



Building Capabilities to enhance Public Health Emergency Preparedness

*International Conference on the implementation of health aspects of Sendai Framework for DDR 2015-2030
10 March 2016*

Summary

- Lessons from recent and current outbreaks
- Public Health Emergency Preparedness in EU
- Enhancing capacities/capabilities of health systems
- Blind spots to address – ECDC contribution



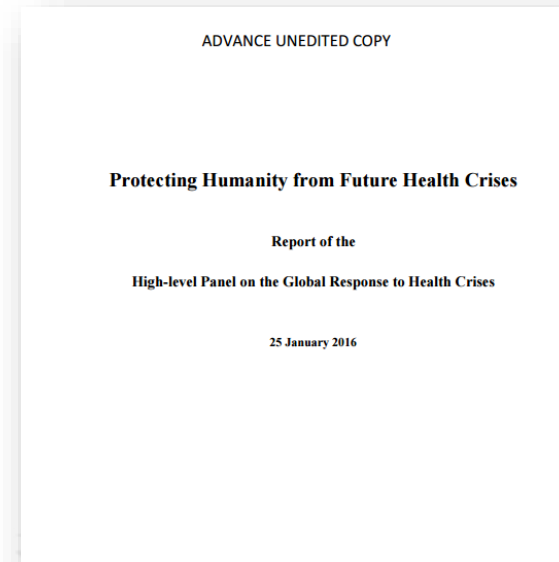
UN Review of Ebola

Main conclusions

1. WHO must build a new Centre for Emergency Preparedness and Response
2. All countries must implement IHR
3. Appropriate financing required

Regional-level conclusions (selected)

- Strengthen regional-level preparedness plans
- Enhance regional research capacity and collaboration
- Facilitate sharing of experiences and lessons learned among regional partners
- Facilitate regional and sub-regional simulation exercises for health crisis responses



Public Health - Lessons learned conference



Conference "lessons learned for public health from the Ebola outbreak in West Africa – how to improve preparedness and response in the EU for future outbreaks" - Mondorf les Bains, 12-14 October 2015

http://ec.europa.eu/health/preparedness_response/events/ev_20151012_en.htm#c

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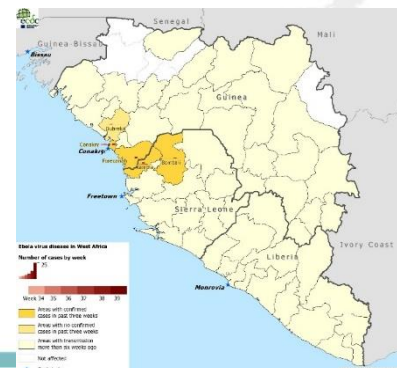
Council conclusions on 'Lessons learned for Public Health from the Ebola outbreak in West Africa — Health Security in the European Union'

(2015/C 421/04)

