



Ebola Task Force Partnership

Cardno manages U.S. Centers for Disease Control and Prevention's (CDC) and the President's Emergency Plan for AIDS Relief's (PEPFAR) Office of the U.S. Global AIDS Coordinator and Health Diplomacy (S/GAC) inputs to the Ebola Task Force Partnership.



Overview

The Ebola Task Force Partnership aims to strengthen the disease surveillance and Ebola response systems in West African countries. Following the outbreak of Ebola, the Liberian Ministry of Health and Social Welfare, supported by CDC and the World Health Organization, requested support from the University of Oslo to leverage the district health information system (DHIS 2) to help manage Ebola case data. As a result, in 2015, the CDC's Division of Global Health Protection and the University of Oslo formed a partnership to develop a more harmonized effort to build a more robust and sustainable integrated disease surveillance and response (IDSR) system. The objectives of the partnership are:

1. Strengthening the core platform;
2. Developing tailored and sharable platform configurations for disease surveillance; and
3. Regional capacity building.

Partners:

University of Oslo, Ministries of Health



Sector:
Health

Key Services:

- > Partnership Management
- > Contracts & Funds Management
- > Monitoring, Evaluation, and Reporting
- > Communication & Knowledge Management



Location:
Global



Award Value:
US\$2,300,000



Client:

U.S. Centers for Disease Control and Prevention (CDC)

Duration:
October 2015 – March 2019

Results

DHIS 2 Software Development

Implementing partners provide quarterly updates and releases to DHIS 2. Recent enhancements have included: program rule improvements with a new user interface for better management; notification mode updates with validation rule notifications allowing high-priority individual messages regarding disease outbreaks; and data visualization enhancements allowing the use of daily relative periods in event analytics and removal of gaps in bar/column charts.

DHIS 2 CBS Online Community

Disease surveillance experts can now share experiences through a new community forum. Topics include lessons learned, technical solutions, platform configurations, requirements, use cases, and training materials. The online community also assists the partnership in receiving expert advice on software development and showcasing how metadata and its features could be configured for a specific surveillance system.

National disease surveillance and response systems strengthened in 19 countries. — As of June 2018.

Regional Capacity Building

To facilitate regional capacity building with DHIS 2, the partnership understands that disease surveillance training and high-quality support to regional and in-country organizations is vital. Four tracker academics took place in Mozambique, Nigeria, Togo, and Uganda. In addition, multiple DHIS 2 academies were completed from April 2017 to March 2018, including:

- Goa, India - Over 40 participants from Africa and Asia learned about disease surveyors and new features and improvements of the 2.26 update.
- Dakar, Senegal - Over 50 participants and facilitators attended the bilingual DHIS 2 academy, which included interpretation. Participants reviewed work done by disease surveyors and learned about new features and improvements of the 2.26 update.
- Oslo, Norway - The 5th annual week-long DHIS 2 Expert Academy brought together over 170 DHIS 2 experts. Sessions covered topics such as: case-based surveillance, DHIS 2 CBS work, malaria surveillance in Zambia, tracker roadmap, offline disease surveillance applications in Sierra Leone and Liberia, and use case presentations from Uganda, India, and South Africa.

Partner Coordination and Outreach through Health Information Systems Program

Coordination and outreach among partners is critical to ensuring effective and sustainable disease surveillance systems in low-resource settings. Health Information Systems Program (HISP) – a global network of people, entities, and organizations established by the Department of Informatics at the University of Oslo – serves as an integral component in supporting these systems by using a participatory approach to support local management of health care delivery and health information systems (HIS). The Ebola Task Force Partnership works with HISPs around the world to build capacity and strengthen HIS. Key achievements in Uganda and Tanzania are highlighted below.

HISP Uganda

- Assisted University of Oslo in hosting and organizing DHIS 2 academies. Continued work on developing integrated disease surveillance and response (IDSR) academy materials and discussions on new predictor feature;
- Helped develop a pilot project in Uganda during DHIS 2 Tracker Work Group Meeting where HIV experts shared expertise;
- Aided in creation of new functionality and requirements for Uganda pilot project;
- Worked with IntraHealth on disease surveillance/laboratory integration by finalizing the lab integration application;
- Assisted Knowtechure (Android developers) with testing and providing feedback to the android development team.

HISP Tanzania

- Collected requirements with HISP Uganda and HISP India for generic disease surveillance analysis application;
- Worked with Ministry of Health on implementation of case-based surveillance, including Cholera and Measles. Final approval was given, and discussions with Ministry of Health Departments of Epidemiology and Laboratory have commenced;
- Upgraded current IDSR tools to adapt to latest DHIS 2 software updates (e.g., utilizing new alters and notifications);
- Supporting implementation of Ministry of Health-led electronic IDSR rollout by conducting training and system configurations.

For more information contact Cardno:

Ophelia McMurray ophelia.mcmurray@cardno.com | +1 (703) 373-7747 | www.cardno.com

www.p4-project.org | twitter.com/p4_project