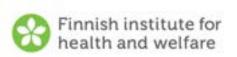




**SHARP Joint Action:** 

To strengthen preparedness in the EU against serious cross-border threats to health and support the implementation of IHR

"How SHARP are your health security arrangements against cross-border health threats?" Workshop – May 5, 2023





### **SHARP** Joint Action (JA)



- Strengthened International HeAlth Regulations and Preparedness in the EU

#### Aims of the JA:

- To strengthen implementation of Decision 1082/2013/EU on serious cross-border threats to health and
- To support the EU level preparedness and responses to health threats and the implementation of the International Health Regulations (2005)
- Strengthened ability to prevent, detect and respond to biological outbreaks, chemical contamination and environmental and unknown threats to human health (SHARP partners, MS and the EU)





30 participating countries, covering ca 95 % of the EU population

countries

countries

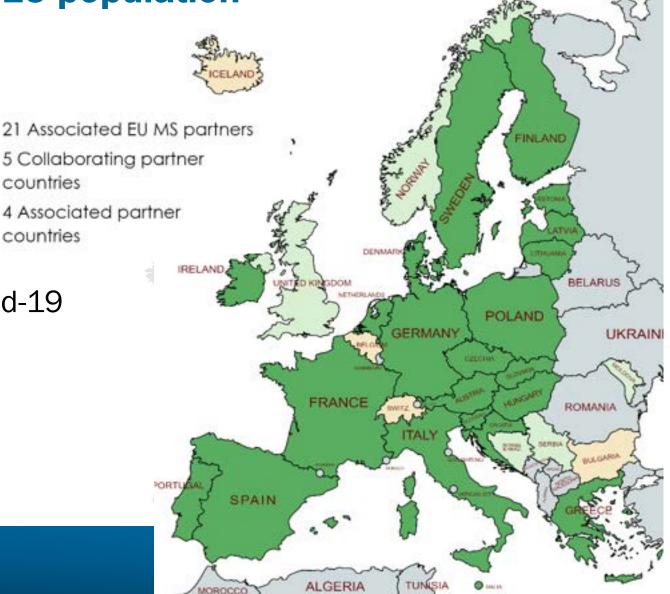
Co-funded by the Health Programme of the European Union

- 26 associated partners
- 35 affiliated entities
- 10 collaborating partners

#### 3-year Joint Action

April 2019 - March 2022

- + 1,5 y non-cost extension due to covid-19
- -> ad Sept 2023







## IHR public health core capacities (and other Joint Actions)



#### **PREVENT**

National legislation, policy and financing

IHR coordination, communication and advocacy

Zoonotic disease

Food safety

Biosafety and biosecurity → JA TERROR

Immunization 

JA Vaccination

#### **RESPOND**

Emergency preparedness

Emergency response operations

Linking public health and security authorities

Medical countermeasures and personnel deployment

Risk communication

#### DETECT

National laboratory system

Surveillance

Reporting

Human resources

#### **IHR RELATED HAZARDS AND POINTS OF ENTRY**

Points of entry — JA Healthy Gateways

Chemical events

Radiation emergencies —— Not applicable





WP	WP title	Lead	Co-lead
WP1	Coordination	THL, Finland	RKI, Germany and INMI, Italy
WP2	Communication and dissemination	Public Health Wales, UK	THL, Finland
WP3	Evaluation of the action	NPHO/EODY, Greece	-
WP4	Integration in national policies and sustainability	MOH-FR, France	RIVM, The Netherlands
WP5	IHR core capacity strengthening and assessment 🗙	FOHM, Sweden	HD, Norway
WP6	Preparedness and Response planning	RIVM, The Netherlands	ISCIII, Spain
WP7	Laboratory preparedness and responsiveness	RKI, Germany	INMI, Italy
WP8	Training and local exercises, exchange of working $\uparrow$ practices	IPHS, Serbia	RKI, Germany
WP9	Chemical safety and chemical threats	UKHSA, UK	NIJZ, Slovenia
WVP III	Case management and infection prevention and control preparedness	INMI, Italy	-



