



National Bridging Workshop on the International Health Regulations (IHR) and the OIE Performance of Veterinary Services (PVS) Pathway

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Bishkek, Kyrgyzstan



Organized by the Ministry of Health of Kyrgyzstan, State Inspectorate of Veterinary and Phyto-Sanitary Security of the Government of Kyrgyzstan, WHO, and OIE

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ABBREVIATIONS & ACRONYMS

AI	Avian Influenza
DG	Directorate General
FAO	Food and Agriculture Organization of the United Nations
FELTP	Field Epidemiology and Laboratory Training Program
FP	Focal Point
HQ	Headquarters
IHR	International Health Regulations (2005)
IT	Information technology
JEE	Joint External Evaluation
MEF	Monitoring and Evaluation Framework
MoU	Memorandum of Understanding
NAPHS	National Action Plan for Health Security
OIE	World Organisation for Animal Health
PH	Public Health
PTS	Professional Test Schemes
PVS	Performance of Veterinary Services
SOP	Standard Operating Procedures
TOR	Terms of Reference
WHO	World Health Organization

INTRODUCTION

BACKGROUND

The World Health Organization (WHO) and the World Organisation for Animal Health (OIE) are the two main international organizations responsible for proposing references and guidance for the public health and animal health sectors respectively. WHO and OIE have been active promoters and implementers of an intersectoral collaborative approach between institutions and systems to prevent, detect, and control diseases among animals and humans. They have developed various frameworks, tools and guidance materials to strengthen capacities at the national, regional and global levels.

- WHO Member States adopted a legally binding instrument, the International Health Regulations (IHR, 2005), for the prevention and control of events that may constitute a public health emergency of international concern. Through these regulations, countries are required to develop, strengthen and maintain minimum national core public health capacities to detect, assess, notify and respond to public health threats and as such, should implement plans of action to develop and ensure that the core capacities required by the IHR are present and functioning throughout their territories. Various assessment and monitoring tools have been developed by WHO such as the IHR Monitoring and Evaluation Framework (MEF), which includes *inter alia* the Annual Reporting Questionnaire for Monitoring Progress and the Joint External Evaluation (JEE) Tool.
- The OIE is the intergovernmental organization responsible for developing standards, guidelines and recommendations for animal health and zoonoses; these are laid down in the OIE Terrestrial and Aquatic Animal Codes and Manuals. In order to achieve the sustainable improvement of national Veterinary Services' compliance with these standards, in particular on the quality of Veterinary Services, the OIE has developed the Performance of Veterinary Services (PVS) Pathway, which is composed of a range of tools to assist countries to objectively assess and address the main weaknesses of their Veterinary Services.



These support tools shift away from externally driven, short-term, emergency response type 'vertical' approaches addressing only specific diseases, and contribute to a more sustainable, long-term 'horizontal' strengthening of public and animal health systems. The WHO IHR MEF and the OIE PVS Pathway approaches enable countries to determine strengths and weaknesses in their respective functions and activities and promote prioritization and pathways for improvement. Furthermore, they engage countries in a routine monitoring and follow up mechanism on their overall level of performance and help to determine their needs for compliance with internationally adopted references and standards.

The use of the WHO IHR monitoring tools and OIE PVS Pathway results in a detailed assessment of existing weaknesses and gaps, with the better alignment of a capacity building approach and strategies at the country level between the human and animal health sectors. The two organizations have developed a workshop format (the IHR-PVS National Bridging Workshops) that enables countries to further explore possible overlapping areas addressed in their PVS and IHR capacity frameworks and develop, where relevant, appropriate bridges to facilitate coordination. A structured approach using user-friendly materials enables the identification of synergies, reviews gaps and defines the operational strategies to be used by policymakers for concerted corrective measures and strategic investments in national action plans for improved health security.

In Kyrgyzstan,

- a PVS Evaluation Follow-up mission was conducted in 2016;
- a Joint External Evaluation (JEE) was conducted in 2016;
- The NAPHS was drafted in 2017 and pending endorsement.

OBJECTIVES OF THE WORKSHOP AND EXPECTED OUTCOMES

The main objective of the IHR-PVS Pathway National Bridging Workshop (IHR-PVS NBW) is to provide an opportunity to the human and animal health services of hosting countries to build on the reviews of performance, gaps and discussions for improvement conducted in their respective sectors, and to explore options for improved coordination between the sectors, to jointly strengthen their preparedness for, and control of, the spread of zoonotic diseases.

The IHR-PVS NBWs focus on the following strategic objectives:

- **Brainstorming:** discuss the outcomes of IHR and PVS Pathway country assessments and identify ways to use the outputs;
- **Advancing One Health:** improve dialogue, coordination, and collaboration between animal and human health sectors to strategically plan areas for joint actions and a synergistic approach;
- **Building Sustainable Networks:** contribute to strengthening the inter-sectoral collaboration through improved understanding of respective roles and mandates;
- **Strategic planning:** inform planning and investments (incl. the National Action Plan for Health Security) based on the structured and agreed identification of needs and options for improvement

Expected **outcomes** of the workshop include:

1. Increased awareness and understanding on the IHR (2005) and the role of WHO, the mandate of the OIE, the IHRMEF and the OIE PVS Pathway, their differences and connections.
2. Understanding the contribution of the veterinary services in the implementation of the IHR (2005) and how the results of the PVS Pathway and IHRMEF can be used to explore strategic planning and capacity building needs.
3. A diagnosis of current strengths and weaknesses of the collaboration between the animal health and public health services.
4. Identification of practical next steps and activities for the development and implementation of a joint national roadmap to strengthen collaboration and coordination.

The agenda of the Workshop is available at [Annex 1](#). It was attended by 46 participants from the Medical and Veterinary Services, with representatives from the Central, Regional and District level attending the three-day discussions.

