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Using the outputs of PVS Evaluations, JEE missions and IHR-PVS National Bridging Workshops for Rabies control and elimination

SAARC Rabies Webinar "Updates and progress in the SAARC region towards elimination of dog-mediated human rabies by 2030" 18-20 May 2020







### **Tripartite efforts in support of Rabies control**

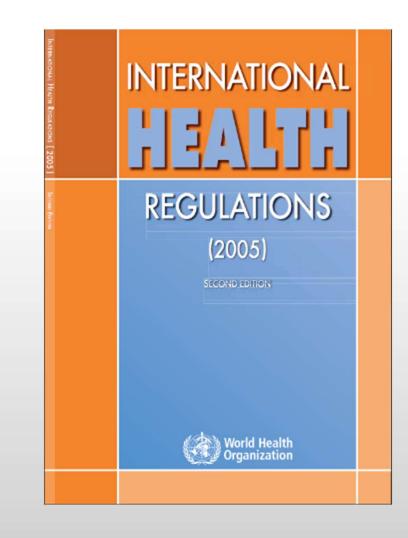
- Rabies is one of the key Tripartite topics
- Tools for Re-enforcement of Human Health, Animal Health and Food Safety National Services:
  - PVS Pathway PVS Evaluations +/- Rabies specific content
  - > IHR-MEF Joint External Evaluations (JEEs)
  - IHR-PVS National Bridging Workshop (NBWs) +/- Rabies focus



### **One Health Frameworks**



# **International Health Regulations**



The International Health Regulations are a legally binding instrument of international law to:

a. assist countries to work together
to save lives and livelihoods endangered
by the international spread of diseases and
other health risks and

b. avoid unnecessary interference with international trade and travel.



### **WHO Joint External Evaluations (JEEs)**

- Evaluation is structured around 19 technical areas, grouped in 4 core areas
- Technical areas of particular interest for Rabies:
  - Zoonotic disease
  - Surveillance
  - Risk communication
  - Also national laboratory system, legislation, reporting, etc.

#### COUNTRY EVALUATION TOOL

#### PREVENT

National legislation, policy and financing IHR coordination, communication and advocacy Antimicrobial resistance Zoonotic disease Food safety Biosafety and biosecurity Immunization

#### DETECT

National laboratory system Surveillance Reporting Human resources

#### RESPOND

Emergency preparedness Emergency response operations Linking public health and security authorities Medical countermeasures and personnel deployment Risk communication

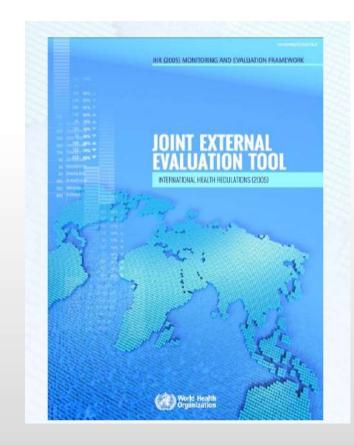
#### IHR RELATED HAZARDS AND POINTS OF ENTRY

Points of entry Chemical events Radiation emergencies





# **Technical areas of JEE**



Oie

No.	Technical Area
1	National Legislation, Policy and Financing
2	IHR Coordination, Communication and Advocacy
3	Antimicrobial Resistance
4	Zoonotic Disease
5	Food Safety
6	Biosafety and Biosecurity
7	Immunization
8	National Laboratory System
9	Real Time Surveillance
10	Reporting
11	Workforce Development
12	Preparedness
.13	Emergency Response Operations
14	Linking Public Health and Security Authorities
15	Medical Countermeasures and Personnel Deployment
16	Risk Communication
17	Points of Entry
18	Chemical Events
19	Radiation Emergencies