Foreign affairs – HEALTH DIPLOMACY AND HEALTH COOPERATION Sustainable Development Goals



Foodstuffs Animal disease Core Public Health
Capacities of IHR &
Health Security

	ERAGE		Health Security  Treatment and isolation		Export control	Trade
UNIVERSAL HEALTH COVE					First responders	Rescue services
					Bio-	
Primary Healthcare	Esser	Essential Public Health Functions	CD control	nooses	weapon	Defense
	Healt				Quaran- tine	Border control, transport
			Environmental Health	Zool	Criminal action	Police
			Environmental protection			



Work Package 5:

To improve core capacity in EU Member States as required by IHR and Decision 1082/2013 EU

Ingebjørg Skrindo/Norwegian Directory of Health/WP 5.2





### SHARP WP 5

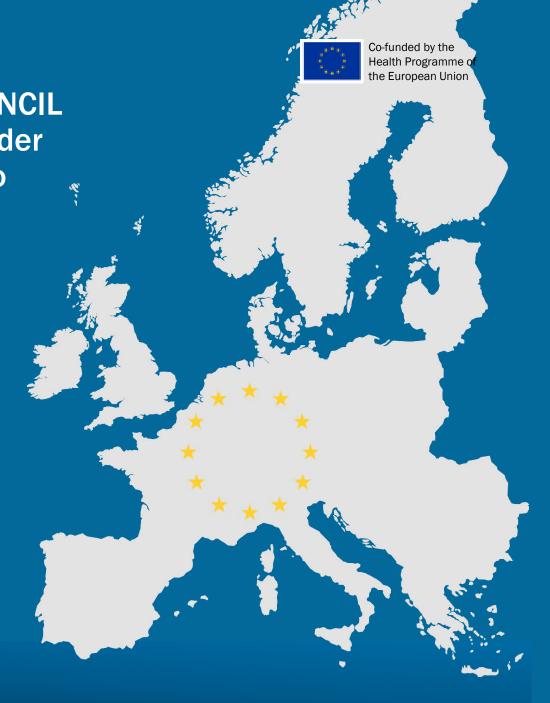


- Objective: Support countries in building capacity required to fulfill the requirements of IHR and EU Decision 1082
- Achieved primarily by way of:
  - Task 5.1 Workshops aimed to support IHR implementation for focus countries that have undergone a Joint External Evaluation or not
  - Task 5.2 Workshop on international collaboration between authorities during crisis:
    - Strengthen preparedness and the implementation of IHR and the new EU regulations
    - Improving cross-sectoral (medical and civil protection) preparedness and response capacity in Member States
    - Strengthening information exchange, cross-sectoral response and mechanisms for rapid mobilization of health personnel and medical countermeasures across borders
  - Task 5.3 Feasibility Study on After-Action Reviews and SimEx



REGULATION (EU) 2022/2371 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 23 November 2022 on serious cross-border threats to health and repealing Decision No 1082/2013/EU

"The national prevention, preparedness and response plans of Member States sharing a border with at least one other Member State should therefore include plans to improve the preparedness for, prevention of and response to health crises in border areas in neighbouring regions, including through cross-border training for healthcare staff and coordination exercises for the medical transfer of patients."







