The contribution of the EpiSouth Network to strengthening preparedness for cross border health threats in the Mediterranean

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Summary

With 27 participating countries, the EpiSouth Network was the biggest inter-country collaborative effort in the Mediterranean Region. Following the successful implementation of the EpiSouth Project (2006-2010), which focused on communicable diseases, surveillance and training, the network implemented the EpiSouth Plus Project (2010-2014) with a focus on strengthening preparedness to common health threats and bio-security risks. A capacity building process on preparedness to common health threats was set up and an implementation of IHR implementation with a special focus on coordination of surveillance between Points of Entry was promoted.

Background and Aim

Countries around the Mediterranean Sea share epidemiological characteristics and public health problems. In order to share knowledge and develop joint activities, in 2006 a EpiSouth collaborating framework, called the EpiSouth Network, was established.

The EpiSouth Network progressively expanded from including 9 MS to 27 countries of which 10 EU MS and 17 Non-EU MS from South Europe, the Balkans, North Africa and the Middle-East. It was therefore the biggest inter-country collaborative effort in the Mediterranean Region.

In order to increase health security in the Mediterranean Area and Balkans, it is necessary to enhance preparedness, detection and response capacity at national/regional levels to face threats to public health. The framework of the International Health Regulations (IHR) is particularly useful in this effect because it is not only legally binding for all EpiSouth partners but it also declines a set of capacities to be met, detailing a mechanism for information exchange and response coordination under the umbrella of WHO.

Between 2010 and 2014, the network implemented the EpiSouth Plus Project with the aim to increase the health security in the Mediterranean area and South East Europe by enhancing and strengthening preparedness to common health threats and bio-security risks at national and regional levels and in the framework of the WHO-IHR.

Management

In addition to WP1-Coordination (ISS-Italy); WP2-Dissemination (ISS-Italy); WP3- Evaluation (ASTI-Italy), EpiSouth Plus activities were articulated in four WPs: WP4- Establishing a Mediterranean Regional Laboratories Network (IP-France); WP5-Promoting common procedures in Generic Preparedness and Risk Management Plans (ISCIII-Spain); WP6-Enhancing Mediterranean Early Warning Systems (EWS) and cross-border Epidemic Intelligence (InVS-France), and WP7- Facilitating IHR implementation (ISS-Italy). Each country participating in the EpiSouth Network was represented by two national EpiSouth Focal Points (FPs).

Methodology

A preparedness needs assessment and a consensus workshop on IHR implementation identified regional gaps. Training an intersectionality/interoperability of preparedness for health-threats at national/cross-border level was designed, culminating in the “Nautilus” command-post Simulation Exercise (SE). Four national situation-analysis (IENA-Study) were conducted to describe existing Mediterranean models of coordination of surveillance between national health systems (NHS) and points of entry (PoE).

Results

We carried out four trainings involving 90 participants (28 from EU MS and 62 from non-EU MS). The SE involved over 250 people in 20 countries and was successful in testing national core-capacities in emergency preparedness/response and identifying opportunities for improvement. Based on this experience, we designed an Emergency Preparedness Planning (EPREP) Tool.

Italy, Malta, Jordan and Morocco participated in the ENSA-study. We defined four strategic lines for improving surveillance coordination at PoE: invest on a legal framework linking IHR national focal-points with Competent Health Authorities (CHA); ensure the presence of CHA at PoE; elaborate/update relevant protocols processes and procedures; ensure, through training, correct and consistent application of protocols, processes and procedures.

Conclusions

EpiSouth-Plus was unique for its focus on the Mediterranean region as a whole, including non-UE countries and all three WHO Regional Offices that cover the Mediterranean. The described EpiSouth lines of intervention contributed to the reinforcement of health security regionally and in the EU/EEA. The EPREP Tool is being further valorised under 2013 EC decision on “serious cross-border threats to health” and the ENSA study was also used to enrich the contents of a 2014 WHO global guidance.

The EpiSouth Network website

The EpiSouth Plus Project was co-funded by the European Union DG-SANCO/EAHC and EuropeAid together with the participating national partner Institutions. The financial support of the Italian Ministry of Health and ECDC is also acknowledged.

Starting date -duration
October 2010 - 39 months

Leader Organization
The Project is led by the Italian National Institute of Health (ISS) and counselled by an Advisory Board composed by EC, ECDC, WHO and other international experts.

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