

## Ebola preparedness in Sierra Leone during the 2026 Bundibugyo virus emergency: institutional findings and introduction of the Architectural and Operational Readiness Gap (AORG) framework

 Eric Nzirakaindi Ikoona *et al.*

Corresponding author:  Eric Nzirakaindi Ikoona

Email: [ikoonae@yahoo.com](mailto:ikoonae@yahoo.com)

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### Content

**Annex 1:** supplementary material 1

*Item-level results, classification and rationale for the 35 binary indicators in the RCSDC Rapid Assessment Questionnaire as completed by the National Public Health Agency of Sierra Leone, May 2026.*

*Companion to: Ikoona EN, Namulemo L, Sinnah MM, Vandi MA, Sahr F. "Reported Ebola and Filovirus Preparedness in Sierra Leone During the 2026 Bundibugyo Virus Disease Public Health Emergency of International Concern: A Rapid Mixed-Methods Institutional Self-Assessment Using the Architectural and Operational Readiness Gap Framework." Pan African Medical Journal submitted May 2026.*

This supplementary material contains the item-level classification, response, score and rationale for each of the 35 binary indicators in the completed RCSDC Rapid Assessment Questionnaire. Reviewers can use this table to verify the calculation of the domain-level AORG values reported in Table 1 of the main manuscript and the national totals of 12 of 15 architectural indicators (80%) and 10 of 20 operational indicators (50%) reported as in place.

Classification rule: items describing the existence of a plan, policy, designated facility, formal system, signed agreement or documented mandate were classified as architectural; items describing functional, equipped, trained, current, disseminated, stocked or active capacity were classified as operational. Items with ambiguous wording (C2, F1, F3, F4 and H4) were classified by consensus between two reviewers.



Categorical items on laboratory testing modalities and species coverage are not included in this table and are reported separately under ‘Critical non-binary finding’ in the main Results.

#	Domain	Item (paraphrased)	Response	Classification	Score	Rationale
B1	Coordination & governance	National preparedness and response plan for VHF exists	Yes	Architectural	1	Existence of a national plan; capacity on paper.
B2	Coordination & governance	National preparedness and response plan for Ebola/filoviruses exists	Yes	Architectural	1	Existence of a specific plan (developed 2021, under review); capacity on paper.
B3	Coordination & governance	Plan currently operational	Yes	Operational	1	Current operational status of the plan.
B4	Coordination & governance	Active national One Health coordination platform	Yes	Operational	1	‘Active’ implies functioning rather than designation alone.
B5	Coordination & governance	Financial provisions in place for rapid mobilisation of emergency funds	No	Operational	0	Operational availability of contingency financing.
C1	Points of entry & border	All PoE staff trained on Ebola/filovirus preparedness	No	Operational	0	Current training status of staff in post.
C2	Points of entry & border	Referral mechanisms established for suspected cases at borders	Yes	Architectural	1	‘Established’ read as documented system; classification resolved as architectural by consensus.
C3	Points of entry & border	Standard operating procedures for handling ill travellers exist	Yes	Architectural	1	Existence of SOPs.
D1	Surveillance & early warning	Event-based surveillance system exists	Yes	Architectural	1	Existence of a system.
D2	Surveillance & early warning	Indicator-based surveillance for Ebola/filoviruses exists	Yes	Architectural	1	Existence of a system.
D3	Surveillance & early warning	Ebola case definitions disseminated to all levels	Yes	Operational	1	Current dissemination.



#	Domain	Item (paraphrased)	Response	Classification	Score	Rationale
D4	Surveillance & early warning	Community-based surveillance systems functional	Yes	Operational	1	'Functional' implies current operation.
D5	Surveillance & early warning	24/7 alert management system or hotline operational	Yes	Operational	1	Current operational status of the hotline.
D6	Surveillance & early warning	Cross-border surveillance mechanisms established with neighbouring countries	Yes	Architectural	1	'Established' read as documented mechanisms.
E1	Laboratory capacity	National laboratory capacity for Ebola/filovirus testing exists	Yes	Architectural	1	Existence of testing capacity (six laboratories).
E2	Laboratory capacity	Laboratory personnel trained for EVD testing	Yes	Operational	1	Current training status.
E3	Laboratory capacity	Capacity for safe specimen collection, packaging and transportation	Yes	Operational	1	Current operational capacity.
E4	Laboratory capacity	Established specimen referral system	Yes	Architectural	1	Existence of a referral system.
E5	Laboratory capacity	Laboratory personnel trained in biosafety and biosecurity	Yes	Operational	1	Current training status.
E6	Laboratory capacity	Adequate personal protective equipment for laboratory staff	No	Operational	0	Current availability of supplies.
E7	Laboratory capacity	Agreements in place with regional or international reference laboratories	Yes	Architectural	1	Existence of formal agreements.
F1	Isolation & case management	Isolation units available at healthcare facilities	Yes	Architectural	1	Designated availability; classification borderline and resolved as architectural by consensus.



#	Domain	Item (paraphrased)	Response	Classification	Score	Rationale
F2	Isolation & case management	Isolation units functional and equipped	No	Operational	0	Current functionality and equipment status.
F3	Isolation & case management	Isolation units available at airport borders	No	Architectural	0	Existence/designation at PoE; classified architectural for consistency with F1.
F4	Isolation & case management	Isolation units available at land borders	No	Architectural	0	Existence/designation at PoE; classified architectural for consistency with F1.
G1	Infection prevention & control	National IPC guidelines exist	Yes	Architectural	1	Existence of formal guidelines.
G2	Infection prevention & control	Healthcare workers at all levels trained on IPC	No	Operational	0	Current training status.
G3	Infection prevention & control	IPC guidelines/SOPs available at health facilities	No	Operational	0	Current dissemination and availability at facility level.
G4	Infection prevention & control	PPE available at all levels	No	Operational	0	Current availability of supplies.
G5	Infection prevention & control	Healthcare-associated infection monitoring systems in place	No	Operational	0	Current operational status of monitoring systems.
G6	Infection prevention & control	Waste management capacity adequate for Ebola response	No	Operational	0	Current operational adequacy.
H1	Risk communication & engagement	National RCCE strategy for Ebola preparedness exists	No	Architectural	0	Existence of a current strategy.
H2	Risk communication & engagement	Communication materials available in local languages	No	Operational	0	Current availability of materials in local languages.

#	Domain	Item (paraphrased)	Response	Classification	Score	Rationale
H3	Risk communication & engagement	Rumour tracking or social listening conducted	Yes	Operational	1	'Conducted' implies current operational activity.
H4	Risk communication & engagement	Media engagement mechanisms established and operational	Yes	Operational	1	'Established' + activity implies operational; borderline.

**Summary.** Architectural items: 15 (12 reported in place; 3 not). Operational items: 20 (10 reported in place; 10 not). National exploratory AORG: 80% – 50% = +30 percentage points. Domain-level AORGs and denominators are reported in Table 1 of the main manuscript.