# 2015 APHL™ ANNUAL MEETING

and ninth government environmental laboratory conference

## *Performance Driven — Racing to Results*

APHL™

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Analysis. Answers. Action.

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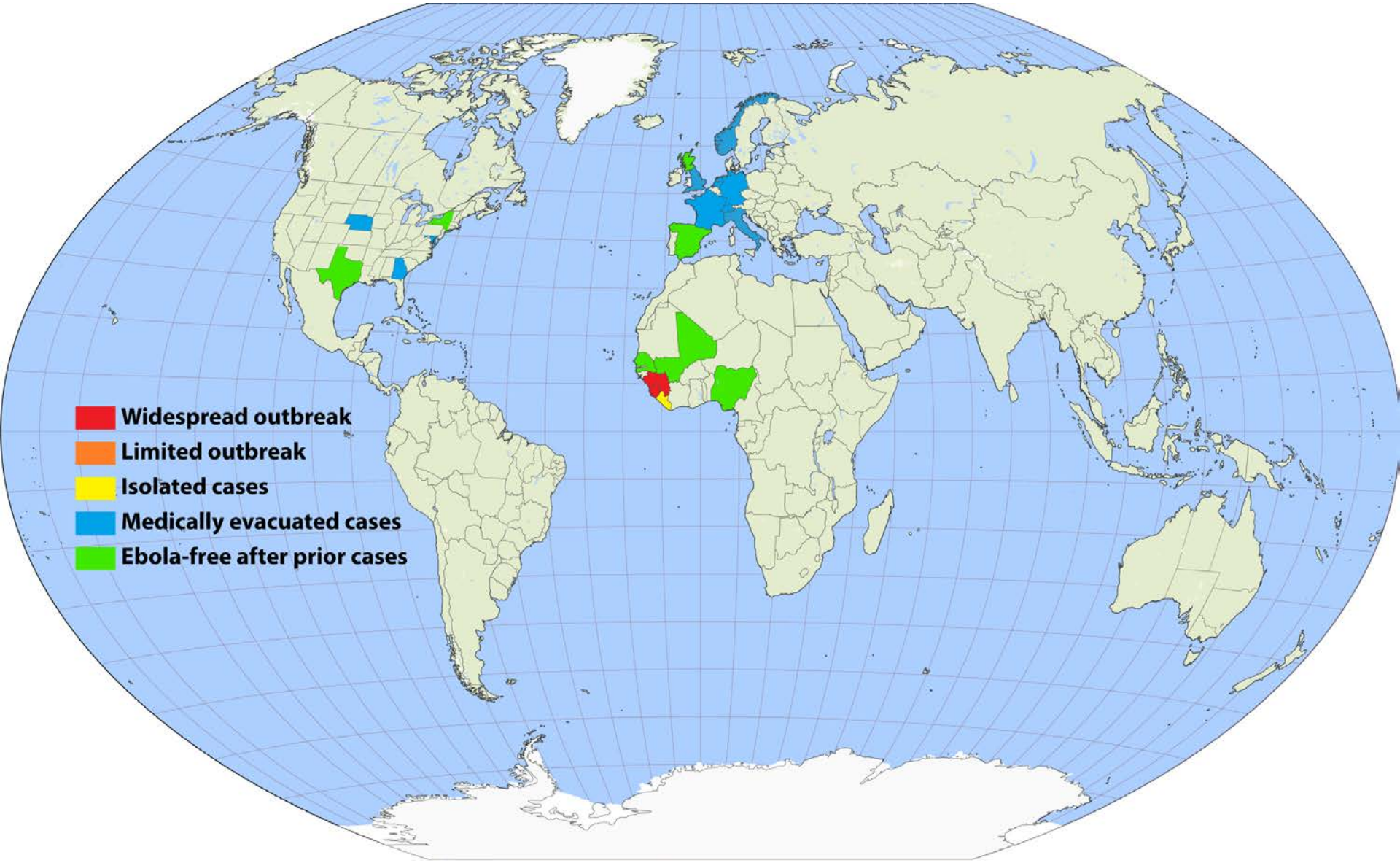
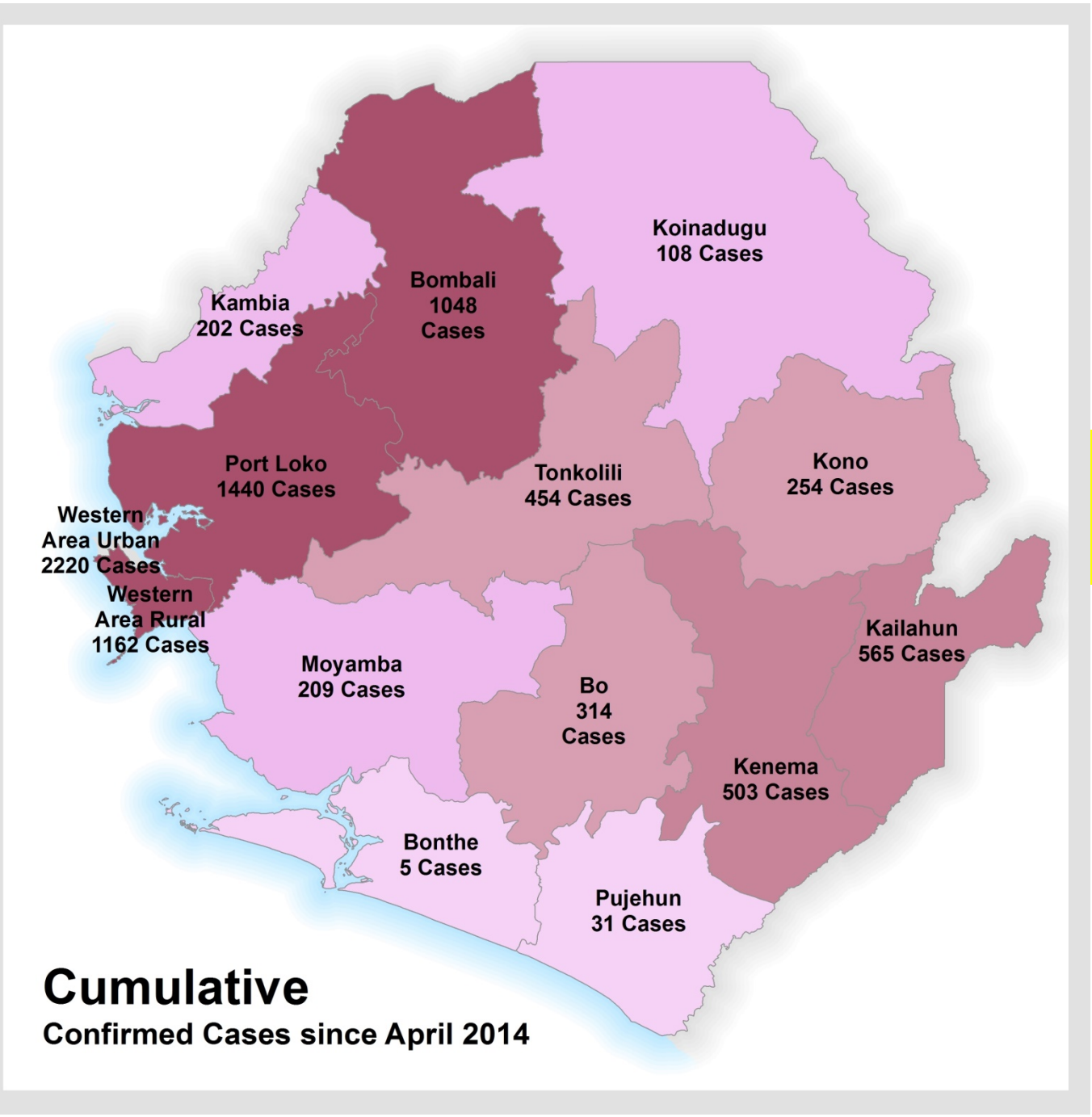
# *The Role of Laboratories in Containing Ebola in West Africa*

