COUNTRY HEALTH EMERGENCY PREPAREDNESS AND IHR

PROGRESS UPDATE WHO ON JEE AND COUNTRY PLANNING

Performance of GHSA in 2016 & The Way Forward 14-15 December 2016. Bali, Indonesia

Ludy SURYANTORO

CORE CAPACITY ASSESSMENT, MONITORING AND EVALUATION

STRATEGIC PARTNERSHIP FOR COUNTRY PLANNING





WHO Reform



ONE WORKFORCE

HQ & regional office staff aligned to new program structure by end-Oct '16



ONE WORKPLAN & BUDGET

Single budget, results framework & work-plans aligned across all offices (Oct-Dec '16)



ONE LINE OF ACCOUNTABILITY

ExD, Directors, appointed, DG & RDs agreed on line of accountability for graded events



ONE SET OF PROCESSES

New protocols for risk assessment, grading, incident management effective as of Aug '16



ONE ADMIN SYSTEM

Contingency fund & emergency standard operating procedures in use



Health Emergencies Program Conceptual Framework

Early warning, risk assessment, and emergency response

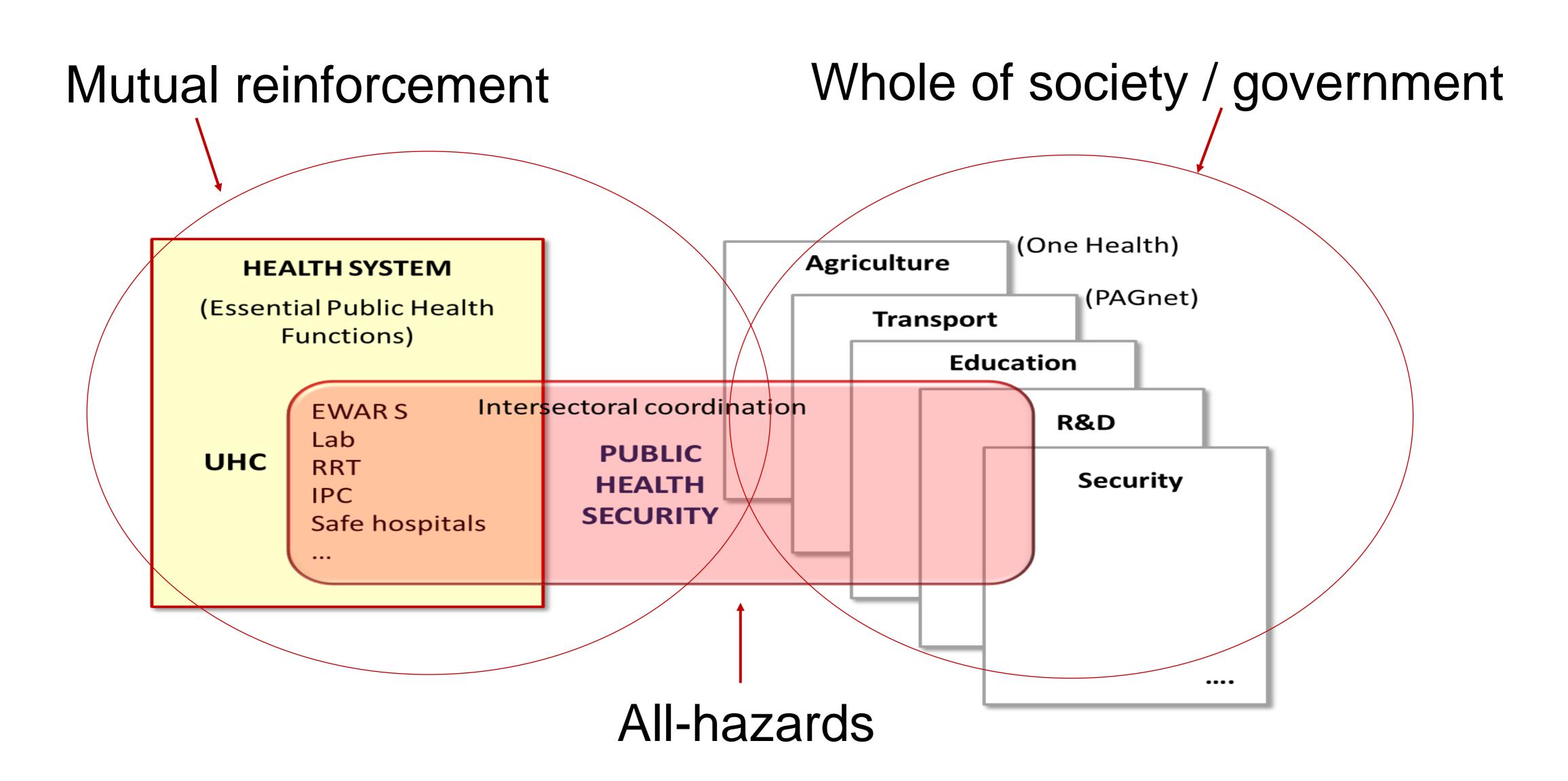
WHE

Prevention and control strategies for high-threat infectious hazards

All-hazards preparedness, IHR assessment and core capacities strengthening

Health systems strengthening in high-vulnerability countries

Country Health Emergency Preparedness Strategic Framework



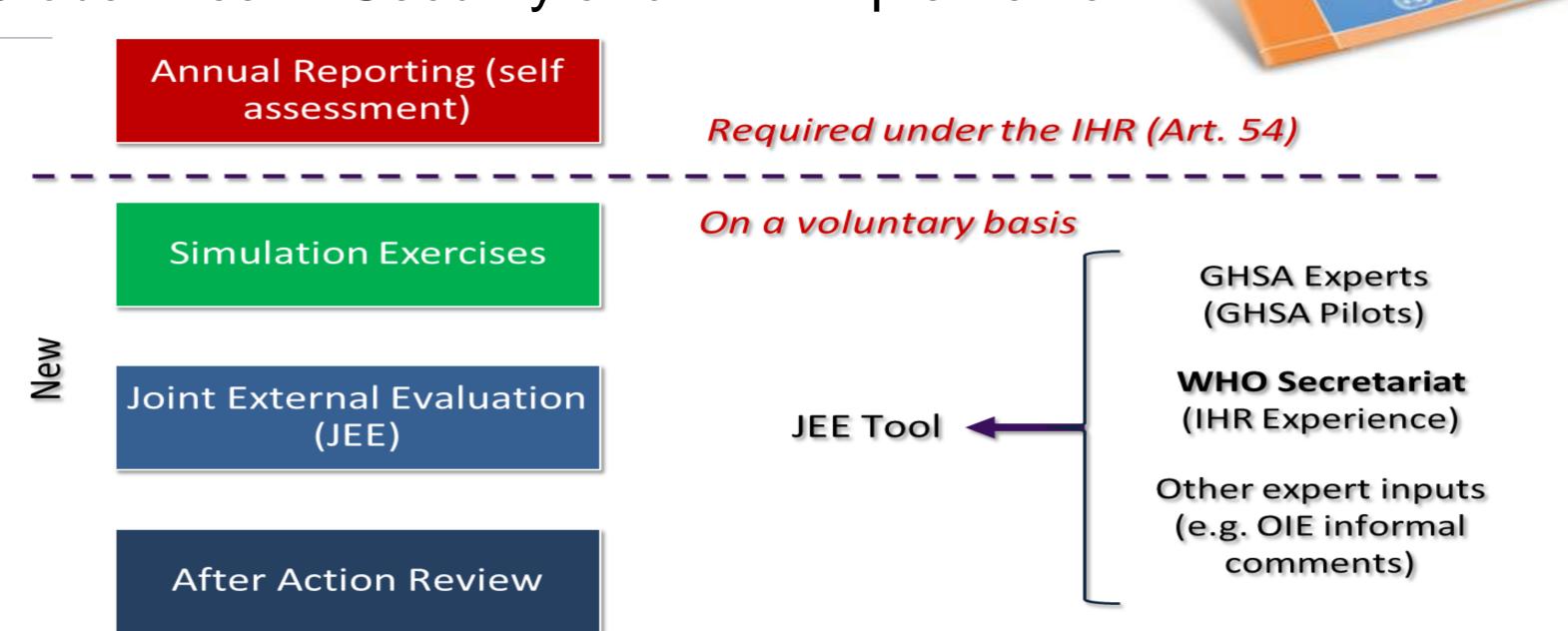
Monitoring IHR States Parties' Core Capacity 3 "ships", 3 principles

- Country ownership (national sovereignty; voluntary JEE)
- WHO leadership (WHO's mandate on IHR issues)
- Active partnership (e.g. GHSA and the Alliance for