REPORT ON THE SESSIONS

The workshop used an interactive methodology and a structured approach with the user-friendly material, case studies, videos, and facilitation tools. All participants received a *Participant Handbook* which comprised of all necessary information such as the objectives of the workshop, instructions for working groups, expected outcomes of each session etc. Sessions were structured in a step-by-step process as follows:

OPENING SESSION

The National Bridging Workshop (NBW) on the International Health Regulations (IHR) and the OIE Performance of Veterinary Services (PVS) Pathway was held in Bishkek, Kyrgyzstan, from 2 to 4 October 2018, at the kind invitation of the Government of Kyrgyzstan. The Workshop was attended by 46 participants from Ministry of Health and from the State Inspectorate of Veterinary and Phyto-Sanitary Security of the Government of the Kyrgyz Republic, as well as representatives of World Health Organization (WHO), World Organisation for Animal Health (OIE) and Food and Agriculture Organization of the United Nations (FAO).

Opening speeches were given by Dr Baktygul Ismailova (Head of the Department of Public Health, Ministry of Health), Dr Murat Abdrayev (Head of Animal Disease Control Department, State Inspectorate of Veterinary and Phyto-Sanitary Security), as well as by Dr Mereke Taitubayev (Head of the Sub-Regional Representation of OIE for Central Asia) and Mr Jarno Habicht (WHO Representative in the Republic of Kyrgyzstan), who highlighted the importance of identifying gaps to progress toward a better coordination of the actions of the two sectors.

SESSION 1: THE ONE HEALTH CONCEPT AND NATIONAL PERSPECTIVES

A documentary video introduced the One Health Concept, its history, rationale and purpose and how it became an international paradigm. The video also introduced the workshop in the global and national context by providing high-level background information on the collaboration between WHO, OIE, and FAO.

The representatives of both sectors briefly presented structures and achievements of Public Health and Veterinary Services. The representative of the Public Health Service presented the way IHR is being implemented in the country after the JEE had been conducted in 2016, with specific actions on the development of a national action plan, public communication on risk-analysis, disease monitoring system, biological safety. The representative of the Public Health Service identified the country's preparedness for public health emergencies and development of intersectoral communication and cooperation as next steps to work on. The representative of the Veterinary Service presented achievements and outcomes of the PVS missions, the actions taken to meet the recommendations in terms of management, control of veterinary products, animal disease, equipment, and performance of veterinary laboratories, and highlighted the importance of the activities conducted in the area of zoonotic diseases.

The workshop approach and methodology were explained and the participant handbook was presented.

A second documentary video provided participants with concrete worldwide examples of intersectoral collaboration in addressing health issues at the human-animal interface.

Outcomes of Session 1:

At the end of the session, the audience agreed that:

- Intersectoral collaboration between animal and human health sectors happened, but mainly during outbreaks; with a better preparedness, much more could be done at the human-animal interface.
- The two sectors have common concerns and challenges and conduct similar activities. Competencies exist and can be pooled. This needs to be organized through a collaborative approach;
- WHO, OIE and FAO are active promoters of One Health and can provide technical assistance to countries to help enhance inter-sectoral collaboration at the central, local and technical levels.

SESSION 2: NAVIGATING THE ROAD TO ONE HEALTH – COLLABORATION GAPS

Participants were divided into five working groups of mixed participants from both sectors and from different levels (Central, Provincial, District). Groups were provided with a case study scenario (Table 1) based on diseases relevant to the local context (Rabies, Anthrax, H5N1, Brucellosis, and Echinococcosis) developed in collaboration with national representatives.

Table 1: Scenarios used for the different case studies

Rabies (disclaimer: this incident is completely fictional)

A stray dog which was known to have bitten two cows and was behaving aggressively towards people was reported to have bitten some children in the same neighborhood. It was shot dead by Police in the outskirts of Osh two days ago. The carcass of the dog was destroyed before the Veterinary authorities were able to take the head of the dog for confirmation of diagnosis.

Anthrax (disclaimer: this incident is completely fictional)

Nine people went to the Batken district hospital close to the border post, showing identical anthrax-like lesions. One of these patients is a worker at the village's slaughterhouse.

At least 60 people who reportedly ate untested meat in the city of Jalalabat were examined for anthrax. The patients were urgently referred to the primary health care center after they developed symptoms typical of cutaneous anthrax. The man who sold the untested meat disappeared, after hearing that his neighbors were sick

Avian influenza- (disclaimer: this incident is completely fictional)

Two people were admitted at the infectious diseases Hospital in Bishkek, with pneumonia. Laboratory testing by RT-PCR resulted positive for H5N1 subtype of avian influenza. One of the patients is a semi-commercial broiler producer who sells his birds three times a week at the local live bird market. The other patient reported having visited the same market 7 days prior to disease onset and having bought four chickens.

Brucellosis (disclaimer: this incident is completely fictional)

During the last month, three cows, all belonging to a small-holder dairy farmer in the city of Talas aborted. At the time of the first two abortions, the farmer did not bother reporting the problem to his local veterinary officer, as his farm was too far from the District Veterinary Office. However, the third abortion occurred a day before the market day and he happened to be in town, where he met with the district veterinarian and mentioned that three of the cows had a recently aborted their calves. The veterinarian immediately went to the farm and carried out a Milk Ring Test on the three animals which had aborted and found them all to be positive for brucellosis.

Echinococcosis (disclaimer: this incident is completely fictional)

A farmer in the Naryn region was taken to hospital with jaundice and abdominal pain. An ultrasound detected atypical seals in the liver, and laboratory tests confirmed that the patient was infected with *Echinococcus multilocularis*. This is the fourth case in the last two months in this area, where local residents are starting to worry because local dogs are often infected with Echinococcus.

Using experience from previous outbreaks of zoonotic diseases, the groups discussed how they would have realistically managed these events, and evaluated the level of collaboration between the veterinary and the public health services for 15 key technical areas: coordination, investigation, surveillance, communication, etc. These activities/areas of collaboration were represented by color-coded *technical area cards*: green for “good collaboration”, yellow for “some collaboration”, and red for “collaboration needing improvement” (Figure 1).



Figure 1: Participants working on a case study scenario and evaluating the level of collaboration between the sectors for 15 key technical areas.

During an ensuing plenary session, each group presented and justified the results of their work. Output 1 summarizes the results from the five disease groups.

Outcomes of Session 2:

- Areas of collaboration were identified and joint activities discussed.
- Level of collaboration between the two sectors for 15 key technical areas was assessed (Output 1).
- The main gaps in the collaboration were identified.