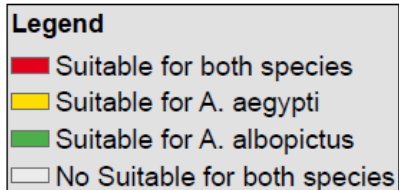
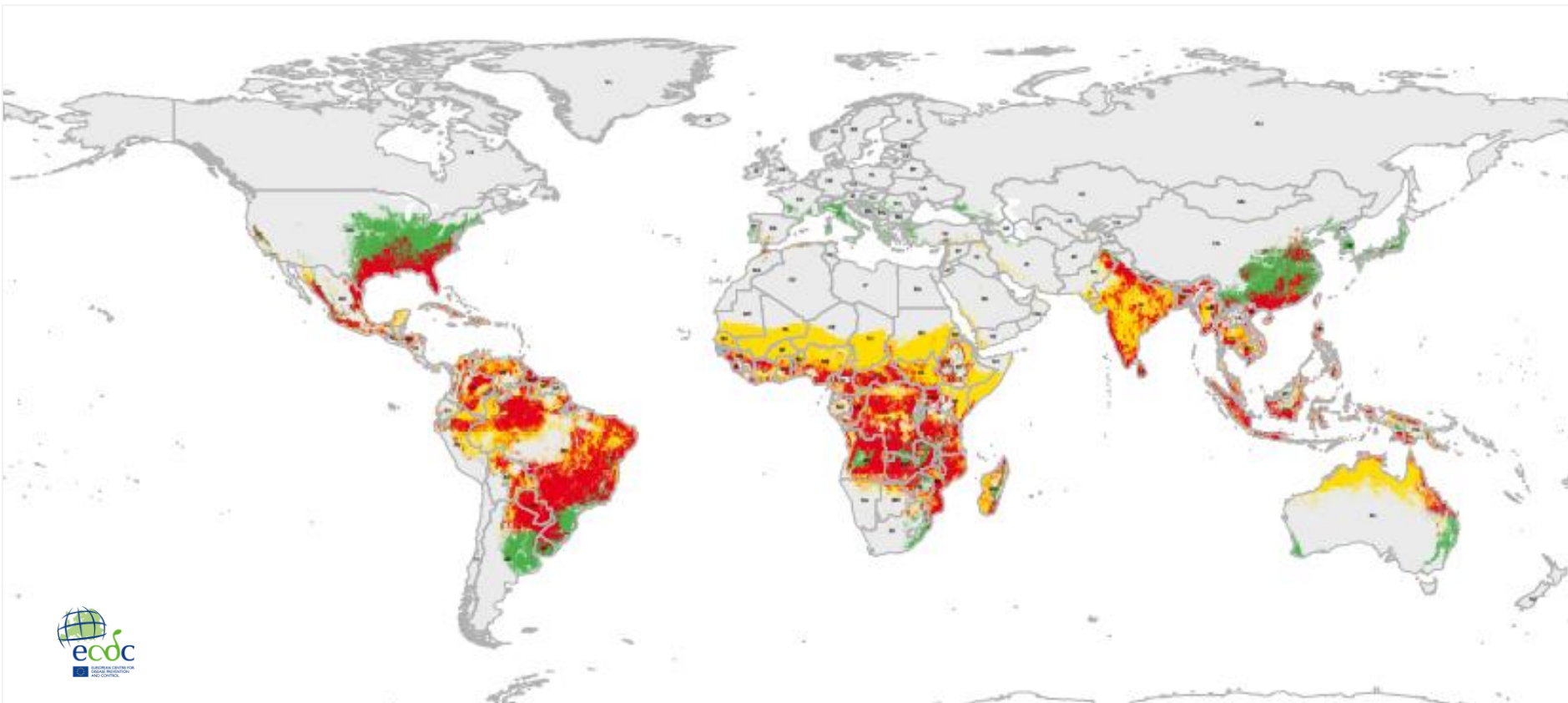
Public Health - Lessons learned conference

Council conclusions

- **Inter-sectoral collaboration** of the response coordination requires commitment on public health priorities from critical sectors
- Long term engagement to support medical evacuation and health systems preparedness including access to intensive care treatment
- Develop **health systems emergency plans** in line with WHO's emphasis on health system strengthening and implementation of the IHR core capacities
- Implement control standards and advance research and development for medical countermeasures before an outbreak occurs
- Importance of effectively **follow-up on these lessons learned**, within the EU but also at a more global level.
- Take forward **preparedness and response planning** at EU level as in Decision 1082/2013 on serious cross-border threats to health

