

Strengthening collaboration between human and animal health sectors for improved health security

Module 1: National Bridging Workshops: A tool to operationalize the collaboration between human and animal health while advancing sector-specific goals in countries (Part 1)

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Hello dear colleagues, my name is Guillaume Belot, I am a veterinary epidemiologist working in the Human-Animal Interface team at the World Health Organization. Stéphane gave us a first introduction to this session and now I'd like to take you through the next steps of our road, and in those steps we will see how we support countries in assessing their collaboration for different diseases, and then how we help them bridge the PVS and the IHR in a synergistic manner. To do this, we have the IHR-PVS national bridging workshops.

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And this is what the first module of this session will be about. Since the NBW (national bridging workshop), as we call it, was developed jointly by WHO and OIE, I will be sharing this pleasure with Dr Maud Carron from the OIE.

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On the menu for this module I will first have a brief presentation on what are the IHR and PVS and how we bridge them. We will then introduce the bridging workshop, we will also have a short video with some country feedback, and finally we will discuss our results and our plans for the next steps.

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So, let's begin. And to understand how a national bridging workshop works, it is essential of course to know a bit more about the IHR and the PVS themselves. So, we will begin with a quick recap on the IHR and then Dr Maud Carron from OIE will do the same in regards to the PVS.

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So, what is the IHR? IHR stands for International Health Regulations. Those regulations were democratically adopted by all member states of WHO and basically, they provide a legal basis and

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they commit countries to follow the same rules in order to secure global health. They also specify the roles and the responsibilities as well as the core capacities for both member states and WHO.

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The key objective of the IHR, as specified in its second article, is to prevent, protect against, control, and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoids unnecessary interference with international traffic and trade.

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In addition, it also states that each state party shall develop strengthen and maintain the capacity to detect, assess, notify, and report events as well as the capacity to respond promptly and effectively. So, it binds countries to develop and maintain these core capacities.

Now, in order to support countries in assessing and planning improvement for these core capacities WHO developed two assessment tools, the State Party Annual Reporting or SPAR and the Joint External Evaluation or JEE. So, we'll have a quick look into these two.

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Let's start with the SPAR, and before going further we must note that according to the IHR it is mandatory for all member states to report on their capacities on a yearly basis and the simplest way to do this is through this SPAR. So it is to be conducted as a self-assessment, it has an online application with a questionnaire and it is usually filled by the IHR national focal points in discussion of course with other relevant stakeholders.

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The assessment focuses on 13 core capacities, that you can see here such as food safety, laboratory surveillance, etc and for each of these core capacities there are several indicators.

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The JEE, on the other hand, works very differently. It is conducted in two distinct phases. First, the country conducts a self-assessment using the JEE tool, and secondly a team of 10 to 12 external experts is sent to the country for a week to discuss with national stakeholders and to review

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together the capacities of the country. It is based on a voluntary basis so if a country wishes to conduct a JEE they must make a specific request to WHO.

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In a similar fashion, as we have seen for the SPAR, the JEE looks at 19 technical areas, which you can see here, and we can note as one health people that in many of those, there is a strong role played by other sectors and particularly the veterinary services. For example, in the technical area for AMR for zoonotic disease, for food safety, or even for laboratory surveillance, etc.

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Here, again, each technical area contains a few indicators. Those indicators are to be scored on a scale of one to five based on the level of capacity. And the final report of the JEE is then compiled, it is made public on the WHO website. So, that concludes the very short recap I wanted to make on IHR, SPAR, and JEE and I now have the pleasure to give the floor to my colleague Dr Maud Carron to tell us a bit about the PBS.

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Good morning everyone. My name is Maud Carron, I am also a veterinary epidemiologist working for the World Organisation for Animal Health or OIE specifically on capacity building activities for veterinary services in relation to one health and I will talk to you about the PVS Pathway.

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So, first of all, the OIE. Who are we? We are the intergovernmental and organization responsible for the improvement of animal health worldwide. So, we're recognized by the WTO, World Trade Organization, as the standard-setting organization for the international trade in animals and animal products. The standards are compiled in the terrestrial and aquatic animal health codes, and they support the improvement of animal health, welfare, veterinary public health, as well as the strengthening of veterinary services.

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So, what is the OIE performance of veterinary services or PVS pathway? It's a more than 10-year-old program which offers a comprehensive multi-stage and cyclical process for the sustainable and

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planning and improvement of many services activities. As you can see it comprises four stages, orientation, evaluation, planning, and different targeted support each stage offers different missions or workshops, capacity building activities to our member countries.

