Current practice in implementing the IHR provisions related to the convening of an Emergency Committee and the determination of a PHEIC (Articles, 12, 15-18, 48, 49)

> Dr Carmen DOLEA Unit Head, IHR Secretariat, WHE/WHO



Information sharing about public health events – IHR key provisions





PART IX – THE IHR ROSTER OF EXPERTS, THE EMERGENCY COMMITTEE AND THE REVIEW COMMITTEE Chapter II – The Emergency Committee (Art. 48 and 49)

Article 48 - Terms of reference and composition

- 1. The DG shall establish an **Emergency Committee** [(EC)] that **at the request** of the **DG** shall provide its **views** on:
 - (a) whether an event **constitutes a PHEIC**;

(b) the **termination of a PHEIC**; and

(c) the proposed issuance, modification, extension or termination of temporary recommendations.

- 2. The EC shall be composed of **experts selected by the DG** from the IHR Expert Roster and, when appropriate, other expert advisory panels of the Organization. The DG shall determine the **duration of membership** with a view to ensuring its continuity in the consideration of a **specific event and its consequences**. The DG shall select the members of the EC on the basis of the expertise and experience required for any particular session and with due regard to the principles of equitable geographical representation. **At least one member** of the EC should be an expert **nominated by a SP** within whose territory the **event arises**.
- 3. The **DG may**, on his or her own initiative or at the request of the EC, appoint **one or more technical experts** to **advise the EC**.





PART IX – THE IHR ROSTER OF EXPERTS, THE EMERGENCY COMMITTEE AND THE REVIEW COMMITTEE Chapter II – The Emergency Committee (Art. 48 and 49)

Article 49 - Procedure

- 1. The DG shall convene meetings of the EC by selecting a number of experts [...] according to the fields of expertise and experience most relevant to the specific event [...] "meetings" of the EC may include teleconferences, videoconferences or electronic communications.
- 2. The **DG shall provide** the **EC** with the **agenda** and any relevant **information** concerning the event, including information provided by the SPs, as well as any **temporary recommendation** that the **DG proposes** for issuance.
- 3. The EC shall elect its Chairperson and prepare following each meeting a brief summary report of its proceedings and deliberations, including any advice on recommendations.
- 4. The **DG shall invite the SP** in whose territory the **event arises** to present its views to the EC. To that effect, the DG shall notify to it the dates and the agenda of the meeting of the EC with as much advance notice as necessary. The **SP concerned**, however, may **not seek** a **postponement** of the meeting of the EC for the purpose of presenting its views thereto.
- 5. The views of the EC shall be forwarded to the DG for consideration. The DG shall make the final determination on these matters.
- 6. The DG shall communicate to SP the determination and the termination of a PHEIC, any health measure taken by the SP concerned, any temporary recommendation, and the[ir] modification, extension and termination, together with the views of the EC. The DG shall inform conveyance operators through SPs and the relevant international agencies of such temporary recommendations, including their modification, extension or termination. The DG shall subsequently make such information and recommendations available to the general public.
- 7. SPs in whose territories the event has occurred may propose to the DG the termination of a PHEIC and/or the temporary recommendations, and may make a presentation to that effect to the EC.





WHO refers an event for consideration to the EC based on the rapid risk assessment

Acute event management under the IHR and the WHO Emergency Response Framework



Mandate and operations of an Emergency Committee under the IHR

Mandate of the Emergency committee (Art 48):

- To advise the DG if event is a PHEIC or not
- To advise the DG on the termination of a PHEIC
- To advise on issuance of Temporary Recommendations if a PHEIC is determined by the Director-General



Operations of an Emergency Committee (Art 47-49):

- Members and advisers selected from IHR Roster of Experts (Article 47) or other Expert advisory panels of WHO, and expert nominated by the affected State Party
- Rules of procedure convened based on the WHO Regulations of Expert Advisory Bodies (WHO Basic Documents)
- Confidentiality and conflict of interest assessed for each meeting
- Affected State Party(ies) invited to provide information
- EC Report with the views of the EC is provided to the Director-General





Procedures for an Emergency Committee under the IHR (2005)



Operations – e.g. the IHR EC on the multi-country outbreak of mpox (1/2)

