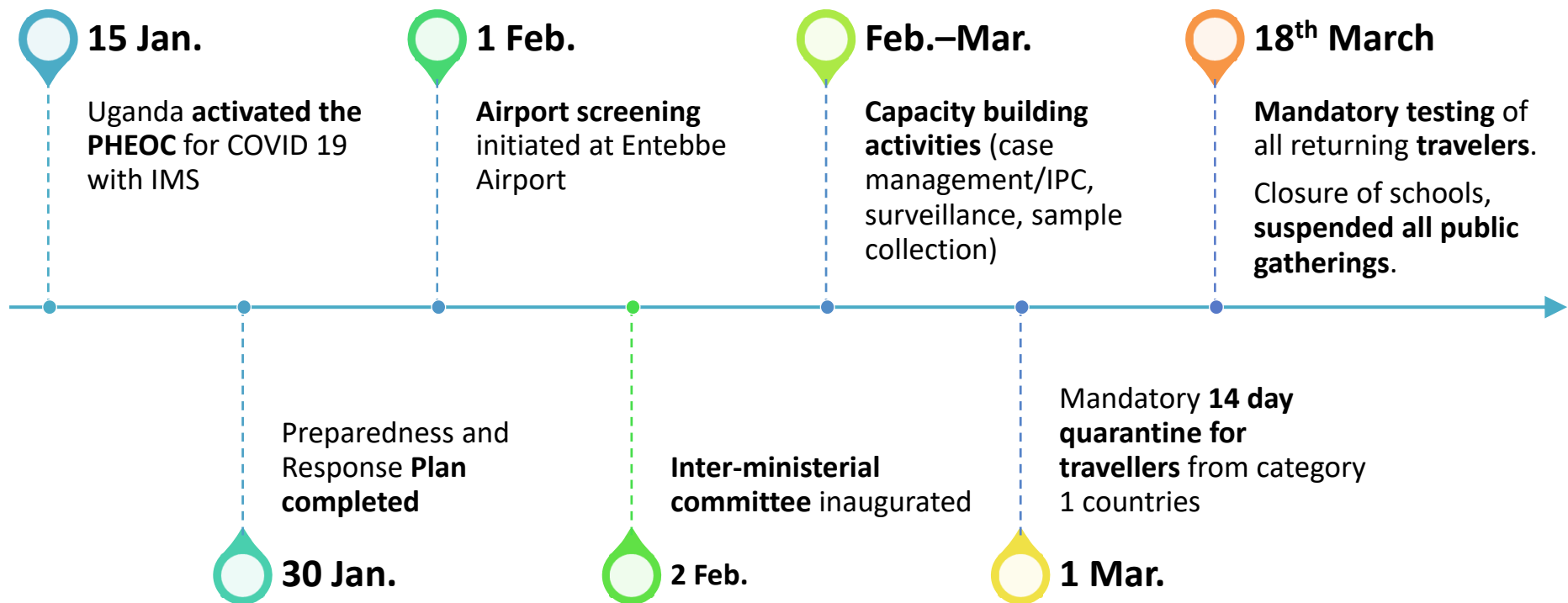


# Management of imported COVID-19 cases and cross border collaboration

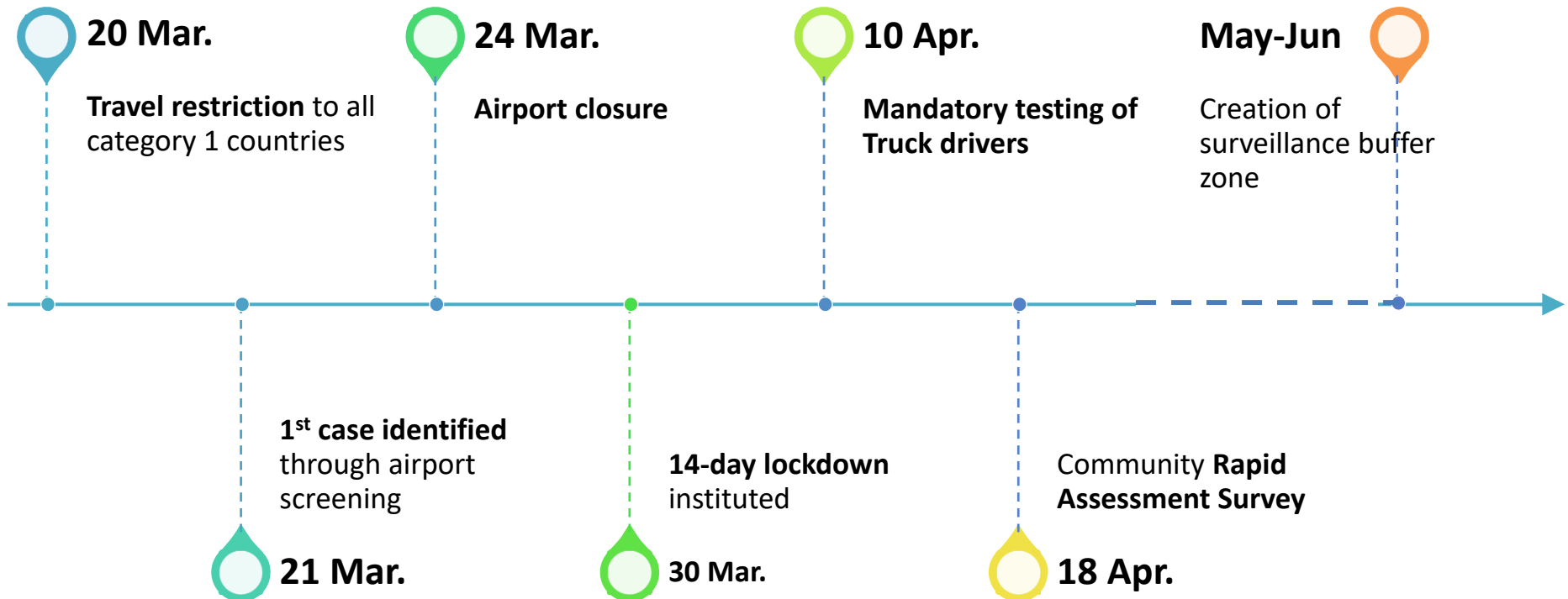
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Best Practices in Uganda  
Henry Kyobe Bosa  
Incident commander

# Preparedness and Response milestones



# Preparedness and Response milestones



# Multisectoral collaboration

Government	Development partners	Non- government
<ul style="list-style-type: none"><li>• GOU Inter-ministerial National Task Force – chaired by the Prime Minister</li><li>• Unified Response command between MOH –UPDF</li><li>• Bilateral cooperation in EAC region<ul style="list-style-type: none"><li>• Kenya</li><li>• South Sudan</li><li>• Rwanda</li><li>• DRC</li></ul></li></ul>	<p>UN Agencies:</p> <ul style="list-style-type: none"><li>• WHO</li><li>• UNHCR</li><li>• UNICEF</li></ul> <p>Bilateral cooperation - Respective embassies</p>	<ul style="list-style-type: none"><li>• Non-governmental Organisations</li><li>• Private sector<ul style="list-style-type: none"><li>• Telecom companies</li><li>• Uganda Manufacturers Association</li></ul></li></ul>

