UNIVERSAL HEALTH AND PREPAREDNESS REVIEW (UHPR) NATIONAL PHASE GUIDANCE

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World Health Organization

CONTENTS

I. ACKNOWLEDGMENT

This document was developed by the UHPR Secretariat at WHO HQ, with input from WHO regional and country offices, other WHO HQ departments, and the UHPR Technical Advisory Group (TAG).

The National Phase Guidance was developed by Drs. Stella Chungong, Liliane Boualam, Luc Tsachoua, with contributions from their colleagues, Drs. Jun Xing, Mauricio Reynaud, Niluka Wijekoon Kannangarage, Akiko Takeuchi, Ernest Aboagye, and Maureen Taylor-Smith of the UHPR Unit in WHO HQ.

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The document may be adjusted based on lessons learnt from upcoming UHPR pilots.

II. EXECUTIVE SUMMARY

The Universal Health and Preparedness Review (UHPR) National Phase Guidance serves as a comprehensive document that describes the steps and tasks necessary to implement the UHPR process.

Leveraging lessons learnt from the first six UHPR pilots conducted in the Central African Republic, Iraq, Thailand, Portugal, Sierra Leone, and the republic of Congo, alongside insights gleaned from the first Global Peer Review Meeting focused on the National Reports of Central African Republic, Portugal, and Thailand, this Guidance embodies a wealth of experiential wisdom and best practices.

This document provides countries with comprehensive guidance on the UHPR process. It underscores the importance of preparation and outlines the essential prerequisites that countries should consider before engaging in the UHPR process, ensuring a solid foundation for smooth and successful implementation.

The Guidance details the activities and delineates the roles and responsibilities of key stakeholders involved in conducting the national review of country's capacities and identifying strategic priorities for health security, through the UHPR process. It clarifies the expected outcomes and explains the process for transitioning from the national phase to the global peer review phase. Additionally, it describes how to leverage the outputs of the UHPR process to strengthen your country's capacities for health emergency preparedness and response, health systems, and Universal Health Coverage (UHC).

The document includes annexes that offer access to crucial tools and resources designed to support the seamless implementation of the UHPR process. These supplementary materials are intended to enhance understanding and facilitate effective execution at every stage of the UHPR journey.

The UHPR is a Member State-led process, with WHO providing support throughout.

III. ABBREVIATIONS

AAR	After action review
EAC	Expert Advisory Commission
COVID-19	Coronavirus disease 2019
CSO	Civil society organizations
DG	Director-General
GPR	Global Peer Review
HEPR	Health Emergency Preparedness, Response, and resilience
HR	Human resource
IAR	Intra action review
IHR	International Health Resolutions
M&E	Monitoring and evaluation
MoH	Ministry of Health
NFP	National Focal Point
NGO	Non-governmental organizations
PPT	PowerPoint
RD	Regional Directors
RO	Regional Office
SimEx	Simulation Exercise
UHPR	Universal Health and Preparedness Review
UN	United Nations
WCO	WHO Country Office
WHA	World Health Assembly
WHO	World Health Organization
WR	WHO Representative

IV. INTRODUCTION TO THE UHPR

1. Context

1.1 background

The devastation caused by the COVID-19 pandemic has been a vivid reminder that the world is not prepared to face a pandemic of that scale and magnitude. The pandemic underscored the imperative for concerted efforts to strengthen health security and enhance the resilience of health systems, ultimately advancing toward Universal Health Coverage.

Under the International Health Regulations (IHR) (2005), all 196 Member States, bear the responsibility to establish and sustain effective capacities and systems for preventing, preparing for, protecting against, controlling, and providing a public health response to the international spread of diseases.

Achieving this goal necessitates unwavering leadership commitment, inclusive engagement across all relevant sectors, and the active involvement of civil society (CSO) as a whole; alongside enhanced accountability and strengthened solidarity among Member States to the global community.

> "***Global health security is only as strong as its weakest link – no one is safe until we are all safe.***"
>
> **Dr Tedros Adhanom Ghebreyesus**, WHO Director-General
> Opening remarks at the Vaccines and Global Health Symposium,
> COVID-19 Vaccine Development, Strategy and Implementation, 23 February 2021

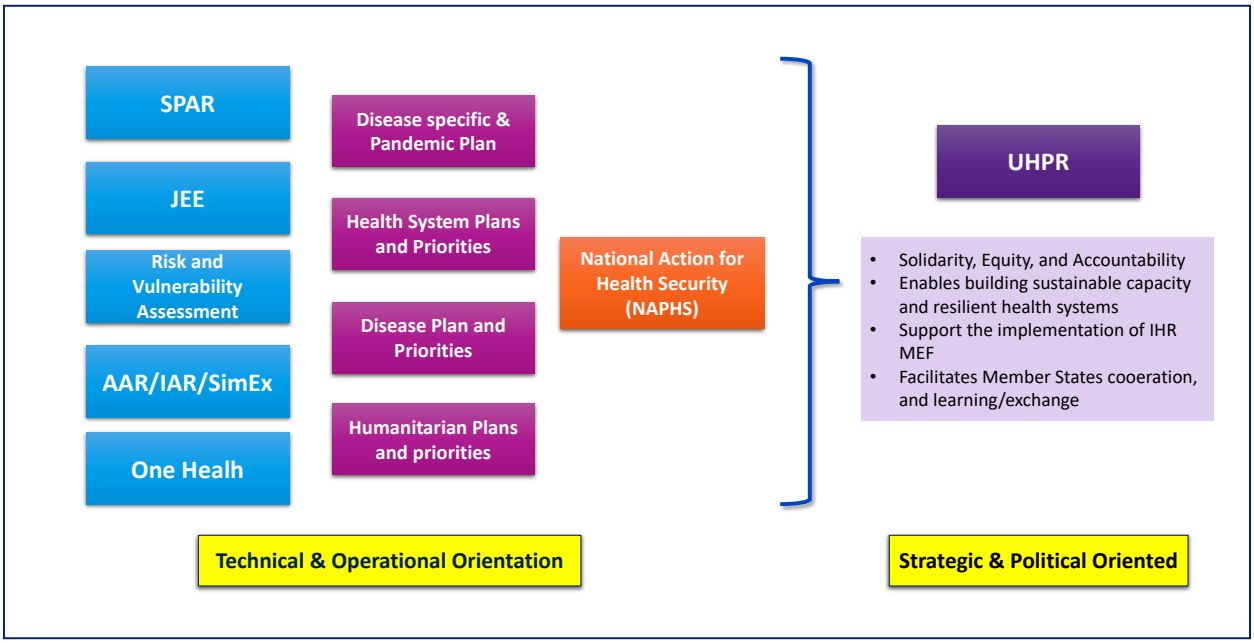
Following a suggestion put forward in 2020 by the Central African Republic and Benin, then-Chairs of the African Union, the WHO Director-General announced in November of the same year the pilot of the Universal Health and Preparedness Review (UHPR). This initiative establishes a Member State-led mechanism whereby countries agree to a voluntary, regular, and transparent peer review of their comprehensive national health emergency preparedness capacities.

1.2 Link between the UHPR and the Health Emergency Prevention, Preparedness, response and Resilience (HEPR)

In the three years post the COVID-19 pandemic's onset, WHO collaborated with Member States and partners to assess global response strengths and weaknesses, and the Health Emergency Prevention, Preparedness, Response, and Resilience (HEPR) framework. After reviewing over 300 recommendations, WHO released the HEPR strategic framework in 2023. This framework aims to strengthen national, regional, and global multisectoral capacities at the intersection of health security, primary health care, and health promotion. It addresses key issues like balancing sovereignty with mutual accountability among the 196 States Parties to the IHR (2005). In response, the WHO Director-General introduced the Universal Health and Preparedness Review (UHPR) as a voluntary, transparent, Member State-led peer review mechanism to achieve this balance.