Assessments for Global Health Security and IHR Implementation

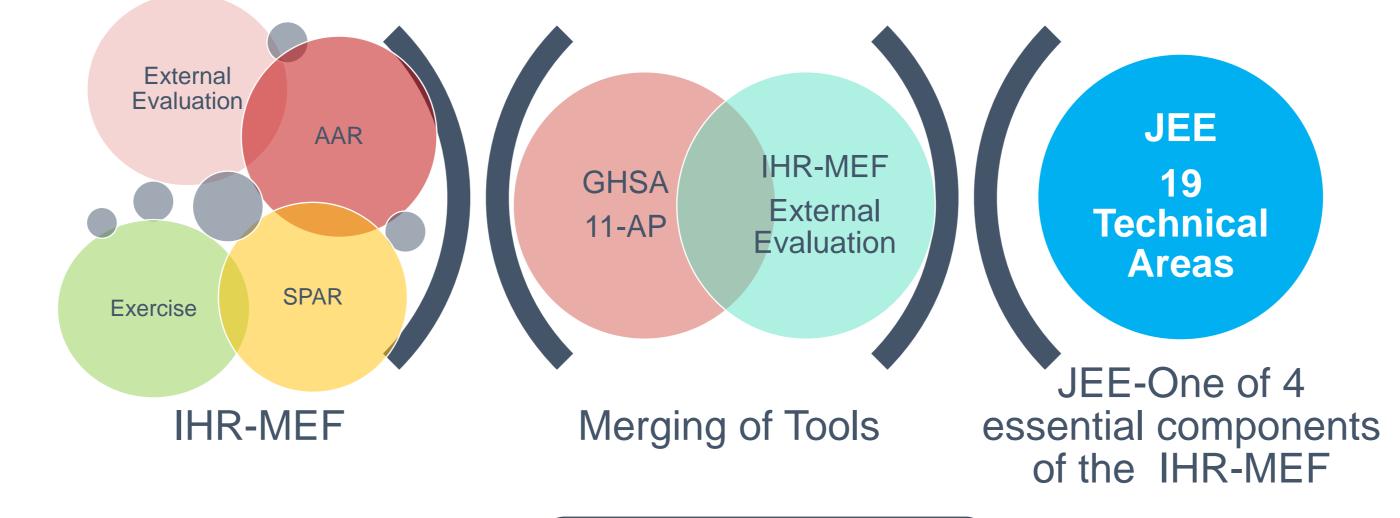


- Follows WHA68.5 ("move from exclusive selfevaluation")
- Noted by WHA69
- Endorsed by WHO GPG





From Joint External Evaluation To Strategic Partnership for Country Planning



August 2015

Alignment of tools to reduce burden on MS

February 2016

JEE launched in Tanzania

FIRST country to volunteer

Strategic Partnerships
For Country Planning
Post JEE & Beyond
5 year NAP
Health
Security

SPP
Go Live
DECEMBER 2015







13-15 JULY 2015

SPP Mandate
Building
GHS
Cape Town
South Africa

FEBRUARY 2016



SPP Stakeholder Meeting

IHR-MEF 2014-2015

With RO. Shared

RCM 2015 - WHA

15-17 NOVEMBER 2016



MARCH 2017
SPCP
Eritrea

JUNE 2017

SPCP

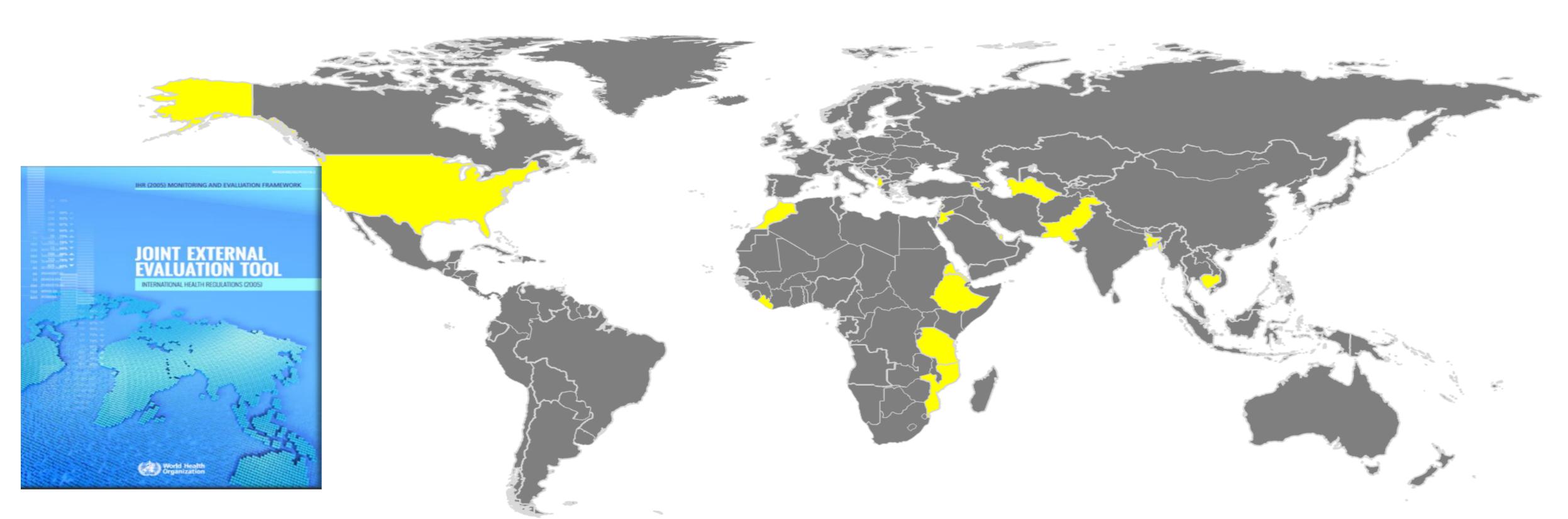
Mozambique,

Liberia,

Sierra Leone

Joint External Evaluations (JEE)

February-October 2016 28 Completed, all 6 WHO Regions, 11 Scheduled



Afghanistan, Albania, Armenia, Bahrain, Bangladesh, (Belize), Cambodia, Cote d'Ivoire, Eritrea, Ethiopia, Jordan, Kyrgzstan, Lebanon, Liberia, Morocco, Mozambique, Namibia, Pakistan, Qatar, Senegal, Sierra Leone, Somalia, Sudan, Tanzania, Tunisia, Turkmenistan, USA, Viet Nam (Nov 1-6) (+ 6 GHSA pilot countries: Georgia, Peru, Portugal, Uganda, Ukraine, UK)



