



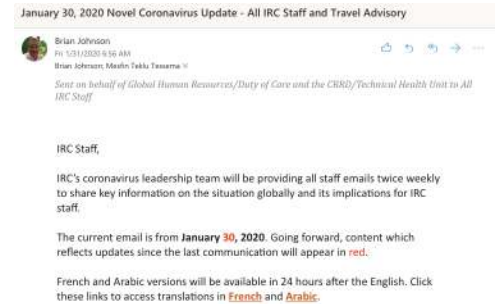
INTERNATIONAL
RESCUE
COMMITTEE

Coronavirus Update

14th Feb 2020

Coordination and Communication

- Coronavirus leadership group established
- Organization wide communication channels established
 - Twice weekly All Staff emails
 - RescueNet info page
 - Translated materials
 - Duty of care



BCC: All IRC People Managers

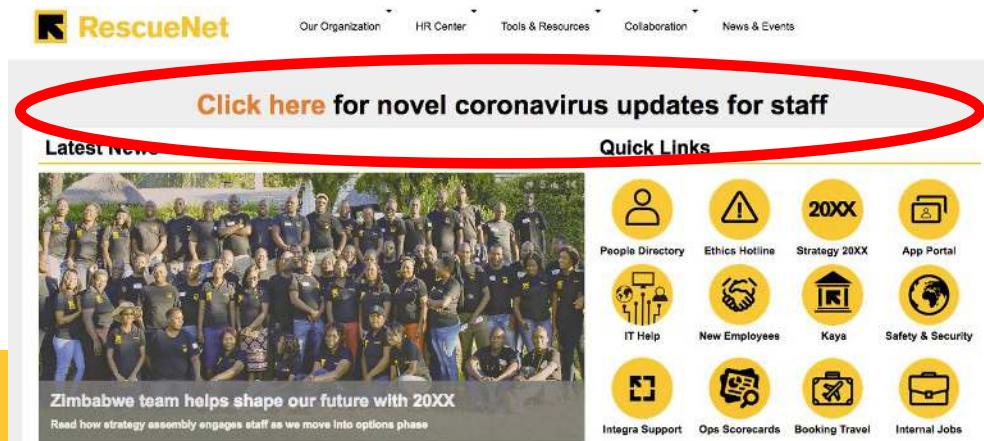


Ces e-mails seront disponibles en français et en arabe 24 heures après la publication de la version anglaise. Cliquez sur les liens suivants pour accéder aux versions en **français**. [Read in French / Lire en français](#)

ستوفر الإصدارات المترجمة إلى الفرنسية والعربية في غضون 24 ساعة بعد نشر الإصدار باللغة الإنجليزية. انقر فوق هذين الرابطين للانتقال إلى الإصدارات المترجمة إلى العربية. [اقرأ باللغة العربية / Read in Arabic](#)

Preparing for and responding to any major disease outbreak within the IRC is complex and involves many stakeholders, departments/units and regions. Outbreak preparedness and response require a coordinated approach.

As managers, you play a critical role in communicating key information to ensure that staff are working in a safe and healthy environment.

