

Core Requirements in Public Health Surveillance and Response for the operation of the Revised International Health Regulations by WHO Member States

Background: The current (1969) International Health Regulations (IHR) require Member States to notify WHO of all cases of cholera, plague and yellow fever. Changes proposed for the revised IHR include the requirement to notify the Organization of all *public health emergencies of international concern*. Because of the need to contain disease events or public health risks at their origin and minimize international control measures, Member States will need rapid detection and response capacities to identify and control events. There are already some Member State capacity requirements in the current IHR, such as the provision of public health services at international airports, ports and frontiers. The revised IHR extends these requirements.

Although surveillance systems vary from country to country, core surveillance and response capacity requirements are universal. A Guide to Health Event Early Warning Systems, referenced in the new IHR text, will provide the guidelines for implementation and operation of the core requirements. The following capacities are considered essential for all Member States:

- 1. Detection and Reporting - *unusual and/or unexpectedⁱ disease events or public health risksⁱⁱ*** in all communities shall be detected and all available *essential informationⁱⁱⁱ* shall be immediately reported to the appropriate public health response level (e.g. emergency room, village health care worker, etc.).
- 2. Response - the first public health response level :** shall have the capacity to verify the reported event or risk and to begin implementing *preliminary* control measures immediately. Each event or risk shall be assessed immediately and if found urgent^{iv} all available and essential information^{iv} shall be immediately reported to the designated *national focal point*.^v
- 3. Response – National/international level :** All reports of urgent events or risks shall be assessed at the national level within 24 hours. If the event/risk is

ⁱ **Unexpected/unusual event** is defined as: “occurrence of illness or death above expected levels, observed in time and place”

ⁱⁱ **Public health risk** is defined as: a contamination, condition, environmental or animal disease source that may cause human illness or death. Examples would include contaminated foodstuffs or water or an animal disease (e.g. Rift Valley Fever) which may cause disease in humans.

ⁱⁱⁱ **Essential information** is defined in the Guide.

^{iv} **Urgent events or risks** may have one of the following indicators: high mortality; unknown disease or unknown cause; high potential for spread outside the community/country; lack of capacity to contain and control further spread.

^v A national centre or other appropriate body, with a contact point and alternates, whose role will be to 1) address ongoing international surveillance and response requirements and 2) to act as the technical resource coordinating body for the IHR revision process.

assessed as meeting any of the following parameters for public health emergencies of international concern, WHO must be notified immediately through the national focal point:

- A serious and unusual or unexpected event.
- A significant risk of international spread.
- A significant risk of international travel and/or traffic restrictions on the free movement of persons, conveyances or trade goods.

Member States should have the following capacities at the National level:

- To quickly determine the national control measures required to prevent international spread
- To provide support in the form of specialized staff skills, laboratory analysis of samples received from the area concerned (in-country or through collaborating centres), logistical support in the form of equipment, supplies and transport
- To provide on-site assistance as required to supplement local investigations
- A direct operational link with senior health and other officials to rapidly approve and implement containment and control measures
- Direct liaison with other key government ministries, such as transport, customs and agriculture
- A rapid communications link with hospitals, clinics, airports, ports, laboratories and other key operational areas, for the dissemination of information and recommendations received from WHO regarding public health events in other countries and inside countries
- To establish, operate and maintain a national public health emergency response plan
- 24 hour, 7 day/week operation

Urgent events should still be reported through routine mechanisms.