Health Security is the Goal, An Iterative Process is the Mean

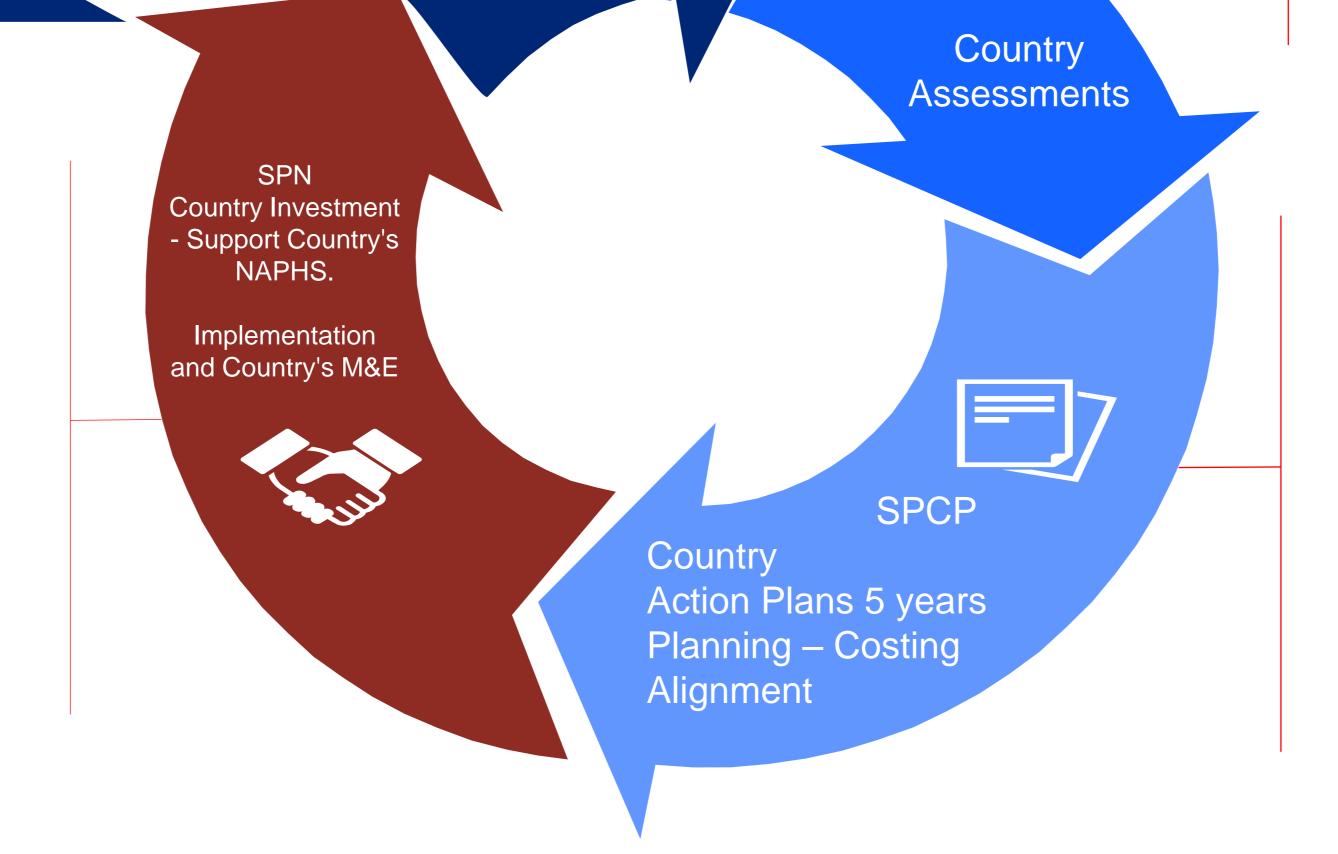
Targets and vulnerability inform country capacity evaluation.

ACCELLERATE THE IHR IMPLEMENTATION

Country Self
Evaluation is
enhanced by the
Joint External
Evaluation (JEE)

Domestic resources

+ External support by multilateral and bilateral partners to monitor progress and fully implement national action plan.



Based on JEE (and PVS) results, develop a costed action plan post JEE and BEYOND.

NATIONAL ACTION PLAN FOR HEALTH SECURITY



Strategic Partnership for Country Planning

FRAMEWORK

- Follow up JEE Results
- Country Planning Guiding Principles
- Planning Framework for IHR Action Plan
 Development

TOOLS

Tools and Methodologies to support National IHR
Action Plan Development (Country Planning Checklist,
Costing Tool/Model, and Detail Activity Plan)







Existing Global frameworks

HEALTH SECURITY

- International Health Regulations (2005)
- Global Influenza Program (GIP)
- Pandemic Influenza Preparedness (PIP) Framework
- OIE Performance for Veterinary Services (PVS) Pathway

HEALTH SYSTEMS STRENGTHENING

- Essential Public Health Functions (WHA69 Resolution)
- Universal Health Coverage (UHC) 2030

DISASTER RISK REDUCTION

- United National Plan of Action on Disaster Risk Reduction for Resilience (UNISDR)
- Sendai Framework for Disaster Risk Reduction 2015
- Comprehensive Safe Hospitals
 Framework (WHO)



UNITY FOR DIVERSITY

COUNTRY PLANNING



JEE results, Strategic Partnership Guidelines, Tools, Cross
Cutting tools (health system and Others), Country profile and
Status, List of countries who have completed country planning
and in the pipelines).

