



IMPLEMENTATION OF IHR - PROCESSES AND CHALLENGES IN BELGIUM



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INTRODUCTION

- Belgium is a Federal state, ♪
- with repartition of competences between three levels of power (federal, federated and local authorities)♪
- The implementation of IHR core capacities is based on a nationwide dynamic (pooling of effort and good cooperation)♪



BELGIUM



The Federal State

THE COMMUNITIES



The Flemish Community



The French Community



The German-speaking Community

THE REGIONS



The Flemish Region



The Brussels-Capital Region



The Walloon Region

LEGAL BASIS

2005

THE BEGINNING:
WHO issued the
International Health
Regulations(2005)

2007

**THE IMPLEMENTATION
PROCEDURE):**
WHO issued the
International Health
Regulations (2005):
Areas of work for
implementation

FEBRUARY 24 2014

**BELGIUM
SUPPLEMENTARY
AGREEMENT**
Protocole d'accord
complémentaire au
protocole d'accord du
11 mars 2008...

DECEMBER 11 2006

BELGIUM AGREEMENT:
Protocole d'accord du 11
décembre 2006 entre le
Gouvernement fédéral et
les autorités visées aux
articles...

MARCH 11 2008

**DESIGNATION OF THE
BELGIUM NFP:**
Notification
internationale de la
Belgique dans le cadre du
Règlement sanitaire
international RSI



BELGISCH STAATSBAD
MONITEUR BELGE

5 GENERAL ORGANIZATION

GROUPS AND CRISIS CELLS

- In Belgium, federal and federated entities, scientific institutes, and other experts work together on preparedness and response to health crisis.
- The main groups and cells are the following:
 - The **Risk Assessment Group** (RAG),
 - The **Risk Management Group** (RMG),
 - The **Governmental Coordination and Crisis Center** (CGCCR),



MAIN BELGIAN STRUCTURES AND ASSIGNMENT

RMG

- The RMG consists of representatives of:
 - **Political authorities** in charge of health (cabinet office of federal, community and regional health ministers),
 - **scientific advisers** (WIV-ISP).
- The **IHR NFP**, chairs the group,

Assignment:

- Management of **preparedness** aspects (Plans, SOP's, exercises, National Strategic Stock)
- **Response** : Management of Public Health crisis (of all origins)
- Is a **decision-making** forum
- Decisions are taken by **consensus**

MAIN BELGIAN STRUCTURES AND ASSIGNMENT

RAG

- The RAG consists of **scientific experts** and representatives of the PH ministry of federal and federated entities (communities and regions);
- The **Public Health Institute chairs** the group.

Assignment:

- **Gathering data** and doing a **regular update** of the situation, in order to **help political authorities to make enlightened decisions**,
- The group carrying out **risk assessments**,
- The RAG is also responsible for **suggesting relevant measures to the RMG**.