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Terms of reference

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-WHO:	th Meeting of IHR Emergency Committee on mpox - 10 May 2023, 12:00-17:00 (CEST)		0	Chair
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	Member States,	Int	ternational Health Regulations (2005) (IHR) Emergency Committee regarding the multi-country outbreak of mpox	der Haupte Leen in Gestander Anderson, Bjecommissigt ander hauten Haufterna, mehrune uf Backet and Anaerina University of Bann
				Rapportaur
	er-General of WHO, under Article 48 of the IHR, is convening the 5th meeting of the Emergency Committee regarding the multi-country outlines of mpox. The meeting will take place on 10 May 2023, from 12:00 to 17:00 CB mobers and advisors of the Emergency Committee.	EST,	Fifth Meeting	Sin Yoger K, Sansan J. Dinactor, Oristan di High Consequenza Participanti and Rethology
The obie	ves of this meeting are to:		10 May 2023, 12:00 to 17:00 CEST (GMT +2) Virtual / Geneva. Switzerland	Membera
			VII OIL VII, OVILLIAID	Service Stands + Service Observe, Drouging Thesest and Solari Hauth Security, Dirch, The Solari Lifence for Depresents, Serber Kenf
	vide views to the Director-General of WHO on whether the event constitutes a public health emergency of international concern, pursuant to Articles 1, 12, 48, and 49 of the IHR. vide views to the Director-General on the proposed temporary recommendations, pursuant to Articles 1, 12, 48, and 49 of the IHR.	Date & Time (Geneva time/GMT +2)	r Item	Sir Clantes Bannale s Jaacing Robert (Matterney, of Nobelshow Bangy of House
The Secr	riat will provide the Emergency Committee with additional information about the outbreak and current response efforts, as well as proposed temporary recommendations.		OPEN SESSION	Drivials Denning + Bentin Researcher, Centre für Reptar Versione and Blatter Hanni, surfleid Department of Dirice Version, University of Dirice; University
A WHO s	tement giving an account of the consultation and its conclusions, will be posted on the WHO public website.	11:30	Connection to the meeting via Zoom, identification of members and advisors	Gri Contrara Paya - mant, Vining-Limbo Panan Panan, Bangai
Informat	about the IHR Emergency Committee can be found at the following link: Mpox (monkeypox) IHR Emergency Committee (who.int).	12:00-12:10	Convening / opening of Meeting (Director-General (DG) or designee)	Ger Rosan Hanayanan n Gereger daranan Andrea Bacigaray, Rasanah manunan
For addit	nal information, please send an email to <u>ihrcommittees@who.int</u> .	12:10-12:20	Identification of Emergency Committee (EC) Members, Advisors and State Party	Dr. Onsamer Malaum - Land, Jones & Discourse and Versilines, Interneting Teamers Researches Contine, Moniso
For addit	an mormation, prease send on emain to <u>incommit copy morn</u> .		Representative(s) attending	-
Best rega	N,		Administrative matters (LEG and CRE): • Background on IHR, the EC and its mandate, organization and operations,	Dr. Donie Optimie Drabitistie of Healthine and Healthica Drassans, Higher Darie University Healthin Healthica Drassans Lint, Higher Darie University Teaching Healthing
IHR Secre	riat World Health Event Information Site for IHR National Focal Points		obligations (LEG) Institutional requirements such as the role and status of members and advisers 	Bit Hongs Provadiate in Biological Director Institute of with Research and Institution, Banglook, Thatand
	Events Announcements Region Contacts HeR Documents Reports Help Contact Form		and issues in relation to Declarations of Interest and/or Confidentiality (CRE)	De Anne Break 1 Probase Epiter Degr wit de concern Distored Own in Henrica Disasse are Auto mem, Peerry Since of Auto mem, Univer
	Events Announcements reagon Contacts InterLocitoriants reapons help Contact Announcements reagon Contacts InterLocitoriants Writewark Reader Johnsylline My Assessed Lag Set Search InterLocitoriants Search InterLocitoriants		Handover to Chair - Objectives of the meeting: • Provide views to the DG on whether the event constitutes a Public Health Emergency of International Concern (PHEIC)	Sir Tamaya Lama - Oracon, Camer for Dimogency Regimathese and Regimma Yantani freshva of Informa Deaseau, Japan
			 Provide views to the DG on the issuance of proposed potential Temporary Recommendations to States Parties 	En Concentration : delicer Research Information Institute an Inspective In Solitat Insert, Recr Bohar Strikefolm, University of Bourney Belleville, United Base department, Mind Hol, Benevel, Bottenford (Retries)
