

**Recommendations/Conclusions from the IHR (2005) and PPHSN Meeting
30 May – 1 June 2012, Nadi, Fiji**

- Participants of the IHR (2005) and PPHSN Meeting confirmed the operational action points and decisions adopted by the PPHSN Coordinating Body.
- PPHSN was confirmed to be very important to support surveillance and response, to fulfill IHR obligations and to support APSED implementation.
- All participants agreed that Syndromic Surveillance is very effective and needs to be continued and strengthened. Other recommendations are:
 - ensure and maintain appropriate funding for human resources to support this system, both at national and regional levels;
 - PICs may expand to more sentinel sites when necessary and should focus on strengthening analysis and response
 - keep the 'dengue-like illness' case definition optional;
 - WHO is asked to start including the 'dengue-like illness' case definition in the weekly bulletin for those countries that report it;
 - conduct more training and mentoring on surveillance and response;
 - encourage development of a response SOP;
 - thresholds are useful, especially in combination with SOPs;
 - continue to explore the usefulness of new technologies.
- Regional EpiNet teams are agreed to be an important mechanism to support national response capacity to outbreaks and public health events of potential international concern. These teams must be of a high level of expertise but also serve as hands-on training opportunities for PICTs' health professionals, especially those from national EpiNet teams.
- National EpiNet teams:
 - must be strengthened by clear political/institutional commitment from decision-makers;
 - routine communication between national EpiNet members has to be established. communication and efficiency of the Teams has to be maintained by way of exercises and in-country needs-specific training sessions.
- The concept of an FETP project for the Pacific region was welcomed and encouraged. The need to consider all existing regional models (MAE, EIS, etc.) is important. A feasibility study is endorsed.
- Strengthening of laboratory capacities at national and regional levels (LabNet) is very important and must be sustained.
 - The possibility of accreditation of LabNet L2 labs should be explored.

- IHR/APSED and the PPHSN framework have to be harmonised into a guideline, e.g. *Pacific Guidelines for Emerging Diseases (PAGED)*.
 - At national level, the guidelines will be optional.
 - They may be used for developing selected areas for surveillance and response and/or fulfilling the IHR core capacities.
 - At regional level, PPHSN partners will use the guidelines to guide the development of PPHSN activities and services to PICs.
 - WHO and SPC, in consultation with CDC, other partners and PICs, should further develop the document and finalise it.

- The participants requested WHO to shorten and simplify the IHR monitoring tool.

- PICs should strengthen food and water safety systems, including better participation in the INFOSAN network.