SESSION 3: BRIDGES ALONG THE ROAD TO ONE HEALTH

Documentary videos introduced the international legal frameworks followed by human health (IHR 2005) and animal health (OIE standards) as well as the tools available to assess the country's capacities: the annual reporting and JEE tools for public health services and OIE PVS Pathway for veterinary services. The differences and connections between these tools were explained. A large matrix (IHR-PVS matrix), cross-connecting the indicators of the IHR MEF (in rows) and the indicators of the PVS Evaluation (in columns) was set-up and introduced to the participants (Figure 2).

Through an interactive approach, working groups were invited to plot their *technical area cards* onto the matrix by matching them to their corresponding indicators. A plenary analysis of the outcome showed clear gap clusters and illustrated that most gaps were not disease-specific but systemic.



Figure 2: Mapping of the gaps by positioning the selected technical area cards on the IHR-PVS matrix.

The main gaps (clusters) identified were discussed. It was noted that areas for improvement in coordination and cooperation between medical and veterinary services exist in many closely related technical capacities, reflecting the scores obtained in Session 2 (Output 1). In order to address those gaps, it was agreed to combine related technical capacities. It was agreed that the rest of the workshop would focus on the following capacities:

- Priority technical area 1: Coordination on the central, local, and technical levels
- Priority technical area 2: Laboratory and surveillance
- Priority technical area 3: Response and field investigation
- Priority technical area 4: Communication

'Education and training' came-up as one of the technical areas needing the most improvement, therefore it was agreed that all four groups would also address that thematic in their respective areas. 'Finance' was also an area showing great weakness. However, participants agreed that the audience of this workshop would not be able to provide substantial improvements in that domain. It remains nonetheless one of the major gaps to impair the efficiency of the intersectoral collaboration.

Outcomes of Session 3:

- Understanding what tools are available to explore operational capacities in each of the sectors.
- Understanding the contribution of the veterinary sector to the IHR.
- Understanding the bridges between the IHR MEF and the PVS Pathway. Reviewing together the results of capacities assessment may help in identifying synergies and optimize collaboration.
- Understanding that most gaps identified are not disease-specific but systemic.
- Identification of the technical areas to focus on during the next sessions.

SESSION 4: CROSSROADS – PVS PATHWAY AND IHR MEF REPORTS

New working groups with representation from all previous groups were organized for each of the four priority technical areas (Figure 3).

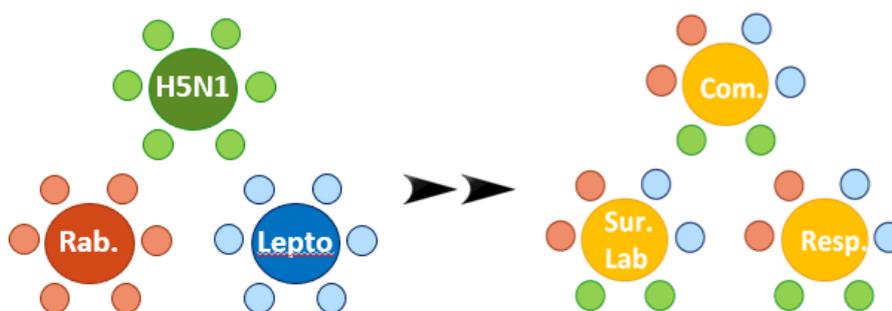


Figure 3: Generic graph describing the organization of working groups for Session 2-3 (left) and Session 4-5 (right).

The matrix was used to link the identified gaps to their relevant indicators in the IHR MEF and in the PVS Pathway. Each working group then opened the assessment reports (JEE, PVS Evaluation Follow-up) and extracted the main findings and recommendations relevant to their technical area (Figure 4).



Figure 4: Participants extracting results from the PVS and JEE reports.

Outcomes of Session 4:

- Good understanding of the assessment reports for both sectors, their purpose, and their structure.
- Main gaps relevant to each technical area have been extracted.
- Main recommendations from existing reports have been extracted.
- A common understanding of the effort needed started to emerge.

SESSION 5: ROAD PLANNING

Using the same working groups as for the previous session, participants were asked to identify, for each technical area, three joint objectives to improve their collaboration. For each objective, they filled *Action Cards*, detailing the activities, their dates of expected implementation, the responsibilities and the process that will be followed to implement them (Figure 5).



Figure 5: The group working on “Communication” identified 3 objectives and 8 activities to improve the collaboration between the two sectors in this domain.

The difficulty of implementation and the expected impact of each activity were evaluated using red and blue stickers respectively and a semi-quantitative scale (1 to 3).

Outcomes of Session 5:

- Clear and achievable objectives and activities were identified to improve inter-sectoral collaboration between the two sectors for all technical areas selected.
- For each activity, the desired completion date, focal points, required support and measurable indicators have been identified.
- The impact and the difficulty of implementation of all proposed activities have been estimated.

SESSION 6: FINE-TUNING THE ROAD-MAP

Working groups from the previous session were given more time to finalize their objectives and activities. A World Café exercise was then organized to enable participants to contribute to the action points of all technical areas (Figure 6). Each group nominated a rapporteur whose duty was to summarize the results of their work to the other groups. Each group rotated between the different boards to contribute and provide feedback on all technical areas. Rotating groups had the possibility of leaving post-it notes on the objectives and activities of other groups when they felt that an amendment or a clarification was necessary.

At the end of the cycle, each group returned to their original board and the rapporteur summarized the feedback received. Groups were given 20 minutes to address changes or additions suggested by the other participants. Objectives and activities were fine-tuned accordingly, and a final plenary session was conducted to discuss the outstanding points.



Figure 6: World café exercise: the group on “Communication” is providing feedback to the rapporteur of the group on “Response and field investigation”.

Overall, the four groups identified a total of 10 key objectives and 28 activities. The detailed results are presented in [Output 2](#).

Prioritization of Objectives

To prioritize the objectives identified by the technical working groups, participants were asked to vote for each objective, using individual stickers to be placed on each objective card. This process allowed identifying the five objectives (and their constituting activities) considered as key priorities.

All participants participated in the vote. Voting results showed uniformity, with none of the objectives being considered as a low priority, and few objectives showing very high scores, highlighting the importance of all of the identified objectives for strengthening the cooperation and communication between two sectors.