	5th Meeting of the International Health Regulations (IHR) Emergency Committee regarding the multi-	12:20-13:30	Presentations	Gr. Zangen Wei in Christ Roternagin, Christia Gamm für Dassas Gamm and Reserver. Director Diverse af with Reserver, HEAD & Christ AD Daspas, Christ Bann
	country outbreak of mpox convened by the WHO Director-General on 10 May 2023		 Japan (~10 minutes) United Kingdom of Great Britain and Northern Ireland (~10 minutes) 	Advisors
	Announcement Displayed Fiom : Wednesday, April 6, 2023 - 15.51		Nigeria (~10 minutes)	AUXVISION On Server Makes : One Server Makes : One Server Makes :
	6 th Meeting of the International Health Regulations (IHR) Emergency Committee regarding the multi-country outbreak of mpox convened by the VHO Director-General on 10 May 2023		 Global Epidemiology, Risk Assessment, and Response (~30 minutes) – WHO Secretariat 	
		13:30-14:45	Questions & Answers	by Masset Califies 1 mast of Reserve, indicities change in terms for here in insert and inserts facework, and Reserve of Markets. Boreaux, Ray, 2
	The Director-General of WHVD, under Article 48 of the IHR, is convening the 5 th meeting of the Emergency Committee regarding the multi-country outbreak of mpox. The meeting will take piace on 10 Mey 2023, them 12 Go of 170 COEST, and a sopen only to members and advisors of the Emergency Committee.		From EC Members and Advisors to the presenters	In Descent Destruction (Director, Director, Director, Definition, Definition, Carried, of Disease Estimation and Prevention, Limited Barriel of America Director, Director,
		14:45-15:00	Break	Ger Calebon Calebon Ger Lines y Santa-Zahlan, Calebon May Republican, Child Calebon Santa-Santanan Santanana
	The objectives of this meeting are to:			Drilling Ganaches (Descars forbeaux Epidemosy), the hervisite distant mean, the Estat of Estit mean, the characty const Estate of smarter
	1 Provide verse to the Director-Centeral of VMHO on whether their event constitutions a public hearth simergency of informational concern, pursuant to Articles 1.12.48		DELIBERATIVE SESSION (Only Members of and Advisors to the Committee)	Profit Science L Registration 1. Professional Conference Descent Registrations(), LB-TRC, List, Hause, Gamma on Station Haard Become Distance mouses, Londers, LH, Roman data Revinance of Particle
	and 49 of the HR - Provide vess the Director General on the proposed temporary recommendations, pursuant to Add(as 1 12 48, and 49 of the HR	15:00-15:45	Deliberations on the key questions	The second se
			Question 1: Should the event be determined by the DG to constitute a PHEIC?	Ur Welch Billion - De Stational Department of Vertile Station (Second Stational Department) of Hervin, Bour Units
	The Secretarial will provide the Emergency Committee with additional information about the outbreak and current response efforts, as well as proposed temporary recommendations.		Criteria for a PHEIC under the IHR in the context of the event (Article 1):	Bir Ganthewas Solweit () Broug Laws, Byterris Intelligence Broug, Bungeen Genre für Disease Rewenter and Gornel, Breater
			 An extraordinary event Constituting a public health risk to other States through the international 	Ger Theorema Theory of Chief Rystry Index's Offices: Rubits Index's Agency of Canada, Canada
	A WHO statement giving an account of the consultation and its conclusions, will be posted on the WHO public website.		spread Potentially requiring a coordinated international response 	Pormier members
	Information about the IHR Emergency Committee can be found at the following link: Monkeypox IHR Emergency Committee (who int).	1. 1. 1. 1. 1.		Server in a Survey of the server of the aging Diserver of the Dearley, and 2 suburary or the heavy for the read Dataset or the University Insul of the Dataset, Gener and Henry to Diserve of the Dearley, and 2 suburary or the heavy for the read Dataset or the University
		15:45-16:15	Question 2: Should the event be determined by the DG to constitute a PHEIC, would the proposed Temporary Recommendations to States Parties be adequate?	
	For additional information, please send an email to incommittees@who int.	16:15-16:30	Conclusions on views of the Emergency Committee	
		16:30-16:45	Arrangements for finalization of the Committee's Meeting Report	HEALTH
	A los fextranet who int/ihr/eventinfor	16:45-17:00	Closure of meeting (DG or designee)	https E/MERGENCLES p
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Operations – e.g. the IHR EC on the multi-country outbreak of mpox (2/2)