# WP 5.2 Conclusion



- We propose an agreement of intention for cross-border collaboration between authorities in neighboring countries to assist each other in the event of largescale emergencies
- The main obstacles need to be defined and solved
- The agreement should be further developed and maintained by a co-operative body





Supporting European Union Member States and Joint Action partner countries in developing operational inter-sectoral preparedness and response plans for serious cross-border health threats with an integrated all hazards approach

Sandra Kamga

Dutch National Institute for Public Health and the Environment Work package 6: Preparedness and Response planning



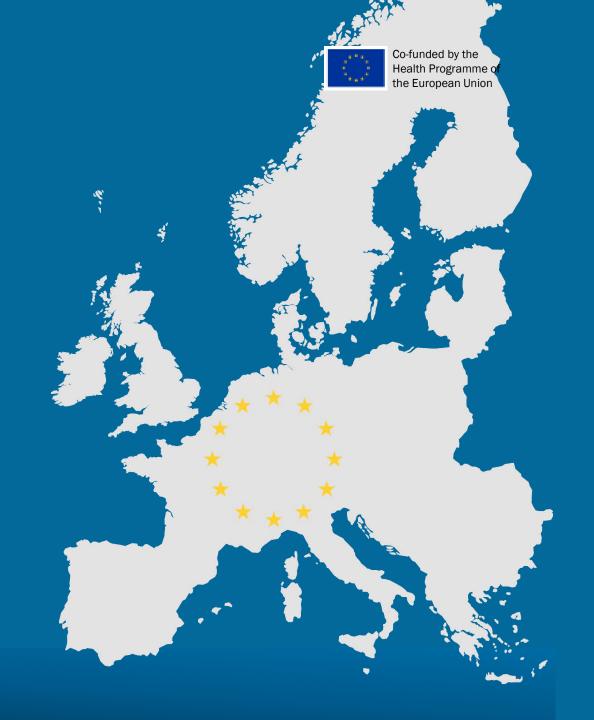


Identifying the sectors involved in European public health emergency preparedness and response: A systematic review

An exploration of the European SARS-CoV-2 testing landscape: *A mix-ed method study* 

Which sectors should be involved in public health emergency preparedness, response and recovery: A RAND modified consensus procedure

The citizen's role during PHEPR: A multi-country focus group study



The European citizen's perception of its role in the COVID-19 preparedness, response and recovery?

A multi-country focus group study



The relationship The citizen as an The citizen's between the citizen perceived role information receiver and decision-makers



The citizen as an information receiver

The relationship between the citizen and decision-makers

### The citizen's perceived role

- Difficulties thinking about how to prepare for, or recover, from a PHE
- Social responsibility to adhere to measures, avoid infecting others, being proactive and working hard
- Creating a sense of solidarity
- Boosting the economy during recovery



What do you think should be think should be the citizen's role?







# WP 8: Training and local exercises, exchange of working practices



INSTITUTE OF PUBLIC HEALTH OF SERBIA "Dr Milan Jovanovic Batut"



Milena Vasic, IPHS





#### Specific objective

Strengthening IHR implementation for serious cross-border health threats in the JA partner countries through cross-sectoral basic and advanced trainings.

#### **Tasks**

- ✓ Assessment of the cross-sectoral training needs in JA partner countries related to preparedness and IHR implementation
- ✓ Development of curricula for basic and advanced face-to-face and on-line training
- ✓ Training implementation
- ✓ Secondments, study tours or internships to supranational organizations or other countries





MS27 Basic and advanced trainings conducted (two basic and three advanced workshops plus several laboratory workshops organised)

- 4 IHR (2005) Basic Online Trainings
- 2 chemical workshops WP9
- 2 table-top exercises
- 2 IAR/AAR workshops
- Introduction to Simulation Exercises
- Laboratory workshops WP7
- Public Health Disaster Recovery Planning
- Outbreak Investigation/Public Health Surveillance





15» EPH Conference

Strengthening health systems: improving population health and being prepared for the unexpected