Full results of the vote can be found in [Output 3](#).

Outcomes of Session 6:

- Harmonized, concrete and achievable road-map to improve the collaboration between the animal health and human health sectors.
- Buy-in and ownership of all participants who contributed to all areas of the road-map.
- Prioritization of the activities.

SESSION 7: WAY FORWARD

Results of the prioritization vote were presented and discussed. It was agreed by participants that the prioritized technical areas are vital critical points to foster collaboration between both sectors. Defined activities are the key instruments to gain synergy in the work of medical and veterinary services for the benefit of public and animal health in Kyrgyzstan.

It was noted that the results of the workshop will be used to strengthen the national legislation of Kyrgyzstan in terms of better cooperation and communication between the two sectors. In particular, it was noted that establishment of joint committees on the central level and focal points on the local level as well as the development of the relevant SOPs will significantly increase the level of communication, transparency, and collaboration between the public health and veterinary services.

The participants from both sectors decided to work together towards the implementation of the Workshop Roadmap, based on the progress done in Bishkek. They proposed that the Veterinary Service be designated as responsible for the coordination of activities in this area between the two sectors. Reference to a national workshop was made to finalize the Workshop Roadmap. National authorities expressed their wish for further WHO and OIE support in order to progress in the Roadmap implementation.

Outcomes of Session 7:

- Understanding how the outputs of the workshop can feed into other existing plans.
- Way forward was presented and discussed.
- Ownership of the workshop results by the country.

CLOSING SESSION

At the end of the workshop, the participants thanked WHO and OIE for the work done together. They highlighted the importance of cooperation and the need for an increased communication and coordination to reach the objectives identified during the Workshop and structured in the Workshop Roadmap. Participants emphasized the importance of the Workshop itself bringing together specialists from both Veterinary Services (VS) and Medical Services (MS) to build professional communication and horizontal networks at all levels to better control zoonoses and other emergencies in the country. Specialists from both sectors stressed that further communication between the two sectors is needed and expressed their willingness to continue collaboration on both the professional and individual levels.

All the material used during the workshop, including movies and presentations were copied on a memory stick distributed to all participants.

A three-minute movie of the workshop was shown and is available at the following link: www.bit.ly/NBWKyrgyzstan.

A Russian version of this report is available at the following link: www.bit.ly/NBWKyrgyzstanRU.

WORKSHOP OUTPUTS

OUTPUT 1: ASSESSMENT OF LEVELS OF COLLABORATION FOR 16 KEY TECHNICAL AREAS

Technical area (cards)	Rabies	Anthrax	H5N1	Brucellosis	Echinococcosis	Score
Communication w/ media	Red	Yellow	Red	Red	Yellow	8
Finance	Red	Red	Red	Red	Green	8
Coordination at a technical level	Red	Red	Yellow	Red	Green	7
Education and training	Red	Red	Green	Yellow	Red	7
Coordination at a local level	Green	Red	Yellow	Red	Yellow	6
Field investigation	Red	Red	Yellow	Yellow	Green	6
Laboratory	Red	Yellow	Yellow	Red	Green	6
Emergency funding	Yellow	Red	Red	Green	Green	5
Legislation / Regulation	Red	Yellow	Yellow	Green	Yellow	5
Response	Yellow	Yellow	Red	Yellow	Green	5
Risk assessment	Yellow	Red	Yellow	Yellow	Green	5
Communication w/ stakeholders	Red	Yellow	Green	Yellow	Green	4
Coordination at a high level	Yellow	Yellow	Green	Yellow	Yellow	4
Joint surveillance	Yellow	Yellow	Yellow	Yellow	Green	4
Human resources	Green	Yellow	Green	Yellow	Yellow	3

For each disease, the performance of the collaboration between the human health and the animal health sectors is color-coded: green for “good collaboration”, yellow for “some collaboration”, and red for “collaboration needing improvement”. The score uses a semi-quantitative scale (2 points for a red card, 1 for a yellow card and 0 for a green card). Technical areas marked in bold were selected and addressed in-depth throughout the rest of the workshop.

OUTPUT 2: OBJECTIVES AND ACTIONS IDENTIFIED PER TECHNICAL AREAS

Action	Timeline	Difficulty (1-3 scale)	Impact (1-3 scale)	Responsibility	Indicators
TECHNICAL AREA 1: LABORATORY AND SURVEILLANCE					
Objective 1: Enhancement of lab diagnostics of priority zoonoses					
1.1 Expert workshop “Modern diagnostics of priority zoonoses”	4 quarter 2019	++	+++	<ol style="list-style-type: none"> Center of Veterinary Diagnostics and Expertise in the North Region (CVDENR) Department of State Epidemiological Surveillance (DSES) 	<ul style="list-style-type: none"> Organize and deliver 2-days workshop on modern diagnostics methods of zoonoses with priority to the country Joint discussions on protocols used by two sectors Conduct gap analysis of the current laboratory diagnostics methods Address gaps in the current lab diagnostics Harmonization of methods of lab diagnostics Discuss possible exchange of materials and reagents
1.2 Modernize diagnostic methods for priority zoonoses and train laboratory staff		+	+++	<ol style="list-style-type: none"> State Inspectorate on Veterinary and Phytosanitary Security of the Government of Kyrgyz Republic (SIVPS GKR) CVDENR DSES 	<ul style="list-style-type: none"> Analysis of current methods for priority zoonoses Study existing standards of WHO and OIE Update existing national standards on zoonoses
1.3 Train laboratory staff of both sectors on diagnostics of zoonoses		++	+++	<ol style="list-style-type: none"> Ministry of Health (MOH) Veterinary Service (VS) 	To train lab staff of the Center for Disease Prevention, DSES, CVDNR, and CVD in the South Region on modern methods of lab diagnostics as well as on information exchange
1.4 Define the need in ELISA and PCR equipment in both sectors	2019 - 2020	++	+++	<ol style="list-style-type: none"> CVDENR DSES 	<ul style="list-style-type: none"> Involve technical expert on ELISA and PCR to develop specifications Procure ELISA and PCR equipment (4 sets of ELISA and PCR) for North and South regions for both sectors Train lab specialists (8 people: 4 serologists and 4 parasitologists – 2 from North and South regions from both sectors)