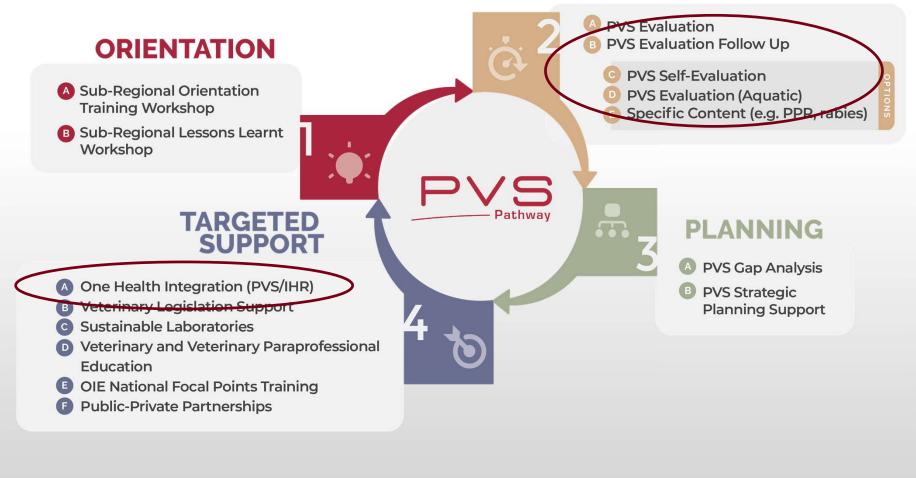
### **IHR Monitoring and Evaluation Framework (MEF)**



		JEE (WHO)	PVS Evaluation	(OIE)	
Full name	Joint Exte	ernal Evaluation	Performance of Veterinary Services Evaluation		
Framework		is one of the 4 components of Monitoring and Evaluation ork	The PVS Evaluation is the first step of the PVS Pathway		
		es the capacities of the country	Assesses the capacities of		
Objective	to respo their co	State o	of play	with OIE	
Obligation		JEEs	. 112		
Assessors		JEES	. 113		
Format	Self ass site visit	<b>PVS Evaluations</b> /	Follow-Ups: 203	its) of	
Indicators	48 indid		Competencies (in 4 compo	nents)	
Scoring		Each indicator is	scored on a 1-5 scale		
Gaps identified		✓ For ea	ach indicator		
Recommendations		✓ For ea	ach indicator		
Confidentiality	Report is	made public	To be decided by the country		
Follow-up		es to feed into National Action Health Security	Outcomes to feed into PVS Gap Analysis		

## **PVS** Pathway

#### **EVALUATION**





### **PVS Tool**

	I HUMAN, PHYSICAL AND FINANCIAL RESOURCES
1-1	Professional and technical staffing of the Veterinary Services
I-2	Competency and education of veterinarians and veterinary paraprofessionals 4
1-3	Continuing education
1-4	Technical independence
1-5	Planning, sustainability and management of policies and programmes
I-6	Coordination capability of the Veterinary Services.
I-7	Physical resources and capital investment I-6 Coordination capability of the VS
I-8	operational randomy
I-9	Emergency funding. IT TECHNICAL AUTHORITY AND CAPABILITY external coordination
CHAPTER	II TECHNICAL AUTHORITY AND CAPABILITY
II-1	Veterinary laboratory diagnosis
II-2	Risk analysis and epidemiology
II-3	Quarantine and border security II-4 Surveillance and early detection
11-4	Surveillance and early detection
II-5	Emergency preparedness and response.
II-6	Disease prevention, control and eradication
II-7	Animal production food safety
II-8	Veterinary medicines and biologicals.
11-9	Antimicrobial resistance and antimicrobial use
II-10	Residue testing, monitoring and management eradication
11-11	Animal feed safety
II-12	Identification, traceability and movement control
II-13	Animal welfare
CHAPTER	III INTERACTION WITH STAKEHOLDERS
111-1	Communication.
III-2	Consultation with stakeholders etc
III-3	Official representation and international collaboration
111-4	Accreditation/authorisation/ delegation
III-5	Regulation of the profession by the Veterinary Statutory Body
III-6	Participation of producers and other stakeholders in joint programmes41
111-7	Veterinary clinical services
CHAPTER	IV ACCESS TO MARKETS
IV-1	Veterinary legislation
IV-2	International harmonisation
IV-3	International certification
IV-4	Equivalence and other types of sanitary agreements
IV-5	Transparency
IV-6	Zoning
11/-7	Compartmentalisation 51

### **PVS Evaluation with Rabies Specific Content**

#### PVS-Rabies mission:

- "classic" OIE PVS Evaluation (Follow Up) + specific content on national VS capacity with respect to dog-mediated rabies control and/or eradication.
- Approach similar to existing PVS-PPR missions
- Methodology developed with GARC, FAO, WHO and PVS experts
  - Guiding Principles document
  - Rabies Annex template
  - SARE assessment promoted as background for mission
- 2019 pilot mission cancelled