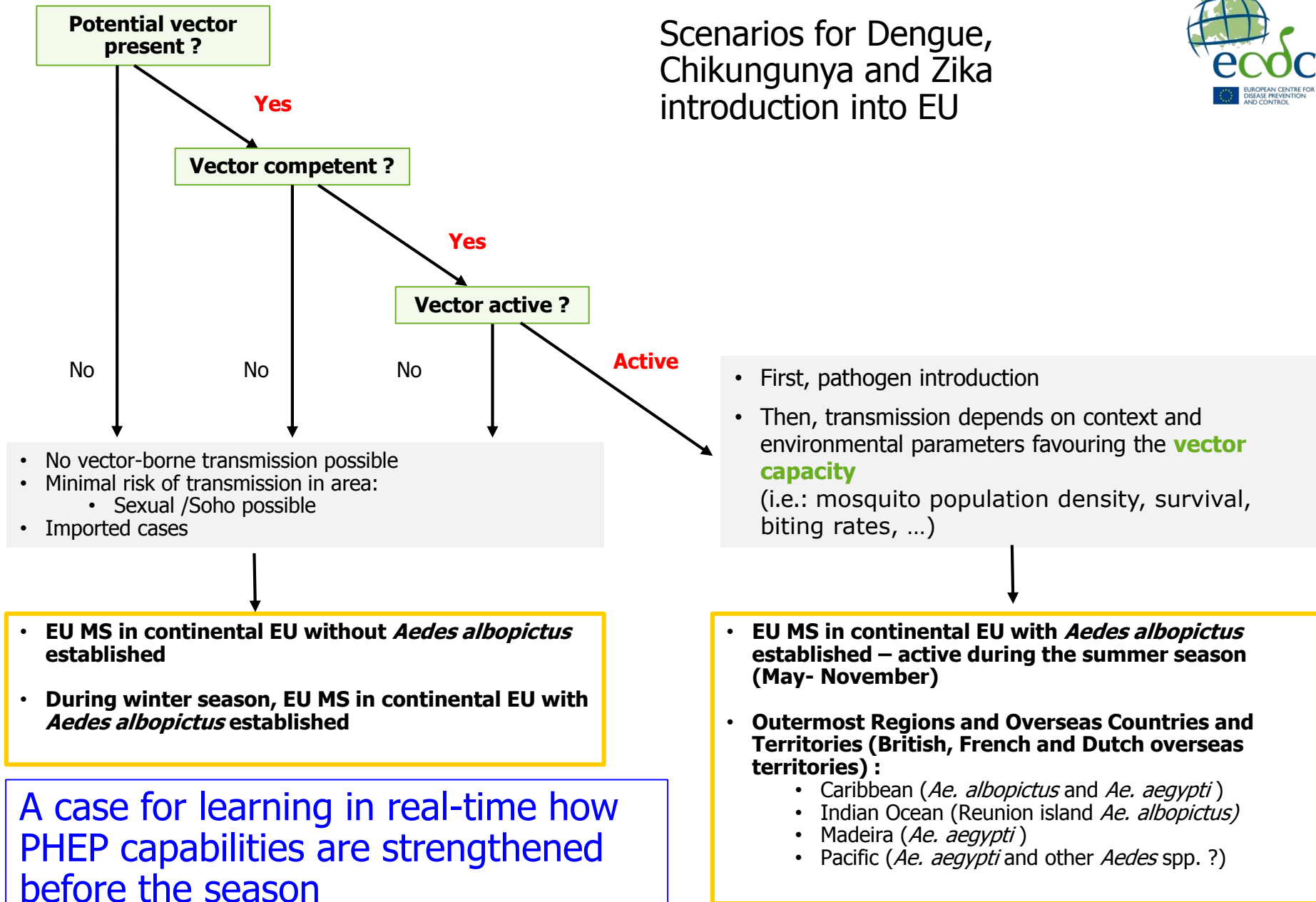


Aedes albopictus and *aegypti* suitability



Monitoring of ZIKA virus outbreak in the green areas will inform us on *Ae. albopictus* vector capacity
Based on the model Kraemer at al. 2015
Threshold 0.6 for considering the area as suitable
Regular check of Zika epidemic evolution with regards to vector presence and suitability

Scenarios for Dengue, Chikungunya and Zika introduction into EU



A case for learning in real-time how PHEP capabilities are strengthened before the season

Knowledge gaps in PHEP

Theme	Description of knowledge gap
Attitudes and beliefs	Behavioural aspects related to PHEP (e.g. decision-making and communication strategies)
Collaboration and system integration	Integration of PHEP with other sectors
Communication	Use and application of e.g. social media, anthropology
Quality improvement and performance standards	Measurement of performance or capacity
Resilience	Public health roles in recovery

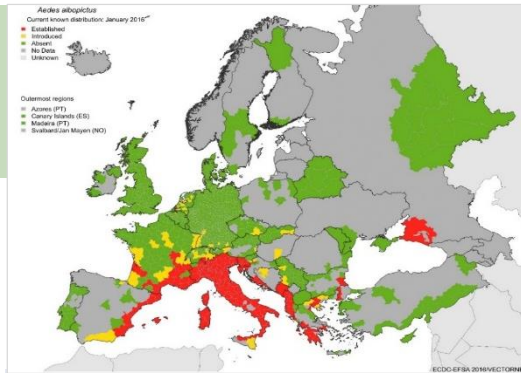
Public Health should

1. Be prepared for a **naturally occurring outbreak or deliberate release**

- ❖ Quickly recognize the disease (e.g. VHF, pandemic flu)
- ❖ Control spread (isolation, quarantine, vaccination)
- ❖ Assure that people get needed care
- ❖ Coordinate with national and international agencies
- ❖ Prevent mass panic

2. Be prepared for **other public health emergencies**, e.g. such as of environmental or technological origin (floods, earthquakes, chemical spills, RN incidents, extreme weather, ...)