Provision of agenda and relevant documentation to the EC members and advisors:

- Communication by email, from generic email address "ihrcommittees"
- Dedicated sharepoint for EC members and WHO technical staff to upload documents
- Meetings held virtually (previously teleconference, since COVID-19 by zoom only

Vorld Health



programme

Communication in relation to the determination of a PHEIC and the views of the Emergency Committee – e.g. the IHR EC on the multi-country outbreak of mpox

Communication to States

For clearance - final statement 5th meeting of the IHR Emergency Committee on mpox	
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ase see attached for your clearance the final statement for the 5 th meeting of the IHR Emergency Committee on the multico	
ar GBS colleagues are on stand-by to kindly transmit the final statement to the permanent missions, after your clearance, aro	und 15:00 today.
my thanks men	
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Report_Fifth meeting IHR Emergency Committee regarding the multi-country outbreak of n	npox, 10 May 2023
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For the attention of all th in Country (in Boc for t	ntry Offices
r colleagues, your information, please find attached the final statement of the 5th meeting of the IHR Emergency Committee reg	garding the multi-country outbreak of mpox held on yesterday, 10 May 2023. Please note that the DG, concurring
the advice of the Committee, has determined that the event no longer constitutes a public health emergency of inling thanks for your usual kind cooperation.	temational concern (PHEIC).
h warm regards.	
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World Health

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https://extranet.who.int/ihr/eventinformation/announce ment/42955-final-statement-fifth-meetinginternational-health-regulations-2005-ihr-emergency

Communication to General Public



https://www.who.int/news/item/11-05-2023-fifthmeeting-of-the-international-health-regulations-(2005)-(ihr)-emergency-committee-on-the-multicountry-outbreak-of-monkeypox-(mpox)



Challenges with the determination of PHEIC and with the advice provided by the Emergency Committee

- 2016, 2019 WHO Secretariat organized 2 meetings with the Chairs of current and previous Emergency Committees to identify challenges and propose solutions.
- 2011, 2016, 2021 various Review Committees on the functioning of the IHR identified several challenges and proposed recommendations regarding the functioning of the Emergency Committees
- Currently, the various challenges identified are being addressed as follows:
 - Decision to convene an Emergency Committee -> systematically considered during the Rapid Risk Assessment
 - Binary nature of the PHEIC -> EIS announcement on convening the Emergency Committee constitutes already an "Alert"
 - Criteria to inform the termination of a PHEIC (not included in the definition) -> EC COVID-19 and EC mpox considered criteria related to severity (morbidity and mortality), spread,
 - Monitor the uptake and implementation of the temporary recommendations -> conducted through the Regional offices





Review Committee on the functioning of the IHR during COVID-19

Recommendations regarding the Emergency Committee and determination of a public health emergency of international concern (1/2)

1. WHO should make its decision-making process for convening an Emergency Committee available on its website and ensure that it continues to be based on a risk assessment.

2. WHO should make available to States Parties through the EIS all the information and technical documentation it provides to the Emergency Committee for each of its meetings, including findings of rapid risk assessments. WHO should allow sufficient time for Emergency Committee members to deliberate, reach a conclusion and prepare their advice to the Director-General. Emergency Committee members should not be required to reach a consensus; if there is division, divergent views should be noted in the Committees' report, consistent with the Emergency Committee terms of reference Rule 12.

3. WHO should consider an open call for the IHR Expert Roster, organized to promote gender, age, geographic and professional diversity and equality, and should generally give more consideration to gender, geography and other aspects of equality and to succession planning (younger experts). WHO should emphasize to all Emergency Committee members the guidance document on the rules of procedure, informing the Chairs and members about the conduct of operations.

