



National Bridging Workshop Roadmap for One health - Lebanon

Developed by the three sectors in Beirut, Lebanon, on 18-20 September 2023

| Activity | Timeline | Difficulty | Impact | Responsibility | Process |
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| COORDINATION, LEGAL & FINANCE | | | | | |
| Objective 1: Strengthen the multi sectoral coordination under an effective governance system | | | | | |
| 1.1. Activate the existing strategic inter-ministerial committee and revise its TORs and structure to integrate One Health Approach | Q4 2023 | ++ | +++ | MOPH MOA MOE One health focal points | <ol style="list-style-type: none"> 1. Draft a One Health Approach file (vision, objectives, TORs, roadmap) related to One Health operationalization in the country for the involved authorities and committees 2. Meet with the concerned ministers to present the One Health roadmap 3. Meeting with the head of the Disaster Risk Management unit 4. Decide which inter-ministerial committee to be involved in the OHA (DRM and IHR committee) |
| 1.2. Establish an operational technical OH coordination team/ OH secretariate involving focal points from the line ministries | Q4 2023 | ++ | +++ | MOPH MOA MOE One health focal points | <ol style="list-style-type: none"> 1. Develop TORs for the coordination team/secretariate 2. Communicate with the line ministries to nominate a OH focal point to join the team 3. Hold meetings with the OH focal points (coordination team members) to develop and define the coordination mechanism including frequency of meetings, information sharing tool/methodology, means for communication (formal and informal) 4. Develop needed agreements/formalities for establishing these team 5. Communicate with the decision makers to highlight challenges and proposed solutions to establish a sound coordination mechanism among sectors 6. Organize meetings among the team to follow up on OH activities both with the technical sub-committees and to report to the inter-ministerial committee |
| 1.3. Revise and integrate technical subcommittees for One Health related technical areas (ex. Zoonoses, AMR, Food Safety, JRA) with TORs under the inter-ministerial committee | Q4 2023 | + | +++ | MOPH MOA MOE One health focal points | <ol style="list-style-type: none"> 1. Develop TORs and structure / profile for the sub committees under the inter-ministerial committee: operational – strategic 2. Communicate with the line ministries to nominate representatives to participate in the committees 3. Develop needed agreements/formalities for establishing these committees |
| 1.4. Integrate the OH approach within the work of the health committees at the governate level, with representatives from each relevant sector IHR technical, IHR national | Q1 2024 | + | +++ | MOPH MOA MOE One health focal points | <ol style="list-style-type: none"> 1. Review and update TOR, roles and responsibilities of each of the representative members (technical and the decision making IHR, national IHR) 2. Organize meetings among the committees members involving the coordination team at the central level to discuss challenges and provide support on progressing the agreed planned activities |
| 1.5. Review and harmonize the legal framework for One Health Approach | Q2 2024 | +++ | +++ | Strategic sub committee | <ol style="list-style-type: none"> 1. List the legal documents that require revision and harmonization. 2. Hold meetings with the key staff responsible for revising the legislation in each sector (ex. Department of Legal Affairs in respective entities). 3. Organize meetings with the decision makers to define legal gaps, review and approve the revised legislation and provide needed support for its implementation |