MONITORING EVALUATION TOOLS



IHR Monitoring Evaluation JEE, National Plan for Health Security (implementation and monitoring), List of Experts for JEE and Country Planning.

STRATEGIC PARTNERSHIP NETWORK



Influenza, AMR, Country Health Emergency, UHC, Health Systems Strengthening, Financing Preparedness, Biosecurity Group, Regional Health Security and others.

GLOBAL HEALTH SECURITY INVESTMENT



Donor, International Organization and Country Information – Coherence Bilateral and Multilateral



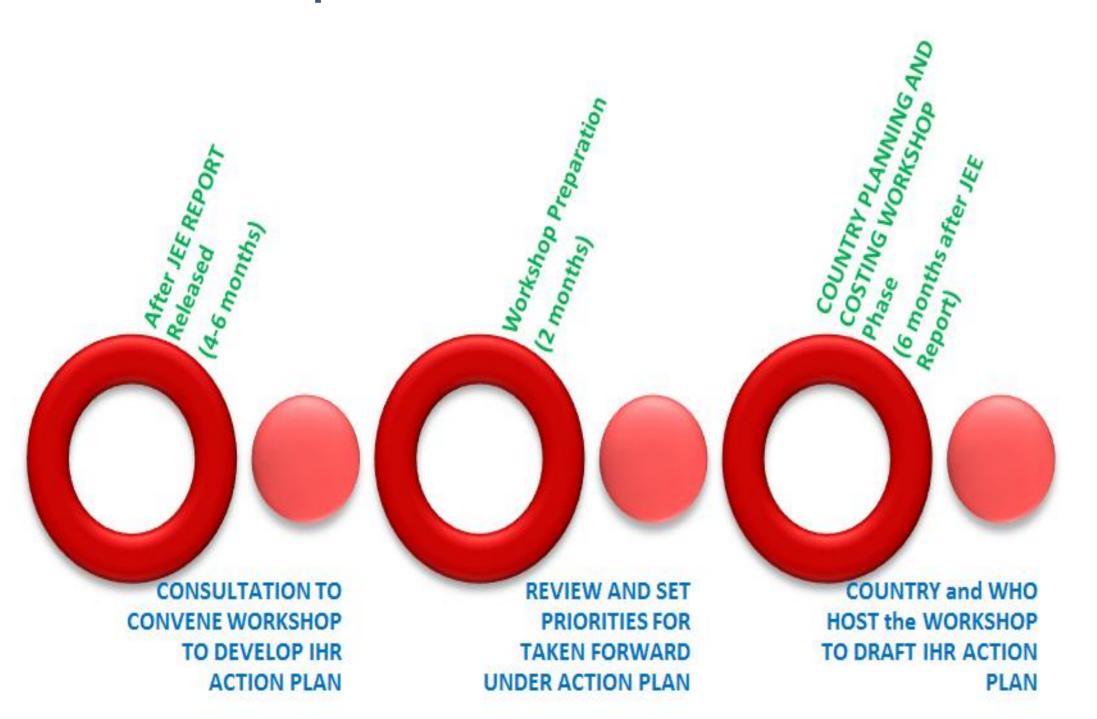


Countries Process Status Diagram



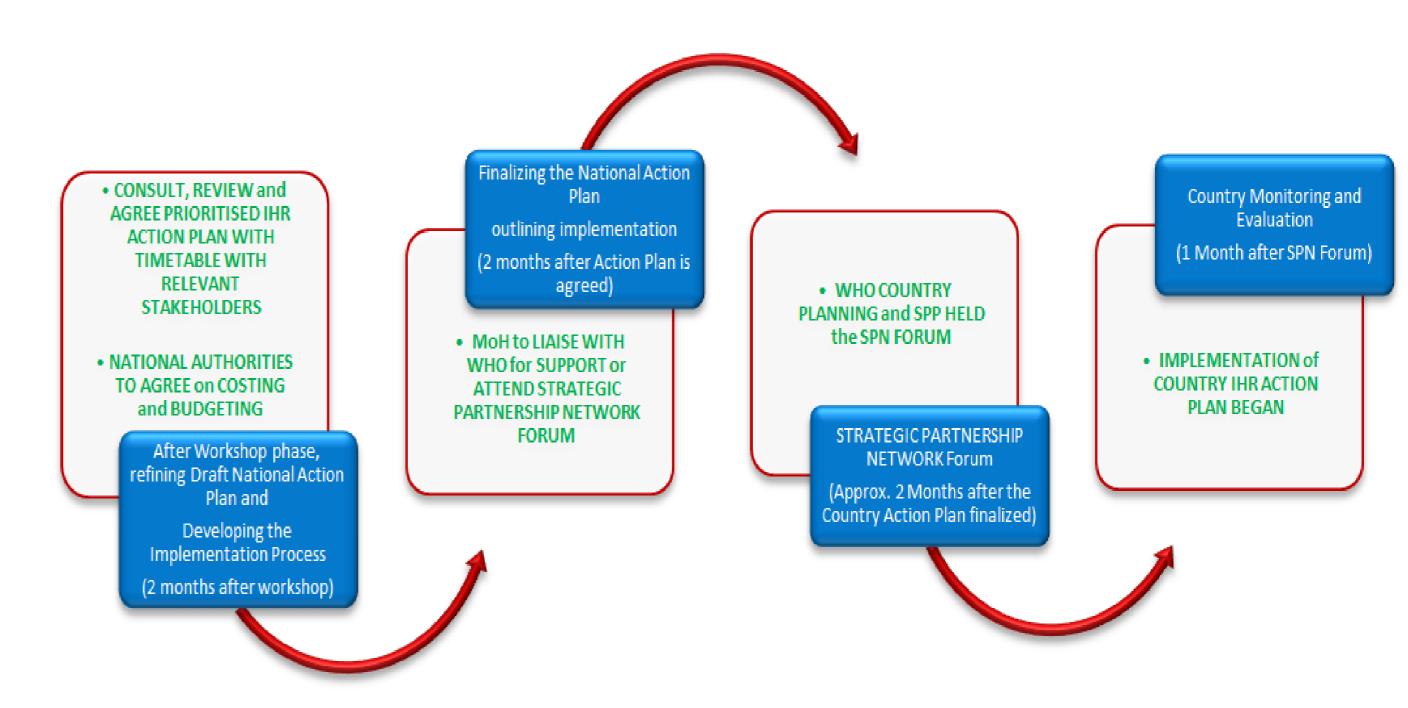
PART 01

Planning Process from JEE to Country Planning Workshop