- ❖ Coordination across sectors and boundaries
- ❖ Investment in workforce and social capital
- ❖ Resilience to adapt to unexpected

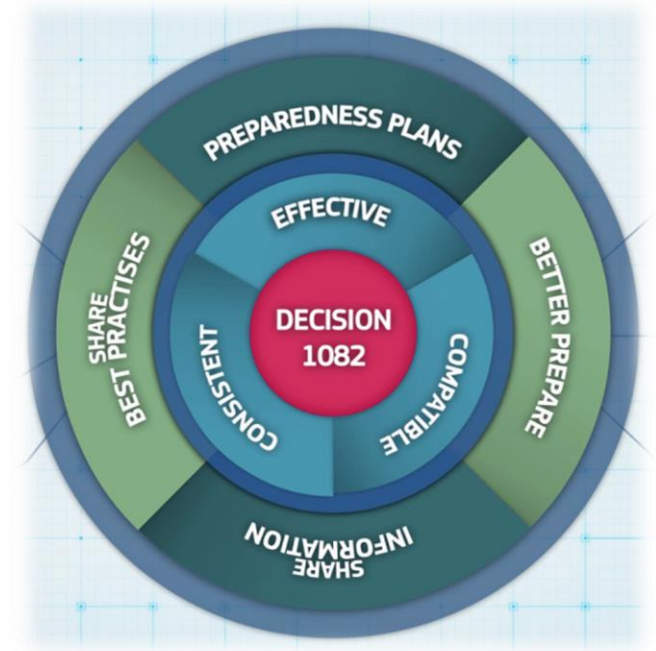


Priorities for Action

- Understanding disaster risk
 - Strengthening disaster risk governance to manage disaster risk
 - Investing in disaster risk reduction for resilience
 - Enhancing disaster preparedness for effective response
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- 30(i) Enhance the resilience of national **health** systems
 - 31(e) Enhance cooperation between **health** authorities and other relevant stakeholders to strengthen country capacity for disaster risk management for *health*

Policy context for preparedness in Europe

- Member States requests e.g. National Focal Points
- Decision 1082, and Health Security Committee
- IHR
- UNISDR



DECISION No 1082/2013/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

of 22 October 2013
on serious cross-border threats to health



- ◆ applies to biological, chemical or environmental threats
- ◆ existing rules on preparing for and managing health emergencies will be strengthened
- ◆ the Health Security Committee will be given a stronger mandate to react in a crisis

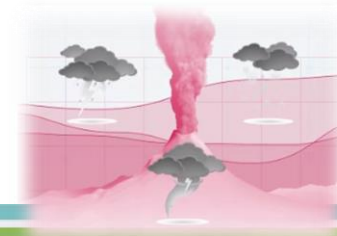
Main objectives

- To ensure adequate level of **preparedness planning** for all types of serious cross border health threats across the EU
- To include provisions for **joint procurement** of medical countermeasures
- To provide for **risk assessment and risk management** for serious cross border health threats from chemical, biological and environmental origin
- To **coordinate EU-wide response** and avoid duplication with other instruments at EU and international level (eg. IHR)