MAIN BELGIAN STRUCTURES AND ASSIGNMENT

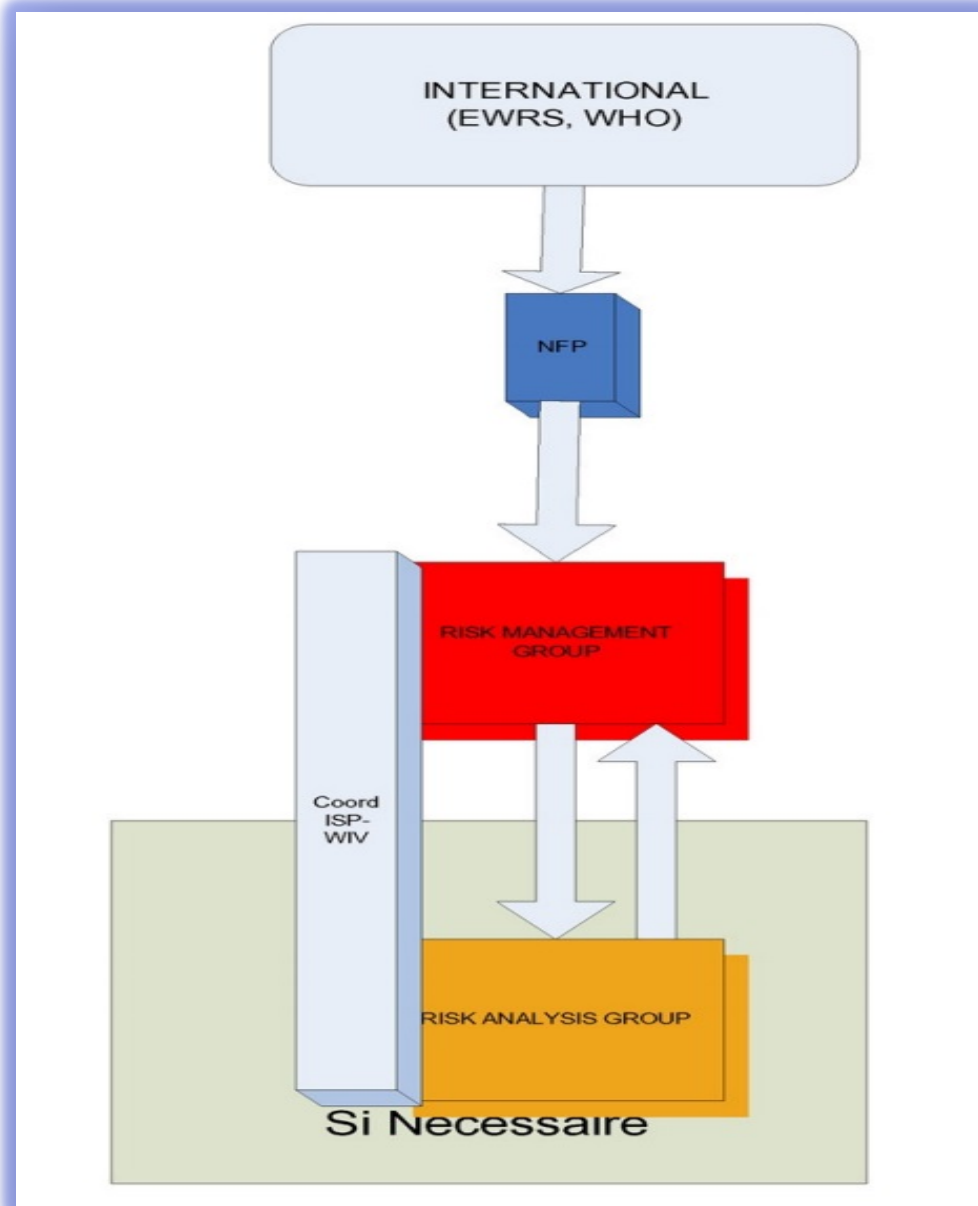
IHR NFP

- **Must remain accessible** at all times (7/24/365),

Assignment:

- **Sending** to WHO IHR /EWRS Contact Points, on behalf of Belgium,
- **Disseminating** information to relevant sectors of the Belgian administration,
- **Responding** to WHO requests for consultations,
- **Consolidating** input from relevant sectors of the Belgian administration, including those responsible for surveillance and reporting, points of entry, public health services, clinics and hospitals; and other government departments.





INFORMATION FLOW, FOR INTERNATIONAL NOTIFICATIONS, IN THE FRAMEWORK OF THE IHR (2005)

