

**Ministry of Health** 

KENYA PUBLIC HEALTH EMERGENCY OPERATION CENTRE STANDARD OPERATING PROCEDURES

**JANUARY 2021** 



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The Kenya Public Health Emergency Operations Center (KPHEOC) Standard Operating Procedures (SOPs) are part of the Ministry of Health Preparedness System. This SOP describes the procedures for activating, operating, and deactivating the KPHEOC.

The KPHEOC provides a central location from which the Ministry of Health can provide interagency coordination and support of incident responses. The KPHEOC coordinates response to public health events/ emergencies.

Upon activation at any level, the KPHEOC serves as the centralized location (physically and virtually) to monitor and report the impact of emergencies while providing communication and information between the KPHEOC, the Incident Manager, key decision-makers, and surrounding jurisdictions. The KPHEOC is the focal point for coordination and support of the response and recovery activities for the country. The procedures listed apply to all personnel participating in KPHEOC activities.

The primary KPHEOC for the Ministry of Health is located at the Kenya National Public Health Institute Building, 1<sup>st</sup> floor, Kenyatta National Hospital grounds. This is a fully equipped and functional location.

About

DR. PATRICK AMOTH, EBS Ag. DIRECTOR GENERAL FOR HEALTH



# ABBREVIATIONS

| CDH     | County Director for Health                      |
|---------|---|
| CDSC    | County Disease Surveillance Officer             |
| DG      | Director General for Health                     |
| DPH     | Directorate of Public Health                    |
| EPID    | Epidemiological                                 |
| ICT     | Information Communication and Technology        |
| IM      | Incidence Manager                               |
| IMT     | Incidence Management Team                       |
| IMS     | Incidence Management System                     |
| KPHEOC  | Kenya Public Health Emergency Operations Centre |
| PHE     | Public Health Event                             |
| PHEOC   | Public Health Emergency Operation Centre        |
| SCDSC   | Sub – County Disease Surveillance Officer       |
| SITREP  | Situation report                                |
| SPOTREP | Spot report                                     |

Standard Operating Procedure for ICT

|                    | MINISTRY OF HEALTH | PHEOC/SOP/1/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

#### 1.1 Background

This SOP outlines responsibilities, structures, controls and the processes for accessing and usage of ICT systems and devices within the PHEOC. It applies primarily to officers within the PHEOC. However, all officers working inside the PHEOC are expected to abide by this and all procedures related to ICT systems security.

#### 1.2 Purpose

The purpose of this SOP is to guide the user on the access on ICT, access control, access to internet connectivity, access to TVs, telephony, computers, printers, scanners and conferencing facilities.

### 1.3 Scope

The scope will include access and utilization of both hardware and software within the PHEOC.

#### 1.4 Responsibilities

This ICT process is done by the ICT officer who is the administrator of the control access database. Responsibilities of all PHEOC users in relation to ICT are as follows:

#### 1.4.1 PHEOC Manager:

The PHEOC manager is responsible to give authorization to which officer and partners can access the PHEOC. He/she will also be responsible to authorize removal of users' access to the PHEOC.

#### 1.4.2 ICT Officer

- a. Maintaining and documenting ICT inventory within the PHEOC.
- b. Ensuring all components of ICT inventory is in good working condition, and report any malfunction.
- c. Advice the PHEOC manager on ICT matters and repairs of malfunction devices and inventory within the PHEOC
- d. Training new officers on use of ICT hardware and software and how to use the EARS system.

- e. Registering users access and updating the database within the PHEOC
- f. Ensuring all ICT systems are running.

#### 1.4.3 User/Watchers

- g. Learning and adhering to ICT policies within the PHEOC.
- h. Trained on usage of the EARS system.
- i. It is the responsibility of all the PHEOC staff to implement the procedure.