# Presidential Directives



Restriction of mass gatherings

Closure of schools, religious gatherings, weddings, funerals



Restriction on movement



Suspension of public transport



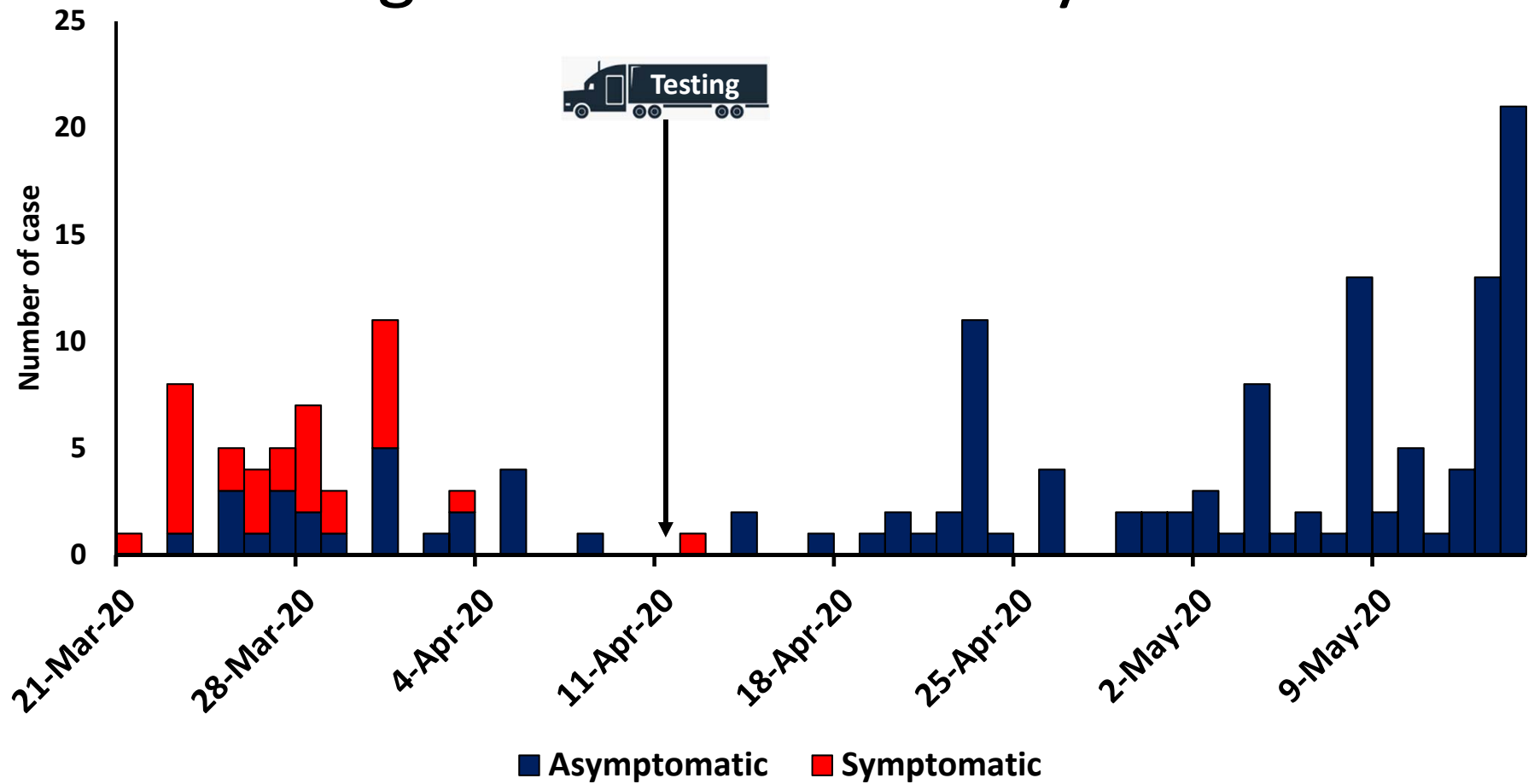