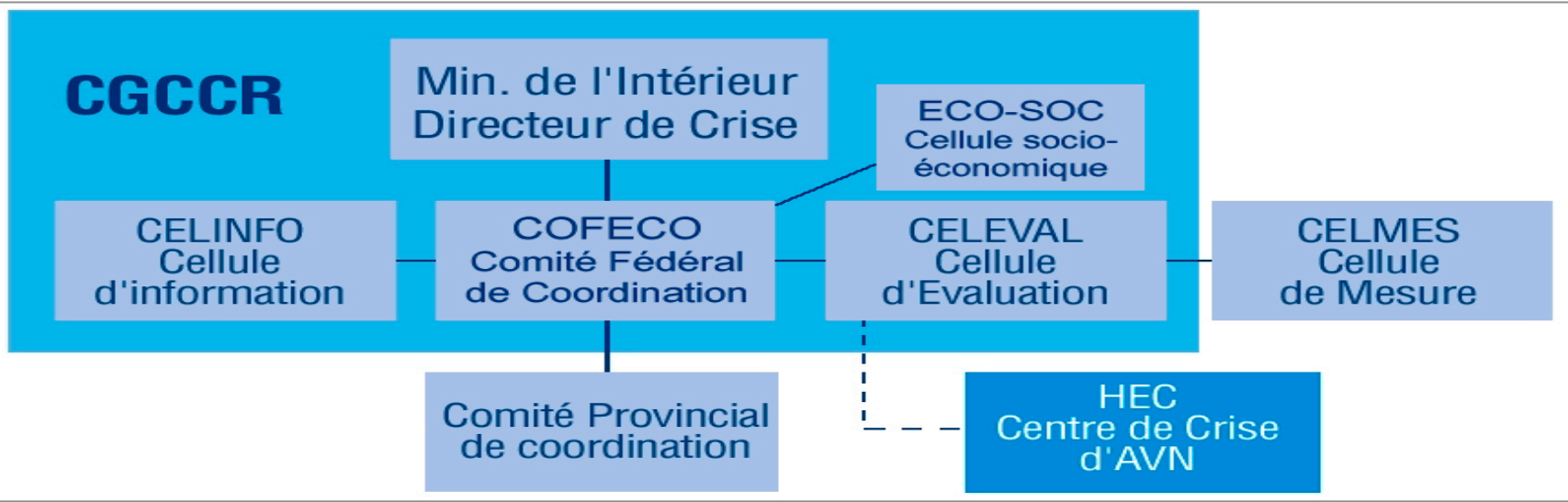
MAIN BELGIAN STRUCTURES AND ASSIGNMENT

CGCCR

- The Governmental Coordination and Crisis Center sits in the crisis center of the [FPS Home Affairs](#). ♪
- The CGCCR is made of different cells which manage various aspects of a crisis: ♪

Assignment: ♪

- The CGCCR organize a [coordinated management of all the aspects of a crisis](#) ♪



Le Centre Gouvernemental de Coordination et de Crise

Votre sécurité
Notre souci

© Belga

ibz Service public fédéral
Intérieur



INTERNATIONAL PARTNERS

WITHIN EUROPE

- HSC (Council + Commission)
- DG SANTE (Commission)
- ECDC (Commission)
- EWRS (notification system, EU NFP network)
- WHO Europe
- Regional cooperation (BENELUX)
- Cross border cooperation (Fr, Nl, Ger, ...)



IN THE WORLD

- WHO (NFP IHR network)
- Bilateral cooperation



STRENGTH AND AREAS FOR IMPROVEMENT

STRENGTH

- Good **cooperation** between federal and federated authorities, scientific institutes and other national partners
- Regular and warm **exchanges** with our international partners,
- Existence of multiples dedicated **plans** (CBRN, Ebola, H1N1, Smallpox, Heat wave, ...)
- National strategic **stockpiles** (medicines, PPE, ...)
- The **Joint External Evaluation** of WHO in Belgium (June 2017) was also a very good experience to assess our level of implementation of the IHR 2005 core capacities
- That process helps us to identify our **Strengths and areas for improvement**





JEE IN BELGIUM



Belgium fulfilled a self-assessment document, that was delivered to the external experts approximately three weeks prior to the JEE mission

Prior to the mission, a teleconference was held between the JEE organizers from Belgium, the WHO JEE coordinators (Geneva) and the WHO European Regional Office (Copenhagen)

During the JEE mission (19-23 June, 2017), the external experts team :
Reviewed our level of implementation of IHR,
Identified our strengths and gaps,
and listed opportunities and challenges in our way for a better implementation.
Finally they issued recommendations for priority actions.

After the visit, the report is finalized by WHO team and sent to Belgium experts for comments and approval for publication.
The final report is now available.

We are now in the process of writing a National Action Plan for a better implementation of IHR in Belgium; based on the recommendations issued in the JEE final report.