# 2. PROCEDURES

### 2.1 System Controls and Security

#### 2.1.1 Physical access controls/ Privileges and access rights:

- j. Physical access to the PHEOC is restricted using biometrics finger print reader and use of key and lock.
- k. The ICT officer with the approval of the PHEOC manager will be responsible for registering other officers into the biometric kit for accessing the PHEOC through scanning their fingers
- I. Registration approval; a formal request to access the PHEOC will be sent via email to the official PHEOC manager's email (<u>manager.eockenya@gmail.com</u>) and a copy can be shared to the ICT officer in charge. The email should have details of the officer requesting access. Upon approval by the PHEOC manager, the new member shall be registered into the system.
- m. The ICT officer will then register details of the newly registered officers into the Access Control database that is located in the ICT control room within the PHEOC. This database has details of all officers that currently have access into the PHEOC and updates time when officers last accessed the PHEOC. The details to be captured into the database are;
  - Full names of the officer.
  - Working organization/department.
  - Mobile telephone number.
  - Email address of the officer.
- n. Whenever a user ceases to be an employee of PHEOC/ DSRU or otherwise directed by the PHEOC manager, a user shall be deactivated and removed from the database hence blocking them from accessing the PHEOC.
- o. All new PHEOC users will be oriented on ICT by the ICT officer.

### 2.2 Equipment and Device Usage

#### 2.2.1 Smart TV sets:

There are smart TV's set up in the PHEOC, at the watchers section, boardroom, and in the ICT control room and one in the PHEOC manager's office. The smart TVs will be tuned to broadcast Global, Regional and Local events and outbreaks simultaneously. Each TV set has a remote control unit and has he following capabilities;

#### 2.2.2 Inbuilt Wi-Fi

To connect the TV to the Wi-Fi, press the menu button on the remote control, then select network, then network settings to see all the wireless networks. Select the PHEOC Wi-Fi link to connect to the Wi-Fi and key in the password to connect the TV.

#### 2.2.3 Internet browsing and smart apps

- p. Once the Smart TV is connected to the internet it can now stream news either through the normal internet browser or through the Smart apps.
- q. The procedure to stream using Smart apps, click on the colored button with 'M' on the remote control unit, this will open installed apps at the bottom of the screen, scroll through to select the news channels and click enter to open. Once opened, the channel will automatically display the content.
- r. To stream using the browser, click on the colored button with 'M' on the remote control unit, this will open installed apps at the bottom of the screen, scroll through to select the web browser with a mouse icon, and then click enter to open. From the browser one can type URL using the remote control to open web pages.

#### 2.2.4 Projecting:

- s. The Smart TV has a com-port and HDMI ports that allow connection for projecting from other devices e.g. laptop and mobile phones using cables. The TV can also connect these devices wirelessly using Wi-Fi-direct through connection from the same network.
- t. To connect through the cable i.e. com-port and HDMI cables plug the provided cable to the device i.e. laptop, using the remote control unit, press the source button then navigate to select HDMI from screen then click enter to view the connected device.
- u. To connect through wireless the computer device must be within the same network with the Smart TV, from the laptop system settings, select project to a second screen option, this will open a panel on the right side of the computer with options to connect to the second screen, select 'connect to a wireless display' option, this will open a list of all devices visible through the network. Select the name of the Smart TV and click connect. From the screen, a communication will be sent to give permission to your laptop to connect to the Smart TV, click allow using the remote control unit and the connection will happen automatically.

#### 2.2.5 PHEOC Cisco Telephones

Each workstation within the PHEOC is set up with a Cisco phone connected using the E1 line from Airtel. These phones are setup to respond to emergencies. To make a call dial 'g', this will change the tone of the phone then followed up with the mobile number of the recipient e.g. 9 0702731072.

#### 2.2.6 Printer and Computers

One smart printer is provided in the PHEOC, this device can also work as a photocopier, scanner and can access documents from a flash disk. The port to the flash disk is located at the back side of the device.

#### 2.2.7 Using the printer

The printer is configured to use the network within the PHEOC. All computers connected to the PHEOC network can print directly to the PHEOC printer. From the printer menu within the computer settings one will be able to visualize the printer and connect to it.

#### 2.2.8 Using the scanner

The scanner services save documents directly to a flash drive. To use the scanner put the document on the scanner panel then plug in the USB drive from behind the device, on the device's screen a pop up will appear requesting either to retrieve from the USB device or to save onto the USB drive. Select save option and click on the microscope icon to scan the document, a preview of the scanned document will be displayed on the screen. Click save, give the document a name and save it in the flash memory. Scanned documents are saved in PDF format.

#### 2.2.9 Using the photocopying service

From the scanning panel press the copy button to start photocopying the document, this will automatically start copying.