UHPR piloting is part of a broader effort to transition to more dynamic assessments, focusing on high-level strategic capacities for health security.

1.3 Link between the UHPR and the International Health Regulations Monitoring and Evaluation Framework (IHR MEF)



The UHPR leverages resources from the International Health Regulations Monitoring and Evaluation Framework (IHR MEF), like the SPAR and JEE, as well as from National Plans like the NAPHS or disease-specific plans. These resources are technically and operationally oriented, while the UHPR stands out with a unique approach and process that complements these resources with a strategic and political orientation.

While all these mechanisms focus on health security capacities, the UHPR covers a broader range of areas, including governance, systems, and financing. Additionally, it goes beyond health security capacities by also reviewing relevant capacities in health systems and Universal Health Coverage (UHC) that contribute to health security. The UHPR engages a higher level and wider range of stakeholders, including the country's highest-level leaders (president, vice president, prime ministers, line ministers), policymakers (parliamentarians), partners, and stakeholders from all relevant sectors, following a multisectoral and whole-of-society approach.

At the global level, the UHPR stands out by engaging all Member States in peer-to-peer reviews of country priorities, experience sharing, and discussions in a spirit of solidarity for better regional and global cooperation towards enhanced global health security.

Overall, the UHPR promotes higher-level country ownership, broader stakeholder engagement, and stronger Member State solidarity.

1.4 The piloting of the UHPR

As part of the ongoing UHPR pilot, eleven Member States, across five WHO regions, have officially engaged in the process: Cameroon, Central African Republic, Congo, Dominican Republic, Iraq, Kyrgyzstan, Luxembourg, Portugal, Sierra Leone, Tanzania, and Thailand (as of July 2024).

As an integral component of the UHPR piloting, continual refinement of the UHPR process and its associated documents is paramount. This iterative process is informed by lessons learnt from UHPR pilots, suggested improvements from Member States, advice from the UHPR Technical Advisory Group (TAG),

and recommendations from partners agencies and technical area leads across WHO country offices, regional offices, and headquarters.

1.5 Evolution of the Guidance: Historical Development Overview

This document represents the fourth version of the UHPR National Phase Guidance. It incorporates lessons learnt from the implementation of the process in the eleven Member States engaged in the UHPR up to July 2024, as well as comments and suggestions from key stakeholders, including those from the country, WHO, the TAG, and partner agencies. The main challenges and corresponding amendments to the procedure are summarized as follows:

- The process has been simplified and streamlined, and several tools and templates have been developed to facilitate implementation.
- The national review phase was sometimes lengthy, often exceeding one year in some countries: the process has been lightened to be implemented in a total of six months duration for the national phase.
- Seeking and sustaining country leadership momentum across process time was variable: the roles and contribution of the country leadership is now clarified and reflected as a prerequisite, before starting the national review phase, highlighting the importance of early involvement and availability of leadership.
- This version provides some options to allow country adjustments while maintaining a consistent structure and overall process principles across countries.
- The initial versions were providing exhaustive listing of technical and high-level activities generating questions on targeted audiences; The updated process is focusing more activities engaging the high-level audiences and optimizing leadership contribution and resources required.
- The roles and responsibilities of key stakeholders (minister of health, UHPR National Focal Points, WHO, partners, CSOs) are clearly defined throughout the national review phase.
- Articulation between the National and Global Peer Review (GPR) phases have been reflected in this version based on lessons learnt from the first GPR experience (Feb 2024).

2. What is the UHPR?

2.1 Purpose

The purpose of the UHPR is to build mutual trust and accountability for health, by bringing nations together as neighbours, to support a whole-of-government approach to strengthening national capacities for pandemic preparedness, universal health coverage, and healthier populations.

2.2 Key principles

The UHPR is underpinned by three fundamental principles: accountability, mutual trust, and solidarity, each playing a crucial role in ensuring global health security.

- **Accountability:** This principle encompasses multiple dimensions. Firstly, it entails governmental accountability to their populations, ensuring they are better protected from health emergencies, have access to Universal Health Coverage (UHC), and experience improved health and well-being. Secondly, countries are held accountable to the global community, particularly in terms of implementing the International Health Regulations (IHR) and contributing to the broader global health architecture. Lastly, global partners are accountable to countries regarding health matters,

including coordinating health discussions, shaping research agendas, setting norms and standards, providing technical assistance, and monitoring health trends and emergencies.

- **Mutual Trust:** Central to the UHPR is the cultivation of transparency with the global community, fostering mutual trust between governments and stakeholders within each country, and nurturing trust between governments and civil society (CSO). This trust forms the foundation for effective collaboration and cooperation in addressing health challenges.
- **Solidarity:** The principle of solidarity is multifaceted. It involves fostering agreements within countries, including laws and legislation to facilitate multisectoral and whole-of-society engagement in health initiatives. It also extends to agreements between countries, encompassing regional and global partnerships aimed at collective health goals. Additionally, solidarity entails the sharing of resources such as human resources, materials, and financing, as well as the exchange of best practices through bilateral cooperation and regional/global platforms.

2.3 Added Value of the UHPR

Over time, countries have expanded stakeholder engagement beyond the health sector to enhance health emergency preparedness and response capacities. However, recent outbreaks, including the COVID-19 pandemic, underscored the imperative for a paradigm shift in health security capacity building. As a Member State-led peer review mechanism that engages high-level authorities and the whole-of-society in national and global dialogues, the UHPR adds value both at the national and global levels. Member States that have participated in the process have shared the following benefits of the UHPR:

At the national level

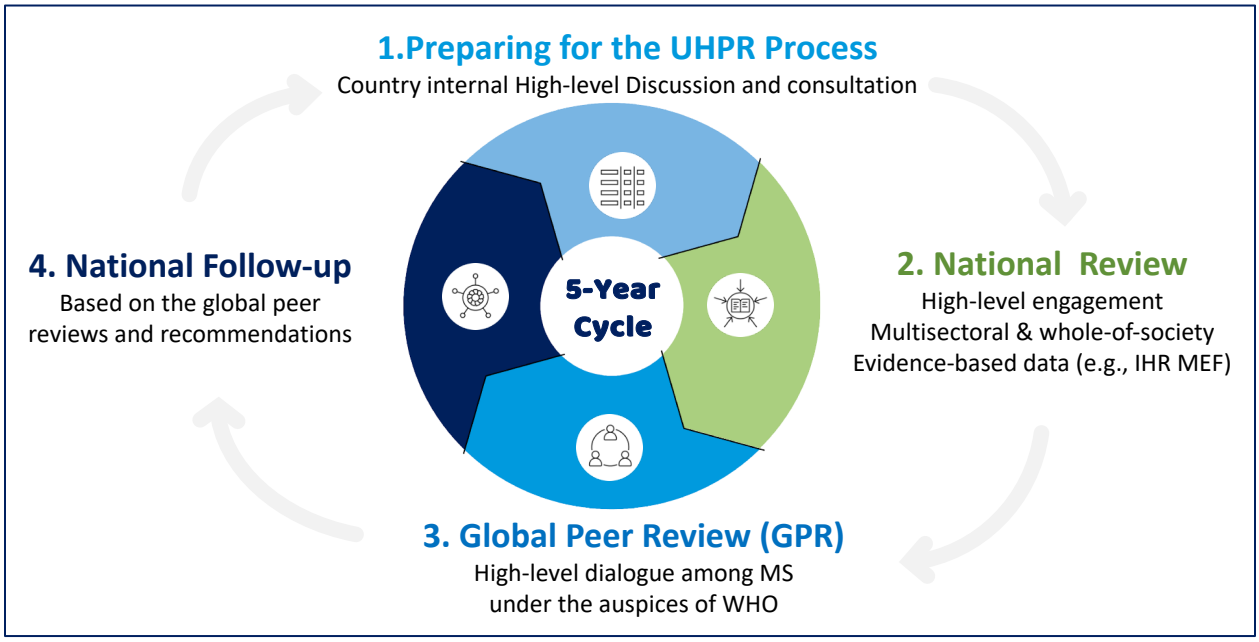
- Elevating health emergency preparedness considerations to the highest political level, engaging country leaders, government officials, and policymakers.
- Establishing and sustaining improved levels of multisectoral mobilization and whole-of-society dialogue.
- Safeguarding the advancements made in COVID-19 response, including networks, knowledge, and experiences.
- Facilitating predictable and sustainable investments in preparedness by mobilizing domestic and external resources towards prioritized areas.