### **PVS-Rabies**

- 28/4	45 CCs relevant for Rabies Generic CC definition	/	Generic
	The authority and capability of the VS to control or eradicate nationally important <i>diseases</i> present in the country, such as through a combination of vaccination, domestic movement control, establishing <i>containment zones</i> , <i>biosecurity</i> measures (including farm biosecurity), isolation and/or culling/stamping out.		LoA Difference
<b>CC II.6</b>	The auti <b>for rabies</b> VS to prevent and control <u>rabies</u> in the country, such as through a combination of areness campaigns, dog population management, dog vaccination, domestic movement control of dogs, rabies outbreak management, establishing <i>containment zones</i> or isolation of rabies-suspect animals.		in LoA (ex: +1, - 2)
l, control and	Findings:		
Disease prevention, control and eradication	Recommendations:		



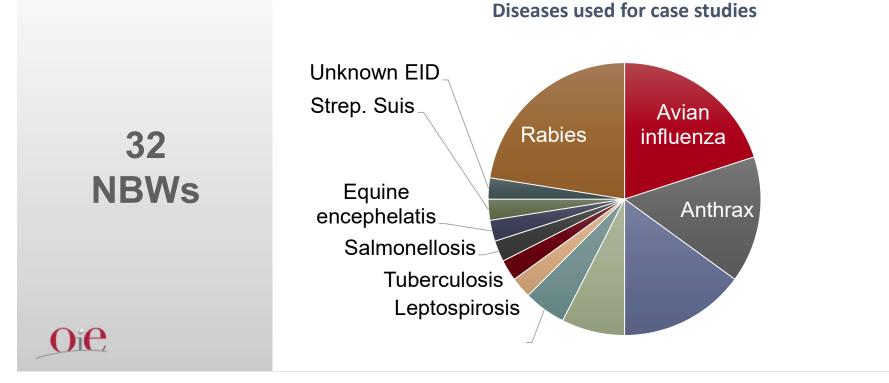
### **PVS-Rabies**

#### Guiding questions – Ex. for CC II-6:

- **Question(s) for consideration that may assist** (for guidance only not to be included in report):
- Is there a National Rabies Coordinator/rabies focal point and a National Rabies or One Health Committee appointed by the relevant Ministry or Department to oversee the Rabies programme's implementation? What is the role of the VS in this activity?
- Are Rabies positive results systematically investigated? (with tracing backwards and forwards, with follow up investigations)?
- Has the dog vaccination coverage being estimated? Does the country set a vaccination coverage target proportionate to the risk assessment? Is the actual coverage assessed or evaluated?
- Has Rabies incidence decreased, increased or stayed the same over time? Or is this unknown?
- What plan is in place to meet surge capacity for vaccine in the face of sudden increased demand?
- •
- Questions extracted from the <u>SARE assessment</u>, for consideration that may assist (for guidance only not to be included in report):
- Has dog vaccination been initiated in some parts of the country? (PCO Stage 1)
- Are mass dog vaccination campaigns reaching at least 70% of the total dog population conducted according to the plan described in the national rabies strategy? (PCO Stage 3)
- Have potential rabies-free zones been identified where animal rabies cases caused by the canine rabies variant have been absent for at least a 2-year period? (PCO Stage 3)

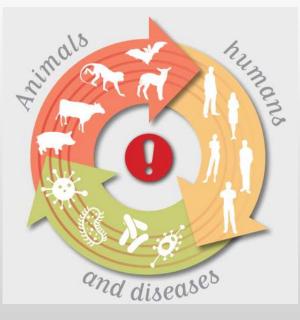
### **IHR/PVS NBW - Methodology**

- The level of intersectoral collaboration is assessed, not capacities.
- 5 case studies (zoonoses) to assess the level of collaboration for 14 technical areas:
  - laboratory, surveillance, national/local coordination, communication, risk analysis, field investigation, response...



#### **IHR/PVS NBW - Methodology**

- From a disease-level assessment to a system-level understanding of gaps in collaboration.
- Gaps and recommendations relevant to collaboration are extracted from JEE and PVS Evaluation reports.
- A joint **Road Map** to improve collaboration is developed





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and diseased

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#### • A joint **Road Map** to improve collaboration is developed