Mandatory wearing of face masks



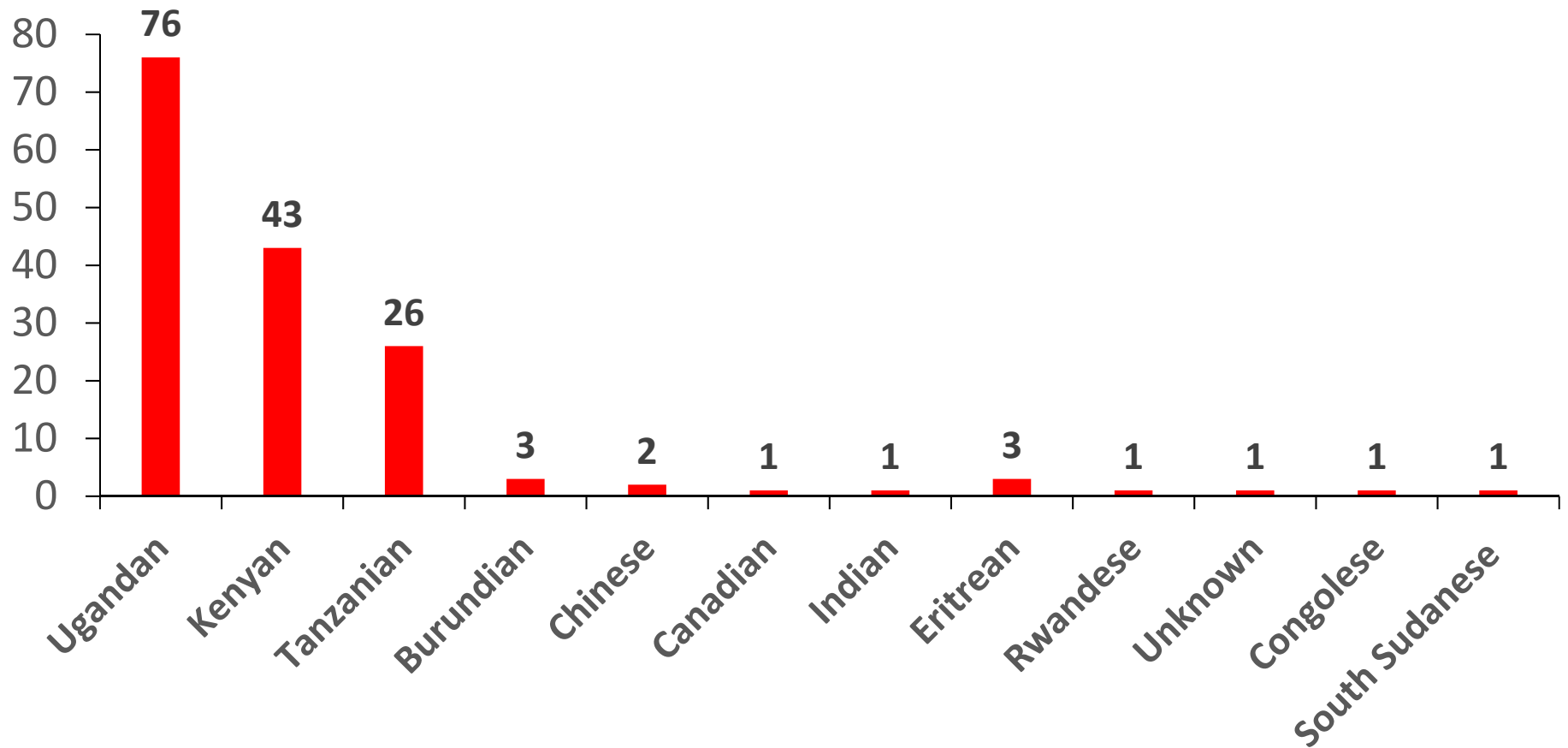
Hygiene measures

Washing hands, cough etiquette

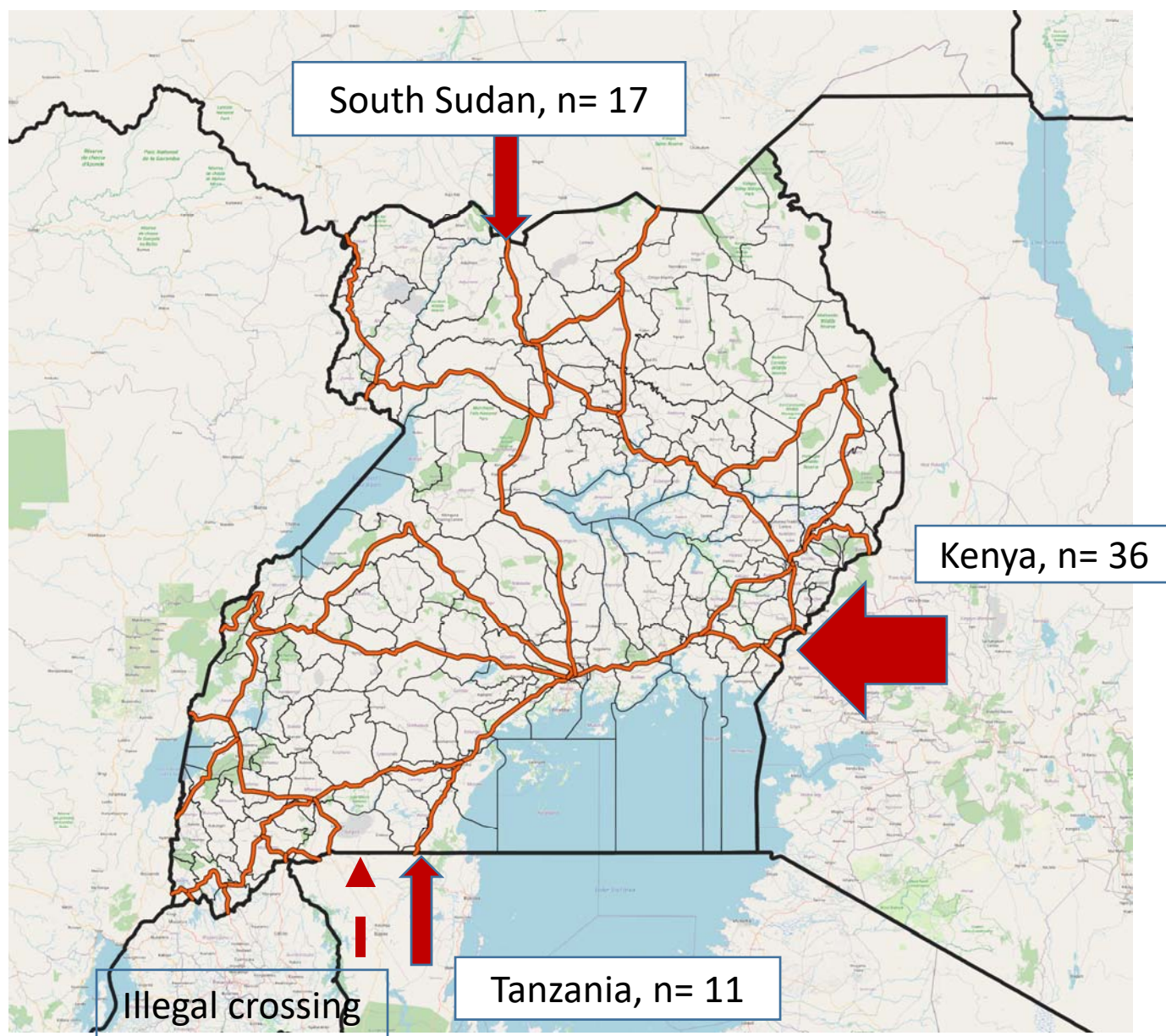
# Epidemic curve of 160 confirmed cases in Uganda as of 14<sup>th</sup> May 2020