At the International level

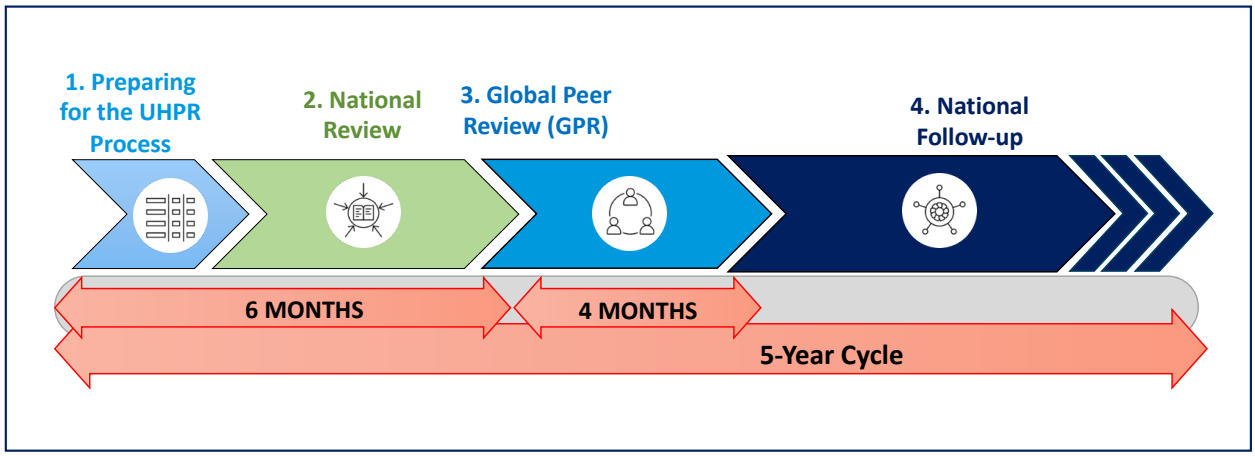
- Encouraging peer-learning, innovation, and sharing of best practices among Member States.
- Keeping health emergency preparedness high on the global political agenda to break the cycle of "panic and neglect".
- Promoting solidarity and cooperation among Member States.
- Promoting engagement and alignment of national initiatives with sub-regional and regional strategies.

V. THE UHPR PROCESS

Graphic 1: The four phases of the UHPR process



Graphic 2: The timeline for implementation of the UHPR process



The UHPR process consists of four phases, with a full cycle spanning five years. The first and second phases last six months in total, the third phase lasts three months, and the fourth phase continues for the remainder of the five-year cycle until the next one.

This document provides countries with a comprehensive guidance on the first two phases of the UHPR process: Preparing for the UHPR Process and the National Review phases, ensuring a robust foundation for the subsequent phases.

Phase 1: Preparing for the UHPR Process

This initial phase involves high-level consultations and discussions within the country to lay the ground for the UHPR process. The preparation for the UHPR includes engaging high-level authorities to secure their support from inception, as well as clarifying the purpose of the process along with the roles and responsibilities of key stakeholders. The outcomes expected from this phase encompass:

- An official letter of engagement from the Minister of health to the WHO Director-General
- A detailed implementation calendar highlighting key dates for events like the high-level mission and the finalization of the National Report.

Phase 2: National Review

During this phase, countries conduct a thorough assessment of their capacities for health emergency preparedness and response, health systems, and UHC. This review is high-level and multisectoral, involving whole-of-society participation. It uses available resources, such as IHR MEF reports, national risk profiles, and health security and systems capacity-building plans. The main event of this phase is the UHPR high-level mission, which convenes country leaders, policymakers, partners, and a WHO delegation to discuss priority areas for strengthening national health security capacities. Anticipated outcomes include:

- Successful completion of the UHPR high-level mission.
- Finalized UHPR National Report, signed off by the President or Prime minister, and shared with WHO for posting and public consultation.

Phase 3: Global Peer Review (GPR)

The third phase involves high-level peer-to-peer dialogue among Member States under WHO's auspices. During this phase, countries present and discuss their best practices, challenges, and priorities as detailed in their UHPR National Report with other Member States. In this collaborative setting, the reviewed country receives comments, recommendations, and support proposals from its peers, fostering mutual learning, solidarity, and accountability. WHO ensures that comments from member states, as well as the ensuing discussions, are conducted in a spirit of respect and constructive feedback, with careful attention to avoiding any naming and shaming. The outcomes of this phase include:

- Global Peer Review Report providing countries under review with actionable recommendations and support offers to enhance national health preparedness.

Phase 4: National Follow-up

The final phase focuses on implementing the priorities and recommendations from both the national and global peer review phases. To facilitate this phase, countries should develop an implementation plan that captures all priority actions and activities. This plan should outline specific steps, assign responsibilities, and establish timelines for each activity. Additionally, it should incorporate mechanisms for regular monitoring and evaluation to ensure that the actions are effectively implemented and adjusted as needed. Expected outcomes of this phase include:

- A National Plan for the implementation, monitoring, and evaluation of country priorities.
- Regular monitoring and evaluation of implementation progress for necessary adjustments.
- Effective implementation of UHPR priorities and recommendations.

VI. IMPLEMENTATION OF THE NATIONAL REVIEW PHASE

This chapter outlines the steps and activities for preparing and implementing the national review phase of the UHPR. It is designed to equip key stakeholders and supporting partners in the country with the knowledge and tools needed to navigate this phase effectively.

1. Phase 1: Preparing for the UHPR process

Phase 1 involves key preliminary steps that countries should undertake before entering the national review phase. This phase aims to lay a solid foundation, ensuring thorough preparation for the smooth and effective implementation of the UHPR process.

Steps and activities:

- **Step 1: Initial Meeting between the Minister of Health and WHO Senior Managers**

The first step involves a meeting between the Minister of Health and WHO senior managers. This meeting will cover various aspects of the UHPR, including its objectives, prerequisites, implementation process, timeline, and the roles of key stakeholders, including the Minister. The goal is to secure the Minister's commitment and support, which are crucial for the successful execution of the UHPR.

Additionally, WHO can assist the Minister and government by participating in advocacy activities with key stakeholders such as partners, parliamentarians, and civil society representatives. This support aims to build a comprehensive understanding of the UHPR process, address any questions or concerns, and ensure stakeholder commitment.

- **Step 2 Development of an action plan to implement the UHPR national review phase**

Following the initial meeting, the country should develop an action plan for the UHPR national review phase. This action plan will serve as a detailed roadmap, including essential elements such as UHPR National platforms and stakeholders, key activities and tasks, assigned responsibilities, a calendar with key milestones, required resources, and strategies to address potential challenges. The calendar should highlight important events, such as the UHPR high-level mission and the finalization of the National Report. The objective is to meticulously plan, prepare for, fund, and execute the UHPR process, ensuring all aspects are covered and potential challenges are proactively addressed.