Berlin, Germany

9 - 12 November 2022





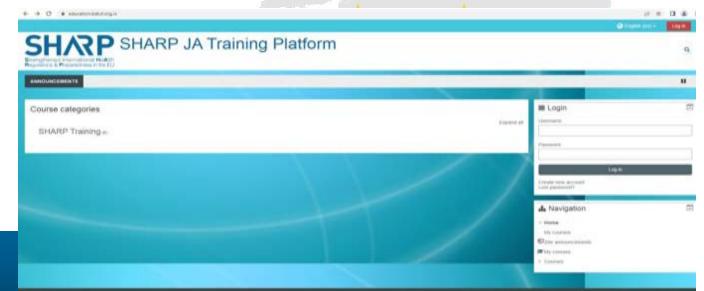






Sustainability: https://education.batut.org.rs/

Co-funded by the Health Programme of the European Union





WP 10: Case Management and Infection prevention and Control Preparedness









### WP 10: Case Management and Infection prevention and Control Preparedness

#### OBJECTIVE

- To improve the hospital preparedness on clinical and biorisk management to possible trans-border health threats.
- To improve the timely and appropriate clinical management using a standardize clinical approach to HCID.
- Evaluation of feasibility of new tools for supporting the timely clinical management of HCID.







#### **OUTCOMES**

Assessment of existing facilities and related recommendation.

 Report on feasibility study for an expert clinical support service for high-consequence infectious diseases.

 Syndrome based clinical protocol piloted in 4 EU countries.







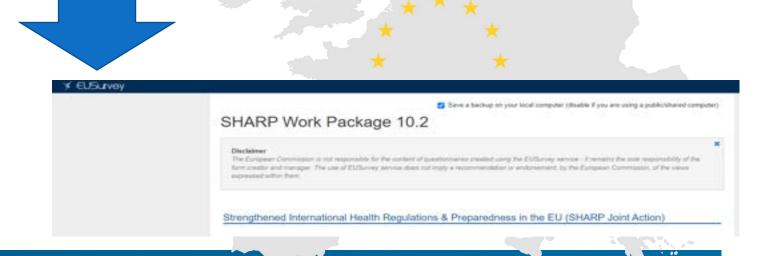


### Mapping of existing facilities and Assessment of country hospital preparedness and capacity for HCID, including high isolation clinical centers

#### **ACTIVITIES**

- Mapping of facilities through a online survey
- Different tools is being used to assess the facilities, these include the use of classical self-administered questionnaire.

Contribute to the harmonization and networking of management of HCID patients through an updated map of clinical centres and the development of a self-assessment tool for the facilities









### Application of a "syndrome based" approach for clinical management of imported emerging diseases threats

- to promote an early clinical identification of HIDs, autochthonous or imported abroad from European cross border countries or from tropical countries. The implementation will be carried out through different phases:
  - identification of the list of diseases.
  - case definition of each epidemic prone disease with acceptable ratio between sensitivity and specificity;
  - systematic identifications of major disease drivers of, and threats associated with the occurrence of the diseases;



Development of a framework protocol for a syndrome based approach at EMERGENCY DEPARTMENT patient management to be used as a tool for implementation of the approach at EU Level

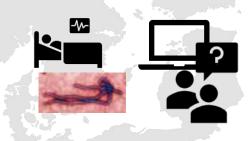






# High consequence infectious diseases in Europe – the need for an expert clinical support service

- Since the 2013-2016 outbreak of Ebola virus disease in West Africa, other outbreaks of high consequence infectious diseases (HCIDs) have also demonstrated the utility of clinical consultations and information sharing among international experts involved in the care of these patients.
- Work package (WP) 10 task 3 constitutes a feasibility study for an expert clinical support service for HCIDs, including an expert consultation platform for case management and infection prevention and control.
- Based on published literature, information from legal experts, and a joint workshop with WP 5 (International collaboration between authorities during crises,) we identified some technical, financial and legal challenges related to different interpretation of GDPR among EU and EEA member states.
- Legal challenges may be resolved by further development of European Health Union legislation, and the implementation of the European Health Data Space.





Conclusion: There is a need for a formal network of European clinicians with expertise in HCIDs, a need for a digital platform meeting defined technical and legal criteria, and a need for long-term funding. One solution could be to establish a new European Reference Network (ERN) for HCIDs.