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We will focus on the PVS evaluation, which is the core of the foundation mission, and is the more similar to the JEE of the WHO. So, what are PVS evaluations? They are in-country missions, very field-based, performed by OIE external experts. They're based on the OIE PVS tool, which is a robust methodology based on the systematic review of 45 critical competencies, and worth noting those missions and those assessments go over the strength, the weaknesses, the gaps of the veterinary services capacities, offers recommendation and in doing so they cover the whole veterinary domain. So, a broad range of stakeholders from public or private sectors are interviewed and the veterinary services in their broad sense, in relation to other ministries and topics relevant to one health are being considered. This gives you a snapshot of the different critical competencies of the tool, multiple of them being relevant to one health such as AMR, AMU, disease control surveillance, external coordination with other authorities.

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And this is an example of a critical competency. Each critical competency uses a one to five scoring system, in addition to detailed qualitative findings and this one is on external coordination with ministries of health, environment all relevant stakeholders that the binary services are involved with.

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Finally, this is a summary table showing the differences and similarities between the three tools we mentioned: the SPAR, the JEE and the PVS evaluation. You can see that the first one is a mandatory mission, versus JEE and PVS are voluntary missions. JEE uses a self-assessment whereas PVS evaluation is more field-based. All the different tools show a great engagement from our member countries.

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Now, with WHO we created a large matrix showing the synergies between the two frameworks, so, the IHR and the PVS frameworks. In particular, on the top row, you can see the different PVS pathway critical competencies. On the left column you can see the different technical areas of the JEE. And within the matrix in green are highlighted the many similarities and convergence between the two frameworks. For example, the capacity of member countries in terms of epidemiological surveillance and detection, including for zoonotic diseases. This way, using the green squares you can get a quick overview of the many convergence between the two frameworks, and I will see in the next part of the presentation how bridging those two frameworks can help bringing the two sectors animal health public health together and this is the basis for IHR-PVS national bridging workshops. Thank you.

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So, now that we have discussed the IHR and the previous frameworks let's discuss about national bridging workshops or NBW.

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The IHR-PVS national bridging workshops. So, what are they? They are three days event held at national level, so, each country has its own national bridging workshop. The objective is to create an event that brings together human and animal health actors and to improve the way they work together. The aim is to make this event as interactive and as participatory as possible.

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First of all, one key aspect of the bridging workshop is the distribution of participants, so not only do we want half of the participants to come from the human health side and then the other half from the animal health side but it's also great if we can involve other sectors such as environment, military, enforcement services. We also try to have representation from the different levels, national staff, provincial-level participants, local level participants, and it's quite a significant number of people, up to 90 participants.

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So, the process. The bridging workshops are held over seven sessions, we'll go briefly over each session. Session one sets the scenes with videos on the Tripartite side, OIE, FAO, WHO, and one health, as well as a presentation for both sectors.

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And the second session is particularly interesting. It divides the participants into four to five working group, targeting a specific zoonotic disease and outbreak scenario. For an age group, participants are given a deck of technical cards, 15 technical cards, such as civilians, laboratory, field investigations, which are the technical fields in which we believe collaboration is important between the two sectors. Using the fictitious outbreak scenario and the technical cards, participants rate the level of collaboration, the actual level of collaboration between both sectors with respect to this technical area.

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So, for example, if participants believe the level of coordination between the two sectors a high level is weak, they will give a red card to this particular technical area if they believe communication with other state with stakeholders, coordination and messaging is good they will give a green card. Yellow card suggests some level of coordination but not optimal. It's a great exercise because it gets participants from both sectors to talk to one another and give a quick snapshot of areas of weaknesses and strength in terms of collaboration.

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Session three. Session three is where we start to bridge and present the IHR and PVS and SPAR tools using videos. It's also where we're bringing the big matrix, we talked about previously which is the mascot of the national bridging workshop. Participants can present the findings of the previous exercises on the big matrix and it gives a diagnosis or a snapshot of overview of the key weaknesses in collaboration.

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Following session, session four, the groups go from a disease, disease-based working groups on technical area based working groups. They reconvene and they work on extracting the relevant

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information from the SPAR, the JEE, the PVS and any other relevant assessment in terms of key gaps and recommendations relevant to their technical area where whether it's communication, surveillance, laboratory or other technical area.

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In session five, brainstorming is initiated to develop a joint roadmap, so each technical working group will identify up to 12 joint activities to improve collaboration in these technical areas.

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Section six is fine-tuning of the roadmap. So, to give you a better understanding, each activity is detailed on an activity card. The purpose here is to get as operational as possible, and therefore the activity card will list who's responsible for implementing the activity, the process for implementation, overall the difficulty of implementation, and then in order to get buy-in and allow contribution from all the different groups a World Café is used so that all the activities are reviewed and contributed to by the wider group. And finally, there's a prioritization vote on which activities of the roadmap are the most important. So, with this session, we finalized the joint roadmap for improved collaboration, which is a key output of the national bridging workshop.

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Session seven is the way forward, so this is entirely led by national stakeholders. They can use a session as best they prefer usually it is a good opportunity to identify next steps, responsibilities, it is also a good opportunity to reflect on how to anchor or how to link this roadmap to existing strategic plans, whether it is a one health strategic plan, a national action plan for health security, or other relevant plans.