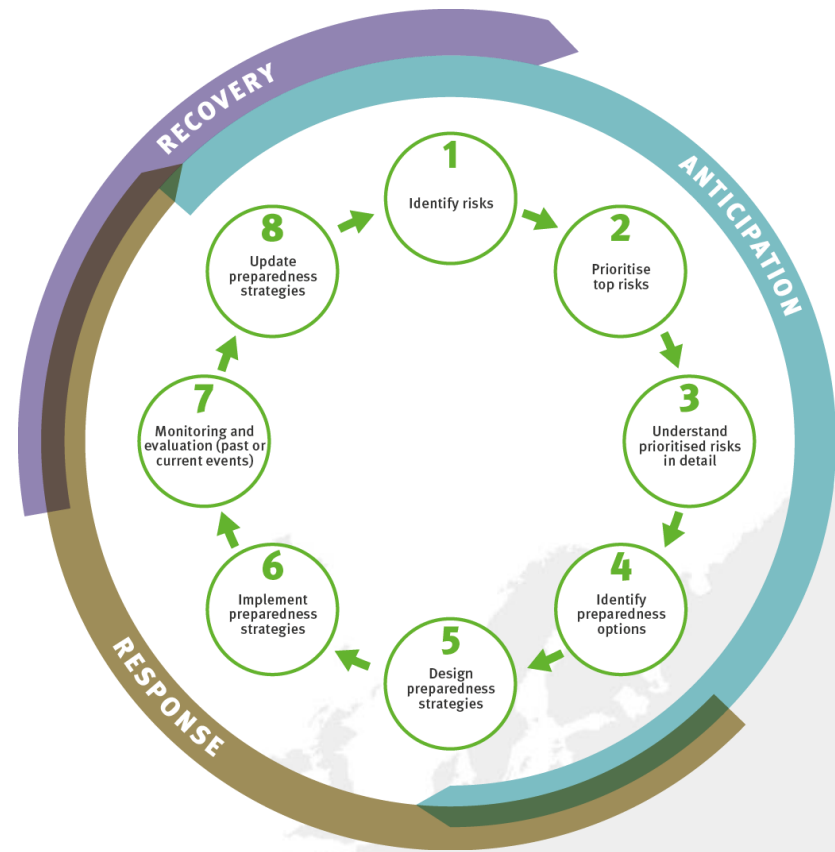
Elements of Preparedness and Response planning in Decision 1082/2013/EC

- ❑ Core capacity standards for preparedness and response planning at national level in accordance with IHR
- ❑ Measures and arrangements with other sectors ensuring interoperability
 - coordination structures in place for cross-sectoral incidents;
 - emergency operational centres (crisis centres);
- ❑ Business continuity plans
- ❑ Revised National Preparedness Plan