#### 2.2.10 Using/accessing flash drive

The flash drive can be used as a source to print out saved documents through the device. Once the flash disk has been plugged in, select the retrieve data option from the device's screen, this will open a folder displaying contents inside the flash disk. Select the document and click print to print the document.

#### 2.2.11 Conference Facilities

The PHEOC has conference devices set up for both tele and video conferencing.

#### a. Video conferencing service

Three video conferencing cameras are set up within the PHEOC, one in the watchers area, one in the boardroom and one in the manager's office. The cameras come with microphones set up near the smart TV screens. The cameras are used for video conferencing either within the premises or to the outside world.

#### **b.** Teleconferencing Service

All cisco telephones set up at every work station are capable of doing a teleconference. Dial '9' then followed by the recipient's number, put the recipient on hold then press the button with multiple image of persons on the phone, this will allow you to dial another recipient's number to join in the call.

### 2.3 Network Security And Access

- v. Network security is the process of taking physical and software preventive measures to protect the underlying networking infrastructure from unauthorized access, misuse, destruction or improper disclosure thereby creating a secure platform for computers and users. The PHEOC is connected to a Wi-Fi access point with a password; the Wi-Fi password is managed by the ICT officer in charge in the PHEOC.
- w. To access the Wi-Fi link, other officers need to contact the ICT officer for the password to access the internet.

#### 2.4 Electricity Connection

Electricity meter for power connection in the PHEOC is located in the ICT control room within the PHEOC. The meter has power switches controlling connection in each section of the PHEOC. In case of power surge and power goes off in any phase of the PHEOC, officers can check the meter in the ICT control room.

#### 2.5 PHEOC Reporting System and Usage

- x. The PHEOC system was developed to enable collection of data required to achieve early detection of diseases and public health related events and to analyze the data in a way that it can be used effectively by decision makers.
- y. Each officer who works in the PHEOC is a user of the system and will be given credentials to access the system for security purposes; this is username and a password. Users have privileges and rights when it comes to access the contents of the system.

#### 2.6 PHEOC System Training resources

The ICT officer will be responsible for training new officers on usage of the PHEOC system. The user manual/ guide are available for any officer to use whenever the ICT officer is not available.

### 2.7 ICT Emergency Recovery Plan

An emergency recovery plan (ERP) is a process or set of procedures to recover and protect a business IT infrastructure in the event of a disaster. It includes putting in place procedures to be undertaken to restore normalcy of operations in the aftermath of disasters. This includes identifying the recovery strategies for all critical business functions and services, establishing recovery management organization and process, and creating recovery plans for various levels of business functions and services

#### 2.7.1 Data backup plan

The PHEOC data backup should be the responsibility of the ICT officer. Data should be backed up in the PHEOC servers located on the ground floor of the building. Daily update and usage of offline back up using an external hard drive should also be done by the ICT officer and stored away from the PHEOC building.

#### 2.7.2 Data recovery plan

In the event of a disaster or data loss, reference should be made to the offline storage for recovery of normal operation.

### 2.8 APPENDICES

- a. KPHEOC Handbook
- b. WHO.- Handbook for developing PHEOC

Standard Operating Procedure for PHEOC Surge staff

|                    | MINISTRY OF HEALTH | PHEOC/SOP/2/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
| Ministry of Health | DIRECTORATE OF     | lssue            | А        |
|                    | PUBLIC HEALTH      | Revision         | 0        |

#### 1.1 Background

The selection of surge personnel depends on the health event/incident. Different health events will require health resource, expertise as per the magnitude of health event.

#### 1.2 Purpose

The purpose of this SOP is to provide standard for selection, engagement and deployment for additional personnel for response. Successful epidemic response (health event) is directly dependent on expertise, competence, developed skills and attitudes of the personnel taking part in response.

### 1.3 Scope

The SOP will be used by the PHEOC, County and partners to identify and assemble relevant surge staff to support response

### 1.4 Responsibility

The event - specific taskforce is responsible for implementation of this SOP.