How project's progress monitoring by evaluation methodology and procedures can continuously improve the effectiveness and efficiency of collaborative joint action

WP3 – Evaluation of the action Eleonora Hadjipaschali National Public Health Organization, Greece





### SHARP EVALUATION







- Evaluation plan/strategy
- Methods
- Tools
- Monitoring
- Outcomes
- Tasks
- Procedures
- Questionnaires





Internal Evaluation

To perform a systematic and objective assessment of the relevance, efficiency, effectiveness, impact, as well as sustainability of the project in the context of its objectives

On going through the project

External **Evaluation** 

Ensure the objectiveness in the evaluation process

Two cycles M1-24, M48-54

- Midterm Report: Assessment of progress and completion, challenges, recommendations, proposals
- Deployment of pre and post evaluation surveys according to Evaluation Plan extracting quantitative and qualitative data for WPs activities.
  In-depth interviews with all WP leaders and key stakeholders, to provide proposals
- supporting the sustainability plan of the JA
- Final Evaluation Report: Evaluation of Impact in accordance with Outcome/impact indicators specified in WPs specific objective



### Co-funded by the Health Programme of the European Union

### **Challenges - Findings**



- The COVID-19 pandemic had an inevitable impact in the JA as a whole
- Challenges in IHR 2005 and European Directive 1082/2013 implementation
- Changes in workshops, tasks, outcomes and materials content was required due to different priorities
- Limited staff availability as people involved in SHARP JA is also heavily involved in their national health response teams (IHR/Public Health trained professionals)
  - Excellent networking opportunities and practise exchange
  - Need to implement material and knowledge gained in National level
  - Need support on technical/scientific level
  - More usage of website, social media as a mean of communication and source of information
- It is also evident that actions and events have resumed successfully in the time following Covid-19 active period, indicating coherence, productive management, and good collaboration amongst partners



Eleonora Hadjipaschali Leader WP3

e.chatzipaschali@eody.gov.gr

- https://www.eody.gov.gr
- https://www.sharpja.eu



Twitter @sharpja\_eu



https://www.facebook.com/SHARPJointAction



https://www.linkedin.com/company/sharp-joint-action/





Understanding of the health policy landscape to meet the challenges of achieving effective visibility, awareness and impact amongst multiple stakeholders

Work package 2: Communication and Dissemination
Giri Shankar, Leah Morantz, Karen Dancey
Public Health Wales





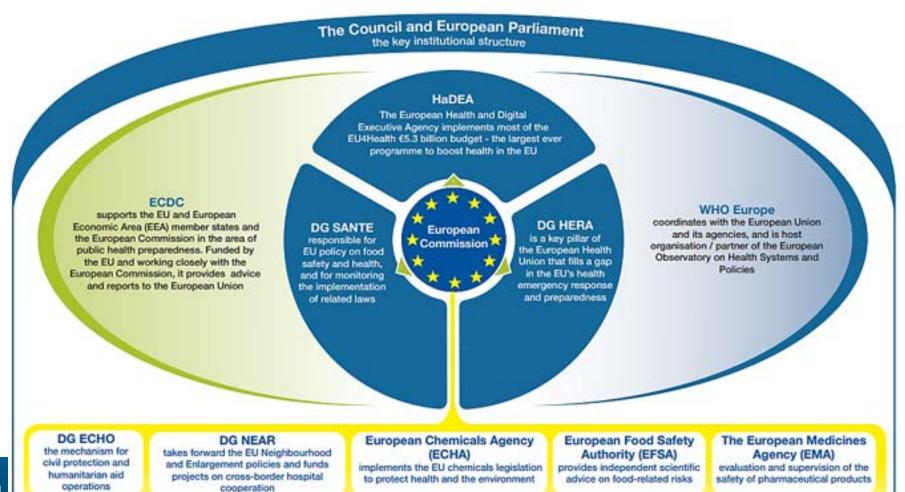






#### European-level health policy and infrastructure

EU countries hold primary responsibility for organising and delivering health services and medical care. EU health policy therefore serves to complement national policies, to ensure health protection in all EU policies and to work towards a stronger Health Union.