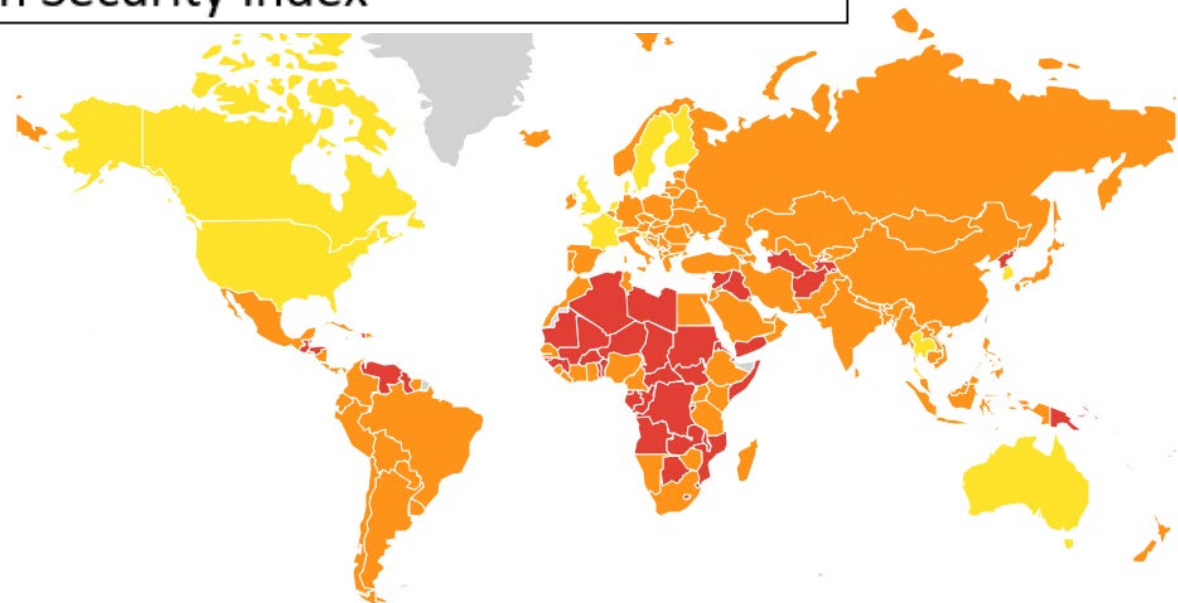


IRC's COVID-19 Risk Categorization and Response Plan

Real-Time Risk Analysis

IRC Coronavirus (2019-nCoV) Risk Categorization Index

1. Transmission type
2. Transmission intensity
3. Country specific vulnerability
 - Global Health Security Index



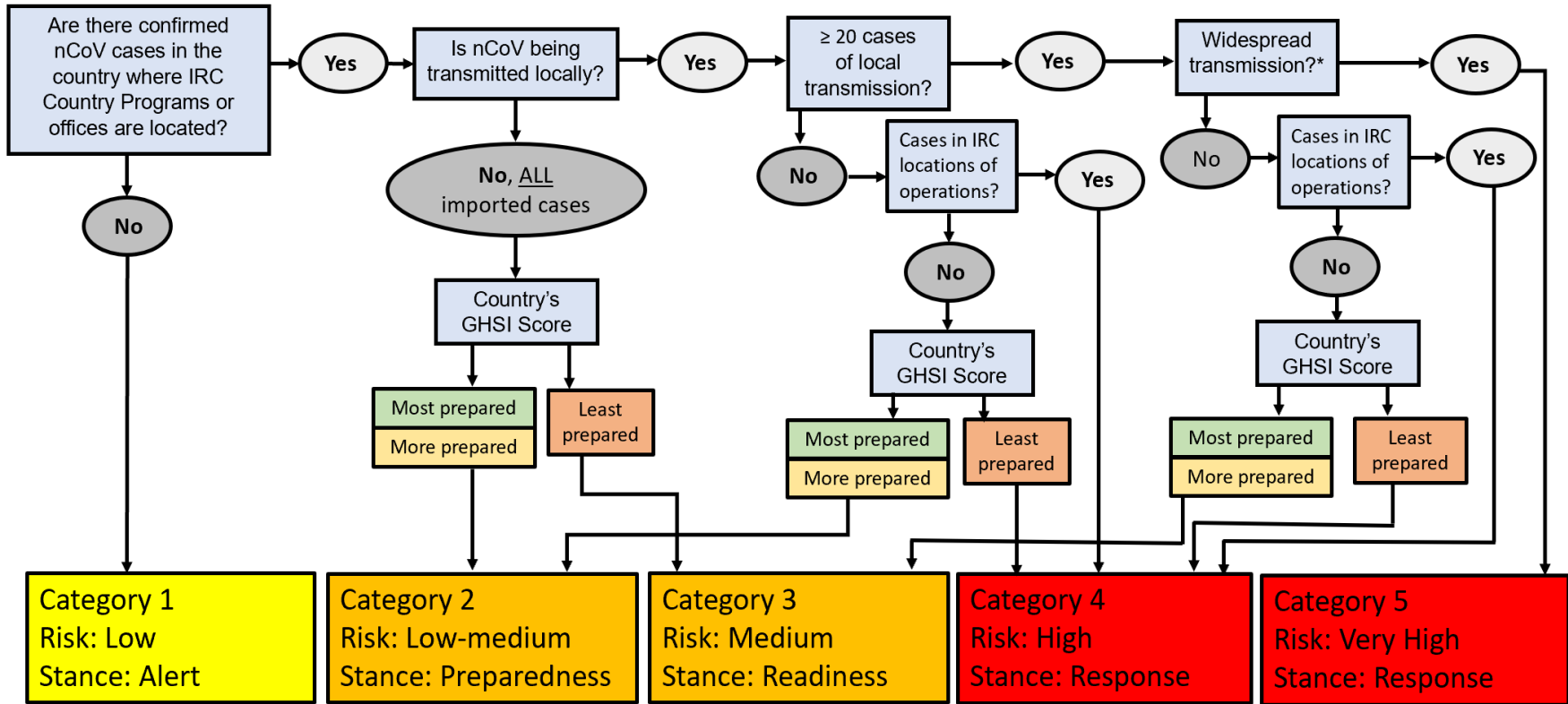
Key

- Most Prepared
- More Prepared
- Least Prepared

Select a country to see Overall Score/Rank and access a full country page.

IRC Decision Making Guide for Risk Categorization and Response to 2019-nCoV

Outbreak of novel coronavirus (2019-nCoV)



IRC Coronavirus (2019-nCoV) Risk Assessment and Response Plan

Clear thresholds and triggers for IRC Offices/Country programs to move between the categories based on the IRC's Coronavirus Risk Categorization Index

Category 1	Category 2	Category 3	Category 4	Category 5
Risk: Low Stance: Alert	Risk: Low-medium Stance: Preparedness	Risk: Medium Stance: Readiness	Risk: High Stance: Response	Risk: Very High Stance: Response



Actions

- IRC Offices
- IRC Country Programs
- IRC Travel Advice



Increasing actions, technical support and resources

Category	Trigger	Risk	IRC Stance	Actions
Category 1	All IRC Country Programs/Offices	Low	Alert	IRC Offices AND IRC Country Programs <ol style="list-style-type: none"> Regular updates provided to all staff. Dissemination of key prevention messages to all staff.
Category 2	<p>Imported case(s) in-country AND Global Health Security Index Score “Most Prepared/ More Prepared”</p> <p>Local transmission in-country (Not in IRC location of operations) AND Global Health Security Index Score “Most Prepared/ More Prepared” AND number of cases from local transmission <20</p>	Low - Medium	Preparedness	IRC Offices AND IRC Country Programs <ol style="list-style-type: none"> Regular updates provided to all staff. Dissemination of key prevention messages to all staff. Country Program/Office Coronavirus focal point established. The Country Director/Head of Office should inform all staff to complete the free WHO online COVID-19 introductory course. For country programs with limited internet connection/bandwidth, the Country Director/Head of Office should nominate an in-country focal point to deliver the content of the online course. All SMT staff are required to read the SOP in full and verbal briefings to share <u>key messages</u> from the SOPs (in local language) with all other staff, must be organized by the CD/head of office.