Action	Timeline	Cost	Impact	Respons.	Process
	CO	ORDIN/	ATION AT	нісн, тесні	NICAL, AND LOCAL LEVELS
Objective 1: Establish high leve	l national man	date for	One Health	collaboration	1
1.1 Sign Memorandum of Understanding on mutual collaboration	February 2019	+	+++	Legal and Technical Departments of MHSP, MARD, and Ministry of Environment	1) Agree to draft MoU at high level 2) Set up a working group 3) Draft MoU including Animal and Human Health inputs 4) Conduct consultations in each sector 5) Approve the MoU by all involved parties 6) Commence MoU
1.2 Establish a National Multisectoral Committee on Zoonoses (NMCZ) according to the MoU provisions	April 2019	+	+++	MHSP, MARD, and Ministry of Environment	1) Establish a working group     2) Develop ToP, for NMC2     3) Develop a working plan of the NMC2     4) Approve establishment of NMC2 for coordination on zoonotic diseases of common interest in line     with ToP.
Objective 2: Enhancing formal 2.1 Review legislation relevant to	One Health coo	ordinatio	n authority	Technical and	d frameworks 1) NMCZ to establish a working group of technical and legal experts from different sectors
One Health and control of zoonoses		++	+++	legal experts from different sectors	2) Develop JoBs 3) Report to MMCZ periodically 4) Final report and recommendations are to be approved by NMCZ
2.2 Establish joint technical sub- committees for priority zoonoses to develop strategic joint response plan and/or update contingency/control plans	October 2019	++	+++	National Multisectoral Committee on Zoonoses (NMCZ)	- NMCZ to establish technical sub-committees for specific zoonoses of common interest: <ul> <li>Brucellosis</li> <li>Anthrax</li> <li>Tuberculosis</li> <li>Rabies</li> <li>Avian Flu</li> <li>West Nile Fever</li> <li>Leishmaniasis</li> <li>Appoint epidemiologists, laboratory, and other relevant specialists in each group</li> <li>Each sub-committee to develop Taßs</li> <li>Final reports and recommendations are to be approved by NMCZ</li> </ul>
2.3 Appoint focal points for intersectoral coordination at national and regional levels	June 2019	++	+++	NMCZ	Nominate focal points at national and regional levels     Oevelop 3085 / job description     Focal points become the secretaries of NMCZ     Oevelop 5098 for focal points

### **IHR/PVS NBW - Rabies**

Methodology being developped in collaboration with FLI

#### Potentials:

- Raise the profile of rabies in the country
- Improve intersectoral collaboration a key challenge for rabies control
- Using a rabies focus to improve the system as a whole
- Zero by 30:

"Investing in rabies elimination saves lives and strengthens both human and veterinary health systems. A collaborative response, through rabies programmes, contributes to disease prevention and preparedness. This means integrated rabies elimination is a model for One Health collaboration."

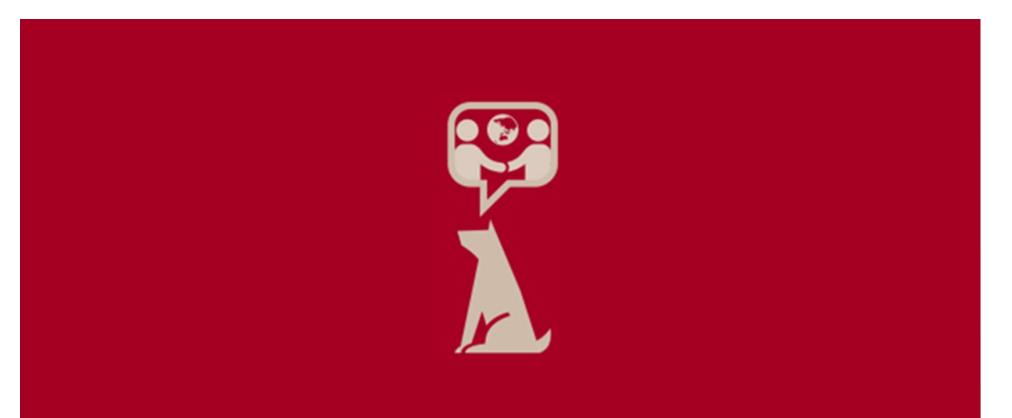


# Conclusions

- Intersectoral collaboration is essential for a successful management of Rabies
- PVS Evaluations and JEEs offer a whole-system snapshot of Member Countries' capacities, including some directly relevant to Rabies control
- PVS-Rabies missions will complement SARE assessments and support national Rabies control plans
- IHR-PVS NBWs: unique opportunity for Health Sectors to meet and progress jointly
- NBWs Rabies: in response to countries' demand for a Rabies One Health exercise



# Thank you for your attention



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