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| Objective 2: To secure sufficient funds for implementing agreed activities aim at improving coordination among sectors through national and international sources | | | | | |
| 2.1. Prepare needed documents for the allocation of a budget line for implementing joint agreed activities in the OH roadmap through the council of the ministries (domestic fund) | Q2 2024 | +++ | +++ | Involved ministries | <ol style="list-style-type: none"> 1. Lists of needs, activities and estimated costs prepared by involved ministries 2. Compile in one budget study for the submission to the ministry of finance 3. Submission to the ministry of finance through the council of ministers |
| 2.2. Prepare joint proposal for fundraising to seek donor support (external fund) | Q1 2024 | ++ | +++ | Involved ministries and UN agencies | <ol style="list-style-type: none"> 1. Map key and potential donors 2. Prepare joint proposals 3. Review joint proposals with UN agencies 4. Contact donors and Submit proposals |
| Objective 3: To advocate for One Health Approach implementation at high level | | | | | |
| 3.1. Conduct an advocacy workshop with politicians (deputy and governors) to make them activists of One Health | Q2 2024 | ++ | ++ | OH focal persons of MOH, MOA, MOE with support of WHO, FAO, WOH | <ol style="list-style-type: none"> 1. Prepare all workshop related technical and logistic aspects including identifying target audience involving academia, UN agencies, etc., CN, venue and allocate fund 2. Prepare and present a policy brief to convince high officials in the country 3. |
| 3.2. Establish an intersectoral advocacy website / dashboard for OH (updates, information, training materials, action plans, etc. ...) | Q2 2024 | ++ | ++ | OH operational committee | <ol style="list-style-type: none"> 1. Decide the entity responsible for the establishment. operation and maintenance of this platform 2. Develop the website and content 3. Establish link with the Risk commitment plan / surveillance data exchange |
| Objective 4: To continuously measure the progress of OH roadmap implementation | | | | | |
| 4.1. Conduct a new JEE and a new PVS evaluation | Q2 2024 | + | +++ | MOPH – MOA and involved UN agencies | <ol style="list-style-type: none"> 1. Submit formal request for a new JEE (MOPH) and (PVS) (MOA) missions 2. MOPH – MOA to conduct a self-assessment 3. Prepare and conduct the mission |
| 4.2. Establish and implement an intersectoral M and E plan for OH roadmap framework using available tools and methodologies | Q4 2023 | ++ | +++ | MOPH – MOA – MOE OH focal points with support from FAO, WHO, MOE | <ol style="list-style-type: none"> 1. Identify KPIs for OH roadmap 2. Identify source of information and frequency 3. Identify responsibilities for the implementation of the M and E framework 4. Develop a dashboard / reporting template on M and E |
| RISK ASSESSMENT & RISK COMMUNICATION | | | | | |
| Objective 5: Undertake Joint Risk Assessment for health threats at the human-animal-environment interface | | | | | |
| 5.1. JRA subcommittee to review existing JRA tools and select a tool (task force) | Q2 2025 | + | +++ | JRA sub-committee | <ol style="list-style-type: none"> 1. conduct desk review of the available risk assessment tools 2. The JRA committee, with the support of an international expert mission will select the most appropriate tool for the Lebanese context, resources and other countries experiences 3. |

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| 5.2. Perform JRA for prioritized health threats list and communicate science-based findings with the decision makers for further action | Q2 2025 | + | +++ | OH operational committee and JRA sub-committee | <ol style="list-style-type: none"> 1. Agree on the list of diseases and threats to be assessed 2. Undertake the JRA exercise 3. Develop JRA report including recommendations and risk communication messages and send to decision makers |
| 5.3. Train JRA committee member on the use of the selected JRA tool | Q3 2025 | + | +++ | OH operational committee and JRA sub-committee | <ol style="list-style-type: none"> 1. Conduct a workshop for the joint committee to be trained on the tool by external expert 4. Complete a practical exercise during the workshop 5. Develop an annual training plan for national focal points |
| Objective 6: Establish mechanism for joint risk communication for epidemic and inter-epidemic context | | | | | |
| 6.1. Establish a quota for one health risk communication community awareness campaigns on national channels | Q3 2024 | + | +++ | MOPH Ministry of information Ministry of High Education | <ol style="list-style-type: none"> 1. Revise and update existing legislations linked to RC 2. Agree on the roles and responsibilities of each involved parties, ministries and partners 3. Identify the means of risk communication that each sector use for RC ex MOPH uses campaigns, brochures, advertisements and social media, Ministry of information uses media, TV, journals, tv programs, talk shows. |
| 6.2. Update existing and develop new joint risk communication materials for threats at the human animal environment interface | Q3 2024 | ++ | +++ | OH operational committee | <ol style="list-style-type: none"> 1. Identify potential common threats for the human animal environment interface 2. For each threat, create an SOP with clear responsibilities and joint work 3. Compile this material in a reference guide shared in all ministries and source of notification 4. Prepare potential message in case needed |
| 6.3. Create SOPs for joint risk communications in times of outbreaks/disasters | Q3 2024 | ++ | +++ | OH operational committee | <ol style="list-style-type: none"> 1. Each ministry has to select her system for data sharing 2. Create a link with dashboard for data and alerts sharing with priority levels 3. Put a time frame for each reporting if immediate or not 4. Sharing of common data on report |
| 6.4. Set up a mechanism for joint press release by the three ministries in case of outbreak | Q3 2024 | ++ | +++ | Ministers of Public health, Agriculture and environment and other potential involved ministers/ministries | <ol style="list-style-type: none"> 1. Prepare a mechanism proposal for the involved ministries |
| Objective 7: Apply alternative ways to fill gaps | | | | | |
| 7.1. Write an MOU (memorandum of understanding) with two academic institutions to fill gaps | Q2 2024 | +++ | + | Minister of Public health, agriculture, environment, Lebanese university, AUBMC | <ol style="list-style-type: none"> 1. Each ministry to identify shortage, challenges and possible solutions to overcome (HR, technical expertise, resources, diagnostics ...) 2. Prioritize functions and occupations that can be filled with alternative methodologies such as agreement with academia to hire fellows 3. 4. Address an MOU to the administration 5. Develop TORs for each needed activity 6. Develop training material for the position 7. Develop evaluation sheet with specific outcomes |
| 7.2. Map relevant stakeholders able to provide support and resources to the one health line ministries considering the PPP | Q4 2024 | ++ | ++ | Minister of Public health, agriculture, environment, culture | <ol style="list-style-type: none"> 1. Identify potential sponsor in the private sector 2. Each ministry will share a list from her side |