- **Step 3: The Minister of Health presents the UHPR to the Government for engagement**

The final step of the preparatory phase involves the Minister of Health presenting the UHPR process to the Government for consideration and engagement. This presentation will outline the objectives, expected outcomes, and the roles and responsibilities of government members, as well as the plan to implement the national review phase. This plan should be formally endorsed by the Government to ensure full alignment and sustainable support.

Expected Outcomes of Phase 1

(1) A formal engagement letter from the Minister of Health to the Director-General or Regional Director of WHO. A sample letter is available in Annex 1.

Prerequisites – Before officially engaging in the UHPR Process

The steps outlined above will assist countries in fulfilling essential prerequisites recommended before entering the UHPR national review phase. Here are the key prerequisites:

- **High-level Commitment:** Obtain a firm commitment from the Government to actively participate in the UHPR process and support its implementation.
- **Endorsement of an Action Plan:** Obtain formal endorsement from the Government for the action plan to implement the UHPR national review phase.
- **Recent evaluation and plans:** The country has relevant and recent assessment reports and strategic plans, such as reports from the International Health Regulations Monitoring and Evaluation Framework (IHR MEF) and the National Action Plan for Health Security (NAPHS) or similar ones.
- **Political Agenda Review:** Assess the country's political agenda to identify any upcoming events or activity, that may impact or influence the UHPR process.
- **Governmental Platform for Health:** Verify the availability and functionality of a Governmental Platform for Health, ideally chaired by the President or Prime Minister that could serve as the national coordination body for the UHPR implementation.
- **Resource Allocation Assurance:** Secure domestic resources (human, financial, logistical, etc.) from the government to ensure the successful implementation of the UHPR process. Additionally, countries could explore financial support from international partners and donors who can contribute to funding the UHPR activities.

2. Phase 2: National Review

The national review involves conducting a thorough, high-level, multisectoral, and inclusive assessment of the country's health security capacities. The centrepiece of this phase is the UHPR high-level mission, around which activities are organized across three periods: before the high-level mission, during the high-level mission, and after the high-level mission. Each period requires the involvement of key stakeholders with clear roles and responsibilities to ensure the successful implementation of the National Review Phase.

Stakeholders to be engaged in the National Review Phase

Stakeholders engaged in the national review phase reflect the high-level, multisectoral and whole-of-society approach of the UHPR. They include:

High-level authorities

- President
- Prime Minister
- Vice President
- Ministers and State Secretaries (Health, food safety, Agriculture, environment, finance, foreign affairs, interior, defense, social affairs, education, Labor, Industry, etc.)
- Parliamentarians

Health sector

- Ministry of Health officials,
- Health Administrators and Managers,
- Public Health Officials,
- Medical Associations and Professional Organizations,
- Health Researchers and Academics,
- Pharmaceutical Companies,
- Health Insurance Providers,
- Health National NGOs

Experts from Other relevant sectors

- Animal health
- Food and agriculture
- Wildlife
- Environment
- Finance
- Education
- Interior
- Energy
- Transportation
- Communications
- Urban development
- Justice
- Tourism, hospitality, sports and entertainment,
- Commerce and trade
- Etc.

Civil Society

- Community leaders
- Women's groups
- Youth organizations
- Non-Governmental Organizations (NGOs)
- Community-based organizations (CBOs)
- Religious leaders
- Private sector
- Professional associations
- Patient advocacy groups
- Representative from marginalized and vulnerable groups
- Academia
- Media
- Etc.

Partners

- UN agencies
- Health Development Partners
- International NGOs
- Embassies
- Donors
- Etc.

Roles and Responsibilities of Key Stakeholders Throughout the National Review Phase

Key Stakeholders engaged in the UHPR have specific roles and responsibilities at every period of the national review phase (the pre-high-level mission, the high-level mission, and the post-high-level mission)

○ Roles and responsibilities of the Minister of Health

The Minister of Health leads the UHPR process in the country. During the national review phase, their roles and responsibilities include the elements captured in the image below.

Roles and responsibilities of the Minister of Health through the National Review Phase.

Before the Mission

- Brief the President/Prime Minister and other Ministers on UHPR during inter-ministerial meetings.
- Nominate the UHPR National Focal Point (NFP) and establish the UHPR Core Team
- Lead the establishment of the UHPR National Commission and Secretariat
- Validate the draft UHPR National Report.
- Attend meetings of the UHPR National Commission, which bring together Ministers.
- Receive monthly updates from the UHPR NFP on UHPR implementation.
- Ensure the participation of government members in the high-level mission.

During the High-level Mission

- Welcome the high-level WHO-led delegation.
- Actively participate in the Opening ceremony.
- Lead the press conference(s) and communication on social networks.
- Participate in the High-Level Facilitated Discussion (High-Level SimEx).
- Chair the Debriefing ceremony.

After the Mission

- Clear the final UHPR National Report and submit to the President/PM for signature.
- Lead and support the implementation of priorities.
- Lead the mobilization of domestic and external funds for priority implementation.
- Share the country's UHPR experience with the Global community through advocacy meetings.
- Lead the country delegation heading to the Global Peer Review phase.

Roles and responsibilities of the UHPR National Focal Point and the UHPR

The Minister of Health nominates a senior Director-level collaborator as the UHPR National Focal Point (NFP). The NFP coordinates the technical and logistical aspects of the UHPR process. WHO recommends that the appointment of the UHPR NFP be made through an official communication from the Minister of Health that outlines the NFP's mandate, responsibilities, and authority, ensuring clarity and support from the highest levels of Government. This formal appointment process helps to establish accountability and provides a clear framework for the NFP to carry out their duties effectively. Draft Terms of Reference for the UHPR NFP are available in Annex 2.

The Minister may also establish a UHPR core team to assist the UHPR NFP. The core team will include representatives from key ministries, partner agencies, and CSOs. Gender balance should be carefully considered when assembling the core team. The team will convene at least bi-weekly.

The UHPR Preparatory Mission (upon Governmental request)

The UHPR Preparatory Mission aims to support the Ministry of health in finalizing preparations for the upcoming High-level Mission (finalize strategic, technical, and logistical preparations), and to ensure readiness for the impending mission. Ideally conducted one month in advance, it involves a series of engagement meetings between key stakeholders in the country and a WHO delegation.

