



Submission Date: 9 May 2008 at: 14:20

Questionnaire about Institutions partners

SECTION 1

Official name¹

¹ Provide the name of the organization such as the Ministry of Health or Public Health Institute to which your unit belongs.

Institute of Public Health of the Republic of Slovenia

Unit²

² Department/Unit within the institutions involved in the Network, in charge of the surveillance of communicable diseases (especially in early warning and response system, vaccine preventable diseases and zoonotic infections).

Center for Communicable Diseases

Phone

+386 1 2441 410

Fax

+386 1 2441 471

E-mail address

cnb@ivz-rs.si

Website address

www.ivz.si

EpiSouth Focal Points:

a) Institution

Institute of Public Health of the Republic of Slovenia

E-mail

alenka.kraigher@ivz-rs.si

b) Institution

Institute of Public Health of the Republic of Slovenia

E-mail

veronika.ucakar@ivz-rs.si

c) Institution

Institute of Public Health of the Republic of Slovenia

E-mail

nadja.koren@ivz-rs.si

SECTION 2

Mandate³ as described in the regulation enacting your organization

A maximum of 200 words is allowed

³ *The mandate defines the main functions of an organization and derives from outside and above an organization.*

SECTION 3

Describe your unit position within the organizational chart (organigram)⁴ of the larger institution you belong to

A maximum of 200 words is allowed

⁴ *An organizational chart for a whole organization shows the units who make up such organization and the relationships between them. Relationships refer to authority and communication lines.*

Upload a file for further informations:

SECTION 4

Describe your unit's organizational chart (organigram)⁵

A maximum of 200 words is allowed

⁵ *An organizational chart for a unit shows the managers and main professional roles who make up such unit and the relationships between them.*

SECTION 5

Illustrate the main roles and activities carried out by your organization in the field of infectious diseases prevention and control, specifically in the following areas:

a) Surveillance of infectious diseases

A maximum of 200 words is allowed

b) Epidemic Intelligence⁶

A maximum of 200 words is allowed

⁶ *Please, see: C. Paquet, D. Coulombier, R. Kaiser, M. Ciotti, Epidemic Intelligence: a new framework for strengthening disease surveillance in Europe in Eurosurveillance, 2006; 11 (12): 212–4.*

Institute of Public Health of the Republic of Slovenia (NIPH) was established with decree of Government of the Republic of Slovenia, No.022–03/90–10/2–8, on 17th December 1992. It was created from the Institute of Hygiene, which was first national public health institution established in 1923. Aim of NIPH is performing activities in the field of social medicine, hygiene, epidemiology, environmental health, and activities of health care organization, economics and informatics for social care services, basic applicative work and research as public institution. NIPH monitors the health of Slovenian population and its determinants and contributes to planning and implementation of population based interventions for the health and welfare of the whole nation. The NIPH also provides education and research programs in the field of public health.

The diversity of the NIPH activities is mirrored by the organization internal complexity, multi-disciplinary approach, and links to various sectors. Activities are organized in five Centers and three Units: Center for health and health care research, Center for health care organization, economics and informatics, Center for health and environment, Communicable Diseases Center, Center for health promotion, Health statistics unit, Information unit for illicit drugs, Unit for drug purchase and distribution.

Detailed informations are available in the organigram attached

Communicable Diseases Center (CNB) has four departments: Communicable disease surveillance department, Department of Immunization, Department of STI, HIV/AIDS and HAI Surveillance, Department of Medical Microbiology.

Communicable Diseases Center coordinates the national surveillance and prevention of communicable diseases and contributes to control strategies and activities. The surveillance has been traditionally based on collection, analysis and interpretation of information about notified cases of newly diagnosed diseases or infections. Sources of this information are regional public health institutes, physicians, public health laboratories. Passive surveillance information is complemented for selected communicable diseases or infections by that obtained from sentinel surveillance systems (acute respiratory infections, HIV) and by reports about important events gathered in cooperation with health inspectorate, veterinary institutes, and from media... Events are investigated in cooperation with regional public health institutes. Gathered data are analyzed, assessed and distributed through reports (monthly CNB news, quarterly and/or yearly reports).