Category 3	<p>Imported case(s) in-country AND Global Health Security Index Score “Least Prepared”</p> <p>Local transmission in-country (Not in IRC location of operations) AND Global Health Security Index Score “Most Prepared/ More Prepared” AND number of cases from local transmission ≥20</p>	Medium	Readiness	IRC Offices AND IRC Country Programs <ol style="list-style-type: none"> Regular updates provided to all staff. Dissemination of key prevention messages to all staff. Country Program/Office Coronavirus focal point established. The Country Director/Head of Office should inform all staff to complete the free WHO online COVID-19 introductory course. For country programs with limited internet connection/bandwidth, the Country Director/Head of Office should nominate an in-country focal point to deliver the content of the online course. Orientation provided to all staff on the IRC COVID-19 Staff Safety SOPs. Implementation of safety SOPs for IRC offices and accommodations. IRC Country Programs additional actions <ol style="list-style-type: none"> Country level risk analysis completed. Program risk assessment and mitigation plan completed. In-country existing stock analysis and prepositioning of supplies. Technical training provided for program staff (see table in section 5).
Category 4	<p>Local transmission in-country (Not in IRC location of operations) AND Global Health Security Index Score “Least Prepared”</p> <p>Local transmission in-country (In IRC location of operation)</p>	High	Response	IRC Offices AND IRC Country Programs <ol style="list-style-type: none"> Regular updates provided to all staff. Dissemination of key prevention messages to all staff. Country Program/Office Coronavirus focal point established. The Country Director/Head of Office should inform all staff to complete the free WHO online COVID-19 introductory course. For country programs with limited internet connection/bandwidth, the Country Director/Head of Office should nominate an in-country focal point to deliver the content of the online course. Orientation provided to all staff on the IRC COVID-19 Staff Safety SOPs. Implementation of safety SOPs for IRC offices and accommodations. Develop program/office closure thresholds and evacuation thresholds in consultation with RSSA IRC Country Programs additional actions <ol style="list-style-type: none"> Country level risk analysis completed. Program risk assessment and mitigation plan completed. In-country existing stock analysis and prepositioning of supplies. Technical training provided for program staff (see table in section 5). Implement Program mitigation measures. Perform response analysis and draft response plan. Implement response plan.