*FIELD Experience*


Widespread outbreak
Limited outbreak
Isolated cases
Medically evacuated cases
Ebola-free after prior cases

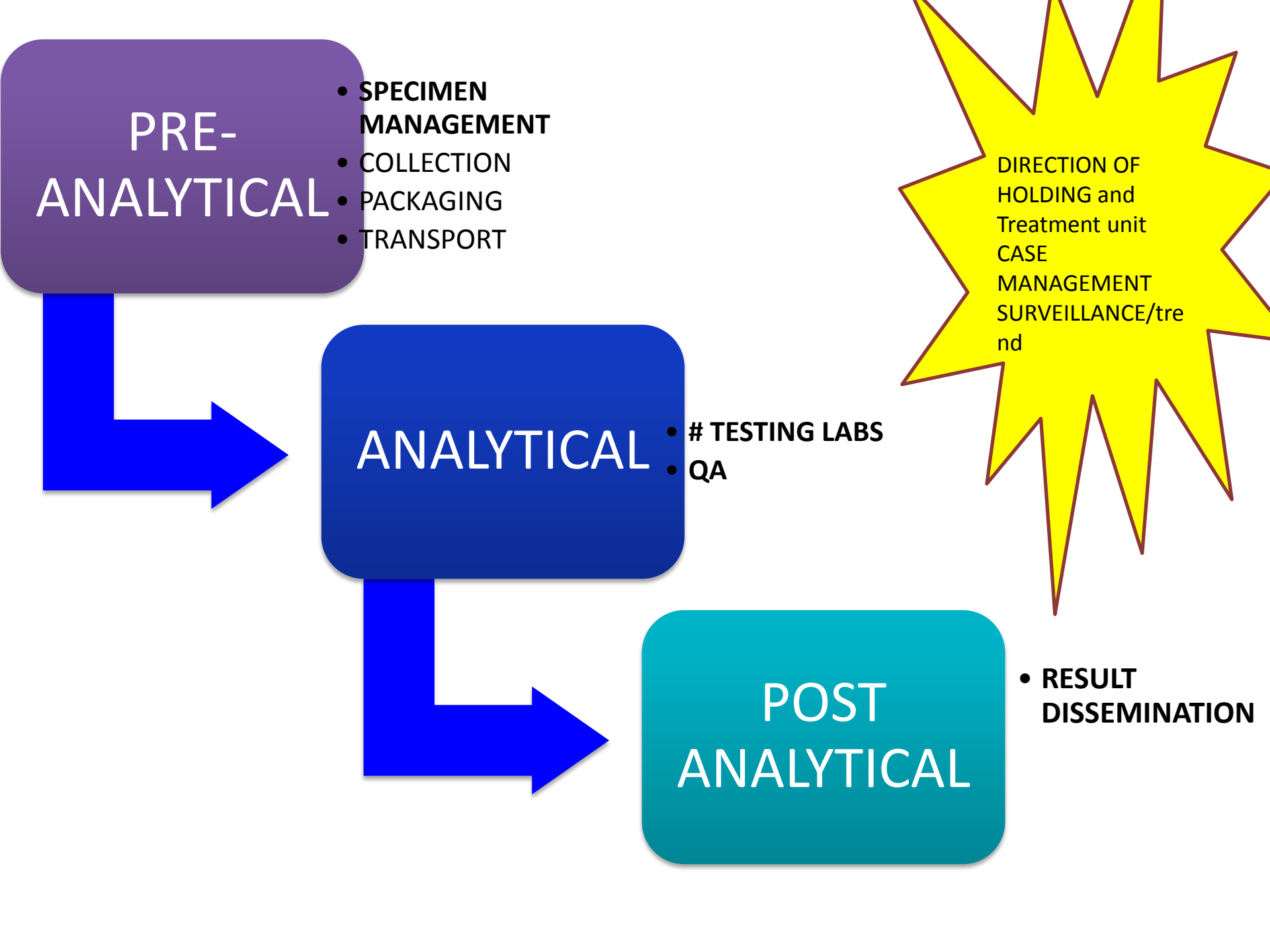


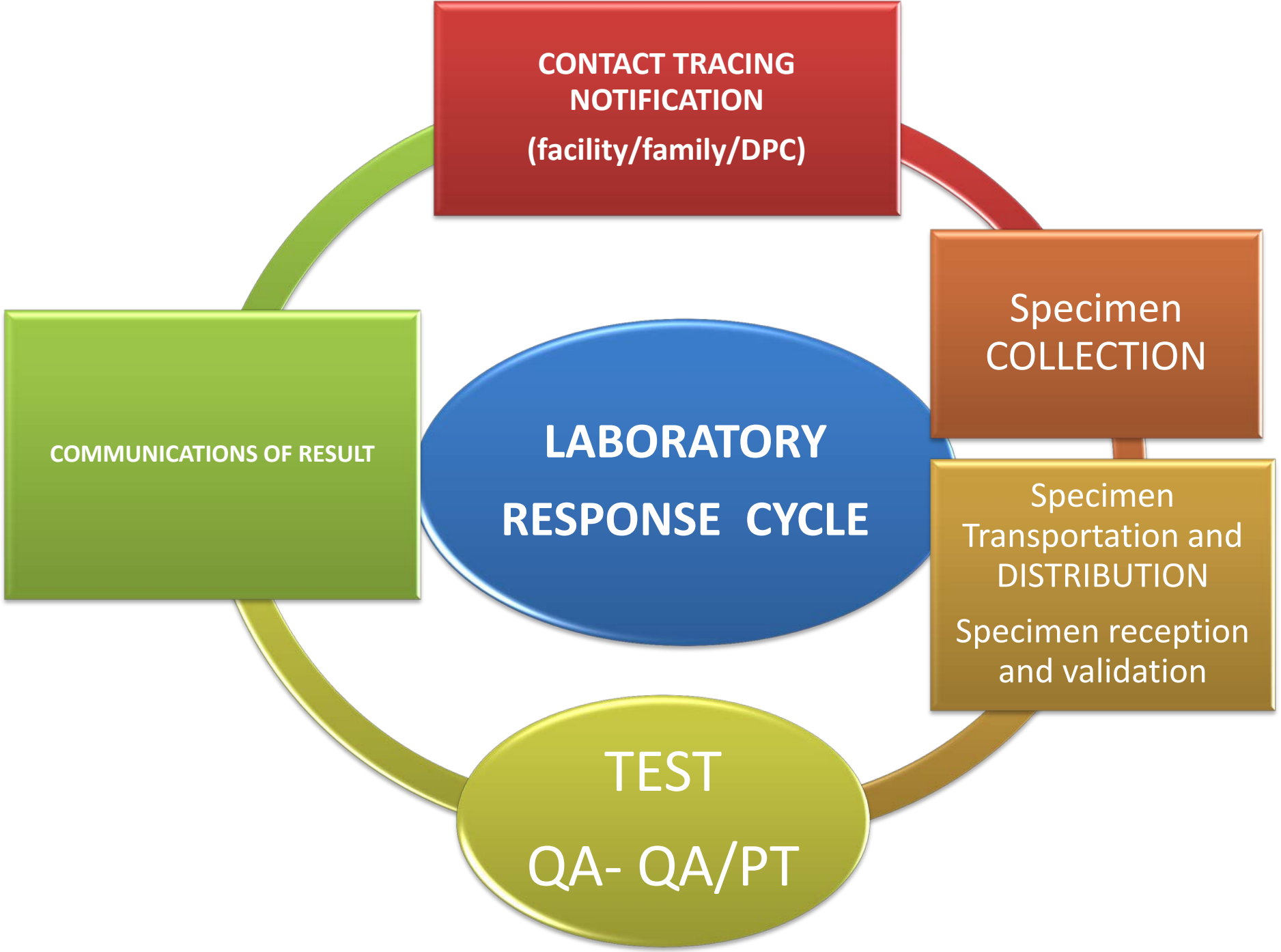

CASES = 8600
DEATHS = 3500

# Laboratory PILLAR?

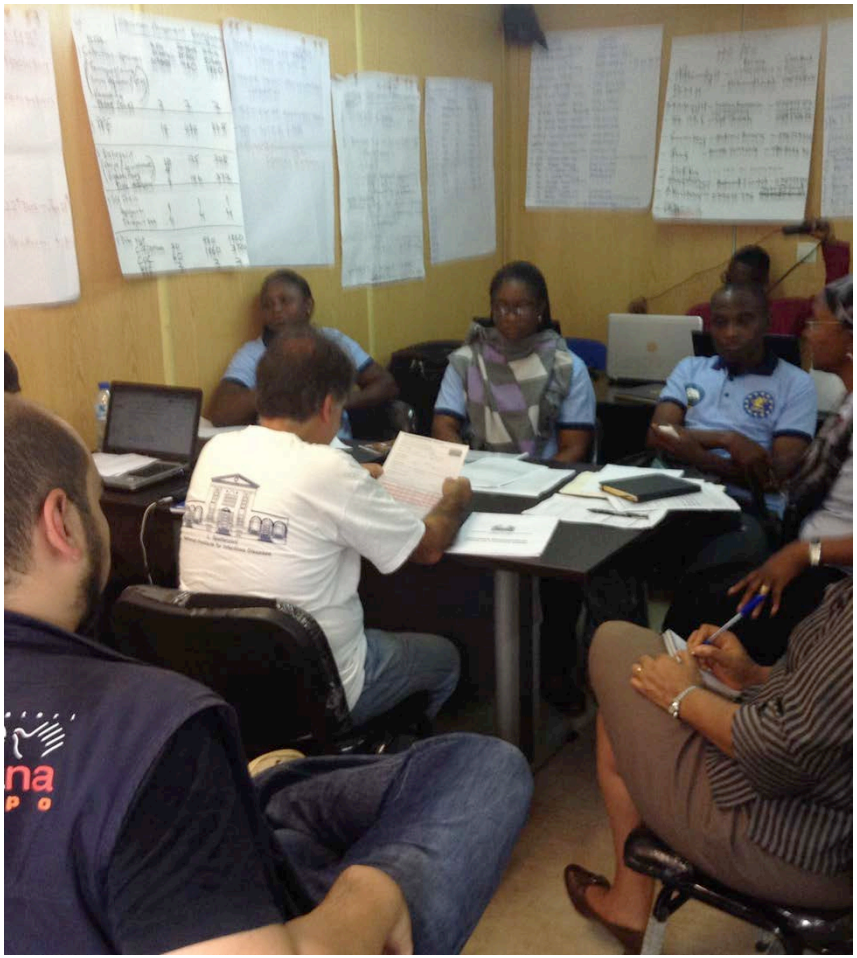
*GOAL: to attain the shortest possible turn around time for testing and reporting of results for efficient actions:*

- *SEGREGATE*
- *TREATMENT*
- *MONITOR*


PRE-ANALYTICAL
• SPECIMEN MANAGEMENT
• COLLECTION
• PACKAGING
• TRANSPORT
ANALYTICAL
• # TESTING LABS
• QA
POST ANALYTICAL
• RESULT DISSEMINATION
DIRECTION OF HOLDING and Treatment unit
CASE MANAGEMENT
SURVEILLANCE/trend


CONTACT TRACING
NOTIFICATION
(facility/family/DPC)
Specimen
COLLECTION
Specimen
Transportation and
DISTRIBUTION
Specimen reception
and validation
TEST
QA- QA/PT
COMMUNICATIONS OF RESULT
LABORATORY
RESPONSE CYCLE