Decision to refer an event to EC is systematically considered in the WHO RRA

Divergent views of EC members are presented in the final report to the DG, without attribution

> Call for expression of interest: International Health Regulations (2005) Roster of Experts

29 April 2022 | Expression of interest 29 April 2022





Review Committee on the functioning of the IHR during COVID-19

Recommendations regarding the Emergency Committee and determination of a public health emergency of international concern (2/2)

- 1. WHO should adopt a more formal and clearer approach to conveying information about the Emergency Committee's meetings to States Parties and the public. To that end, WHO should provide a standard template for statements issued following each meeting, which should include: the information provided to the Emergency Committee and its deliberations; the reasons and evidence that led to the Emergency Committee's advice; any diverging views expressed by Emergency Committee members; the rationale for the determination or not of a public health emergency of international concern by the WHO Director-General; the issuance, modification, extension or termination of temporary recommendations; the categorization of recommended health measures; the significance of a public health emergency of international concern and the key public health response actions expected from States Parties (e.g. vaccine activities, funding, release of stockpiles); and the difference between the declaration of a public health [...]
- 2. For events that may not meet the criteria for a public health emergency of international concern but may nonetheless require an urgent escalated public health response, WHO should actively alert the global community. Building on WHO's online Disease Outbreak News, a new World Alert and Response Notice (WARN) should be developed to inform countries of the actions required to respond rapidly to an event so as to prevent it from becoming a global crisis. This notice should contain the WHO risk assessment, shared in a manner consistent with Article 11, and the specific public health response actions required to prevent a public health emergency of international concern, including calling for an increased response from the international community.



Currently being discussed in the WGIHR and INB processes





HEALTH EMERGENCIES programme

Article 12 Determination of a Public Health Emergency of International concern

1. The Director-General shall determine, on the basis of the information received, in particular from the State Party within whose territory an event is occurring, whether an event constitutes a public health emergency of international concern in accordance with the criteria and the procedure set out in these Regulations.

2. If the Director-General considers, based on an assessment under these Regulations, that a public health emergency of international concern is occurring, the Director-General shall consult with the State Party in whose territory the event arises regarding this preliminary determination. If the Director-General and the State Party **are in agreement regarding this determination**, the Director-General shall, in accordance with the procedure set forth in Article 49, seek the views of the Committee established under Article 48 (hereinafter the "Emergency Committee") on appropriate temporary recommendations.

3. If, following the consultation in paragraph 2 above, the Director-General and the State Party in whose territory the event arises **do not come to a consensus within 48 hours** on whether the event constitutes a public health emergency of international concern, a determination shall be made in accordance with the **procedure set forth in Article 49**.

4. In determining whether an event constitutes a public health emergency of international concern, the Director-General shall consider:

- (a) information provided by the State Party;
- (b) the decision instrument contained in Annex 2;
- (c) the advice of the Emergency Committee;
- (d) scientific principles as well as the available scientific evidence and other relevant information; and

(e) an **assessment of the risk** to **human health**, of the risk of **international spread** of disease and of the risk of **interference with international traffic.**





The WHO Director-General convened an Emergency Committee under the IHR for **10** events – of which **7** were determined to constitute **PHEIC**







Information provided by States

Parties in whose territory the

Advice from Emergency

Scientific principles and

Risk to human health, risk of

intl spread, risk of interference

available evidence

with intl traffic

event occurs

Annex 2

Committee

IHR Emergency Committee concerning ongoing events and context involving transmission and international spread of poliovirus (28-29 April 2014 -)

- 28-29 April 2014: First EC meeting -> on 5 May 2014 DG accepted the advice of the EC and <u>determined</u> that wild polio transmission, in the context of polio eradication, constituted a PHEIC
- **10 November 2015** (7TH meeting): The scope of the PHEIC is <u>expanded</u> by the DG to include cDVPV.
- 26 May 2016: In decision <u>WHA68(9)</u>, the Health Assembly, endorsed the continuation of the management of the PHEIC through Temporary Recommendations issued by the DG, to address the provision in Article 15 that proscribes their continuation beyond the second WHA following a PHEIC determination.
- 12 May 2023 (35th meeting): <u>DG determined</u> that event continued to constitute a PHEIC and extended/revised the IHR Temporary Recommendations.