IRC's Coronavirus Response

IRC Coronavirus (COVID-19) Monitoring Dashboard		
Date		13 th February 2020
Total COVID-19 cases		60,405
Total countries/territories affected		28
IRC Stance		IRC CPs/Offices
Alert	Category 1	All other countries
Preparedness	Category 2	Belgium Germany Italy Malaysia United Kingdom United States
	Category 3	Thailand
Readiness	Category 4	
Response	Category 5	

Available daily on rescue.net

Implementation

IRC Coronavirus (2019-nCoV) Technical Support Team

Global Support	Michelle Gayer	Director Emergency Health
	Stacey Mearns	Coronavirus Technical Lead
	Marydale Oppert	Coronavirus Epi Lead
	Megan Coffee	Communicable Diseases Advisor
	Gareth Bailey	DD Pharmaceutical and Emergency Supply Chain
	Chris Martin	Senior Medical Logistician
Great Lakes	Alison Wittcoff	Coronavirus Health Focal Point
Asia Region and USP	Laura Miller	Coronavirus Health Focal Point
West and Central Africa	Leonardo Shamamba	Coronavirus Health Focal Point
East Africa	Aston Benjamin Atwiine	Coronavirus Health Focal Point
Middle East and North Africa	Khaldoun Al Amire	Coronavirus Health Focal Point



IRC Coronavirus (2019-nCoV) Technical Brief # 1 7th Feb 2020

The IRC's 2019-nCoV technical briefs are designed to provide access to a summary of the understanding, and information related to 2019-nCoV. The information presented here literature as it emerges regarding this novel infection. Readers should note that information is expected that our understanding will shift. The technical briefs do not cover the strength of it emerges, instead the aim of the briefs is to provide IRC technical staff with access to the information. Technical briefs will be updated and shared each week and will cover key epidemiological aspects.

1. Incubation period

- Incubation period is believed to be 2-14 days. Median about 5 days after exposure.
- Many individuals develop mild symptoms on onset, but some – around 55% of patients developed a cough and more severe symptoms 5-8 days after initial onset. Individuals who are ill and coughing or having upper respiratory symptoms (less common).