# Establishment of a Central Coordinating Core Organ-
# National Laboratory Technical Working Group



**Human Resource**
- Training
- Restructuring

**Inventory Management**
- SCMS
- Chain of Custody

**Specimen management**
- Collection
- Transportation

**QUALITY ASSURANCE**
- Quality Control
- Audit

# Process Flow

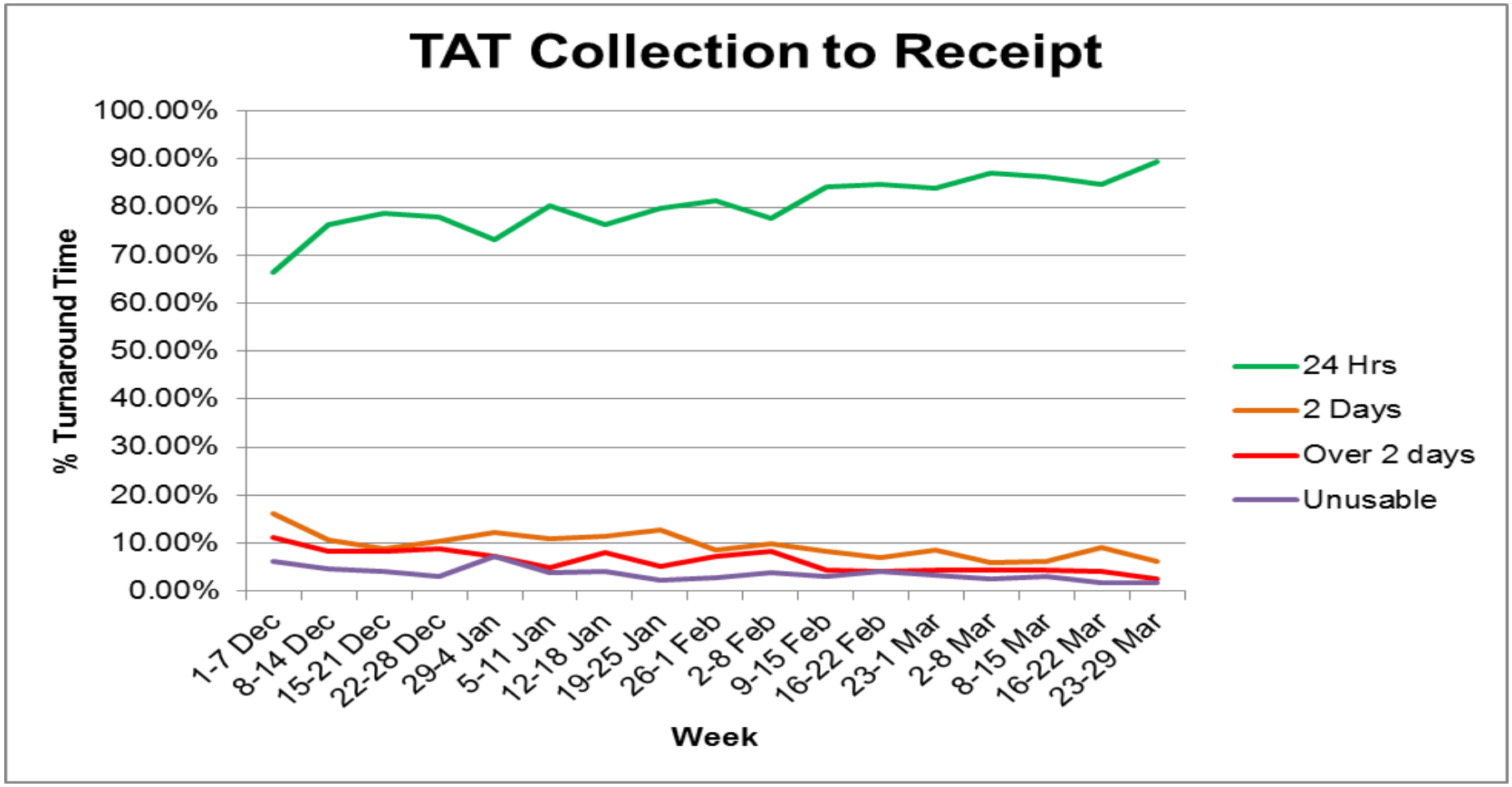
Specimen management

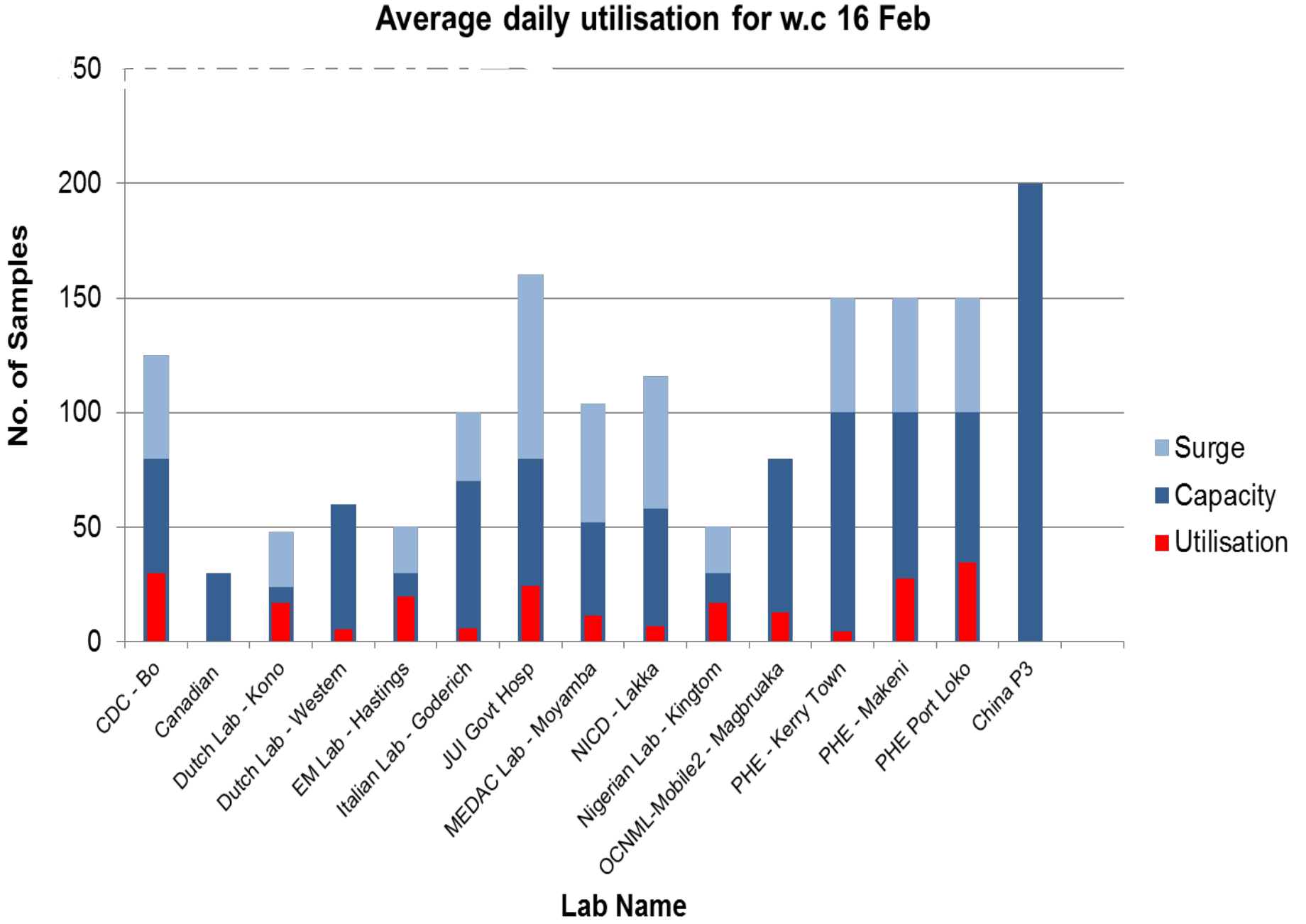
Specimen transport

Testing

Result for action

**COORDINATION – Country Ownership**


TAT Collection to Receipt
100.00%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
% Turnaround Time
1-7 Dec
8-14 Dec
15-21 Dec
22-28 Dec
29-4 Jan
5-11 Jan
12-18 Jan
19-25 Jan
26-1 Feb
2-8 Feb
9-15 Feb
16-22 Feb
23-1 Mar
2-8 Mar
8-15 Mar
16-22 Mar
23-29 Mar
Week
24 Hrs
2 Days
Over 2 days
Unusable


Average daily utilisation for w.c 16 Feb
No. of Samples
50
200
150
100
50
0
CDC - Bo
Canadian
Dutch Lab - Kono
Dutch Lab - Western
EM Lab - Hastings
Italian Lab - Goderich
JUI Govt Hosp
MEDAC Lab - Moyamba
NICD - Lakka
Nigerian Lab - Kingtom
OCNML-Mobile2 - Magbruaka
PHE - Kerry Town
PHE - Makeni
PHE Port Loko
China P3
Lab Name
Surge
Capacity
Utilisation

# Laboratory Coverage

PHE P.L.