### 2. PROCEDURES

- The PHEOC will maintain and update on a regular basis a database of relevant and varied skilled local surge staff.
- Upon declaration of an event, the PHEOC manager will do an analysis to quantify the human resource required in terms of skills and expertise and advice the chairperson of the event specific taskforce on the human resource requirement.
- The team reviews the staff that is available vis a vis staff needed for response.
- If additional staff is required, the event specific taskforce chairperson will advise the Director General/ County Director of Health to request for surge staff locally or internationally based on identified gaps.
- The surge staff will be oriented on the incident then deployed.
- The event specific taskforce will regularly review the performance the number of surge staff based on the evolution of the public health event.

• The Director General/ County Director of Health is responsible for Memorandum of Understanding between MOH / County Health Department and other agencies that provide surge staff.

# **3. REFERENCES**

KPHEOC Handbook

Standard Operating Procedure for Activation & Deactivation of PHEOC

|                    | MINISTRY OF HEALTH | PHEOC/SOP/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

### 1.1 Background

The watchers in the PHEOC routinely monitor events of public health concern. When an incident of public health concern is reported and requires a health response, the PHEOC is activated to coordinate the response. When the response is declared over, the PHEOC will be deactivated and return to routine monitoring.

#### 1.2 Purpose

The purpose of this SOP is to provide guidance for the activation and deactivation of the PHEOC.

### 1.3 Scope

The SOP will be used by the Director General / County Director of Health.

#### 1.4 Responsibility

The PHEOC manager is responsible for the implementation of this procedure.

# 2. PROCEDURES

### 2.1 Activation

When a public health event meets at least one of the following criteria, the PHEOC Manager should advice the DG/ CDH in writing to activate the PHEOC. The criteria are:

- Incident occurrence overwhelms the available resources including where the capacity of regular PHEOC staff is overwhelmed and additional support required
- Any condition that has met the criteria to be declared a Public Health Event of International Concern (PHEIC) in line with IHR 2005 guidelines
- An emergency with high public health burden potential
- A condition with the potential of cross border effects
- Issuance of a leadership / policy group directive
- Incidences of public concern
- An epidemic of national concern (affecting multiple regions)

The DG/ CDH will then take the following steps:

- Activate an Incidence Management Team with clear Terms of Reference to coordinate response.
- Designate an Incidence Manager, who shall:
  - a. Be responsible for coordinating the on-site response activities together with the field response team.
  - b. Provides continuous updates about the response activities to the EOC manager
  - c. Evaluate stocks of supplies for the response and ensure backups are brought in good time to prevent stock outs
  - d. Provide regular updates to the DG/ CDH while looping in PHEOC Manager for internal and external sharing.

The activation checklist is comprehensively laid out in the KPHEOC Handbook.

### 2.2 Deactivation

The following activities should be carried out to effect deactivation. The Incidence Manager will:

- Notify appropriate agencies regarding the individual sites where the public health emergency is being deactivated
- Develop and disseminate the deactivation plan
- Monitoring the deactivation process
- Ensure that all forms, reports, and documents from each section/unit are completed and submitted to the documentation unit or officer responsible
- Make recommendations regarding the timing and sequence of demobilization of all resources used in the response to the PHEOC manager
- Authorize the deactivation of IMS resources
- Transfer of authorities/responsibilities/missions to the relevant authorities
- Handover to the PHEOC manager
- Fold and repack re-usable maps, charts, materials
- · Collect items that have been deployed in the field for future response use
- Make a list of all supplies that need replacement and forward to the logistician
- Return identification credentials to the PHEOC Manager
- Develop the deactivation report
- Ensure open action items that are to be addressed by the agency are completed or will be addressed after deactivation
- · Prepare for the after-action review meeting
- Initiate evaluation activities for the response.

### 3. REFERENCES

KPHEOC Handbook

Standard Operating Procedure for Information Management

|                    | MINISTRY OF HEALTH | PHE0C/S0P/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

### 1.1 Background

The information management system includes data and information receipt, recording, documentation, analysis, generation of different information products, displaying and sharing of information.

#### 1.2 Purpose

The purpose of the SOP is to ensure that there is an effective information management system which enables enhanced early detection and response to (Public Health Events) PHEs.

### 1.3 Scope

Data will be collected from all the levels in Kenyan health system (Community, Health facility, sub county, county and National level) and processed at the National level and disseminated to health care levels and stakeholders.