2. Transmission method and rate (Reproductive number)

- Respiratory droplets (which can travel 1-2 meters) result in the majority of transmission. Help prevent sick individuals from spreading droplets to others, largely through close contact.
- Aerosolization (smaller particles that persist in air) can occur with coronavirus infection. N95 masks protect healthcare workers from airborne spread.
- Fomite transmission (through touching frequently touched objects like countertops and contaminated by touch or droplets landing; requires surface cleaning with 0.5% bleach (perhaps up to 5-10 min).
- Alcohol based hand washing >60-70% or soap and water; not dilute 0.05% bleach at the time.
- Given SARS transmission in super-spreading event in Amoy Apartments, due to broken aerosolization from toilets, vigilance needed for rare, but potential fecal related spread diarrhea, RNA found in stool samples of some cases (but not when tested late indicating not occur).
- The data is imperfect to determine a precise R0. Most estimates placed R0 between 1.8-2.5.

All Files > ☆ 2019-nCoV

IRC COVID-19 Technical Toolkit

Name ^	Updated	Size
Case Management	Feb 2, 2020 by Megan C...	3 Files
Equipment and Supplies	Yesterday by Stacey Mea...	3 Files
Infection Prevention and Control	Jan 29, 2020 by Stacey ...	6 Files
Preparedness and Readiness	Feb 2, 2020 by Megan C...	9 Files
Research	Yesterday by Marydale O...	12 Files
Risk Communication	Jan 29, 2020 by Stacey ...	12 Files
Situation Reports	Today by Marydale Oppert	18 Files
Staff Safety	Feb 2, 2020 by Megan C...	3 Files
Surveillance	Yesterday by Megan Coff...	10 Files

Implementation



IRC Safety Protocol for the 2019 Novel Coronavirus (2019-nCoV) Outbreak Version 1

Contents

1. Introduction
2. Roles and responsibilities
3. Risk Analysis
3.1 Risk Analysis: 2019-nCoV transmission to IRC staff members
3.2 Risk Analysis: Associated and cascading risk
4. Standard Operating Procedures
4.1 Staff information – Frequently Asked Questions
4.1.1 What do we know about 2019-nCoV
4.1.2 Key messages for general prevention
4.1.2.1 Use of Face masks
4.2 Staff travel
4.3 Incident reporting
4.4 Safety at IRC offices and staff accommodation
5. Contingency protocols
5.1 Staff member with risk of exposure (asymptomatic)
5.2 Staff member with risk of exposure (symptomatic)
5.3 Staff member confirmed with 2019-nCoV
5.4 Staff member contact of a case
5.5 Staff member who is a caregiver or household member of a confirmed
5.6 Staff member quarantined
5.7 Medical evacuation (medevac)
6. Key Contacts
7. Annex
Annex 1: Risk Analysis: Associated and cascading risk
Annex 2: Use of face masks summary table

Implementation

Supplies and logistics

- Global market analysis
- Global IRC analysis of existing stock
- Increasing global prepositioned stock

Table with multiple columns (Country, Region, etc.) and rows, showing data for various countries and regions. Many cells are highlighted in red, indicating specific data points or status.

IRC 2019-CoV PPE Recommendations

	Staff Safety Supplies	Program Safety Supplies
Why	Items needed to implement office/accommodation contingency measures in the event of confirmed 2019-CoV in IRC areas of operation.	Items needed to continue to implement health programs in the event of confirmed 2019-CoV in IRC areas of operation.
What	<ul style="list-style-type: none"> • Surgical face masks • Alcohol hand gel • Infrared thermometers 	<ul style="list-style-type: none"> • Surgical face masks • N95 face masks • Gown or coverall • Goggles or face shield • Examination gloves
When	Prepositioned in IRC country programs/offices who trigger Readiness stance on IRC's classification.	Prepositioned in IRC country programs who trigger Readiness stance on IRC's classification AND IRC delivers direct health service provision
How	Country programs/offices with no import restrictions: Supplies prepositioned from IRC's Global stock (currently IMRES). Country programs/offices with import restrictions: Funding allocated to country program/office to procure items locally.	Country programs/offices with no import restrictions: Supplies prepositioned from IRC's Global stock (currently IMRES). Country programs/offices with import restrictions: Funding allocated to country program/office to procure items locally.
Quantities	Ideally a 3 month stock will be prepositioned.	Ideally a 3 month stock will be prepositioned.