Dutch

Goderich

Jui

Chinese P3

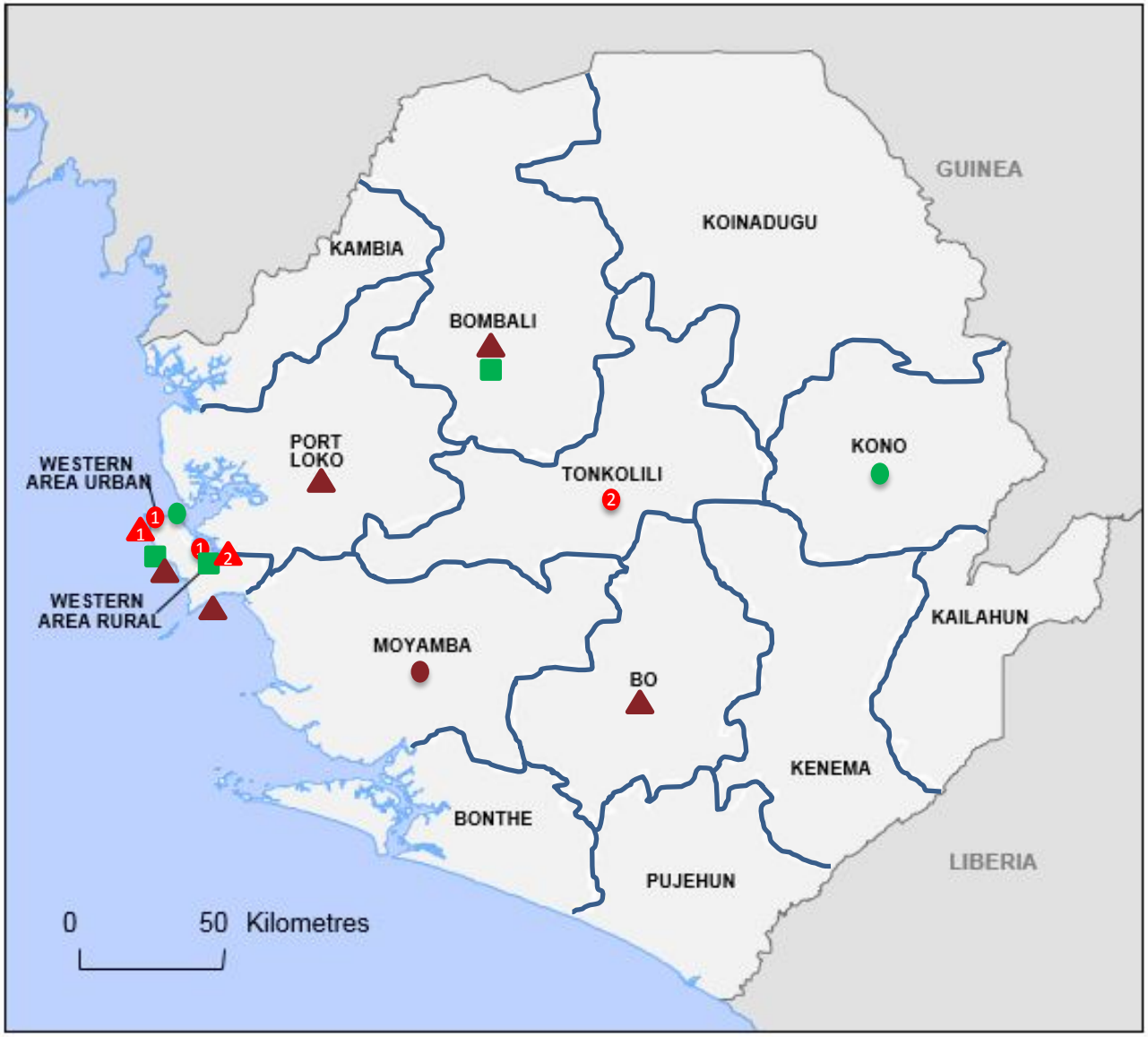
Kingtom - Nigerian

Kingtom - Canadian

Lakka

PHE Kerry Town

Hastings




PHE Makeni

Holy Spirit Bombali

Dutch Kono

Magburaka Tonkolil