					<ul style="list-style-type: none"> • Install the equipment
1.5 Develop a joint national strategy on Professional Test Schemes (PTS)	4 quarter 2020	++	+++	<ol style="list-style-type: none"> 1. DSES 2. Department of disease prevention 3. SIVPS GKR 4. CVDENR 5. Kyrgyz Veterinary Research Institute 	<ul style="list-style-type: none"> • Sign the agreement between two sectors to conduct PTS • Define areas to conduct PTS to test samples from humans and animals • Develop PTS • Conduct PTS
Objective 2: Development of joint strategy on zoonoses surveillance					
2.1 Establish a working group to develop a surveillance strategy on priority zoonoses	1 quarter 2019	+	+++	<ol style="list-style-type: none"> 1. MOH 2. VS 	<ol style="list-style-type: none"> 1. Update legislation on epi surveillance of zoonoses 2. Develop ToR for a working group on development of joint surveillance strategy on zoonoses 3. Establish the working group 4. Functioning of the working group
2.2 Establish a joint database to exchange surveillance data between two sectors	4 quarter 2019	+++	+++	<ol style="list-style-type: none"> 1. MOH 2. VS 	<ol style="list-style-type: none"> 1. Analyze existing databases in both sectors 2. Develop ToR for the database and a budget 3. Find financial support (international donors?) 4. Hire IT-specialists and develop the database 5. Test and fine-tune the database 6. Train the staff
2.3 Develop a joint active and passive surveillance plan for zoonoses	4 quarter 2019	+++	+++	<ol style="list-style-type: none"> 1. MOH 2. VS 	<ol style="list-style-type: none"> 1. Establish a working group 2. Analyze existing plans 3. Define ToR for the joint plan 4. Involve external experts 5. Develop a joint plan engaging the technical help 6. Issue decrees to implement the plan 7. Implementation of the joint plan
Objective 3: Update of legislation on sample receiving, sampling, and transportation of samples					
3.1 Develop SOPs on sample receiving, sample transportation, and exchange of results	2 quarter 2019	+	+++	<ol style="list-style-type: none"> 1. CVDENR 2. MOH 	<ol style="list-style-type: none"> 1. Analyze existing SOPs 2. Develop SOP for sample receiving 3. Coordinate work with Coordination Steering Committee 4. Development of SOP for sample transportation
3.2 Train laboratory staff on the new SOPs	3 quarter 2019	++	+++	<ol style="list-style-type: none"> 1. MOH 	<ol style="list-style-type: none"> 1. Find financial support for the workshops

				2. Coordination Steering Committee 3. VS	2. Nominee participants from both sectors 3. Conduct workshops on a national scale 4. Train the national trainers to conduct workshops on a local level
TECHNICAL AREA 2: COORDINATION ON THE CENTRAL, LOCAL, AND TECHNICAL LEVELS					
Objective 4: Development of joint strategy and legislation for the inter-ministerial committee on zoonoses					
4.1 Develop the memorandum between two sectors on cooperation and coordination in the area of zoonotic diseases	4 quarter 2019	+	+++	1. MOH 2. SIVPS GKR	<ul style="list-style-type: none"> Establish a joint working group to develop a memorandum Define technical areas for the scope of the memorandum
4.2 Establishment and functioning of the intersectoral committee on prevention and control of zoonoses	1 quarter 2019	+	+++	1. MOH 2. SIVPS GKR	<ul style="list-style-type: none"> Develop legislation necessary to establish the committee Develop ToR Regular meetings at a high level to exchange information (2 times a year) Nominee participants into committee
Objective 5: Improvement of coordination and information exchange between two sectors					
5.1 Nominee focal points for mutual information exchange between sectors on oblast and rayon level	1 quarter 2019	+	+++	1. MOH 2. SIVPS GKR	<ul style="list-style-type: none"> Nominee candidates Develop ToRs Update the list of focal points not less than twice a year
5.2 Develop SOPs for information exchange between focal points of two sectors on the local level	2 quarter 2019	+	+++	Joint Committee of MOH and VS	<ul style="list-style-type: none"> Develop SOPs, including the algorithm of information exchange Agree and approve SOPs Conduct monthly coordination meetings between sectors
5.3 Develop electronic report system for two sectors	2 quarter 2019	++	+++	Joint Committee of MOH and VS	<ul style="list-style-type: none"> Analyze best practice existing in this field in the other countries Define types and focus of the reports to be included in the system Develop electronic report forms Set parameters of report exchange
TECHNICAL AREA 3: RESPONSE AND FIELD INVESTIGATION					
Objective 6: Training of both sectors on joint response and field investigation					
6.1 Update of curriculum for students on veterinary and medical faculties to include One Health aspects	2-4 quarters 2019	++	+++	Deputies of MOH, VS, Ministry of Education	<ul style="list-style-type: none"> Engage international technical experts for curricula development

					<ul style="list-style-type: none"> • Develop One Health module(s) to include into student curricula • Agree the plan to jointly include the developed module(s) into curricula
6.2 Develop an educational program for specialists of two sectors on response and field investigation		++	+++		<ol style="list-style-type: none"> 1. Update post-graduation curricula of veterinarians with aspects of response and field investigation of zoonosis cases 2. Conduct step-by-step training for 200 specialists – 2 per 7 oblasts and 2 cities; 42 specialists from rayons; central veterinary office 3. Involve existing centers for post-graduate education of MoH (7 centers) for joint educational programs 4. Continue remote education, paused earlier due to insufficient funds, including the following aspects: <ul style="list-style-type: none"> • Defining the infection source • Spread, prevention, and treatment • Clinical aspects (symptoms of zoonoses) • Epidemiology • Risk groups
Objective 7: Standardizing of a joint response to zoonotic emergencies					
7.1 Develop a joint response framework plan for zoonotic outbreaks		+	+++	Joint working group of MOH and VS	<ol style="list-style-type: none"> 1. Establish a joint working group 2. Nominee representatives of MOH and VS 3. Develop a general framework plan of joint response, including among others: <ul style="list-style-type: none"> • logistics (personnel, materials, transport, disinfectants, personal protection equipment, etc.) • joint deployment on the ground when emergency • ToRs • joint investigation act • budget of joint response and investigations
7.2 Develop sub-plans on joint response on priority zoonoses		+	+++	Joint working group of MOH and VS	Develop sub-plans detailing the following zoonoses: brucellosis, echinococcosis, TB, rabies, anthrax,