The UHPR High-level Mission

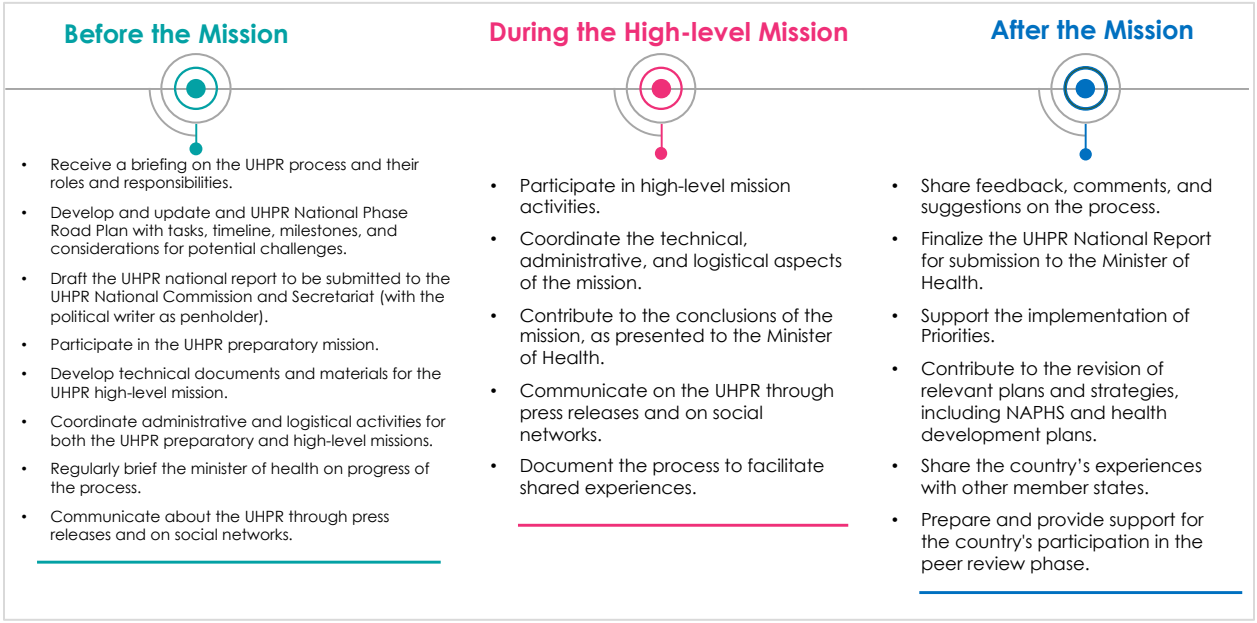
The UHPR high-level mission aims to engage the highest-level country leaders, policymakers, heads of partner agencies, and representatives from CSO in high-level engagements and activities focused on health security capacities and priorities review.

A WHO-led delegation will join the mission, participating in these activities and engaging directly with country leaders in high-level discussions.

The primary objective of the mission is to facilitate high-level strategic discussions focused on the country's health security capacities and strategic priorities. These discussions will focus on key areas, including governance, systems, and financing, with the goal of agreeing on strategic priorities to enhance health security. The mission aims to gather valuable insights that will be incorporated into the final UHPR National Report.

Furthermore, the mission seeks to secure the commitment and support of country leaders for planning and implementing actions to address the UHPR priorities. An Agenda Template for the UHPR High-Level Mission is available in Annex 3.

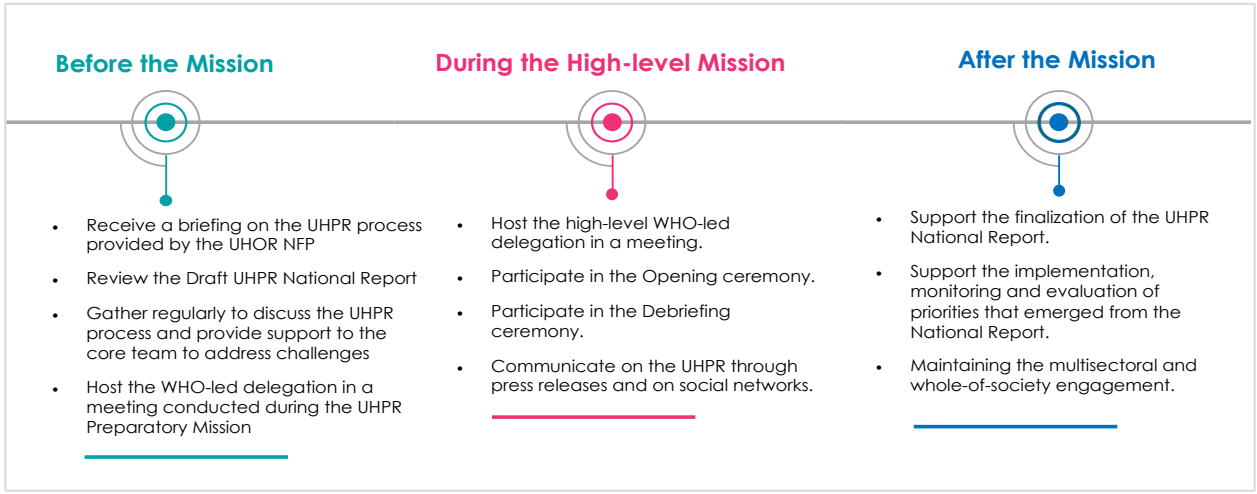
Roles and responsibilities of the UHPR NFP and the Core Team through the National Review Phase.



○ Roles and responsibilities of the UHPR National Commission

The UHPR National Commission is a high-level political platform responsible for leading the implementation of the UHPR process. The commission is chaired by the President or Prime Minister and gathers Ministers and Secretaries of State who will meet monthly. WHO recommends using existing platforms, such as the council of Ministers. Draft Terms of Reference of the National Commission are available in Annex 4.

Roles and responsibilities of the UHPR National Commission through the National Review Phase.