Real time information will also be gathered through media monitoring (Local and International TV channels) and social media.

# 2. PROCEDURES

- At occurrence of a PHE a citizen or a health worker that witnesses the event or is notified, reports to PHEOC through hotlines (0732353535, 0729471414) or the PHEOC toll free number (0800721316) or to a regional surveillance officer, who communicates the information to the national regional focal person through a phone call.
- Watchers capture news /event from mass media or social media of occurrence of a PHE and advises source of information not to share unconfirmed information about the incident but to refer all enquiries to the PHEOC and County Director of Health offices for advice.
- The event is captured in the PHEOC reporting system, EARS.
- PHEOC information system will generate basic EPID analysis of the event.
- PHEOC watchers will conduct further in-depth information gathering from the source and follow it with the SCDSC/CDSC to verify and give feedback.
- Event analysis will be presented to the watchers team lead that will determine the severity of the incidence and determine communication urgency to the EOC manager. Reporting can be in form of a SPOTREP if urgent or in the form of daily or weekly reports if not urgent.

- Upon confirmation (through laboratory analysis, if infectious, by the National Public Health Laboratories) of a serious nature of a PHE.
  - a. the laboratory informs the PHEOC and other levels on the results following the laboratory information sharing SOPs
  - b. the PHEOC manager informs health workers handling the event via email and text message, phone call the investigation results
- For purpose of official communication and in compliance with the IHR 2005 of the event, PHEOC reports laboratory results to the higher authority to the Director General of Health through the Head Directorate of Public Health.
- If there is positive confirmation of an event of public health importance the PHEOC (communication focal person) will develop communication release to be shared by the DG and County directors to the public. This will be done based on the information needs.

### **3. REFERENCES**

KPHEOC Handbook

Standard Operating Procedure for Daily Reports

|                    | MINISTRY OF HEALTH | PHEOC/SOP/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

### 1.1 Background

The watchers on duty at the PHEOC should generate reports summarizing their activities for each day.

#### 1.2 Purpose

This SOP describes the procedures to be followed for development and dissemination of the PHEOC daily report by the watchers on duty at the PHEOC on a daily basis.

#### 1.3 Scope

This SOP applies to all permanent and temporary personnel assigned in the PHEOC.

### 1.4 Responsibility

The PHEOC Manager is responsible for ensuring that the designated personnel are sufficiently trained to competently perform this as prescribed. All permanent and temporary staff assigned to the PHEOC are responsible for compliance with this SOP.

### 2. PROCEDURES

- The PHEOC watchers on duty gather information on potential and confirmed public health incidents throughout the day by review and surveillance of various information sources (MOH disease surveillance and information systems, Print, electronic and social media). Before capturing the report, the watcher counter checks the tabular report to make sure that it has not been captured in the emergency reporting system.
- The daily report includes information about:
  - a. Incidents and updates that occurred locally, regionally and globally in the course of the day.
  - b. Call data from the PHEOC hotlines and toll free lines
  - c. Field deployments
  - d. Other PHEOC activities
- The watchers on duty compile the first draft of the report
- Sources of information include:

- a. MOH disease surveillance and information systems
- b. Reports from the public, County Disease Surveillance Coordinators and the media reports (i.e. e-mails and phone calls regarding emerging events and incidents of significant importance that are either new or have increased public health impact).
- c. Daily survey of media information
- d. Weekly SITREPs
- e. Minutes of the National Task Force meetings
- f. Other disease surveillance or outbreak reports
- The first draft of the daily report is sent to the week's team lead for review and additional comment by 1630 hours every day. The original report is contained in the EOC Alert Reporting System (EARS) whilst the summary daily and weekly report is shared with PHEOC manager and the entire rapid response teams within PHEOC.
- The team lead for the week will then circulate the daily and weekly report internally, with PHEOC manager and members of the rapid response teams by 1700 hours every day and end of the week respectively via email.
- The PHEOC manager to share the report with the Director General and Head Directorate of Public Health, Head Department of Disease Surveillance and Epidemic Response, Head Division of Disease Surveillance and Epidemic Response and Head National Public Health Laboratories by 0800 hours the following day via email.
- By the end of every epi-week, a weekly report shall be generated from the EARS system which should be shared to the PHEOC manager and presented during the PHEOC handover meeting every Monday at 1000 hours.