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| | | | | | <ol style="list-style-type: none"> 3. Share the list with the joint committee 4. Selection of common sponsors to be approached later. 5. Produce a list (as a guidance) of the possible and promising PPP projects to encourage PP Projects developments based on the local market situation and existing legislations |
| SURVEILLANCE & LABORATORY | | | | | |
| Objective 8: Ensure a joint strategy and coordination mechanisms for surveillance activities | | | | | |
| 8.1. Nominate focal points for coordination between the different sectors at central and province level for surveillance activities | Q2 2024 | + | ++ | surveillance units at MOPH, MOA and MOE | <ol style="list-style-type: none"> 1. Conduct regular meetings between head of surveillance unit of concerned ministries 2. Assign responsible focal points for each/group of disease under surveillance from each sector (using a legal form) |
| 8.2. Develop a joint surveillance strategy for identified priority diseases | Q2 2024 | + | +++ | focal points from MOPH (ESU) veterinary services and referral labs | <ol style="list-style-type: none"> 1. Conduct an OH zoonotic disease prioritization (OHZDP) exercise, or review (revisit) pre-existing prioritization report. 2. Develop the strategy targeting the list of prioritized diseases and inline with joint risk assessment results |
| Objective 9: Establish a mechanism for routine data sharing across one health sectors | | | | | |
| 9.1. Develop SOPs for routine information and data sharing between all sectors | Q2 2024 | + | +++ | MOPH, MOA (veterinary services) and MOE | <ol style="list-style-type: none"> 1. Assign the same committee for inter-sectorial collaboration 2. Conduct regular meetings 3. Develop the reporting system 4. Define the reporting mechanism 5. Assign the responsible focal points for data sharing 6. Write the SOP document 7. Share the SOP with relevant stakeholders |
| 9.2. Develop an interoperable integrated IT platform for data sharing across sectors | Q3 2025 | +++ | +++ | IT assigned from MOPH, MOA, MOE | <ol style="list-style-type: none"> 1. Define the specifications of the platform 2. Ensure the funding to Establish the platform 3. Develop an agreement on data sharing |
| 9.3. Train relevant employees from each sector on data management and analysis on the IT platform | Q1 2026 | + | +++ | IT specialists from MOPH, MOA, MOE | <ol style="list-style-type: none"> 1. Train relevant staff at central level by IT specialist 2. Conduct cascade training at province level. |
| Objective 10: Enhance biosafety –biosecurity measures at national lab network | | | | | |
| 10.1. Establish a multi-sectoral biosafety/biosecurity team at national level in coordination with network of CPHL, LARI, and supporting expert laboratories | Q3 2024 | ++ | +++ | MOA (ARD) MOPH (ESU) LABS | <ol style="list-style-type: none"> 1. Nominate the team members including academic and private sector 2. Develop the ToRs 3. Recruit expert for development of guidelines and training of laboratory trainers 4. Develop national guidelines in biosafety and biosecurity 5. Train on biosafety/biosecurity measures |
| 10.2. Conduct joint training on biosafety/biosecurity for all lab technicians | Q3 2024 | ++ | +++ | Biosafety/biosecurity team | <ol style="list-style-type: none"> 1. Develop an annual program for training at the national level by the biosafety/biosecurity team 2. Train the concerned lab staff |