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And all this event, the national bridging workshop, uses a specific material kit which is pre-prepared with activity cards, head cards, handbooks, manuals, and very participatory materials.

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So, to review the key outputs of the bridging workshop, the first one is this diagnosis of strengths and weaknesses across 15 areas of technical areas for some key zoonotic diseases.

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And the second key output for national bridging workshops is, of course, the joint roadmap for the two sectors to improve their collaboration.

Here, you have an extract of the roadmap produced during the national bridging workshop of Armenia, you can see the level of details of the activities listed, their timelines, and specifically the implementation process. So, this is it, this is in a nutshell a national bridging workshop and because a picture is worth a thousand words we will show you a short video of a national bridging workshop, which took place in Bhutan. Thank you.

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I've been very fortunate as an officer of the department of livestock. I've attended many many workshops and today's workshop methodology, personally, I was very very impressed. This is something a very unique approach which is very clear from where we transcend from one step to the other. I think we have achieved each of the steps. This is very unique, personally, I in a personal view i think this is one of the best workshops that I've always attended and one of the best moderators that I've seen. Now, yes, workshops are important, meetings are important, discussions are important but as we see the meeting going inside, we are coming up with solutions, we are coming up with gaps addressing recommendations, activities, and activities solutions which is pragmatic. Personally, I'm very glad. Our colleagues, staff are working very hard and I'm positive that we will come with something practical, something which can happen. Thank you.

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Hello everyone and greetings from Bhutan, I am Siddharth working as a director for the strategic planning and international relations in the Medical University of Bhutan. I also work as an assistant professor for epidemiology.

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What I would like to emphasize here is that this NBW is the first time that has brought a large group of policy makers and professionals from the key one health sectors and then working together clearly understanding wonderful concepts, understanding the technical core areas and then identifying gaps, strengths, and gaps for the one health collaboration in Bhutan.

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So, the key sectors in Bhutan include Minister of Health Department of Livestock, Bhutan Agriculture and Food Regulatory Authority, which looks after the biosecurity and food safety, professionals from wildlife, environment, drug regulatory authority, and academic institutions. So, professionals included not only from the central national level but also sub-national right from the ground field-level professionals.

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Now, how did how this national bridging workshop impacted the collaboration in Bhutan? For the first time, although we have taken one health approach and initiated a lot of activities and also develop one healthy strategic plan, but this national bridging workshop has enabled us to systematically understand the commonalities and intersection in the key technical areas for the collaboration among the human health, animal health, and food safety, identify strengths and gaps in one health collaboration, develop joint roadmap and action plans which I will highlight in the next slide and most importantly it enabled to create awareness and advocacy on one health, particularly to the field professionals from the key one health sectors.

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Firstly, based on this national bridging workshop we have revisited reviewed our existing national strategic framework and we have incorporated many activities that we have missed out and based on this methodologically developed technical core areas, and now we have a very comprehensive one health strategic plan. Secondly, as a part of recommendation, we are now regularly organizing by ENL, national one health conference, and we have in 2019 we have organized fourth national one health conference. One of the key recommendation is also to institutionalize and operationalize the one health governance and we have now established inter-minister committee for one health and we have recently organized the second IMCOH meeting. In addition, we have also established Bhutan one health permanent secretary office which we are going to inaugurate on the third November. We have also established the national one health technical committee and national AMR technical committee and in addition we are also in the process of establishing district one health committee, so that one health activities not only are implemented at central level but it is implemented at the field level also. As a part of the national bridging workshop, we have developed a curriculum for field epidemiology training program and so far we have conducted three cohorts of training in addition, we have also now developed a number of strategic plans and guidelines, SOP's.

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One of the key examples is the current preparedness and response plan that we have implemented in Bhutan through taking one health approach we have established, the technical advisory group, to the minister of health composing of epidemiologists and public health specialists from the minister of health, as well as epidemiologists and laboratory experts from the animal health sector and food safety authority.

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Now, a bit of advice learning from the Bhutan's experience and for those countries considering the national bridging workshop, as we have seen from the COVID experience, we cannot overemphasize the importance of the one health, such a large-scale disaster nature of COVID-19 pandemics, so one health approach is very important tool for preventing and mitigating any such future pandemics. National bridging workshop enables country to understand one health concept clearly and systematically identify strengths and weaknesses in one health collaboration. The WHO and OIE have developed a very excellent guide and methodology of national bridging workshop, which is well designed, very practical, and systematic, multi-sectoral approach, learner-centered, and outcome-oriented. I must say that this is a must-do workshop for any country adopting one health approach. This from my own experience of having participated and also having conducted the national bridging workshop in Bhutan, Ethiopia and Myanmar. This has been well received and from this session on the national bridging workshop I see that you all must have understood how important this bridging workshop is and also how important one health approach is, particularly to mitigate any such future pandemics. Thank you very much.