Monitoring of information is done through Indicator based surveillance (mandatory notification system, laboratory surveillance, sentinel networks) and event based surveillance (national – on call preparedness 24 hours 7 days a week – and international event monitoring through EWRS, MediSys, ProMed, OIE, WHO, CDC, ECDC, Eurosurveillance, media; literature overview). Data are assessed and investigated in cooperation with regional public health institutions.

c) Monitoring of services delivery, including immunization of migrant populations
A maximum of 200 words is allowed

d) Zoonosis
A maximum of 200 words is allowed

e) Diagnostic services
A maximum of 200 words is allowed

f) Emergency preparedness
A maximum of 200 words is allowed

g) Training and education
A maximum of 200 words is allowed

h) Research
A maximum of 200 words is allowed

SECTION 6

Describe the alert procedure adopted by your organization and the conditions to which applies paying special attention to infectious diseases.
A maximum of 200 words is allowed

Nominated doctors are in charge for delivery of immunization and vaccination services. Monitoring of these services is done by regional and national coordinators (monitoring the sensitivity and susceptibility of general population, including vaccination coverage, conduction of population based seroprevalence studies). Immunization of migrant population is not monitored separately from general population.

In Slovenia, the Ministry of Agriculture, Forestry and Food and the Ministry of Health share the responsibility for matters concerning zoonotic diseases. Steering Committee on Zoonoses on national level gives an important opportunity for cooperation between Veterinary administration of RS (VARs), Ministry of Health (MOH), Health Inspectorate... Committee is chaired by an epidemiologist of the NIPH RS. There are certain ad hoc meetings and also occasionally regular sharing of data (bird flu). Regular outputs on zoonoses are: annual report on zoonoses; annual program for zoonoses monitoring; annual report for EFSA.

Microbiological testing in Slovenia is provided through the regional IPH laboratories and national reference laboratories. Most of the reference laboratories are contained within the national IPHRS. Exceptions are reference laboratories for TB, HIV and viral hemorrhagic fevers. Diagnostic services of IPHRS Public Health Laboratory are separated in following main diagnostic categories: – vaccine preventable diseases – influenza viruses, enteroviruses (including polioviruses) – invasive bacterias, – molecular and genetic diagnostics.

Outbreaks and events of public health concern are reported directly to the IPH which informs the MoH. Outside office hours, outbreaks are reported directly by phone to the epidemiologist on duty. Both at regional and national levels, a formal system of contacting the relevant persons outside office hours is in place (24 hours and 7 days a week).

Postgraduate education programs. Education about immunization and vaccination principles and cold chain (regular workshops).

In recent years, the Center has coordinated and/or participated in several studies such as: – a national general population probability sample study about sexual behavior, which integrated testing for genital Chlamydia trachomatis infection – first national hospital acquired infections survey – seroepidemiological studies relevant to vaccine preventable diseases (measles, rubella, diphtheria, tetanus, hepatitis A, human metapneumovirus...) – seroprevalence and risk factor study of herpes zoster – seroprevalence study of cytomegalovirus – study about re-emergence of pertussis in Slovenia (with regard to the change in national immunization policy) – research on invasive bacteria epidemiology and antimicrobial resistance

Outbreaks and events of public health importance are detected at the regional level, either through (direct) notification by physicians, and institutions like schools, by analyzing the lab reports (microbiological laboratories are integrated in the regional public health institutes) or by analyzing the notifications. Reporting on outbreaks is obligatory and must be immediate and on suspicion using the quickest possible way (telephone, fax). Outbreaks are reported directly to the IPH which informs

the MoH. Outside office hours, outbreaks are reported directly by phone to the epidemiologist on duty. Both at regional and national levels, a formal system of contacting the relevant persons outside office hours is in place (24 hours and 7 days a week). Outbreak or event is investigated by regional epidemiologist or national outbreak team, depending on the size of the outbreak and other characteristics and circumstances.

