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EPISOUTH  
SECOND TRAINING MODULE

# Challenges for IHR implementation in Spain

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## International Health Regulations (2005)



### Objective:

- To improve capacity for disease prevention, detection, and response
- To provide ground rules to address national PH threats that have the potential to become global emergencies

June 2007: The revised regulations entered into force for all WHO member states

## International Health Regulations (2005): A new Concept

“Events that might constitute a public health emergency of international concern”

Proactive risk management strategy:  
early detection of events and containment while  
they are still local, before they become an  
international health threat

## New Times, New Requirements

The new IHR include the following 5 changes:

- Expanded Scope
- Decision Instrument and Notification (algorithm)
- Focal and Contact Points
- National Core Surveillance and Response Capacities
- WHO Support

## IHR (2005): Requirements for member states

- To develop, strengthen, and maintain core capacities to
  - 1) detect, assess, notify, and report disease events,
  - 2) respond promptly and effectively to PH risks and PH emergencies of international concern
    - public health infrastructure and human resources
    - **national action plans**
- To collaborate with a request for event verification
- To designate “**national IHR focal points**” as the operational link for notification / reporting to WHO

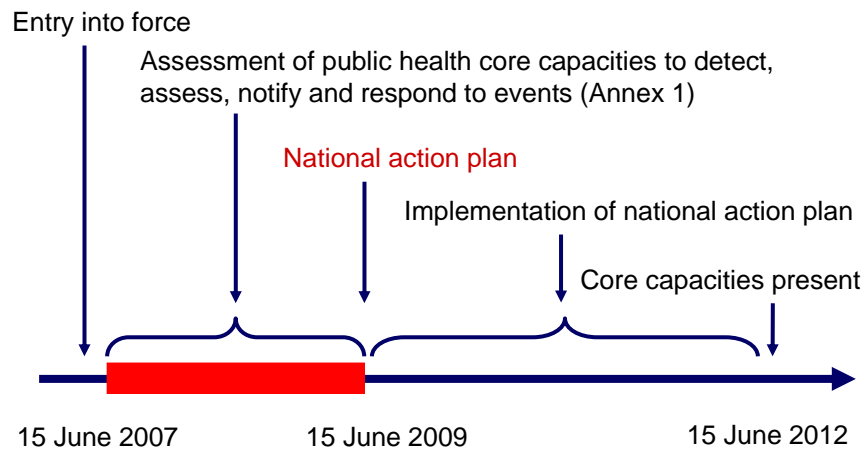
## New Requirements:

“Traditional” surveillance systems need to be adapted in order to face the new challenges.

The new alert systems must build on **networks** that

from the international level,  
and thru the national level,  
reach the local level,  
where events posing a PH risk  
are going to be detected initially.

## Steps in IHR implementation process



## Capacity assessment

- Steps in the IHR implementation process
  - Legislative compatibility with the IHR
- Core capacities (all hazard) (IHR Annex 1)
  - Surveillance and Notification
  - Preparedness and Response

## Surveillance and Notification

### Do we meet IHR requirements?

#### ✓Present:

- Surveillance network based on reporting physicians/ labs from the local level up to national level
- List of mandatory reporting diseases, outbreak notification and additional systems for specific diseases
- Alert systems: different degree of implementation and performance at Regional level
- A designated National Focal Point for WHO (CCAES)

#### ✗Not present:

- A performing alert system covering all country 24/7/365
- A system to detect and notify all events under the new IHR

## Preparedness and Response

### Do we meet IHR requirements?

#### ✓Present:

- Response guidelines for specific situations (CD outbreaks...)
- At some levels: established response circuits to specific alerts
- A Pandemic Influenza Preparedness and Response Plan discussed and agreed at all levels

#### ✗Not present:

- A performing alert system coordinating response in all the country 24/7/365
- Coordinated response procedures for emergencies related to Animal Health, Food, Chemicals...
- A national public health emergency response plan (GPP)

## Legislative compatibility

### Do we meet IHR requirements?

- Do we need to adapt current legislation?
  - For surveillance?
  - For response and control measures?
- Do we need to collapse all IHR related legislation in a single, comprehensive General Act?

## National action plan

### Priority areas identified by self-assessment:

- Legislative aspects: Need to adapt current legislation to IHR (2005) requirements
- To have a National IHR Focal Point able to comply with IHR (2005) requirements
- To develop health alert systems 24/7/365 at national and regional level with designated focal points at both levels in order to comply with IHR (2005) requirements
- To disseminate the IHR (2005) to all the actors (national, regional, local level) of the circuit
  - Training and workshops

Thank you for your attention