RESPONSE AND FIELD INVESTIGATION

Objective 11: Establishing framework for fields investigation and response as on health under IHR /DRM

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| 11.1. Update / Develop joint contingency plans for priority diseases and threats | Q2 2024 | +++ | +++ | IHR (National & technical) Committees | <ol style="list-style-type: none"> 1. Set the contingency plan for priority diseases and threats as priority activity on the agenda of IHR (National and Technical) 2. Establish contingency plan involving all concerned parties with different scenarios, with the collaboration of all stakeholders including NGOs, and international organizations (WHO, WOAH, FAO...) 3. Get approval from IHR and DRM unit 4. Dissemination of contingency plan to all involved parties (ministries NGOS DRM unit) |
| 11.2. Update the SOPs of the joint PHEOC to follow the OH approach | Q4 2024 | +++ | +++ | Head of department in each ministry & DRM unit | <ol style="list-style-type: none"> 1. Develop and revise available SOPs (representatives from stakeholders from each ministry) with clear TOR and timeline |

Objective 12: Strengthening the rapid response capacity at the national and local levels

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| 12.1. Set-up the joint rapid response team at the national level in coordination between PHEOC and DRM | Q3 2024 | +++ | +++ | OH operational committee | <ol style="list-style-type: none"> 1. Activate the multisectoral RRT at the governorate level 2. Specify and identify the role and responsibilities 3. Establish a list of persons involved in RRT unit and a Roster list 4. Train the RRT on various One Health Approach and joint activities |
| 12.2. Establish joint RRT at the governorate levels in coordination between PHEOC and DRM | Q2 2024 | +++ | +++ | Head of Public Health Department at the Governorate level IHR committee: National and technical – DRM committee Involved agencies: Military-ISF-NGOs | <ol style="list-style-type: none"> 1. RRT coordinator will be assigned for each governorate 2. Members of the RRT will be assigned for their specialty, form different parts of the joint health 3. Allocate a budget 4. Members will be selected based on voluntary basis 5. Roles and responsibilities will be fixed 6. List of the different RRTs at the governorate level will prepare with contact members will be shared with PHEOC and DRM |
| 12.3. Conduct cascade training (ToT for national RRT and cascade trainings for governorate RRTs) on joint field investigation and response | Q4 2024 | +++ | +++ | Expert MoPH/MoA or national/international | <ol style="list-style-type: none"> 1. Establish training plan chapters 2. Selection of the expert (national & regional experts) that are qualified in the field needed 3. Prepare training material by the experts 4. Establish roster of trained individuals (database) |

Objective 13: One Health Response simulation and after-action review, monitoring and reporting

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| 13.1. Conduct an annual joint simulation exercise focusing on joint response and field investigation to One Health | 2025 | +++ | +++ | DRM-MOPH-MOA-MOE with support of NOGs, WHO-WOAH-IOM | <ol style="list-style-type: none"> 1. Select the appropriate simulation exercises type (table-top, drills, Functional exercise, Full scale exercise) 2. Assign the parties responsible for the simulation exercise 3. Preparation and organization of the simulation exercise 4. Identify the OH threat and develop the scenarios 5. Implementation of simulation exercise 6. Communicate Simex output with decision makers, partners and stakeholders |
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| 13.2. Undertake after action review and reporting | After events | +++ | ++ | DRM-MOPH-MOA-MOE with support of NOGs, WHO-WOAH-IOM | 1. Plan and implement an AAR on selected events |
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Difficulty of implementation: Low +, Moderate ++, Very difficult +++

Impact: Low impact +, Moderate impact ++, High impact +++