



Global Infection Prevention and Control (IPC) Network (GIPCN)

IPC in Public Health Emergencies (PHE) Working Group – facilitated by WHO Health Emergencies (WHE) Programme

Terms of Reference

05th October 2022

Background

Experiences with recent and ongoing public health emergencies, including coronavirus disease (COVID-19), Ebola virus disease (EVD) and Monkeypox (MPX), highlight the critical role of IPC in preparedness, readiness, and response efforts for emerging and re-emerging pathogens. “The COVID-19 pandemic has exposed many challenges and gaps in IPC in all regions and countries, including those which had the most advanced IPC programmes,” said Dr Tedros Adhanom Ghebreyesus, WHO Director General. “It has also provided an unprecedented opportunity to take stock of the situation and **rapidly scale up outbreak readiness and response through IPC practices**”.

Among its core objectives, the Global IPC Network (GIPCN) has assisted WHO by “enhancing global outbreak response through provision of technical advice and rapid development and dissemination of relevant recommendations/documents during emergency situations and by providing evidence-based IPC recommendations to contain outbreaks as well as contributing to WHO Emerging Diseases Clinical Assessment and Response Network’s (EDCARN) and/or Global Outbreak Alert and Response Network’s (GOARN) calls to action in the event of a global health emergency”. Given the increasing needs for advanced planning to enable rapid response to public health emergencies and for providing timely advice at the early stages, establishing a specific working group of the GIPCN is recommended.

Purpose

To establish a working group on IPC in Public Health Emergencies (PHE) within the GIPCN that will discuss technical and management topics related to IPC preparedness, readiness, and response on a regular basis and that can be called upon for immediate deliberation at the outset of the readiness and response phases of a public health event, contributing to surge capacity, response efforts, product development and dissemination.

Objectives of the IPC in Public Health Emergencies (PHE) Working Group (WG)

Support Member States’ IPC public health emergencies response efforts through provision of:

1. Timely advice within the context of emerging or re-emerging public health threats and events, supported by information and epidemiological data collection and analysis from health care and community settings
2. Effectively support the development, peer review and dissemination of rapid advice guidance and relevant derivative products including training materials and community engagement materials
3. Support response efforts through facilitating communication and collaboration across existing response networks including GOARN, EDCARN, Emergency Medical Teams (EMT), Global roster of IPC professionals, amongst others and within WHO

4. Contribute to defining the immediate and longer-term IPC research priorities and implementation considerations within the context of new or re-emerging pathogens, to inform the development of research protocols

Membership of the IPC in PHE WG

The WHE IPC Public Emergencies WG will include:

A core group of members:

- GIPCN members who express interest in this working group
- Representatives from key organisations with specific roles in IPC in PHEs.
- Individual IPC professionals with expertise and field experience, particularly in resource limited settings which may include (but not be limited to) Infection Prevention and Control (IPC), Infectious Diseases (ID), Microbiology / Virology, Epidemiology, Laboratory Medicine, Occupational Health and Safety, Public Health Emergency Management, Environmental Health, Water, Sanitation, and Hygiene (WASH), Behaviour and Implementation Science

Ad Hoc members:

- Individuals with subject matter expertise tailored to a particular event/ threat at hand (e.g., Monkeypox); for a coordinated and agile response, determination of membership composition and type of subject matter expertise may be tailored to a particular event to enhance operational readiness and effective response.

Collaboration and coordination across existing networks and WGs

WHO has several established networks and committee structures with an IPC element or programmatic component. This WG will complement (not duplicate) collective efforts; the convening of the working group in response to an emerging event will include cross-representation when warranted for a coordinated approach.

Methods of working/accountability

This WG of the GIPCN will meet at minimum quarterly and more frequently as required at call of the chair to discuss ongoing issues related to IPC in outbreaks. Where a situation is anticipated to continue and not to be resolved in a time-limited response, an event-specific working group may be established.

The WG will be primarily a virtual group, facilitated using an on-line web-based 'platform.' Teleconference/videoconference discussions will be facilitated by WHO. Notes from any group discussions and recommendations/actions arising from these will be recorded and shared by WHO on the web-based platform.

Subject to the availability of funds and approvals, ideally the working group will meet in person once per year or when necessary. WHO will provide expenses for travel to WHO led face-to-face meetings in line with UN approved per diem for external experts.

Lifespan and evaluation of the working group

This working group will exist until no longer deemed necessary by WHO and participants. WHO has the right to close the WG at any time or to revise the participant list.

The work of the working group will be documented through regular reports describing engagement between WHO and participants as well as any collaborative outputs delivered and will feed into reviews of WHO related work.

Disclaimer

The opinions represented by the working group participants are not necessarily the opinions or recommendations of WHO. No participant of the working group can claim they are working for or on behalf of WHO (unless under certain circumstances, any members are contracted to work for WHO).