JEE IN BELGIUM



| Technical areas | score |
|--|-------|
| National legislation, policy and financing | 4 |
| | 4 |
| IHR coordination, communication and advocacy | 4 |
| | 4 |
| Antimicrobial resistance | 4 |
| | 4 |
| | 5 |
| | 4 |
| Zoonotic diseases | 5 |
| | 4 |
| | 4 |
| Food safety | 5 |
| Biosafety and biosecurity | 3 |
| | 4 |
| Immunization | 4 |
| | 5 |
| National laboratory system | 5 |
| | 4 |
| | 4 |
| | 4 |
| Real-time surveillance | 4 |
| | 4 |
| | 5 |
| | 3 |
| Reporting | 5 |
| | 5 |

| | |
|--|---|
| Workforce development | 4 |
| | 4 |
| Preparedness | 2 |
| | 3 |
| Emergency response operations | 4 |
| | 4 |
| | 5 |
| Linking public health and security authorities | 5 |
| | 5 |
| Medical countermeasures and personnel deployment | 4 |
| | 5 |
| Risk communication | 4 |
| | 5 |
| | 4 |
| | 3 |
| Points of entry | 3 |
| | 5 |
| Chemical events | 5 |
| | 5 |
| Radiation emergencies | 3 |
| | 4 |

RECOMMENDATIONS FOR PRIORITY ACTIONS

- **The Generic Preparedness Plan** is needed to address all hazards (In process),♪
- **Reinforce human resources** by training and hiring new staff; and ensure the appropriate development of existing staff♪
- **Provide more financial resources** to better prepare and manage major outbreaks and crisis♪
- **Strengthen the legislation** to give more tools to staff and allow them to address outbreaks in a more effective and targeted way. ♪
- **Risk mapping and prioritization** to address current risks and be ready for new threats of our environment in constant mutation (climate change, new technologies, bioterrorism, etc.)♪





JEE IN BELGIUM



NEW CHALLENGES

- As we live in a constantly **evolving, and more complex world**, the challenges that we have to face in terms of PH emergencies are also evolving and more complex: ♪
- **New technologies** bring new hazards (nuclear, chemical, radiological,…)♪
- The multiplication of armed conflicts >> increases the risk of **terrorism attacks** with bacteriological weapons ♪
- **Climate change** can also be source of new PH hazards (vector borne diseases, more natural disasters, …). ♪
- **AMR** is also a major growing concern♪

it is essential to address all those challenges in a ♪
“One World One Health” approach♪



CONCLUSION

- Living in a **globalized world**, Belgium, as the whole planet, face a wide range of threats of all origins.♪
- Following the recommendations of the IHR (2005), Belgium embedded the IHR in his national **legislation**, in 2006 and designated an IHR NFP in 2008. ♪
- From 19th to 23th of June 2018 we have been through the **JEE** process♪
- This **very fruitful peer to peer review** of IHR implementation allowed us to identify our strengths and weaknesses as well as the priority actions for a better implementation of IHR requirement and recommendations.♪
- Now, we are writing our **National Action Plan** for a better implementation IHR, on the basis of the JEE recommendations.♪
- All this, by taking into account **new challenges** of our moving world.♪



REFERENCES

- WHO < About IHR > : ♪
 - <http://www.who.int/ihr/about/en/>♪
- Joint external evaluation of IHR Core Capacities of the Kingdom of Belgium♪
 - <http://apps.who.int/iris/bitstream/handle/10665/258557/WHO-WHE-CPI-SUM-2017.37-eng.pdf;jsessionid=89A2C82B74F41B832DFA9A7A26FA9264?sequence=1>♪
- Health, Food Chain Safety and Environment FPS < Protocols d'accord > : ♪
 - file:///C:/Users/tal/Downloads/2006%2012%2011%20-%20Focal%20Point%20pour%20le%20Reglement%20sanitaire%20international%20-%20et%20annexe_13788517_fr.pdf♪
 - [file:///C:/Users/tal/Downloads/2008%2003%2011%20-%20Reglement%20sanitaire%20international%20RSI_13788525_fr%20\(1\).pdf](file:///C:/Users/tal/Downloads/2008%2003%2011%20-%20Reglement%20sanitaire%20international%20RSI_13788525_fr%20(1).pdf)♪
 - <file:///C:/Users/tal/Downloads/2014%2002%2024%20-%20Focal%20point%20IHR.pdf>♪
- FPS HOME AFFAIRS < CRISIS CENTER > : ♪
 - <http://centredecrise.be/fr>♪





THANK YOU