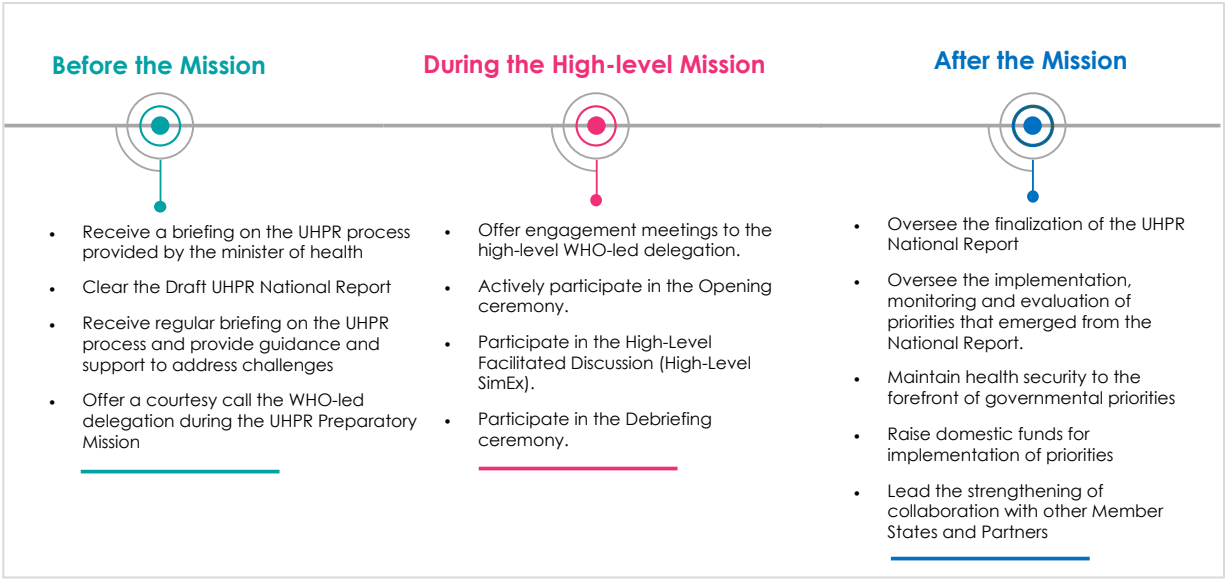


○ Roles and responsibilities of the UHPR National Secretariat

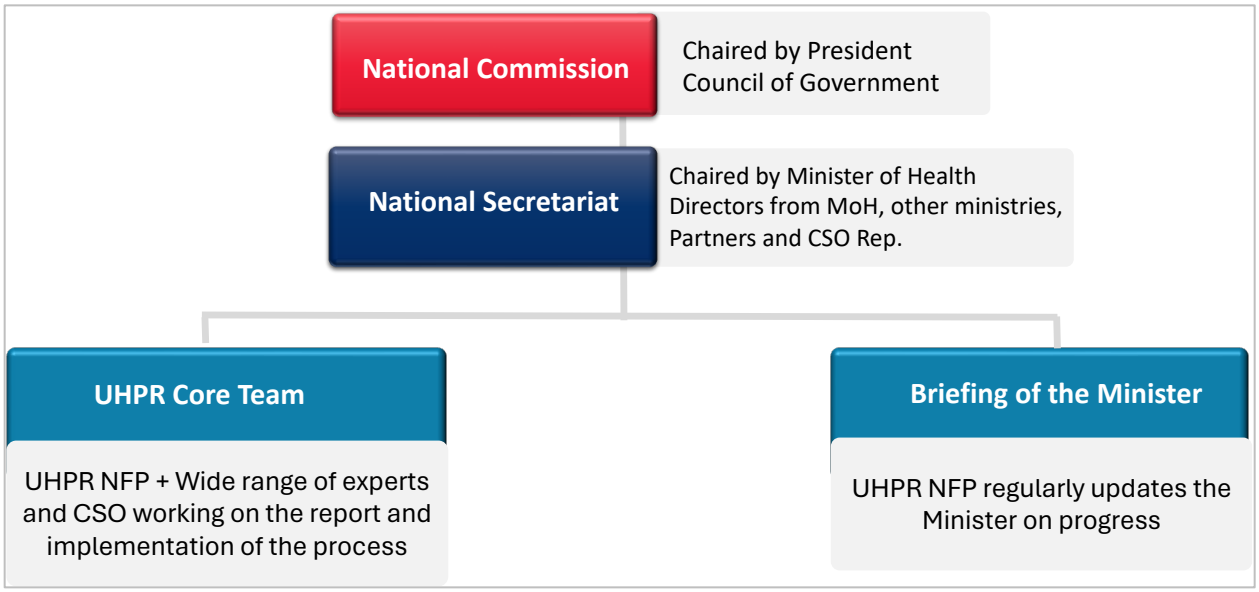
The UHPR National Secretariat is a technical platform responsible for coordinating the technical implementation of the UHPR process. The secretariat is chaired by the Minister of Health and includes Directors and Secretaries General from relevant ministries and representatives from partner agencies and

CSOs who will gather Bimonthly. Gender balance should be considered in the composition of both platforms. Draft Terms of Reference of the UHPR National Secretariat are available in Annex 4.

Roles and responsibilities of the UHPR National Secretariat through the National Review Phase



Architecture of the UHPR National Platforms



UHPR National Report

Countries are responsible for drafting their UHPR National Report, **coordinated by the UHPR National Focal Point (NFP)**. The draft report will be reviewed by the National Secretariat and validated by the National Commission.

The report will be **structured around the three key areas** emphasized in the UHPR process: **governance, systems, and financing**. For each area, the review will highlight the country's **best practices, challenges, and strategic priorities** to enhance health emergency preparedness and response capacities. It will also examine capacities in **health systems and Universal Health Coverage (UHC)** that contribute to overall **health security**. The report should also address issues requiring intersectoral political or policy intervention, particularly those needing the attention of high-level leaders, decision-makers, and policymakers.

The UHPR, as a high-level, multisectoral, and whole-of-society approach, advises countries to **consider key social determinants of health** in their reports while assessing capacities and identifying strategic priorities. Countries should consider crucial determinants such as gender, socioeconomic status, environmental factors, education, etc. ensuring a comprehensive analysis that addresses the diverse needs and challenges identified throughout the process.

The report should also address issues requiring intersectoral political or policy intervention, particularly those needing the attention of the highest-level leaders, decision-makers, and policymakers.

WHO has developed a UHPR **National Report Template and Guidance** to assist countries in effectively structuring their reports. For more information, please refer to Annexes 6, 6, 7, and 8.

It is important to note that the UHPR National Report will be finalized after the UHPR high-level mission, as this mission is designed to collect additional insights from country leadership, policymakers, and heads of partner agencies, who will contribute to refining and finalizing the report.

Following the UHPR high-level mission, the final report is signed off by the President or Prime Minister and shared with WHO for publication and public consultation.

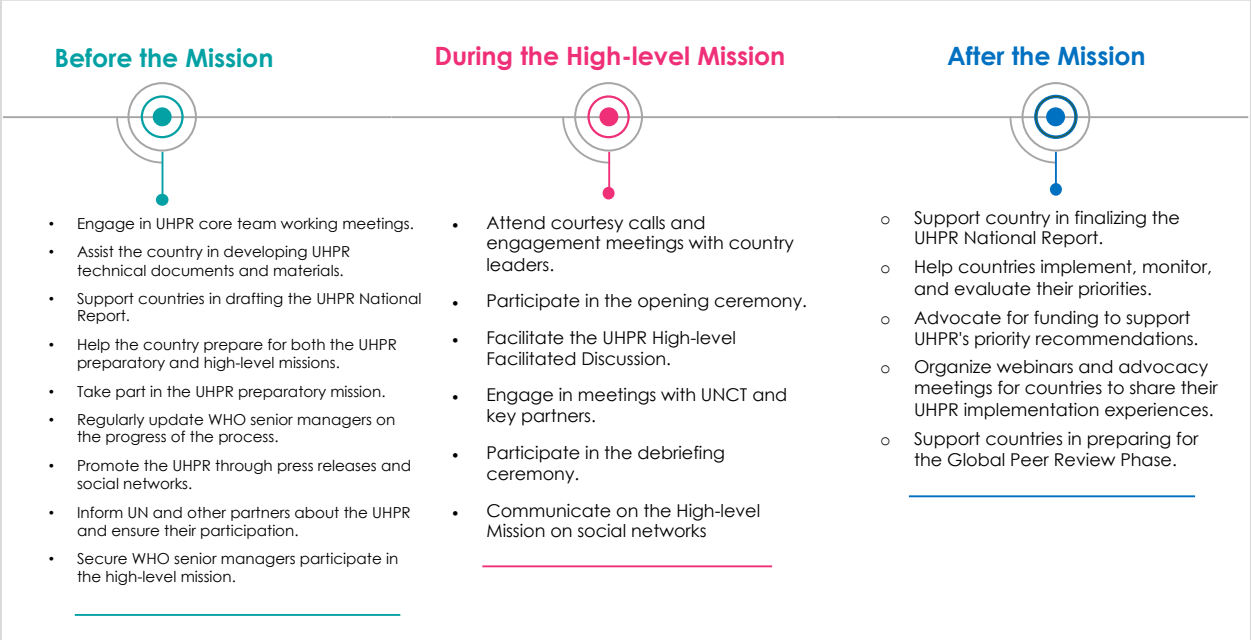
Upon request, WHO can provide support in drafting the UHPR National Report. This support may include providing a country profile, integrating data from various assessment reports and national plans. Further details on the UHPR Country Profile are available in Annex 9.

The list of UHPR National Reports shared by Member states is available in the chapter VII: References.

○ Roles and responsibilities of WHO

WHO through the three levels of the organization, support countries in the implementation of the UHPR process.

