Terms of Reference: Review Committee on role of IHR in Ebola outbreak and response

- (a) to assess the effectiveness of the International Health Regulations
 (2005) with regard to the prevention, preparedness and response to the
 Ebola outbreak, with a particular focus on notification and related
 incentives, temporary recommendations, additional measures, declaration
 of a public health emergency of international concern, national core
 capacities, and context and links to the Emergency Response Framework5
 and other humanitarian responsibilities of the Organization;
- (b) to assess the status of implementation of recommendations from the previous Review Committee in 2011 and related impact on the current Ebola outbreak;
- (c) to recommend steps to improve the functioning, transparency, effectiveness and efficiency of the International Health Regulations (2005), including WHO response, and to strengthen preparedness and response for future emergencies with health consequences, with proposed timelines for any such steps.

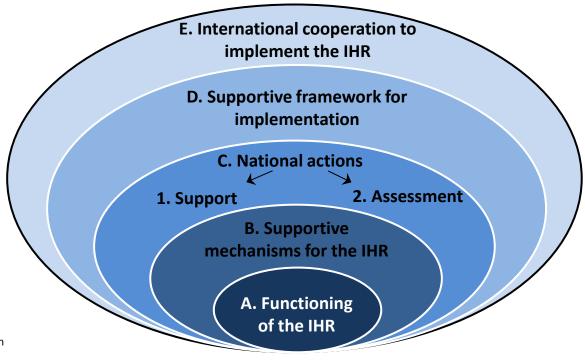
Principles guiding the work of RC

- Speed
- Transparency and openness
- Building on existing documents and reviews
- Building on experiences
- Optimising stakeholder engagement
- Optimising communication
- Implementability of recommendations

National and global contexts and supportive environment for the International Health Regulations (2005)

A: Functioning of the IHR Review the International Health Regulations with regard to:

- States Parties' core capacities in detection, assessment and response
- States Parties' detection, assessment, alert/reporting operations
- WHO surveillance, assessment and response operations
- PHEIC mechanism, IHR
 Temporary Recommendations,
 Emergency and Review
 Committees
- Points of entry; measures for international travellers, transport and trade
- Avoidance of unnecessary interference with travel, transport and trade
- Implementation of the IHR with respect for travellers, human rights, additional measures
- Institutional provisions



E: International cooperation to implement the IHR

- UN Security Council
- Global Health Security Agenda
- Coordination of roles and responsibilities of UN entities
- Coordination of IGOs and NGOs
- Strengthen health security facilities in Regional Entities such as AU, EU, ASEAN, etc.
- WHO platform for information sharing and matching country needs to partner resources
- "Friends of IHR": involving stakeholders such as airlines, travel and tourism industry, insurance etc. that have a vital interest in the functioning of IHR

B: Supportive mechanisms for the IHR

Ensure political will through providing appropriate:

- Human resources
- Financing
- Information management
- Active intersectoral coordination
- Nationally –legal frameworks and policies to facilitate country implementation of IHR
- Integrating IHR into integrated, people-centered health systems

C: National and regional actions

- (1) Strengthen support of the IHR through:
- Whole-of-government ownership
- ➤ Health risk communication network
- Health in national security agenda
- (2) Strengthen, with assistance of WHO, assessment function through:
- Measuring performance through independent evaluation
- Promoting regional learning and sharing lessons
- Carrying out routine simulation exercises
- > Improving self-assessment
- > Systematic post outbreak reviews
- Using innovative surveillance mechanisms

D: Supportive framework for implementation

- Establish a fund for IHR (determine local, national, regional and global financing)
- > Foster civil society engagement
- Strengthen regional networks and cross-border agreements
- Develop annual reports on global health security
- Establish a global health emergency workforce

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Methods of work

- Rooted in IHR but also within a broad health and multisector context
- Three subgroups to analyze the difficulties met, to study existing recommendations and experiences, and to propose the possible operational and IHR solutions
 - Definitions, principles and flow of information between MS and WHO
 - Capacities
 - Compliance to and governance of IHR
- The ambition of a report is that it is short, clear, understandable, accessible and user-friendly

Timeline

August: proactive communication strategy to all stakeholders including website submissions and active solicitation of inputs

September: teleconference of RC and secretariat

October (early): 2nd RC meeting

November: intersessional meeting of RC and secretariat

January: preliminary report to EB

February: 3rd RC meeting

March: submission of final report

May: presentation of report to WHA