### **3. REFERENCES**

- KPHEOC Handbook
- Public Health Act Cap 242
- IHR 2005

Standard Operating Procedure on Weekly Disease Outbreak Situation Report (SITREP)

|                    | MINISTRY OF HEALTH | PHE0C/S0P/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

#### 1.1 Background

The weekly disease outbreak situation report captures information regarding confirmed disease outbreaks in the country as well as reported health alerts, public health incidents and the actions taken.

The information is provided in the narrative form and, epidemic curves and tables for each disease outbreak in four primary headings, namely: (i) disease outbreak status, (ii) interventions carried out, (iii) challenges, and (iv) key recommendations.

Sharing information with key response stakeholders and partners supports situational awareness and decision-making at all levels of emergency management. Timely communication of incident information, including impact to the public health and medical system, current and anticipated resource needs, and the capacity to respond are essential to developing a common operating picture and planning the response.

#### 1.2 Purpose

This SOP describes the procedures to be followed for development and dissemination of the weekly disease situational report.

#### 1.3 Scope

This SOP is applicable in the management and dissemination of disease outbreak information that is collected on a weekly basis from counties with confirmed disease outbreaks, and shared to the relevant stakeholders for public health action every Tuesday at 1400 hours. The weekly SITREP shall be the primary means of information sharing with stakeholders in order to develop a common picture for effective coordination of response activities.

#### 1.4 Responsibilities

The Planning Section Chief and the PHEOC manager is responsible for compliance with this SOP.

### 2. PROCEDURES

• The Planning Section Chief collect case lists / line list (MOH 503) in MS Excel format from all counties with confirmed disease outbreaks every Monday at 1000 hours via email.

- The Planning Section Chief and the Planning Team then compile the case lists based by disease.
- The Planning Section Chief and the Planning Team then analyze each by time, place and person (descriptive epidemiology).
- The Planning Section Chief and the Planning Team then prepare the first draft of the weekly SITREP to include additional information from the weekly watcher's reports.
- The Planning Section Chief shares the first draft with the editorial team for review every Monday by 1700 hours.
- The editorial team shares feedback with the Planning Section Chief every Tuesday by 1000 hours who incorporates the feedback and finalizes the weekly SITREP by 1200 hours.
- The Planning Section Chief then shares the final weekly SITREP with the PHEOC Manager for approval by 1300 hours.
- The PHEOC manager sends out the weekly disease SITREP every Tuesday at 1400 hours to relevant stakeholders, namely: (i) MOH top management, (ii) Development Partners in Health, (iii) County Directors of Health, (iv) County Disease Surveillance Coordinators, and Division of Disease Surveillance and Response & PHEOC staff via email.

### 3. REFERENCES

KPHEOC Handbook

Standard Operating Procedure for Handing over of Hotlines

|                    | MINISTRY OF HEALTH | PHEOC/SOP/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

#### 1.1 Background

The KPHEOC was established for members of the public to immediately report any occurrences that pose health threats even by hotlines.

### 1.2 Purpose

To ensure PHEOC watchers have functional dedicated phones for operations and reporting public health events.

### 1.3 Scope

The PHEOC hotlines will manage calls and messages from any part of the country of events that affect humans, animals or the environment.

### 1.4 Responsibility

Designated watchers deployed via a periodically updated duty roster.

# 2. PROCEDURES

- The watchers on duty will attend the handover meeting held every Monday at 1000 hours.
- Each watcher shall get a hotline phone handed over to them and recorded (name, phone number) with a charger.
- Each watcher shall confirm the airtime/ recharge balances in their respective phone and document. In addition, the phone condition and functionality shall be documented on the hotline phone log.

Standard Operating Procedure for Receiving of Hotline Phones

|                    | MINISTRY OF HEALTH | PHEOC/SOP/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

### 1.2 Background

The Ministry of Health established the KPHEOC to enhance event based surveillance and it has dedicated hotlines for the public to report any occurrences that pose health threats and are of concern.

### 1.3 Purpose

The PHEOC watchers handle emergency reporting calls from both public and health workers and generate a concise event report for analysis and public health action.

#### 1.3 Scope

The PHEOC hotlines will be used to receive calls and messages from any part of the country on public health events.