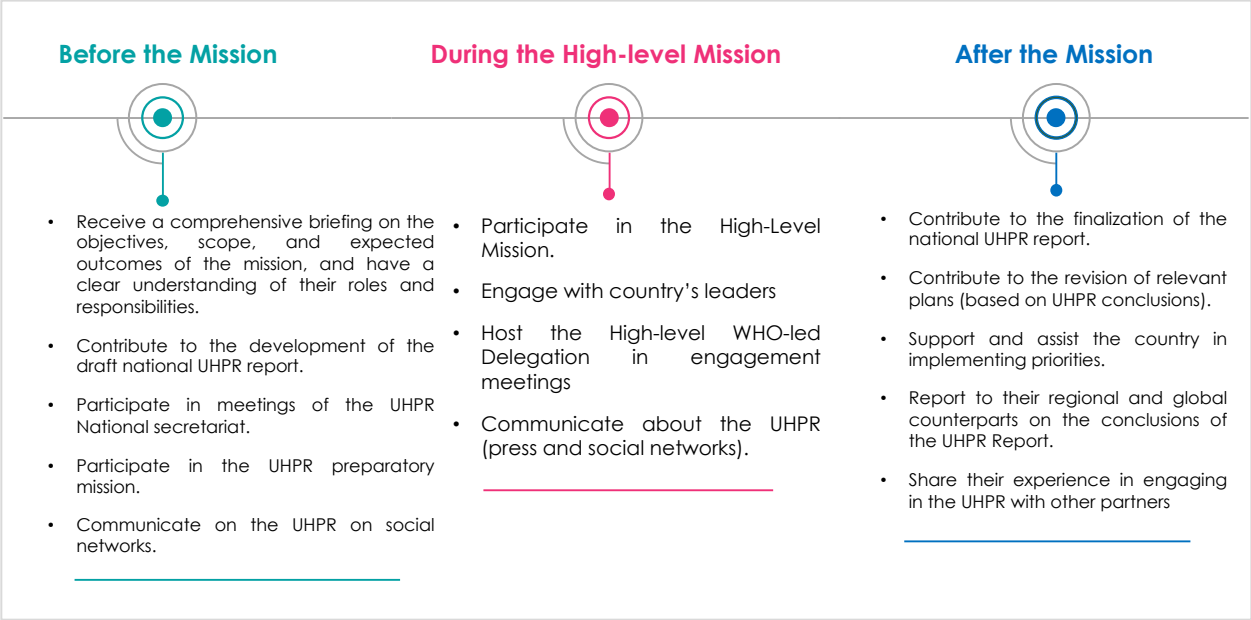
Roles and responsibilities of WHO through the National Review Phase



○ Roles and responsibilities of Country Partners

Country Partners play a crucial role in emergency preparedness and response by supporting the development and strengthening of country capacities. Their early engagement in the national review phase of the UHPR offers an opportunity to contribute to the identification of country priorities, aligning their support with the country's capacity-building strategy and plan. Additionally, partners engaged in the national review phase will interface with their regional and global counterparts, who will participate in the subsequent phases of the UHPR process (GPR and national follow up).

Roles and responsibilities of the Country Partners through the National Review Phase



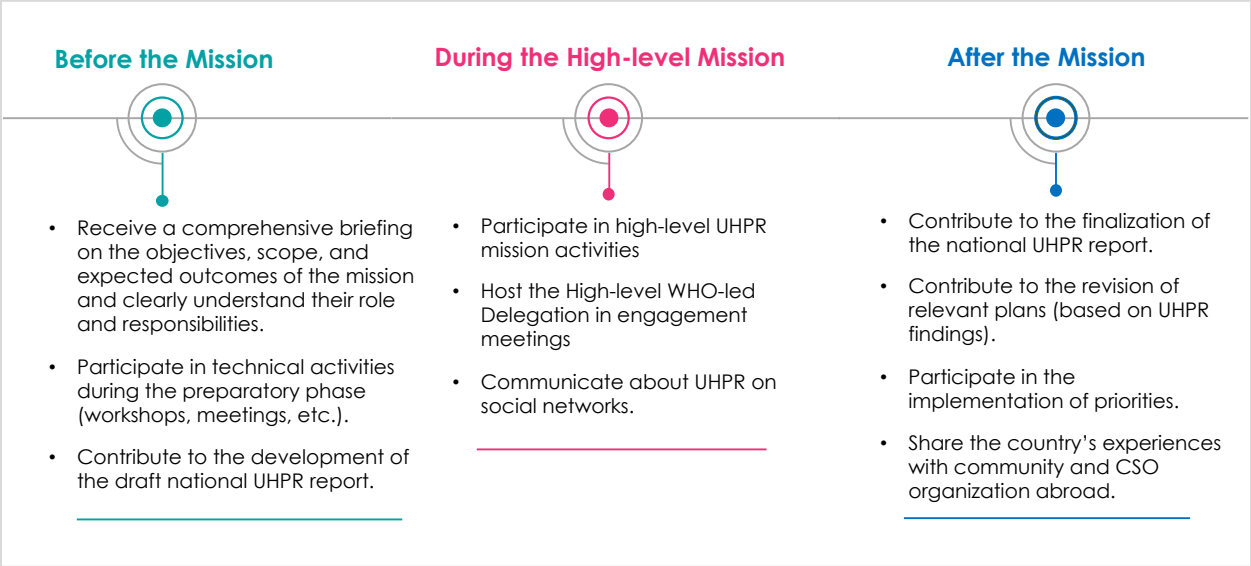
○ Roles and responsibilities of the Civil Society (CSO)

Civil society plays a vital role in emergency management. As the initial witnesses of emerging threats and the first to be impacted by health emergencies, their involvement is crucial in emergency response activities. Lessons learned from recent pandemics, including COVID-19, highlight that the adherence and acceptance of response measures by civil society organizations (CSOs) are essential. This acceptance necessitates their active participation in emergency preparedness and response planning activities.

CSO participation in the UHPR process is critical. This approach aligns with the WHO Multisectoral Preparedness Coordination Framework (MPC)[1], which emphasizes that a holistic, multisectoral, and multidisciplinary approach is necessary to address gaps and enhance coordination for health emergency preparedness beyond the health sector.

[1] Multisectoral Preparedness Coordination Framework: best practices, case studies and key elements of advancing multisectoral coordination for health emergency preparedness and health security. Geneva: World Health Organization (2020).

Roles and responsibilities of the Civil Society through the National Review Phase



Mapping and Engaging Civil Society Organizations (CSOs)

The UHPR process is grounded in a whole-of-society and whole-of-government approach. Member States are encouraged to actively engage and consult with a diverse range of stakeholders throughout the process, including civil society, non-governmental organizations, the private sector, academia, and community representatives. This involves collaboration with the ministry of health and other partners to facilitate CSO engagement in the process.

CSO engagement begins with identifying and mapping CSOs with interest and expertise in public health. Once mapped, key CSO representatives are selected and engaged in the UHPR process. CSO selection criteria emphasize diversity and inclusivity, considering factors such as gender, ethnicity, geography, vulnerable groups, and marginalized communities.

These representatives will participate in UHPR activities, with some serving within the UHPR National Secretariat and the UHPR Core Group, ensuring their voices are heard and considered in identifying the country's priorities and drafting the UHPR National Report.

A Guidance for engaging CSO in the UHPR process in available in Annex 10.

Expected Outcomes of the National Review Phase

(1) UHPR High-level Mission conducted

The country will host a UHPR high-level mission under the auspices and leadership of the President or Prime Minister and coordinated by the Minister of Health.

Purpose & objective:

The mission aims to engage the highest-level country leaders, including the President, Vice President, and ministers; policymakers such as parliamentarians; heads of partner agencies (e.g., UN, Health Development Partners); and representatives from civil society organizations (e.g., community leaders,

private sector, academics) in discussions about the country's capacities and strategic priorities as outlined in the UHPR process.

A WHO-led delegation, comprising managers from all three levels of the organization, will participate in the mission. This delegation will engage with country leaders and key stakeholders to review the country's capacities and deliberate on high-level strategic priorities in health emergency preparedness and response, as well as in health systems and Universal Health Coverage (UHC) capabilities, to enhance overall health security.

The conclusions from these discussions will be captured in the final version of the UHPR National Report. Furthermore, this engagement seeks to secure full commitment and support from national leaders for prioritized implementation efforts, fostering whole-of-government collaborative partnerships, and ensuring the sustainability of the process over time, beyond the national review phase.