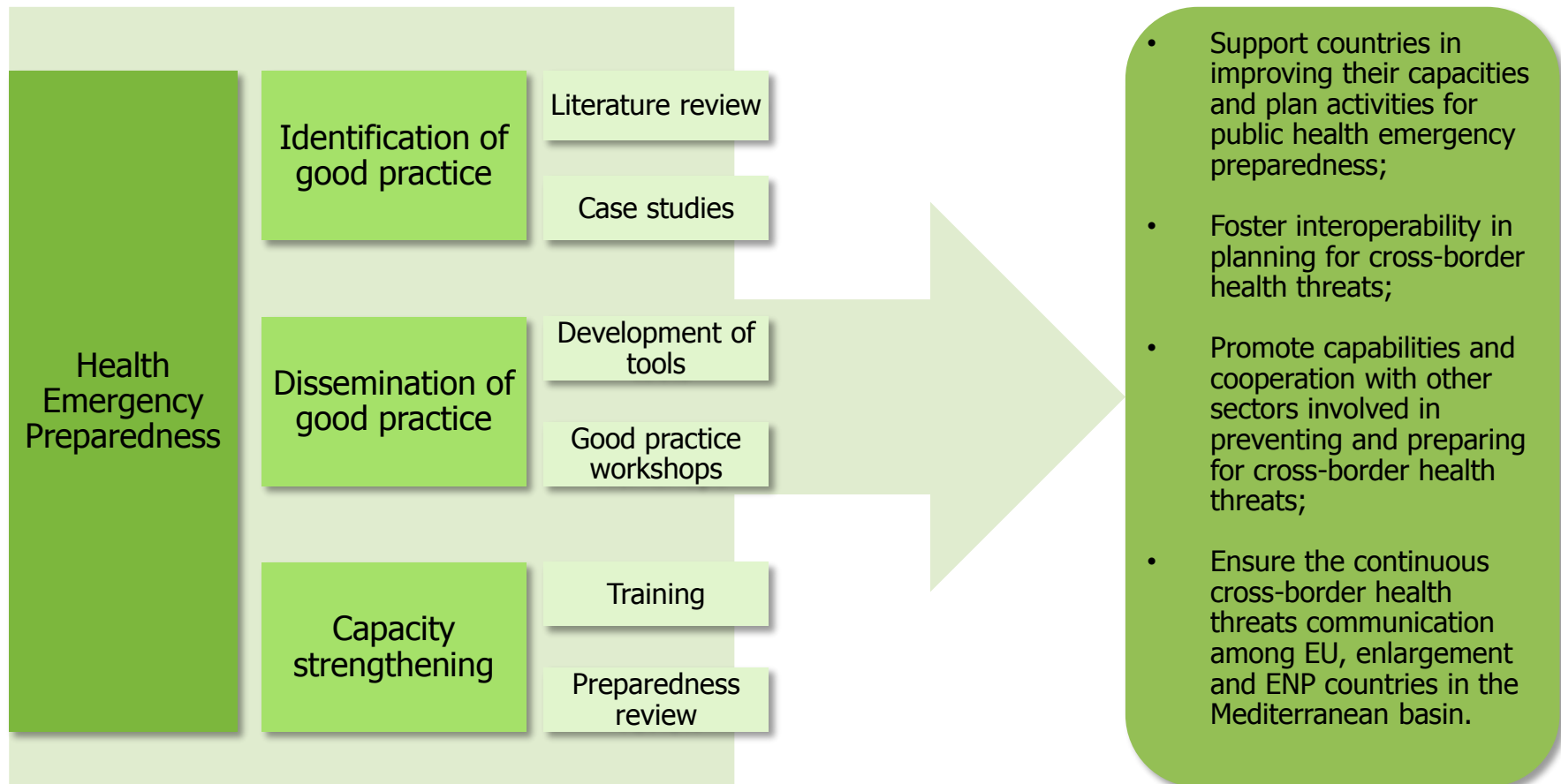


PHEP: an operational definition

The *capability* of the public health and health care *systems*, communities, and individuals, to prevent, protect against, quickly respond to, and recover from health emergencies, particularly those whose scale, timing, or unpredictability threatens to overwhelm routine capabilities. Preparedness involves a coordinated and *continuous process* of planning and implementation that relies on measuring performance and taking corrective action



Supporting countries in implementing Decision 1082



Overlap between preparedness for communicable diseases and for other types of health threats.

Methods of conducting critical incident reviews for the purposes of preparedness and response planning

Clinical and public health management of intoxication with plant toxins Ricin and Abrin

Best practices in ranking emerging infectious disease threats

Types of CD control services available for refugees and asylum seekers arrived in Europe

Tool for assisting EU MS in enhancing preparedness for CD control during sudden influx of migrants

Taking Corrective Action

Case studies: Mers-CoV, Polio

Peer review of EVD preparedness

Prototype tool for assessment of health emergency preparedness

Preparedness Cycle

Evaluating

Organizing

Safe use of PPE in the treatment of IDHC

Video on PPE donning and doffing

How to plan for pre-hospital management of suspected Viral Haemorrhagic Fever (VHF) patients Training course

Pilot course for intersectoral training on staff protection from biological hazards

How to set up, run and evaluate exercises in EU public health settings; a practical course