## Distribution of 160 Confirmed Cases by Nationality as of 14<sup>th</sup> May, 2020

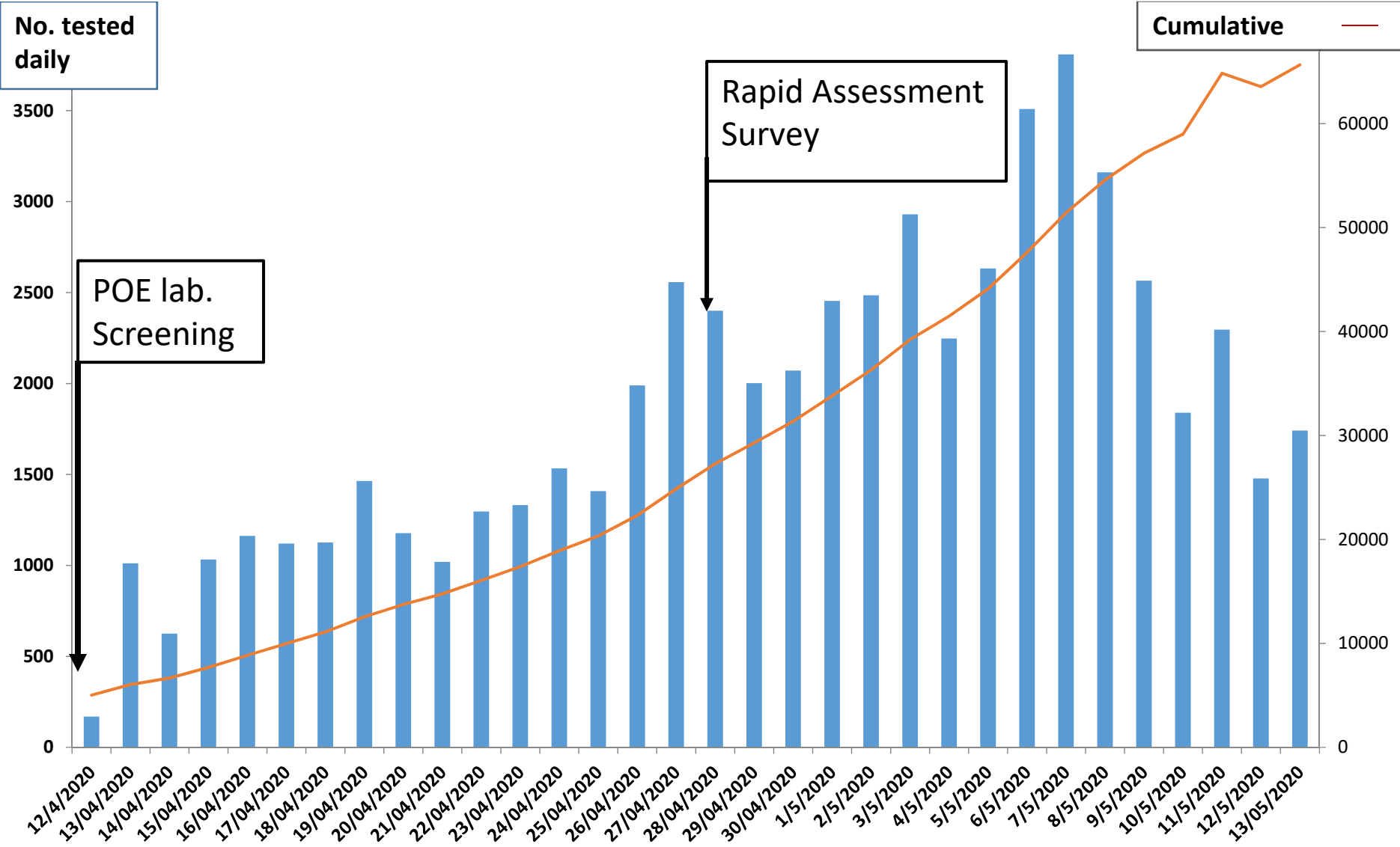


# POEs with identified confirmed cases (N=





# Daily and cumulative number of samples tested as of 13<sup>th</sup> May 2020 (N= 67,559)



# Rapid Assessment Survey

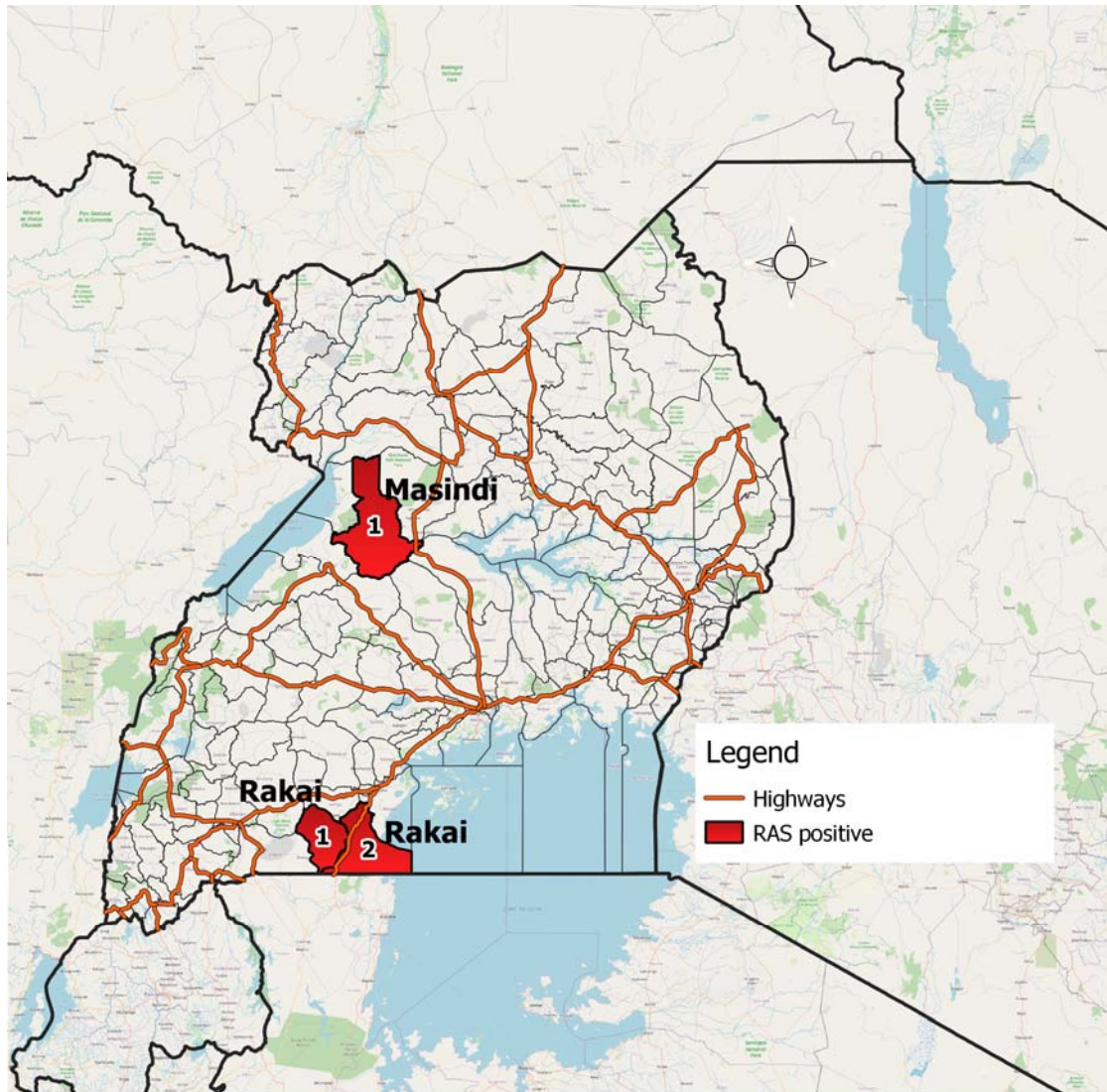
Goal is to find cases that are not caught by the route screening and testing and are therefore circulating to communities around them.

## *Objectives;*

1. To establish the presence or absence of community transmission of COVID19 in Uganda
2. To identify population sub-groups at high risk of COVID19 and their geographical locations.
3. To compare the performance of various diagnostic tests and sample types.
  - I. Rapid diagnostic Tests (Serological – antibody & antigen)
  - II. Molecular (PCR based) tests
  - III. Sample types: NP and OP swabs, Saliva and blood



# Summary preliminary findings



## Preliminary findings:

- 4 confirmed positive and none had Epi-link with a prior case
- Overall community transmission, **proportion of positivity = 0.028% (4/14061)**

## Conclusion:

- **Sporadic cases distribution**
- **1 cluster (N=3)**

# Summary of Findings-2

- **Geographically**

- Kyotera = **0.397%** (2/504); **4** times higher than hypothesized value of 0.1%
- Rakai = **0.343%** (1/291); **3.4** times higher than hypothesized value of 0.1%
- Masindi = **0.377%** (1/265); **3.8** times higher than hypothesized value of 0.1%