https://www.who.int/groups/poliovirus-ihr-emergency-committee



11 Members and 1 Adviser; 7 male, 5 female.
Chair: Prof Helen Rees, South Africa
Members: S. Al Awaidy (Oman); Y. Al-Mazrou(KSA); V. Field (UK); O. Ivanova (Russia); R. Leke (Cameroon); J. Mackenzie (Australia); M. Rahman (Bangladesh); S. Saeedzai (Afghanistan); M. Salman (Pakistan); O. Tomori (Nigeria)
Adviser: C. Burns, USA

Afghanistan and Pakistan attended every meeting; other countries were invited, depending on occurrence of events.





IHR Emergency Committee regarding the coronavirus disease (COVID-19) pandemic (20 January 2020 – 5 May 2023)

- 3 January 2020: Response by China to a WHO verification request on cases of pneumonia of unknown etiology
- 22-23 January 2020: The WHO Director General convened the EC and invited China to present on the situation. Members of the Emergency Committee expressed divergent views on whether the event constituted a PHEIC or not. DG reconvened the EC on 23 January in view of new containment measures in Wuhan and invited 3 additional countries reporting cases to present on their situation to the EC: Japan, Republic of Korea and Thailand. At that time EC advised that the event did not constitute a PHEIC but remained ready to reassess the rapidly changing situation. Director-General accepted their advice.
- 30 January 2020: Director-General reconvened the EC, who advised the event constituted a PHEIC. The Director-General determined the event to constitute a PHEIC and issued Temporary recommendations. The EC met every 3 months after that, and the Temporary Recommendations were regularly reviewed.
- 31 May 2021: Decision WHA74(15) Health Assembly endorsed the continuation of the management of the PHEIC through temporary recommendations issued by the Director-General under the International Health Regulations (2005).
- 5 May 2023 (15th meeting) EC advised the event no longer meets the criteria of PHEIC and Director-General determined the termination of the PHEIC.

https://www.who.int/groups/covid-19-ihr-emergency-committee



The IHR Emergency Committee for COVID-19 held its first meeting on 2 and 23 January 2020. On 30 January 2020, following its second me the Director-General declared that the outbreak constituted a Public Healt Emergency of International Concern, accepted the Committee's advice and issued it as IHR Temporary Recommendations. The Com o meet on a regular bas

Statements







Statement on the thirteenth meeting of the International Health equiations (2005) Emergenc ommittee regarding the





Statement on the twelfth meeting of Statement on the eleventh meeting the International Health Regulations of the International Health Regulations (2005) Emergency (2005) Emergency Committee Committee regarding the





Members (12 male - 6 female): Professor Didier Houssin (Chair), Dr Martin Cetron, Dr Adelle Chang On, Dr Supamit Chunsuttiwat, Dr Vladimir Dubyanskiy, Dr Youngmee Jee, Dr Nyoman Kandun, Dr Hiroshi Kida, Professor Marion Koopmans, Professor Rose Leke, Professor Wannian Liang, Professor John S. Mackenzie, Dr Brian McCloskey, Dr Ziad Memish, Dr Ravindran Palliri, Professor Helen Rees, Dr Muhammad Salman, Dr Denise Werker

Advisors (8 male - 4 female): Professor Steve Ahuka, Dr Lucia Alonso, Dr Etienne Bonbon, Dr Heike Deggim, Dr Dirk Glaesser, Dr Keith Hamilton, Dr Ansa Jordaan, Dr Palitha Karunapema, Dr Khalil Mohammad Khalil, Dr Malik Peiris, Dr David Powell, Dr Anders Tegnell







IHR Emergency Committee on the multi-country outbreak of mpox (7 May 2022) – 11 May 2023)

7 May 2022: UK notification signaling international spread of mpox (from Nigeria to United Kingdom)

23 June 2022: First EC meeting EC advised DG that event did not constitute a PHEIC but required close monitoring - DG concurred. EC regarded published WHO guidance documents as adequate to inform response actions

21 July 2022: Second EC meeting: EC did not reach consensus as to whether the event constituted or not a PHEIC. Director-General made the determination that the event constituted a PHEIC and issued Temporary Recommendations.