Equipping

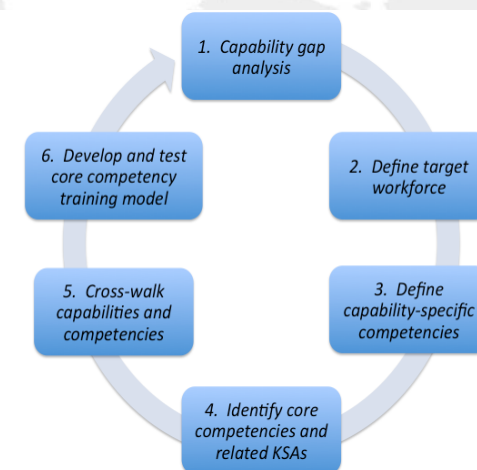
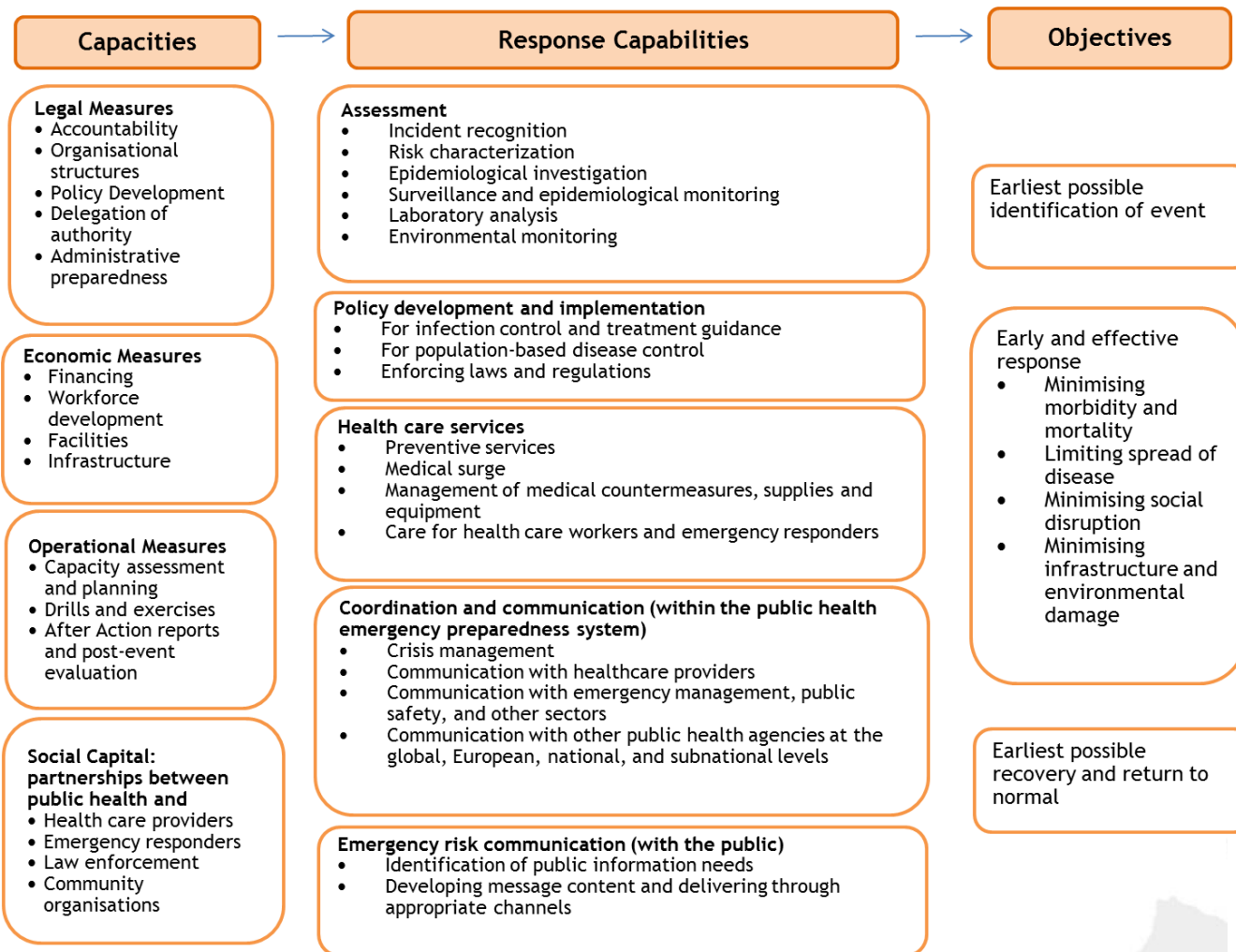
Assist EC on Joint Procurement on PPE

Exercising

How to plan and run Simulation exercises Training course Modules

How to plan and run Simulation exercises: Handbook

ECDC Logic Model for PHEP



Blind spots for capacity building and operational research in PHEP

1. How to address gaps and strengths of PH systems preparedness (capacities-capabilities) to develop competencies of management and frontline staff
1. How to enable the generation of real-time evidence (clinical, epi, anthropological)? E.g. multi-discipline network/platform in “peace time”
1. How to facilitate cross-sectorial, cross-border lessons learning from response/recovery – to address the gap that not much learning happens from crisis to crisis
 - a. Community and participatory approaches to preparedness (which resources, networks, or types of local ‘lay’ expertise exists and can be accounted for?)
 - b. Not everyone is equally at risk – where is vulnerability?
 - c. How can flexibility be designed or accounted for in preparedness planning

Planning and Preparedness

“Everybody has a plan until they get punched in the face.”



Thank you