PART 02

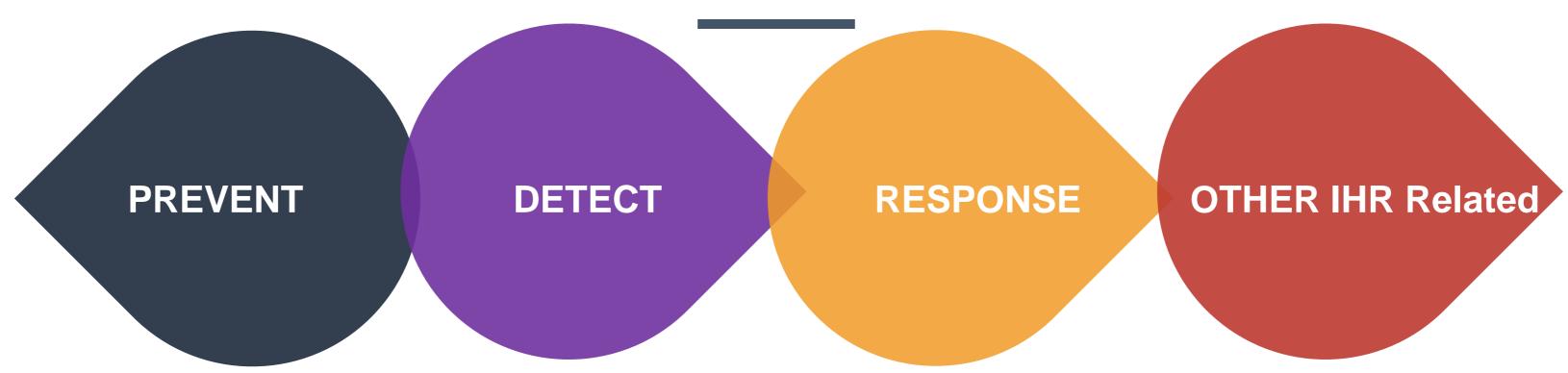
Planning Process from Country Planning Workshop to Agree Costed IHR Action Plan





Country Planning Post JEE Reports





National Legislation, Policy and Financing

IHR Coordination, Communication and Advocacy

Antimicrobial Resistance

Zoonotic Disease

Food Safety

Biosafety and Biosecurity

Immunization

National Laboratory System

Real Time Surveillance

Reporting

Workforce Development

Preparedness

Emergency Response Operations

Linking Public Health and Security Authorities

Media Countermeasures and Personnel Deployment

Risk Communication

Other IHR Related Hazards and Point of Entry (PoEs)