- **Population sub-groups**

- Road Law enforcement = **0.093%** (2/2152); **similar to** hypothesized value of 0.1%
- Border crossing point = **0.052%** (1/1923); **lower** than hypothesized value of 0.1%
- Community households = **0.037%** (1/265); **lower** than hypothesized value of 0.1%

# Validity of study findings

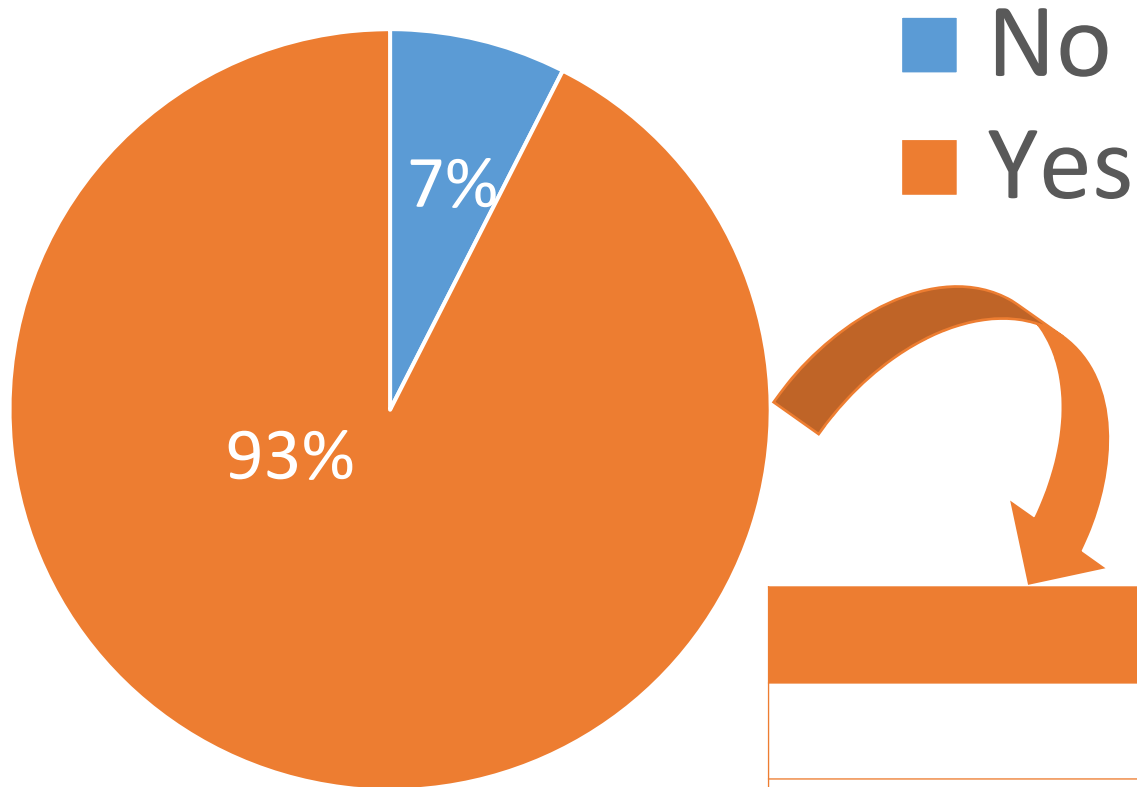
## Community Alerts

Positivity = 0 (0/4,420)