					leptospirosis, listeriosis, influenza (avian, swine)
7.3 Develop ToR to enable joint disease control centers for response and field investigation (for zoonoses outbreaks)		+	+++	Joint working group of MOH and VS	Develop ToRs for joint disease control centers of different levels, including staffing, aims, scope, etc.
7.4 Establishment of joint emergency supplies reserve	1 quarter 2019	+	+++	Joint working group of MOH and VS, and Ministry of Emergencies of Kyrgyz Republic	<ul style="list-style-type: none"> • Establish a joint working group on emergency supplies reserve procurement • Define top-priority medicines and food • Count needs in emergency reserve items based on localization • Nominee responsible persons, develop respective ToRs
7.5 Conduct training and simulation exercises to enable a high level of operational efficiency of two sectors		++	+++	MOH, VS, and Ministry of Emergencies of Kyrgyz Republic	<ul style="list-style-type: none"> • Develop document packages for the training and exercises • Define the target audience • Estimate budget • Find financial support • Conduct training on the general framework response plan and disease-specific response sub plans • Conduct table-top exercises • Conduct functional and full-scale simulation exercises

TECHNICAL AREA 4: COMMUNICATION

Objective 8: Establishment of a structure for joint communication

8.1 Establish communication department in Public Health and Veterinary Services and nominee focal points in both sectors	2020	++	+++	1. SIVPS GKR 2. MOH	<ul style="list-style-type: none"> • Issue decree approving the new staff structure • Hire communication specialists • Nominee personal responsible for constant communication between sectors
8.2 Develop joint communication strategies for priority zoonoses	2020	+	+	1. SIVPS GKR 2. MOH	<ul style="list-style-type: none"> • Agree and approve joint communication strategies • Define the aims and scope of awareness campaigns • Define the target audience • Define communication channels • Develop jointly complementary content for awareness campaigns
8.3 Develop SOPs for risk communication	2020	++	++	1. SIVPS GKR 2. MOH	<ul style="list-style-type: none"> • Develop draft SOPs • Engage communication experts for SOPs development

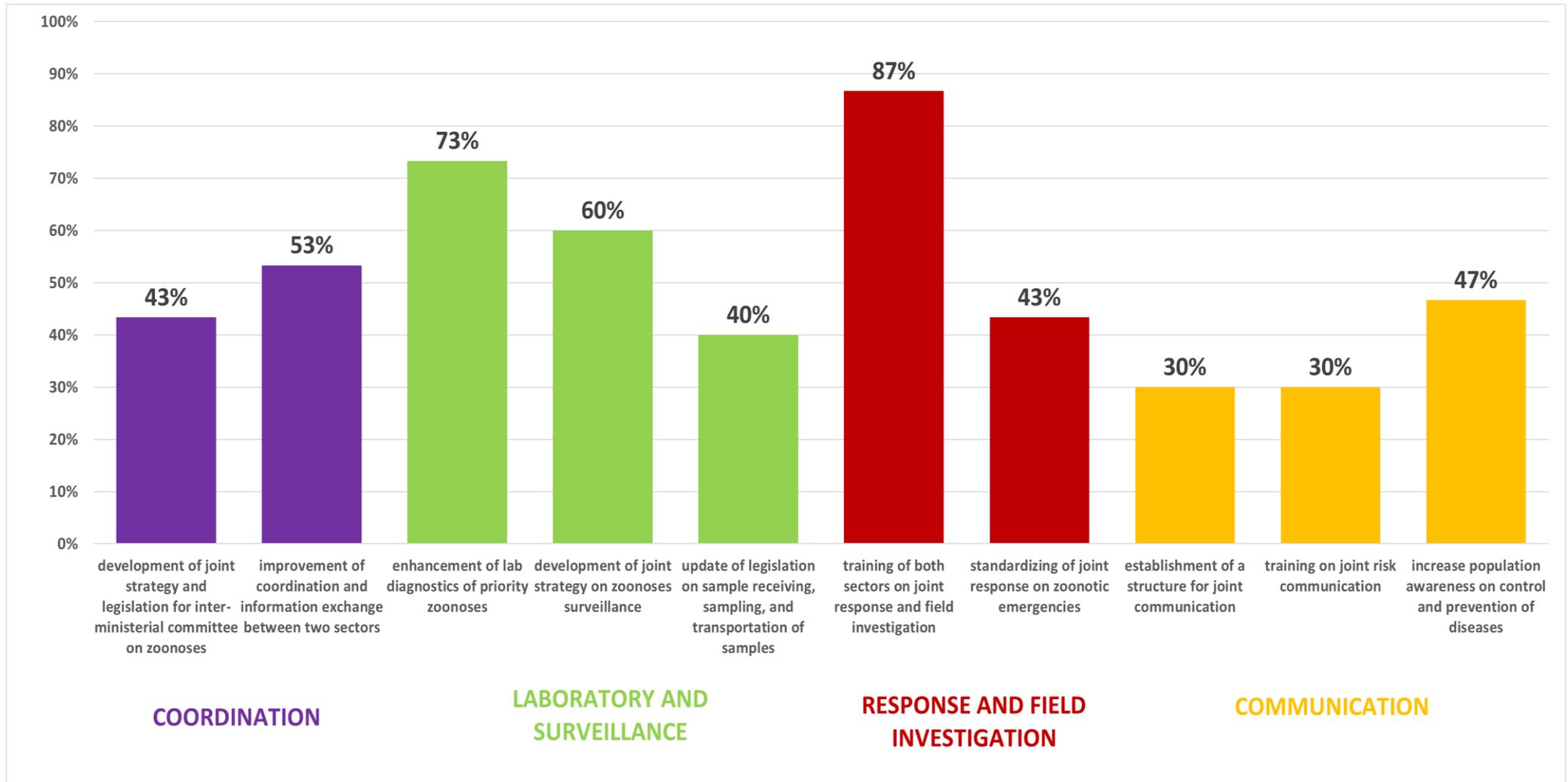
					<ul style="list-style-type: none"> • Agree and approve SOPs
8.4 Develop joint educational and information materials on priority zoonoses	Ежегодно с 2019 г.	+++	++	<ol style="list-style-type: none"> 1. SIVPS GKR 2. MOH 	<ul style="list-style-type: none"> • Identify priority diseases • Define types and formats of communication materials (video, posters, brochures, etc.) • Estimate budget • Find financial support
Objective 9: Training on joint risk communication					
9.1 Conduct training on risk communication for specialists from both sectors	Annually from 2019	+++	+	<ol style="list-style-type: none"> 1. SIVPS GKR 2. MOH 	<ul style="list-style-type: none"> • Involve international experts in communications to develop train-the-trainer training • Deliver the train-the-trainer training for 1 medical and 1 veterinary specialist per each oblast • Train risk communication specialists (4 people from each sector from each oblast (28 total))
9.2 Conduct joint training for medical, veterinary specialists and village health committees	Annually from 2019	+++	++	<ol style="list-style-type: none"> 1. SIVPS GKR 2. MOH 	<ul style="list-style-type: none"> • Develop a training program • Define regions suitable for training • Estimate budget • Find financial support
Objective 10: Increase population awareness on control and prevention of diseases					
10.1 Update school curricula with information on priority zoonoses	2020	+	+++	<ol style="list-style-type: none"> 1. SIVPS GKR 2. Department of Disease Prevention and Epi-surveillance 	<ul style="list-style-type: none"> • Update secondary school curriculum (subject "Principles of personal and social safety") with aspects of prevention of zoonotic diseases • Agree with Ministry of Education • Train teachers
10.2 Create One Health section for zoonoses on websites of two ministries	2020	++	+	<ol style="list-style-type: none"> 1. SIVPS GKR 2. MOH 	<ul style="list-style-type: none"> • Design One Health pages for the websites of MoH and VS; develop the content devoted to One Health and zoonotic diseases • Update the content regularly