### 1.4 Responsibility

PHEOC watchers on duty.

### 2. PROCEDURES

- Use a PHEOC specific branded salutation as below in English or Kiswahili:
  - a. **ENGLISH**: "Thank you for calling Ministry of Health, this is the Public Health Emergency Operation Centre, my name is.............. (Official name). How may I help you?"
  - b. **KISWAHILI**: "Asante kwa kuwasiliana na Wizara ya Afya, hiki ni Kitengo cha Tharura, jina langu ni....... (majina kamili). Unahitaji usaidizi wa aina gani?"
- Enquire the name of the caller and the location where he/ she is calling from.
- Allow the caller to make a report of whatever public health event.
- Ask the caller questions to clarify facts related to; what, where and when of the event.
- Follow up inquiry about magnitude or total cases affected.
- Do not make any promises but assure the report will be acted upon and the caller or the public involved could follow up with County Director of Health in the respective area.
- Give the caller an opportunity to ask any questions.

- Call back if the call goes off before sufficient information is collected.
- Thank the caller.
- End the call.
- Document the captured data in the EARS for analysis and action

# **3. REFERENCES**

KPHEOC Handbook

Standard Operating Procedure for Management of Hotline Information

|                    | MINISTRY OF HEALTH | PHEOC/SOP/3/2021 |          |
|--------------------|--------------------|------------------|----------|
|                    |                    | Depart:          | Section: |
|                    |                    | DPH              | PHEOC    |
|                    | DIRECTORATE OF     | Issue            | А        |
| Ministry of Health | PUBLIC HEALTH      | Revision         | 0        |

#### 1.1 Background

The PHEOC has hotline phone lines for enhancing event based surveillance.

#### 1.2 Purpose

This SOP describes the specific procedures to be followed in managing the information received from the Hotlines

#### 1.3 Scope

The PHEOC hotlines are used from any part of the country and report events that affect humans, animals or the environment.

#### 1.4 Responsibility

The watchers on duty manning the hotlines shall ensure that information is well captured as per category logs and in correct format as per the daily report template in the EARS system. In addition, the watcher is expected to indicate the status of follow up information from SCDSC whether rumor or confirmed and determine the significance of the event and indicate as per the EOC system.

### 2. PROCEDURES

- Once information is received from the calls, the watcher shall the information in the EARS system.
- The watcher who received and entered the information into the EARS system will then verify the information by calling the relevant County Disease Surveillance Coordinator.
- In the event of significant finding, the watcher shall inform the team lead who shall escalate it to the PHEOC manager via phone call and email.
- The PHEOC manager, based on the nature of event and its importance shall then escalate it to the senior management in the daily reports.

# **3. REFERENCES**

• Work manual of 12320 health hotline responding to public health emergencies



# ACTIVITY LOG ICS 214

|                              |                  |                                 |                  | Alert No:<br>Message No:      | : ON       |
|------------------------------|------------------|---------------------------------|------------------|-------------------------------|------------|
| UNIT LOG                     | 1. Incident Name |                                 | 2. Date Prepared |                               | 3. Time    |
| Unit Name/Designators        | Unit Leader      | Unit Leader (Name and Position) | ion)             | 5. Operational Period<br>Date | From<br>To |
| 7. Personnel Roster Assigned |                  |                                 |                  |                               |            |
| Name:                        |                  | Position:                       |                  |                               |            |
|                              |                  |                                 |                  |                               |            |
|                              |                  |                                 |                  |                               |            |
| 8. Activity Log              |                  |                                 |                  |                               |            |
|                              | Activity         |                                 |                  |                               |            |
|                              |                  |                                 |                  |                               |            |
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| Prepared By:                 |                  |                                 |                  |                               |            |
|                              |                  |                                 |                  |                               |            |