#### What we've done to strengthen communications effectiveness

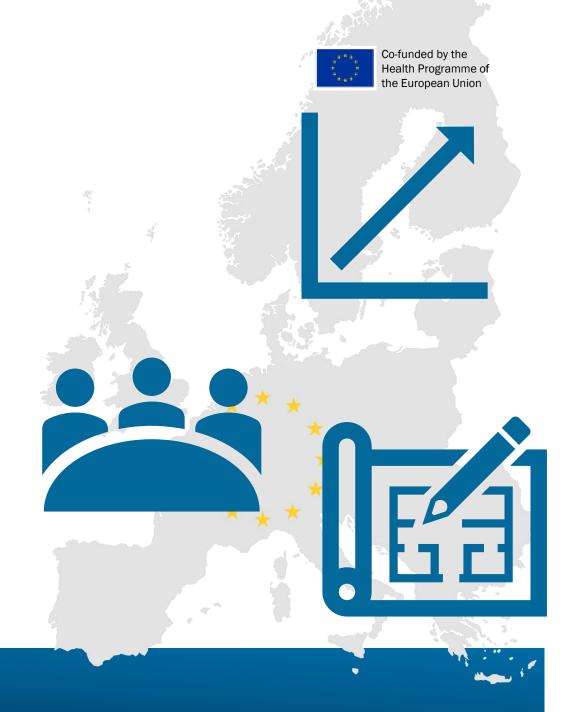
#### Strategy focusing on:

- Website content SEO and a subscribe/comment function to engage organic traffic
- A campaign approach to promote each deliverable to its relevant audience using digital channels - news posts; direct email; social posts;
  - HPP Agora network posts potentially reaching >9000 participants
- Creating a list of 100+ external organisations with potential interest in SHARP
- Optimised social media by following all key organisations at
  - Global/regional policy level
  - National policy and coordination level
  - Operational level subscribing to their newsletters to remain informed
- Social-media listening and Google Alerts to monitor for external opportunities to raise awareness of SHARP Joint Action
- Facilitating journal publications



# SHAP a proactive, strategic communications approach

- In 2022 SHARP presented at 5 external organisation events
- Newsletter subscribers grew by 133% engaging with other sectors
- Website New Users rose Apr 1, 2022–Mar 31, 2023 to 1,337, with 83% of users returning
- Recruitment to SHARP workshops, trainings, etc., exceeded targets, attracting participants from a range of sectors/external organisations
- Journal publications achieved exceptional engagement
- A blueprint for effective programme communications for future Joint Actions will be published later in the year, detailing these best practices.
- Subscribe to SHARP JA newsletter

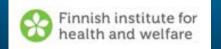






#### **Finally, short introductions to:**

- Laboratory preparedness and responsiveness (WP7)
- Chemical safety and chemical threats (WP9)
- Integration in national policies and sustainability (WP4)
- -> How to sustain the work and outcomes of SHARP Joint Action?





#### WP7 - Laboratory preparedness and responsiveness

Lead: RKI, Germany; Co-lead: INMI, Italy

#### 7.1 External Quality Assurance Exercises (EQAE)

- Three EQAEs conducted (2020, 2021, 2022)
- WP7 partner meetings (Dec 2020, Nov 2021, Sept 2022)

#### 7.2 Diagnostic approaches

- Assessment of diagnostic capabilities performed
- Continuous SARS-CoV-2 whole-genome sequencing, Working Groups on Next Generation Sequencing (NGS), Basic diagnostics and Antimicrobial Susceptibility Testing (AST)
- Training in laboratories booklet updated at the internal website
- Workshop AST of highly pathogenic bacteria, Workshop on Detection of pathogens of risk group 4 without BSL-4 laboratory facilities. Technical meeting on NGS (May 2023)

#### 7.3 Laboratory biorisk management

Development of a tool with recommendations for enhancing laboratory biorisk management