Chemical Events

Radiation Emergencies

2015





3

2

Others

Funding \$5 M

In Kind Contribution \$7 M

Joint Contribution \$6 M



Strategic Partnership for Country Planning

September – December 2016

2 Completed in 2 WHO Regions. 13 Scheduled in 2017



COMPLETED in 2 WHO Regions

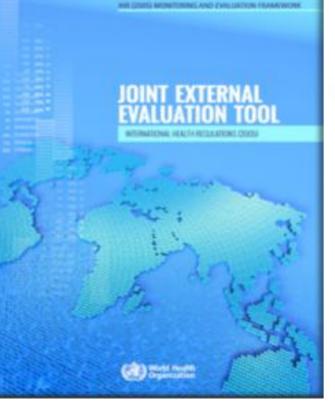


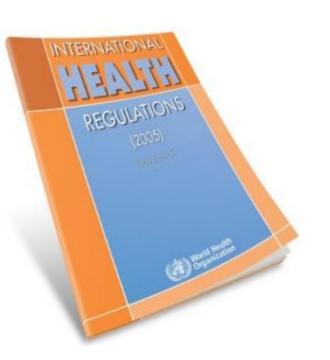
13

SCHEDULED In 2017



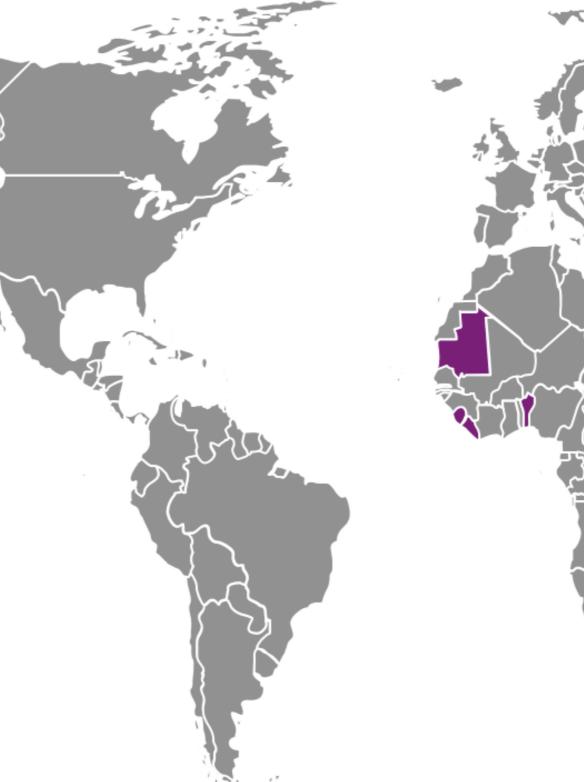


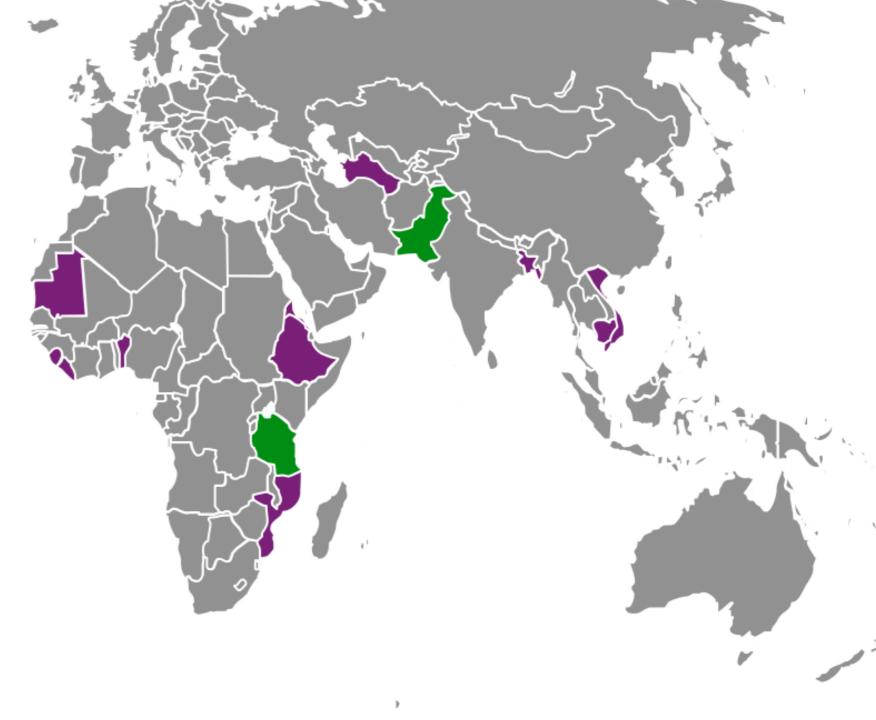




Tanzania, Pakistan (COMPLETED).

In the pipeline: Ethiopia, Eritrea, Liberia, Sierra Leone, Bahrain, Bangladesh, Cambodia, Jordan, Lebanon, Morocco, Mozambique, Turkmenistan, Viet Nam, and others







Strategic Partnership Country Planning

World Health Organization	TANZANIA 15-17 NOV 2016	PAKISTAN 30 NOV – 2 DEC 2016						
# Participants	140+	70+						
# Partners	25	12						
Outcome	5 Yrs National Action Plan for Health Security Funding Gaps, and Potential Funding Sources	5 Yrs National Action Plan for Health Security Funding Gaps, and Potential Funding Sources						
Key Action	 Formalize functionality of integrated multi-sectoral high level and technical platforms Finalize the legal instruments and national guidance tools in line with the One Health approach Strengthen collaboration with potential partners, regional boards and others Put in place a robust and transparent monitoring, exercising and evaluation mechanisms Advocate at the highest levels for sustainable domestic financing of the action plan Review existing national and international funding mechanisms 	 Formalize functionality and oversight role of the National Multi-sectoral Taskforce for IHR encompassing GHSA Identify any gaps in the legal framework and processes with One Health Approach Strengthen coordination mechanisms between Health & non-Health sectors, Federal & Provincial Governments and collaboration with health development partners (HDPs) Develop robust and transparent monitoring and evaluation mechanisms Advocate political leadership, Finance and PD&R Division, Provincial P&D and Finance Departments Review the existing national and international funding investments and work plans 						