Difficulty of implementation: Low +, Moderate ++, Very difficult +++

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

OUTPUT 3: PRIORITIZATION RESULTS

All participants were asked to vote individually via sticking white stickers onto the objective cards to select which five of the identified objectives they considered as of the highest priority. Voting results showed uniformity, with none of the objectives being considered as a low priority, and few objectives showing high scores, highlighting the importance of all of the identified objectives for strengthening the cooperation and communication between two sectors.



WORKSHOP EVALUATION

An evaluation questionnaire was completed by 31 participants (Figure 8) in order to collect feedback on the relevance and utility of the workshop. Overall, the participants valued the workshop as very good and worth for recommendation for other countries. All workshop components such as the content, format, facilitation, and organization gained very high scores.

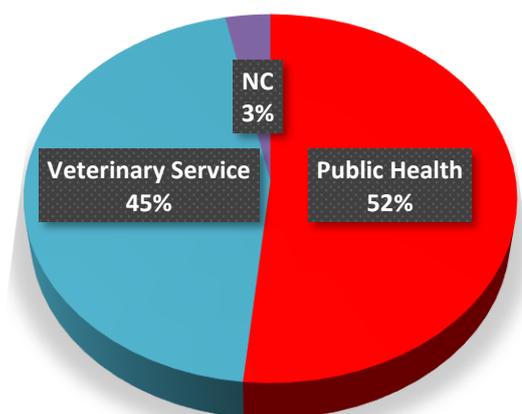


Figure 8: Answers to the question "which sector are you from?" (31 respondents)

Tables 2-4: Results of the evaluation of the event by participants (31 respondents)

Workshop evaluation	'Satisfied' or 'Fully satisfied'	Average score (/4)
Overall assessment	100%	3.8
Content	100%	3.9
Structure / Format	100%	3.9
Facilitators	100%	3.8
Organization (venue, logistics, ...)	100%	3.9

Participants had to choose between 1=Highly unsatisfied – 2=Unsatisfied – 3=Satisfied – 4=Highly satisfied

Average score for each session (/4)						
Session 1	Session 2	Session 3	Session 4	Session 5	Session 6	Session 7
3.7	3.7	3.7	3.7	3.8	3.9	4.0

Would you recommend this workshop to other countries?	
Absolutely	97%
Probably	3%
Likely not	0%
No	0%

ANNEX 1: WORKSHOP AGENDA

DAY 1	
08:30 – 09.00	Registration of participants
09.00 – 10.00	<p>Opening Ceremony</p> <ul style="list-style-type: none"> • Representative of the Ministries - Public Health + Agriculture (20') • Regional Representative of WHO + OIE (20') • Introduction of participants (10') • Group Picture (10') <p>Coffee break (20')</p>
10.00 – 12.00	<p>Session 1: Workshop Objectives and National Perspectives</p> <p>The first session sets the scene by providing background information on the One Health concept and the subsequent tripartite OIE-WHO-FAO collaboration. It is followed by comprehensive presentations from both Ministries on the national public and animal health services. A second documentary provides concrete worldwide examples of fruitful intersectoral collaboration, showing how the two sectors share a lot in terms of approaches, references and strategic views.</p>
	<ul style="list-style-type: none"> • Workshop approach and methodology – PPT (10') • MOVIE 1: Tripartite One Health collaboration and vision (15') • Veterinary Services and One Health – PPT (20') • Public Health Services and One Health – PPT (20') • MOVIE 2: Driving successful interactions - Movie (25')
Lunch (12:00-13:30)	
13.30 – 17.00	<p>Session 2: Navigating the road to One Health</p> <p>Session 2 divides participants into working groups and provides an opportunity to work on the presented concepts. Each group will have central and provincial representatives from both sectors and will focus on a fictitious emergency scenario.</p> <p>Using diagrammatic arrows to represent the progression of the situation, groups will identify joint activities and areas of collaboration and assess their current functionality using one of three color-coded cards (green, orange, red).</p>
	<ul style="list-style-type: none"> • Presentation and organization of the working group exercise – PPT (15') • Case study - Working groups by disease (120') • Restitution (75')
<p>Expected outcomes of Sessions 1 and 2:</p> <ul style="list-style-type: none"> • <i>Understanding the concept of One Health, its history, its frameworks, and its benefits.</i> • <i>Understanding that a lot of areas for discussion and possible improvements do exist and can be operational - not only conceptual.</i> • <i>Level of collaboration between the two sectors for 16 key technical areas is assessed.</i> • <i>Collaboration gaps identified for each disease.</i> 	
17.00 – 18.30	<p>Facilitators and moderators only:</p> <p>Briefing Session 3-4-5 and compilation of results from Session 2</p>