CDC Bo

Medac Moyamba

# Results communication for action and trend monitoring

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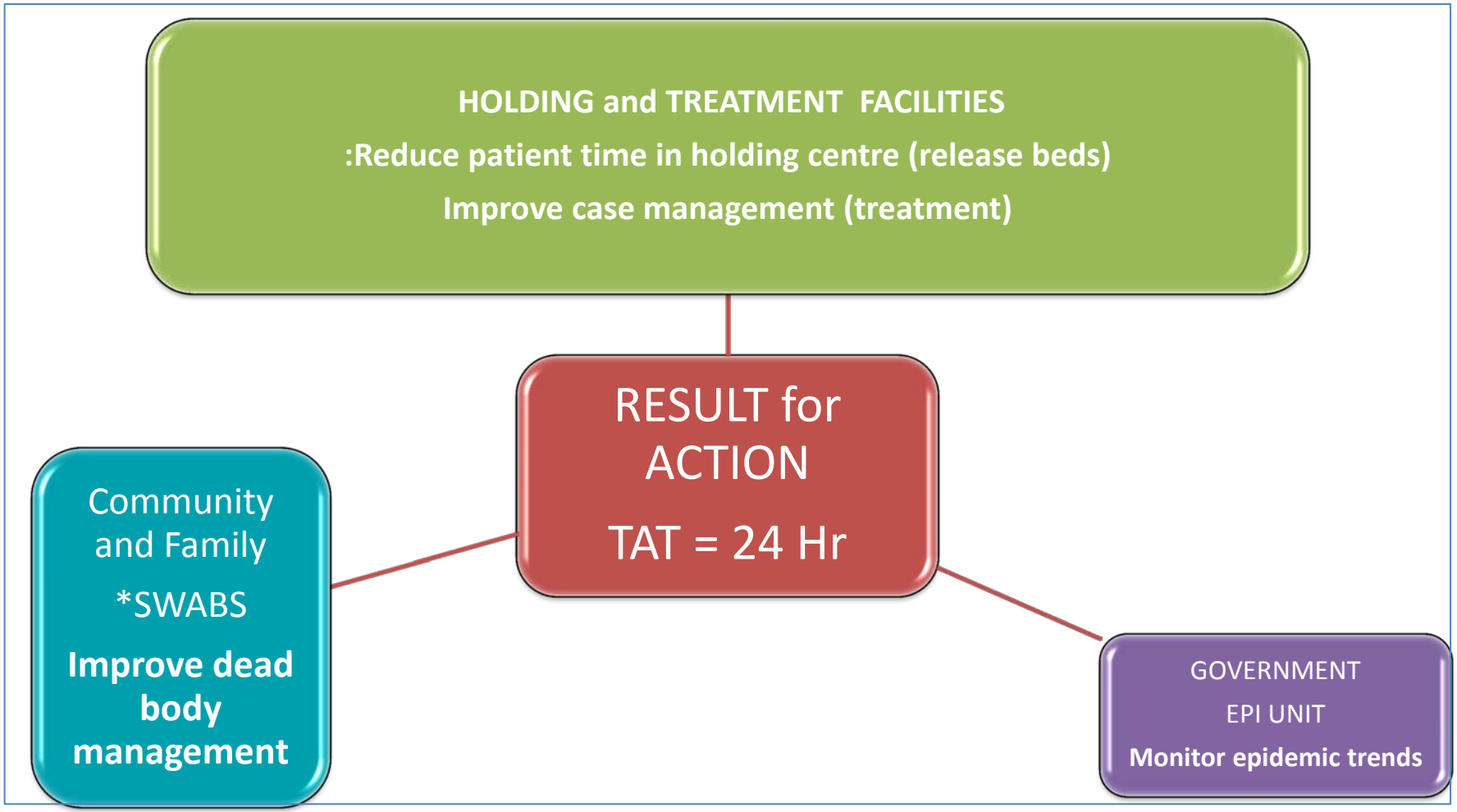
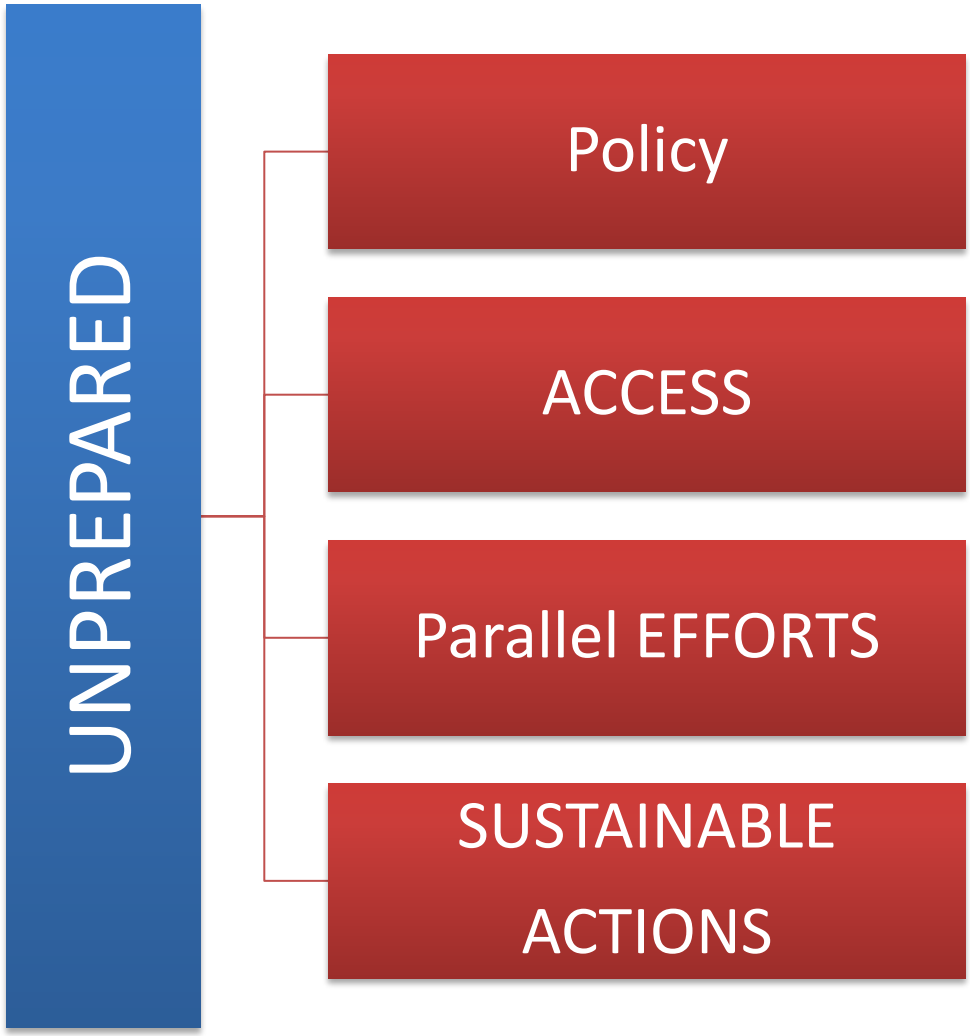