SECTION 7

Provide a brief account of your unit's professional staff mix⁷

⁷ The categories are mutually exclusive: please, assign only one profile to each unit's professional staff.

Staff mix	Senior	Junior	Total
Epidemiologists	5	2	7
Infectious diseases specialists	0	0	0
Statisticians	2	0	2
Microbiologists	5	0	5
Biologists	5	0	5
Laboratory technicians	11	0	11
Information Technology Managers	0	0	0
Others (please, specify) <i>data manager / program assistant / other</i>	14	2	16

SECTION 8

Describe the content of and time span covered by the databases related to infectious diseases your organization manages.

Please select the number of databases you want to describe, insert their descriptions, and leave the drop-down menu with the number of databases you have compiled.

Number of databases:

5

Data-base	Content	Time span	Brief description
Communicable diseases	Database on 75 mandatory reportable communicable diseases.	From 1950	Universal mandatory notification. Passive reporting system. Database of reports from GP.
Sexually transmitted diseases	Database on mandatory reportable sexually transmitted diseases.	From 2001	Universal mandatory notification. Passive reporting system.
HIV / AIDS	HIV/AIDS surveillance is based on mandatory reporting of HIV / AIDS / AIDS deaths.	From 1986	Additional sources: overall national HIV testing rates, unlinked anonymous testing, behavioral surveillance
Adverse events following immunization	Database on reported adverse events after immunization.	From 1996	Passive reporting system
Immunization registry	Immunization surveillance and evaluation, supported by computerized system, data exchange.	From 1996	Passive reporting system

SECTION 9

Exemplify the main publications produced by your organization during the last three years.

Please select the number of publications you want to describe, insert their descriptions, and leave the drop-down menu with the number of publications you have compiled.

Number of newsletters:		0	
Number of bulletins:		1	
Title	Frequency (Yearly, monthly, etc.)		Web link (if available)
"CNB novice"	monthly		http://www.ivz.si/index.php?akcija=podkategorija&p=89
Number of reports:		5	
Title	Frequency (Yearly, monthly, etc.)		Web link (if available)
Surveillance of communicable diseases in Slovenia	yearly		http://www.ivz.si/index.php?akcija=novica&n=798
Reports of STI in Slovenia	quarterly, yearly		http://www.ivz.si/index.php?akcija=podkategorija&p=90
Reports of HIV / AIDS in Slovenia	quarterly, yearly		http://www.ivz.si/index.php?akcija=podkategorija&p=90
Analysis of immunization program delivery	yearly		http://www.ivz.si/index.php?akcija=novica&n=1206
Analysis of vaccine side effects	two yearly		http://www.ivz.si/index.php?akcija=novica&n=1210
Number of research:		0	
Others:		0	

SECTION 10

Identify your main collaborating partners in each area.

Number of partners:										7
Partner name	Location	Surveillance of infectious diseases	Epidemic Intelligence	Monitoring of s. delivery	Zoonosis	Diagnostic Services	Emergency preparedness	Training and education	Research	
Ministry of Health	National	No	No	Yes	Yes	No	Yes	No	No	
Ministry of Health, the department of Health inspectorate	National	No	No	Yes	Yes	No	No	No	No	
9 Regional Public Health Institutes	Regional	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Infectious disease clinic	National	No	No	Yes	Yes	Yes	Yes	Yes	Yes	
Institute of Microbiology and Immunology	National	No	No	Yes	Yes	Yes	Yes	Yes	Yes	
Ministry of Agriculture, Forestry and Food, Veterinary administration of RS	National	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
ECDC	Internat.	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	