DAY 2	
08:30 – 08:40	Feedback from day 1
08.40 – 11.20	<p><u>Session 3: Bridges along the road to One Health</u></p> <p>Session 3 presents the tools from both sectors (IHR MEF, JEE, PVS) and uses an interactive approach to map activities identified earlier onto a giant IHR-PVS matrix.</p> <p>This process will enable to visualize the main gaps, to distinguish disease-specific vs systemic gaps and to identify which technical areas the following sessions will focus on.</p>
	<ul style="list-style-type: none"> • MOVIE 3: IHR Monitoring and Evaluation Framework (25') • MOVIE 4: PVS Pathway (25') • MOVIE 5: IHR-PVS Bridging (10') • Mapping gaps on the IHR/PVS matrix (50') + Coffee break (20') • Discussion – Plenary (30')
<p>Expected outcomes of Session 3:</p> <ul style="list-style-type: none"> • <i>Understanding what tools are available to explore capacities in each of the sectors.</i> • <i>Understanding the contribution of the veterinary sector to the IHR.</i> • <i>Understanding the bridges between the IHR MEF and the PVS Pathway.</i> • <i>Identification of the technical areas to focus on during the next sessions.</i> 	
11:20 - 12:40	<p><u>Session 4: Crossroads - IHR MEF, JEE and PVS Pathway reports</u></p> <p>Participants will be divided into working groups by technical topic (surveillance, communication, coordination, etc) and will explore the improvement plans already proposed in the respective assessments (IHR annual reporting, JEE, PVS Evaluation, etc.), extract relevant sections and identify what can be synergized or improved jointly.</p>
	<ul style="list-style-type: none"> • Presentation and organization of the working group exercise (20') • Extract main gaps and recommendations from the PVS and IHR reports (including the JEE), in relation to gaps identified on the matrix (60')
Lunch (13:00-14:00)	
14:00 - 14:30	<u>Session 4 (continued)</u>
	<ul style="list-style-type: none"> • Extract main gaps and recommendations from the PVS and IHR reports (including the JEE), in relation to gaps identified on the matrix (continued, 30')
<p>Expected outcomes of Session 4:</p> <ul style="list-style-type: none"> • <i>Good understanding of the assessment reports, their purpose and their structure.</i> • <i>Main gaps and recommendations from existing reports have been extracted.</i> • <i>A common understanding of the effort needed starts to emerge.</i> 	
14:30–17:15	<p><u>Session 5: Road planning</u></p> <p>Participants will use the results obtained from the case studies and from the assessment reports to develop a realistic and achievable road-map to improve the collaboration between the sectors.</p>
	<ul style="list-style-type: none"> • Presentation and organization of the working group exercise (15') • Objectives and Activities (Working groups by technical topic) (150')
<p>Expected outcomes of Session 5:</p> <ul style="list-style-type: none"> • <i>Clear and achievable objectives and activities are identified to improve inter-sectoral collaboration between the two sectors for all technical areas selected.</i> • <i>Timeline, focal points, needed support and indicators have been identified for each activity.</i> • <i>The impact and the difficulty of implementation of proposed activities have been estimated.</i> 	
17.15 – 19.00	<p>Facilitators only: Compilation of results from Session 5 (drafting of the road-map) and preparation of Session 6</p>

DAY 3	
09:00 – 9:10	Feedback from day 2
9:10 - 12:15	<p><u>Session 6: Fine-tuning the roadmap</u> The objective of Session 6 is to have all participants contribute to all technical areas and to consolidate the joint-road map by making sure it is harmonized, concrete and achievable.</p>
	<ul style="list-style-type: none"> • Fine-tuning of the road-map (90') • Coffee break (15') • World Café (90') • Presentation of the prioritization vote (10') • Prioritization vote (during lunchtime)
<p>Expected outcomes of Session 6:</p> <ul style="list-style-type: none"> • <i>Harmonized, concrete and achievable road-map.</i> • <i>Buy-in and ownership of all participants who contributed to all areas of the road-map.</i> • <i>Prioritization of the activities.</i> 	
Lunch (12:15-13:30)	
13:30 - 15:30	<p><u>Session 7: Way forward</u> In the last session, representatives from the key Ministries take over the leadership and facilitation of the workshop to discuss with the participant about the next steps and how the established roadmap will be implemented. Linkages with other mandated plans such as the National Action Plan for Health Security are discussed. This is also where any need from the country can be addressed. This will depend greatly on the current status of the country in terms of IHR-MEF and on the level of One Health capacity.</p>
	<ul style="list-style-type: none"> • Results of the prioritization vote (15') • Integrating the action points into the IHR-MEF process (30') • Next steps (75') (lead by Ministry representatives)
<p>Expected outcomes of Session 7:</p> <ul style="list-style-type: none"> • <i>Linkages with NAPHS.</i> • <i>Identification of immediate and practical next steps.</i> • <i>Identification of opportunities for other components of the IHR-MEF.</i> 	
15:30 - 16:30	<p><u>Closing Session</u></p> <ul style="list-style-type: none"> • Evaluation of the workshop (20') • Closing ceremony (40')
16.30 – 17.00	<p>Facilitators: Video interview of some participants</p>

Note: a 4-minute video explaining the different steps of the process can be viewed at the following link: www.bit.ly/NBWMethod

APPENDIX

ANNEX 2: LIST OF PARTICIPANTS

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE



ORGANISATION MONDIALE DE LA SANTÉ
BUREAU RÉGIONAL DE L'EUROPE

WELTGESUNDHEITSORGANISATION
REGIONALBÜRO FÜR EUROPA

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

IHR-PVS workshop
Evropa hotel
02-04 October, 2018

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Provisional list of participants

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