Expected outcomes:

1. High-level engagements conducted with national leaders (President and Prime Minister), ministers, parliamentarians, heads of partner agencies, and CSO representatives.
2. High-level facilitated discussions held, gathering key ministers.
3. Opening and/or closing ceremonies held and attended by national leaders and key stakeholders.
4. Agreement attained on the country's capacities and priorities, which will, after the mission, be incorporated into the final version of the UHPR national reports.
5. Commitment and support from the Minister of Health secured for the next phases of the UHPR process, including the finalization of the UHPR National Report, participation in the forthcoming Global Peer Review, and the development of a plan for implementation, monitoring, and evaluation of the UHPR priorities.
6. Effective communication achieved through social media before, during, and after the high-level mission.

(2) The UHPR National Report Finalized and shared with WHO

Following the UHPR high-level mission, the country will finalize the UHPR National Report, with the finalization process coordinated by the UHPR National Focal Point (NFP). This process will incorporate inputs from engagements between the country leaders, key stakeholders, and the WHO-led delegation during the high-level mission.

Final amendments to the report will reflect conclusions and agreements reached during the high-level mission concerning the country's capacities and priorities. Once completed, the report will be cleared by the Minister of Health and then submitted to the President or Prime Minister for final sign-off.

The final report will be shared with WHO for posting on the UHPR webpage for public consultation.

Reports submitted by Member States are accessible on the UHPR webpage. A list of reports available up to July 2024 can be found in Chapter VII: References.

3. Transition to the Global Peer Review Phase:

After concluding the high-level mission, the country will finalize its UHPR National Report and transition to the Global Peer Review (GPR) Phase.

The GPR phase involves high-level dialogue among Member States under the auspices of WHO, during which countries under review will present and discuss their best practices, challenges, and priorities, as detailed in their UHPR National Report, with peers from other Member States.

Purpose and Objectives of the GPR:

- Presenting and discussing the country's capacities and strategic priorities with peers from other Member States to gain insights and feedback.
- Receiving recommendations and support proposals from peers and partners to address identified challenges and effectively implement the country's strategic priorities.
- Fostering a collaborative environment that encourages mutual learning, solidarity, and accountability among Member States, aiming to enhance global health security and preparedness.

Expected outcomes of the GPR:

- A comprehensive report of the peer-to-peer discussions, including questions raised and recommendations provided by peers from other Member States, as well as responses and reactions from the country under review.
- Actionable recommendations for implementing the best practices and innovative solutions shared during the peer review.
- Commitments and offers of support from Member States and partners to improve the country's health preparedness and response capacities.

For further details on the GPR phase, please see Annex 11.

4. How to use the outputs of the UHPR National and Global Peer Review Reports

Priorities from the UHPR National Report and recommendations from the Global Peer Review Report will serve as strategic directives, essential for guiding the country in:

- **Developing a plan for monitoring of implementation of country priorities:**

The country is expected to monitor the implementation of the priorities identified at the National Phase. This monitoring will inform the highest level of the Member State how UHPR process helps and continue to help to achieve the country top priorities. Monitoring can be both quantitative and qualitative with results shared with the multisectoral stakeholders on a regular basis.

- **Developing and/or updating health development plans:**

The conclusions and recommendations from the UHPR reports inform the development and revision of health development plans, such as the national action plan for health security (NAPHS), national health development plan, Country Cooperation Strategy (CCS), readiness plans, disaster reduction plan, humanitarian plan, etc.

- **Prioritizing key interventions:**

The insights gained from the UHPR reports, which highlight both gaps and best practices, are essential for guiding the prioritization of interventions. These insights help identify areas that require immediate improvement and ensure the continuation of effective practices. By focusing on these insights, countries can allocate resources more effectively, address critical weaknesses, and reinforce successful strategies.

- **Securing and allocating domestic funding:**

The UHPR process, through its engagement with country leaders and decision-makers, plays a crucial role in advocating for the allocation of sufficient and sustainable domestic funds to implement priority interventions identified. The evidence-based justifications and compelling arguments presented in the UHPR reports provide a solid foundation for resource allocation within the country's budgetary process.

- **Mobilizing and leveraging external support:**

The UHPR process, through its engagement with partners, donors, and member states at both the national and global phases, plays a crucial role in mobilizing external funds and assistance to support health emergency preparedness and response efforts. By leveraging the findings and recommendations of the UHPR, Member States can effectively advocate and raise external support. This includes exploring funding mechanisms at the regional or global level.

- **Fostering engagement across various platforms for dialogue:**

The UHPR facilitates engagement in various platforms for dialogue, including bilateral collaborations, sub-regional, regional, and global forums. Through these platforms, countries can share their best practices, learn from others' experiences, and support one another in strengthening health emergency preparedness. This mutual accountability process fosters collaborative efforts and knowledge exchange, contributing to enhanced global health security.

- **National Monitoring and Evaluation of UHPR Priorities**

The UHPR National Commission and National Secretariat, established during the UHPR process, should play a central role in both fostering multisectoral and whole-of-society engagement and overseeing the monitoring and evaluation of UHPR priorities. By bringing together country leaders, partners, civil society, and other stakeholders, this commission will ensure active involvement in the implementation of priority recommendations. Through a whole-of-government and whole-of-society approach, the national commission led by head of government can assign clearly defined roles to all relevant stakeholders, strengthening national ownership and accountability. Regular progress reviews, held at least annually, should be conducted to address any challenges and adjust the implementation strategies as necessary. This coordinated, multisectoral engagement will enhance the country's capacity for health emergency preparedness and ensure alignment with national health goals. This progress report should be shared with the UHPR Secretariat for their information.

- **Integrating UHPR Priorities into National Development Plans**

Countries are encouraged to integrate UHPR priorities into existing national development frameworks and synchronize them with broader goals, such as the Sustainable Development Goals (SDGs). This ensures that health security is not seen as a standalone issue but as an essential component of national development, particularly in areas like economic resilience, education, and social protection.

- **Documenting experiences and lessons learned from implementing the UHPR process:**

The country should document its experience in implementing the UHPR process by capturing insights on the implementation journey, including methodologies used, stakeholders engaged, and activities conducted. This documentation should also include lessons learnt, challenges faced, best practices and added value identified during the process. This comprehensive record will serve as a valuable resource for refining the UHPR process and will contribute to a shared knowledge base that can inform and guide other Member States in their own UHPR implementations.

The UHPR secretariat is currently exploring the frequency of mid-term review within the 5 years cycle of UHPR. Member States will be consulted on this matter and guidance updated.

VII. REFERENCES – UHPR NATIONAL REPORTS

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VIII. ANNEXES

Annex 1: Sample letter - UHPR pilot expression of interest	 Sample letter - UHPR pilot
Annex 2: Draft Terms of Reference UHPR NFP	Availlable upon request to the UHPR secretariat: uhpr@who.int
Annex 3: Agenda Template for the UHPR High-level Mission	 Agenda Template UHPR high level
Annex 4: Draft Terms of Reference of the UHPR National Commission and Secretariat	 Draft ToR UHPR Secretariat and
Annex 5: UHPR National Report Template	 UHPR National Report Template
Annex 6: UHPR National Report Template (French Version)	 Canevas Rapport National UHPR -
Annex 7: Guidance to support the development of the UHPR National Report	 SUPPORT TO DEVELOP THE
Annex 8: Guidance to support the development of the UHPR National Report (French Version)	 SUPPORT TO DEVELOP THE
Annex 9: UHPR Profile	Availlable upon request to the UHPR secretariat: uhpr@who.int
Annex 10: Guidance for engaging CSO in the UHPR process	Availlable upon request to the UHPR secretariat: uhpr@who.int
Annex 11: Global Peer Review Phase	Availlable upon request to the UHPR secretariat: uhpr@who.int