Homebased Care Concept
Introduction

Objectives:
- Establish viable home-based care system for 859,000 refugees to provide medical care for COVID-19 patients
- Ensure isolation and quarantine practices to prevent the further transmission of the infection

Initiation: SARI ITC reach 75% occupancy

Sliding scale mild $\rightarrow$ mild, moderate $\rightarrow$ mild, moderate, severe
Estimated planning figures (based on JHU/LSHTM models)

Total symptomatic cases: 230,000 - 300,000 (95% CI: 170,000 – 350,000)

- Severe: 30,000
- Mild/Moderate: 200,000 - 270,000
- Max. incidence at peak time: 11,800 (moderate scenario) - 20,500 (high scenario)

In need of homebased care at peak: up to 100,000 persons ??
Task distribution

2,000 CHWs and other volunteers (+400 reserve), 400 Health Care Workers → 1 HCW/ 5 CHWs

Health care worker to training CHWs, initially joint HH visits

Task of CHW:
- Daily household visit, algorithm to identify mild/ moderate/ severe
- Provision of standard medication after consultation with HCW
- Messaging on infection prevention and control
- Identify other needs for support by other actors → link to other focal points for additional support that other partners will deliver (protection, food, LPG etc)

Tasks of health care worker:
- Prescription of standard medication
- Targeted visits to moderate/ severe patients
- Palliative care
- Initiate referral
How to make it work

Similar approach to cholera vaccination campaign

1. CHWs by allocated health block, average 1/160 HH
2. Identification of additional volunteers. Aim: 1 CHW/100 HH
3. Early phase:
   • Target: 1,400 CHWs
   • Existing CHWs will cover their assigned area (max. 175 HH)
   • In current gap areas, other CHWs (e.g. MSF or other partners) can be assigned
   • Training of additional volunteers for next phase
4. Peak phase:
   • Target: 2,000 volunteers
   • Existing CHWs will cover part of their assigned area (max. 100 HH)
   • New homecare supporters (education/nutrition volunteers) and CHWs will be assigned to ensure full coverage
5. Training starting next week
Support from FSS partners

- Referral for home deliveries in case unable to attend distribution
- CHW → CHW supervisor → KOBO submission → ISCG → FSS focal points