## Rapid Assessment

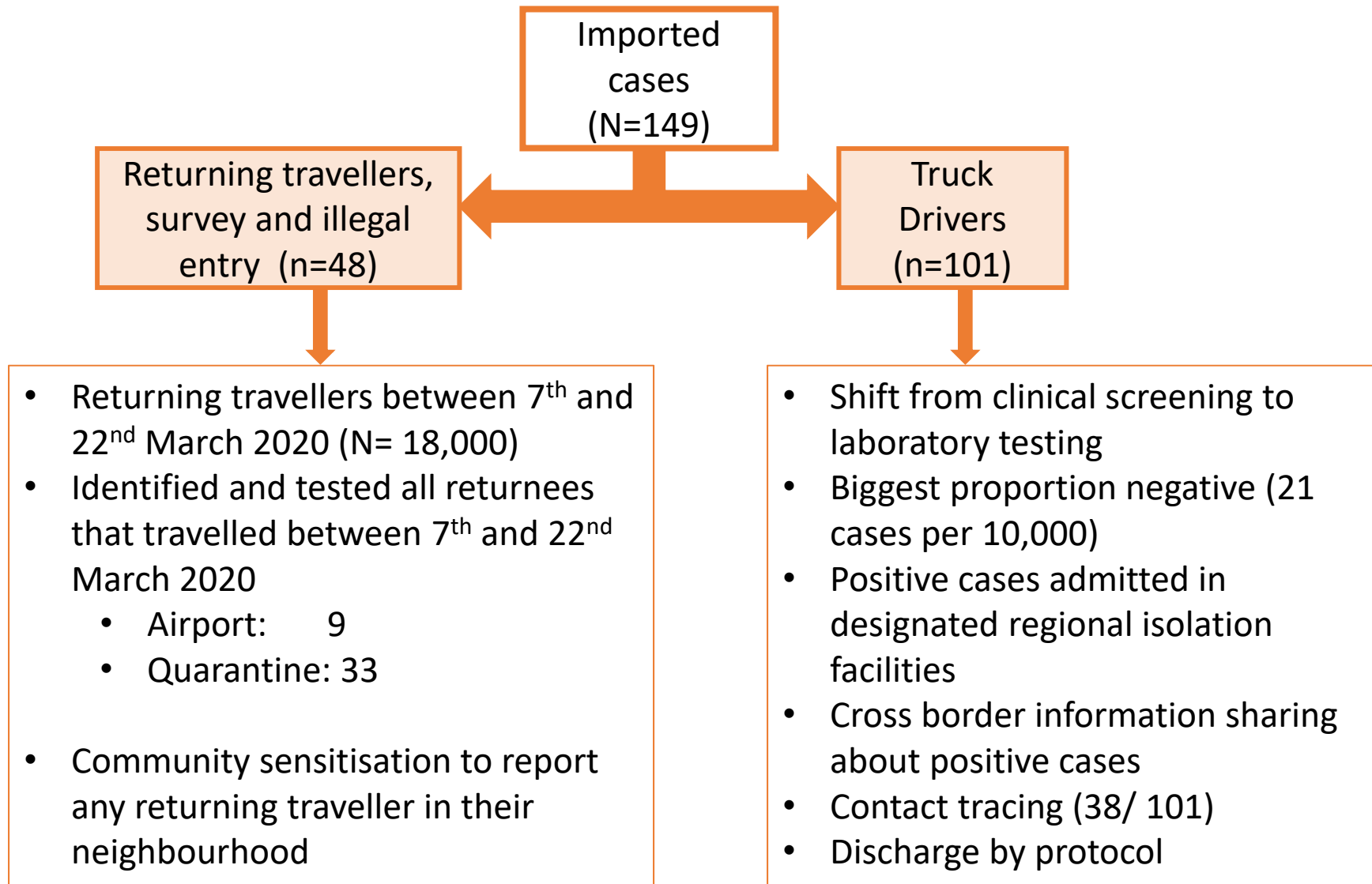
Positivity=0.028%  
(4/14,061)

# Was case imported?



Imported case		
	# (N=149)	Percentage (%)
Returning travellers	43	32
Truck drivers	101	63
Illegal entry	3	2
Survey	2	1

# Management of imported cases





# Regional efforts to mitigate cross border transmission

- EAC Heads of State consultative summit on COVID-19 (All, except Tanzania & Burundi)
- Joint consultative meeting of EAC Ministers of Health, Trade, Transport and EAC
- Bi-lateral ministerial engagements ; Kenya, South Sudan, Rwanda
- Joint meeting of EAC Ministers of Health, Trade, Transport, Security, EAC Affairs (All EAC Partner States)

# Current focus

- **Enhance surveillance at border** points of entry mainly travelers and routes where they pass, stopping centers, and communities around those places
- **Creating a ‘buffer’ zone of intensified active surveillance,** community-based surveillance, risk communication and community engagement between Uganda and countries with diffuse COVID-19 community transmission
- **Expand laboratory testing capacity** through decentralized testing in the general hospitals, health center IVs and points of entry. This is to have quick turnaround time of results

## Current focus (II)

- Following the survey, the Ministry will maintain **sentinel sites** in key areas; transit areas, high risk groups (truck drivers, people in contact with the truck drivers)
- Community engagement and risk communication focusing on hand-washing, social distancing and widespread use of **face masks** in public places
- **Decentralized response** with district strengthening



## Conclusion: Key Features of the MoH Response

- **Early activation of National Task Force** on Outbreaks for COVID19 (mid-January), with the escalation of coordination responsibilities to the Office of Prime Minister following the first few cases
- **Early development of the National Scenario-based Response Plan** (February) with several revisions to reflect evolving guidance and modelling
- **Decentralization of the response** to districts and activation of DTF's and their subcommittees
- **Strong focus on borders:**
  - screening at international airport since February
  - dynamic adaptation of the response at Points of Entry
  - universal testing of truck drivers and monitoring of their movements
- **Early and stringent containment measures**
  - Mandatory institutional quarantine paid for by the Government
  - Nation-wide lock down
- **Unified response command** of response between MOH and Security forces (UPDF)