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# SECURITY SIGN-IN/ OUT LOG

#### Visitors and Staff – Please sign in and out

| Date | Time In | Name | Section/Agency | Time Out |
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# **RESOURCE REQUEST FORM**

| RESOURCE REQUEST NUMBER                  |                       |         |
|--|-----------------------|---------|
| FROM:                                    | I                     | DATE:   |
| AGENCY:                                  |                       |         |
| DESCRIBE RESOURCE BEING REQUESTE         | D:                    |         |
|  |                       |         |
| HOW MANY ARE NEEDED:                     |                       |         |
| PURPOSE (How will resource be used?)     |                       |         |
| LOCATION WHERE RESOURCES TO BE PI        |                       |         |
| RESOURCE USE LOCATION (if different from | n delivery location): |         |
| REQUESTER: (Name)                        | (Phone)               |         |
| HOW LONG WILL IT BE NEEDED?              |                       |         |
| Approved by                              | Date & Time           |         |
| Given by:                                | Date:                 | & Time: |
| Received by:                             | Date:                 | & Time: |
| 28                                       | 5                     |         |

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| Date<br>Return                             |  |  |  |  |   |  |   |  |   |   |   |  |
| Date<br>Delivered                          |  |  |  |  |   |  |   |  |   |   |   |  |
|  |  |  |  |  |   |  |   |  |   |   |   |  |
| Comments                                   |  |  |  |  |   |  |   |  |   |   |   |  |
| Date/Time<br>notified of (dis)<br>approval |  |  |  |  |   |  |   |  |   |   |   |  |
| Approved/<br>Disapproved                   |  |  |  |  |   |  |   |  |   |   |   |  |
| Date/Time<br>Forwarded<br>to County        |  |  |  |  |   |  |   |  |   |   |   |  |
| Date/Time<br>of Request                    |  |  |  |  |   |  |   |  |   |   |   |  |
|  |  |  |  |  |   |  |   |  |   |   |   |  |
| Resource                                   |  |  |  |  |   |  |   |  |   |   |   |  |
| esource Request #                          |  |  |  |  |   |  |   |  |   |   |   |  |
|  | Date/Time         Date/Time         Approved/         Date/Time         Comments           of Request         Forwarded         Disapproved         notified of (dis)         to County         approval | Resource     Date/Time     Date/Time     Approved/     Date/Time     Comments     Date       of Request     Forwarded     Disapproved     notified of (dis)     Delivered     Delivered       to County     approval     approval     approval     Delivered | Resource     Date/Time     Date/Time     Approved/     Date/Time     Comments     Date       of Request     Forwarded     Disapproved     Disapproved     approved     Date       to County     to County     approved     approval     approval | Resource     Date/Time     Date/Time     Approved/     Date/Time     Date/Time       of Request     Forwarded     Disapproved     notified of (dis)     Date       to County     approval     approval     Delivered | Resource     Date/Time     Date/Time     Date/Time       of Request     Forwarded     Disapproved     Date/Time       of Request     Forwarded     Disapproved     Date/Time       for County     Disapproved     Disapproved     Disapproved       for County     Disapproved     Disapproved     Disapproved | Resource     Date/Time     Date/Time     Date/Time     Date/Time       of Request     Forwarded     Disapproved     notified of (dis)     Date       in     in     in     in     in       in     in     in     in     in | Resource     Date/Time     Date/Time     Date/Time       of Request     Forwarded     Disapproved     Date/Time       of Request     Forwarded     Disapproved     Disproved       in     In     In     In       in     In     In | Resource     Date/Time     Date/Time     Date/Time       of Request     Date/Time     Approved/     Date/Time       of Request     Forwarded     Disapproved     Date/Time       io     County     Disapproved     Date/Time       io     County     Disapproved     Disapproved       io     County     Disapproved     Disapproved       io     County     Disapproved     Disapproved       io     Io     Io     Io       io     Io     Io     Io | Resource     Date/Time     Date/Time     Date/Time     Date/Time     Date/Time       of Request     Forwarded     Disapproved     Date/Time     Approved     Date/Time       of Request     Forwarded     Disapproved     Disapproved     Disapproved       of Request     Forwarded     Forwarded     Disapproved     Disapproved       of Request     Forwarde | Resource     Date/Time     Approved/     Date/Time     Approved/     Date/Time       Image: Comments     Image: Comments     Image: Comments     Date/Time     Date/Time       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Date/Time       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Image: Comments     Image: Comments       Image: Comments     Image: Comments     Imag | Resource     Date/Time     Date/T | Resource         Date/Time         Approved/<br>International of Responding<br>forwarded         Date/Time         Date/Time |

# **RESOURCE REQUEST STATUS LOG**