# CHALLENGES

## UNILATERAL ACTIONS



# Laboratory Partner Collaboration:
## *Foster LABORATORY NETWORK -*
## *Leveraging support for effective and efficient delivery –*

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# TRANSITION PLAN

INTEGRATION INTO HEALTH SECTOR PLAN for SUSTAINABLE OUTBREAK RESPONSE

# Critical Transition Outline

1. Geographic coverage- REACH-ACCESS
2. Transition of infrastructure – (minimum standards)
    a. Technology suitability
    b. Sustainability
3. Transition- Human Resource Capacity Building
4. Quality Assurance

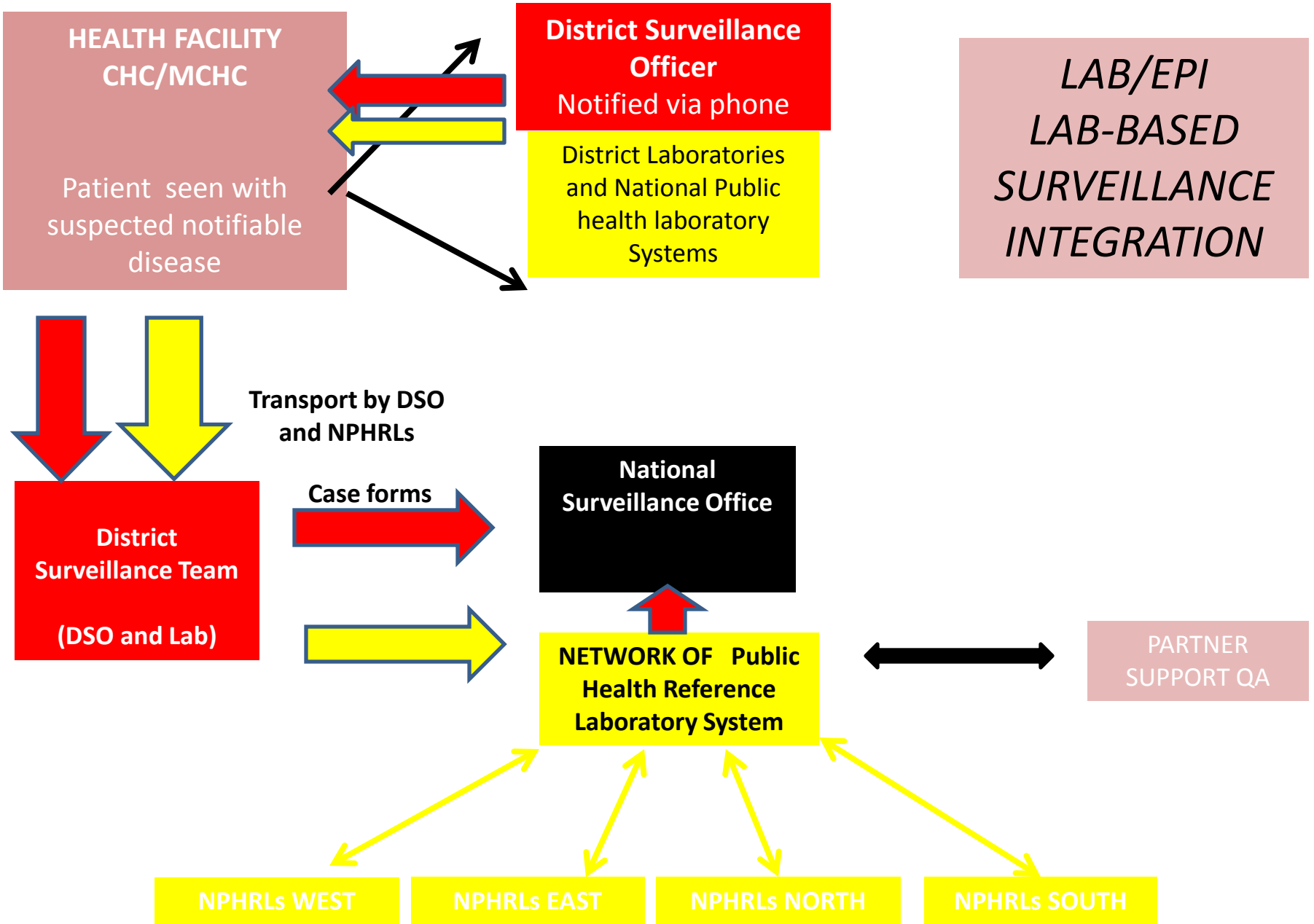
# Core Systems and structures set at minimum standards for Laboratory Services

Energy

HR

Water

Infrastructure


HEALTH FACILITY
CHC/MCHC
Patient seen with suspected notifiable disease
District Surveillance Officer
Notified via phone
District Laboratories and National Public health laboratory Systems
LAB/EPI
LAB-BASED
SURVEILLANCE
INTEGRATION
Transport by DSO and NPHRLs
Case forms
District Surveillance Team
(DSO and Lab)
National Surveillance Office
NETWORK OF Public Health Reference Laboratory System
PARTNER SUPPORT QA
NPHRLs WEST
NPHRLs EAST
NPHRLs NORTH
NPHRLs SOUTH

# NATIONAL RECOVERY PLAN

## *Human Resource – Rapid laboratory response team*

Quality Laboratory Service should be the first critical pillar to be established in Ebola outbreak as it is pivotal in directing the outbreak containment and prevention program.

# DEDICATED TO SURVIVORS

## HANDS OF TIMES AUGUST 2014

## HANDS OF TIME DECEMBER 2014

# THANK YOU