Next Steps

Costing Workshop by 15 Jan 2017 Finalize Costed 5 Year NAP for HS Launch Action Plan by - 30 March 2017 Finalize and Share 5 Year IHR NAP for HS – Dec/Jan 2017 Establish Functional Executive Committees – Jan 2017 Finalize Costed 5 Year NAP for HS – end of March 2017 Launching 5 Year IHR NAP for HS - July 2017 Implementation 5 Year IHR NAP for HS - begin July 2017

Take steps to develop polio transition plan to support Health Security

DOMESTIC FINANCING FORNATIONAL HEALTH SECURITY PLAN National Gaps and Needs to be supported by external partners and donors



The SPCP Stakeholders: Multisectoral Health Security

INTERNATIONAL GOVERNMENTAL ORGANISATIONS

• FAO, ICAO, IOM, OIE, UNICEF, UNISDR, UNWTO, WHO, WFP, IATA, WTO, etc.

PUBLIC HEALTH INSTITUTIONS AND NGOS

- AFRICAN EPIDEMIOLOGY NETWORK,
- NO MORE EPIDEMICS
- MALARIA ALLIANCE
- MSF
- SAVE THE CHILDREN
- TEPHINET, MAIPARK
- CARIBEAN PUBLIC HEALTH AGENCY
- ECDC
- IFRC
- INTRENATIONAL MEDICAL CORP

ACADEMIA

• UNIVERISTY OF TOKYO; UNIV. ALABAMA; LONDON SCHOOL OF ECONOMIC, KING COLLEGES, etc.

DONORS, FOUNDATIONS

- AFRICAN DEVELOPMENT BANK GROUP
- ASIAN DEVELOPMENT BANK
- ASIAN PACIFIC COOPERATION (APEC)
- BILL AND MELINDA GATES
- CANADA DFAIT
- DFID PHE Department of Health Fleming Funds
- EUROPEAN COMMISSION
- THE NETHERLANDS
- THE NORDIC GROUP
- GERMAN FEDERAL MINISTRY FOR ECONOMIC COOPERATION AND DEVELOPMENT
- JICA MOH MOFA Cabinet Office of Japan
- KOICA and Ministry of Health of South Korea
- SKOLL GLOBAL THREAT FUND
- USAID HHS CDC State Department USDA DoD
- WORLD BANK GROUP



Country Health Security Information

Please fill out with the following colour and value if applicable

1	> 1. Received Funding and Technical Assistance	3	> 3- Received NO Contribution
2	> 2. In-Kind Contribution (Technical Assistance)	4	> 4- Joint Contribution

5 --> 5. Other

Current Multisectoral Contribution Support

	Technical Areas		UN					US			UK	GERMANY	AFRICAN			DENMARK IRELAND		SWISS	World	Foundations	Peace	Finland	Tanzania Leading Agency	
			UNICEF	UNFPA	UNDP	WHO	USAID	ŒC	D00	PEPFAR	DITRA	DFID	KfW/GIZ	ADB	DFATD	GOV of CANADA	DANIDA	Irish Aid	SDC	Bank		Corps		
DEVENT		National Legislation, Policy and Financing																						
	L N	IHR Coordination, Communication and Advocacy																						
	¥	Antimicrobial Resistance (AMR)																						MOHCDGEC, MALFD, TFDA
		Zoonotic Disease																						
		Food Safety																						
		Biosafety and Biosecurity																						МОН
		Immunization																						
																		-				1		
		National Laboratory System																				<u> </u>		MOHCGEC
		Real Time Surveillance																				 		MOHCGEC, RHMT, CHMT
	7	Reporting																						
		Workforce Development																						MOHCDGEC: CMO office, DPS & Epidemiology Section, DHRD, DCS
		Preparedness																				1	1	
RESPONSE	E SE	Emergency Response Operations																						MoHCDGEC, Chief Medical Officer's Office, Department of Preventive Services, and Department of Health Quality Assurance; MOHA, MALFD, TPDF, SUA
		Linking Public Health and Security Authorities																						PMO - DMS, MOHCDGEDC, MALFD, MOFP, MFAEAC, MWI, MNRT, MOD, MOH - Zanzibar, TMA, MCLA, TAEC, TFDA, SUA, GCLA
		Medical Countermeasures and																						
		Personnel Deployment																						
		Risk Communication																						
		, ,						-														,		
Ė	72	Other IHR Related Hazars and Point of Entry (PoEs)																						
OTHER IHR	elate	Chemical Events																						
ŧ	~	Radiation Emergencies																						
							· · · · · · · · · · · · · · · · · · ·																	
	4																							
	Ï												<u> </u>											
	OTHERS																						 	









https://extranet.who.int/donorportal/

sppteam@who.int

Thank you!

See You Next Time