KOGI STATE APPROVED INCIDENT ACTION PLAN

		ACTIVITY	BUDGET
	Surveillance	1a. Set-up and popularize State call center to respond to queries and alerts on COVID-19 including testing requests and report of GBV from the public and health facilities. Establish linkage with surveillance team/RRT.	1,120,000
1		1b. Conduct a one-day training for call center volunteers	106,000
2		Establish and train rapid response teams in each of the 21 LGAs to conduct case investigation and respond to alerts (3 persons per team).	3,706,500
3		Recruit and train 105 contact tracers (average of 5 per LGA)	1,029,000
4		4. Support daily contact monitoring/tracing for 3months	8,820,000
5		5. Build capacity /reorient DSNOs and other surveillance team members on case definition, active surveillance, contact tracing, case investigation, SORMAS and other reporting tools.	
6		6. Support DSNOs to conduct step down training to health facilities (public and private) within their LGA on case definition, reporting, IPC and active surveillance	
7		7. Adapt, print & disseminate guidelines on COVID- 19 surveillance to all health facility	1,210,000
8		Enhance surveillance for COVID-19 in 21 LGAs through facility and community active case search with risk communication and sample collection.	10,797,000
9		9. Support for the State Surveillance data team including engagement of data officers	1,130,000
10		10. Dedicate two staff to retrieve results and communicate timely to patients and case managers	260,000
11		11. Support operational expenses e.g printing of CIFs, fueling, communication,	3260000
12			
13	Laboratory	Training of 75 personnel selected from designated health facilities in each of the 25 State Consitutency (across the 21 LGAs) on sample collection, packaging, storage, transportation, processing, use of PPE and completing CIF in SORMAS.	945,000
	·	2. Procure additional sample collection and packaging materials (ziploc bags, falcon tubes, swabs, VTM)	5,395,000

		Decentralized sample collection by establishing 25 sample collection center in designated health facilities and FMC Lokoja in each of the 25 State Consitutency across the 21 LGAs in the State.	17,535,000
14		Provide logistics for sample transport from the LGAs/designated sample collection sites to central sample reception center at the State capital	6,000,000
15		3.Support sample transportation to the nearest laboratory	240,000
		Engage/assign dedicated staff for coordinating and supervising sample reception, packaging and transportation to Laboratory (assign at State level)	210,000
16		4.Support testing laboratory with staff for data entry and result communication.	135,000
17		5. Support designated laboratory with surge staff and other laboratory staff needs such as overtime allowance/hazard pay, accomodation, meals and daily transport.	
18		6. Operation cost for laboratory pillar activities	366,750
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20	Case management	1. Enroll clinicians, nurses, environmentalists, and other health workers for case management. Have at least 30-60 health personnel ready for deployment to isolation and treatment centers.	
21		2. Conduct training on case management and IPC for 30 health care workers.	352,500
22		3. Provide honorarium and accomodation for health workers	
23		4. Support for feeding of patients and healthworkers in isolation and tretament centers	
24		5. Supportive supervision of designated centers	420,000
25		6. Support operational expenses of case management pillar	210,000
26			
27	IPC	1. Engagement of at least least 5 IPC experts to provide support to the response.	750,000
28		2. IPC training for EOC and responders non health facilities based training.	352,500
29		3. Support establishment of triaging system in major health facilities in the States (primary, secondary and tertiary hospitals)	6,595,400

30		4. Train environmentalist, burial teams and ambulance and other drivers on IPC measures.	697,000
31		5. Print and disseminate IPC guideline, IPC IEC materials and tools to HF in the State.	
32		6. IPC Training of trainers of 10 HCWs workers across LGAs (for 2 days)- {This should be done with the IPC training materials developed by the NCDC and also under the supervision of the trainers and master trainers already trained}. Also integrate training on addressing GBV.	
33		7. Support 1-day step-down training of health workers on IPC from health facilities in 21 LGAs. Also integrate training on addressing GBV. (Participants will be trained in 2 batches of 30 each in each of the 21 LGAs)	
		Train 50 PPMVs and community pharmacists in each of the 21 LGAs on basic IPC measures, case definition and reporting of suspected cases	6,258,000
34			
35	Risk Communication	2. Support mechanism to manage rumours and misinformation	990,000
36		Support Community engagement activities by training and deploying town announcers, CBOs and FBOs (training on key messages dissemination, rumor and signal management in the community)	8,085,500
37		4. Support training of LGA and Community mobilizers	
38		5. Procurement of community mobilization equipment e.g megaphone	4,913,000
39		9. Support monthly social mobilization committee meetings in each of the 21 LGAs and State level	
40		7. Support for adaptation and printing of IEC materials in local languages	
41		8. Operational expenses for risk communication activities	
42			
43	Research	1. Conduct operational research in collaboration with other pillars	
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45	Coordination	1. Support daily EOC meetings	3,060,000
46		Provide operational funds to support EOC activities	3,060,000
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47		Provide operational funds for office of State Epidemiologist and Accounts department for project management	2,220,000
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48	Logistics	1. Forecast, procure and distribute personal protective equipment and other IPC commodities to point of care.	
49		2. Forescast, procure and distribute medicines, consumables and response commodities to point of care	
50		4. Procurement of operational vehicles for community mobilisation, sample transportation, case investigation and coordination of outbreak response	
51		5. Procurement of phones, laptops, internet modem for response	
		6. Procurement of medical equipment for designated isolation Centres for two isolation Centres	
	Grand Total		100,229,150