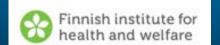
#### WP9 - Chemical safety and chemical threats

Lead: UKHSA, UK; Co-lead: NIJZ, Slovenia

- 9.1 Fact-finding report (Gap analysis, based on questionnaire results)
  - D9.1 Fact-finding report (PDF 1,000 KB)
- Report on desirability and feasibility of an EU chemical network
- Designed and developed training materials
- Delivered 2 advanced workshops on chemical health threats (2022).
- Produced training report

Reports: SOPs, Mechanisms for Cross-border chemical health threat preparedness









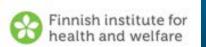
#### WP4: Integration in national policies and sustainability

Lead: MoH-France; Co-lead: RIVM

#### Some preliminary findings

- AAR and simulation exercises should be conducted routinely to evaluate and to keep response mechanisms updated
- Exercises should be reported, and recommendations included into state of preparedness -reports
- EU-level SimEx and AAR require follow-up systems in place
- Preparedness plans should include recommendations on involving of different sectors in different phases of the response
- It is important to maintain EMERGE laboratory network (highly dangerous and emerging pathogens) to ensure flexible collaboration during crisis
- Continuous training is needed in implementation of IHR, preparedness and response
- European chemical laboratory response network is needed to be prepared for chemical incidents









### Other priority outcomes (1/2)

- Possible recommendations from the reports:
  - Improving IHR implementation, added value of external evaluation processes and facilitating strengthening of selected core capacities in the EU and neighbouring countries (WP5)
  - On the use of exercises and AAR as part of monitoring for IHR core capacities (WP5)
- Recommendations based on the study of the:
  - COVID-19 decision-making process concerning testing strategies (WP6)
  - Lessons learned on multisectoral collaboration during the COVID-19 pandemic (WP6)
  - Best practices based on experiences with e-learning and tabletop exercises (WP6)







### Other priority outcomes (2/2)

#### Laboratory

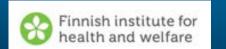
 Possible recommendations from report on assessment of modern molecular diagnostic methods, including AST (WP7)

#### Training

- Procedure to assess the cross-sectoral training needs across countries (WP8)
- Experiences with training provided in WP8, including the training packages and on-line platform (WP8)
- Recommended curricula developed for basic and advanced face-to-face and on-line training (WP8)

#### Chemical safety and threats

- Recommendations on chemical events surveillance in relation to Public Health preparedness (WP9)
- Lessons learned from previous events, including workshop materials and chemical incident exercise scenarios (WP9)
- Developed SOPs, based on findings from the workshops and the best practices, gaps and bottlenecks identified previously (WP9)







### https://sharpja.eu/

Co-funded by the Health Programme of the European Union

Home

About us V

Work packages >

<u>Deliverables</u> News

Events

Contact us V

SHARP JA newsletter

Front page / Deliverables

Päivitett

#### **Deliverables**

Here you will find externally available deliverables from SHARP Joint Action.

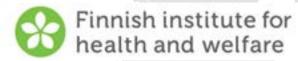
- D2.1 Leaflet a four page overview of the SHARP Joint Action (PDF 324 KB)
- D3.4 Midterm external evaluation report (PDF 638 KB)
- D5.4 Review of EU-level Simulation Exercises and After Action Reviews (PDF 1.32 MB)
- D6.1 Multisectoral collaboration during public health emergencies: an integrative review (PDF 1,023 KB)
- D8.1 Report on training needs (PDF 2,000 KB)
- D9.1 Fact-finding report (PDF 1,000 KB)





### **SHARP JA Final Conference**

in Helsinki, Finland, at 19 - 20 June 2023







# SHARP Thank you!







# f

#### More questions?

- Contact the SHARP coordination team at THL: sharp@thl.fi
- Visit the website: https://sharpja.eu/
- Keep informed: SHARP Joint Action @SHARP\_EU