11 May 2023: Fifth EC meeting – EC advised to terminate the PHEIC, DG accepted their advice and terminated the PHEIC, and issued Temporary recommendations

World Healt https://www.who.int/groups/monkeypox-ihr-emergency-committee

*	Health Topics 🗸	Countries ~	Newsroom 🗸	Emergencies ~	Data 🗸	About WHO ~
Mpox IHR Emergency Committee				The IHR Emergency Committee on the multi-country outbreak of first meeting on 23 June 2022. On 23 July 2022, the WHO Directo determined the event to constitute a Public Health Emergency of I Concern (PHEIC) and issued Temporary Recommendations to Sta accordingly.		

Meetings reports and temporary recommendations





23 July 2022 | Statemen Third meeting of the International Second meeting of the International Health Regulations lealth Regulations (2005) (IHR) (2005) (IHR) Emergency nergency Committee regarding committee regarding the multi



25 June 2022 | Statemer First meeting of the International Health Regulations (2005) Emergency Committee regarding



outbreak of monkeypox

News



Members (10 males, 6 females): Dr Jean-Marie Okwo-Bele (Chair), Dr Nicola Low (Vice-Chair), Dr Inger Damon (Rapporteur), Dr Daniel Bausch, Dr Clarissa Damaso, Dr Jake Dunning, Dr Ousmane Faye, Dr Rinat Maksyutov, Dr Othoman Mellouck, Dr Dimie Ogoina, Dr Nittaya Phanuphak, Dr Anne Rimoin, Dr Tomoya Saito, Dr Kathrin Summermatter, Dr Daniel Tarantola, Dr Zunyou Wu.

Advisors (6 males, 2 females): Dr Steve Ahuka, Dr Demetre Daskalakis, Dr Cleiton Euzebio De Lima, Dr Gregg Gonsalves, Dr David Heymann, Dr Wanda Markotter, Dr Gianfranco Spiteri, Dr Theresa Tam







Categories of temporary recommendations issued by the Director-General following the determination of a PHEIC

Area for temporary recommendations		Polio 2014	Ebola 2014 – 2016	Zika 2016		COVID-19 2020-2023	Мрох 2022-2023
Surveillance	Х	Х	Х	Х	Х	Х	Х
Public health response	Х	Х	Х	Х	Х	Х	Х
Mass gathering			Х			Х	Х
Research				Х	Х	Х	Х
Access to therapeutics			Х	Х	Х	Х	Х
Measures for international travellers		Х	Х	Х		Х	X





Examples related to Temporary Recommendations

Modification / Extension Multi-country outbreak of mpox 1 Nov 2022

MODIFIED 1.1. Implement all actions necessary to be ready to apply or continue applying the set of Temporary Recommendations enumerated under Outbreak Response (2) below in the event of first-time or renewed detection of one or more suspected, probable or confirmed cases of monkeypox.

https://www.who.int/publications/m/item/monkeypox-strategic-preparedness--readiness--and-response-plan-(sprp)

MODIFIED: Outbreak response (2): All States Parties with one or more cases of monkeypox, regardless of the initial source, or experiencing human-to-human transmission, including in key population groups communities at high risk of exposure

EXTENDED: 2.a. Implementing coordinated response

EXTENDED: 2.a.i. Implement response actions with the goal of stopping human-to-human transmission of monkeypox virus, with a priority focus on communities at high risk of exposure, which may differ according to context and include gay, bisexual and other men who have sex with men (MSM). These actions include: targeted risk communication and community engagement, case detection, supported isolation of cases and treatment, contact tracing, and targeted immunization for persons at high risk of exposure for monkeypox.

https://www.who.int/publications/m/item/monkeypox-strategic-preparedness---readiness---and-response-plan-(sprp)

EXTENDED: 2.a.ii. Empower affected communities and enable and support their leadership in devising, contributing actively to, and monitoring the response to the health risk they are confronting. Extend technical, financial and human resources to the extent possible and maintain mutual accountability on the actions of the affected communities.

https://www.who.int/publications/m/item/monkeypox-strategic-preparedness--readiness--and-response-plan-(sprp)

ADDED: 2.e.iv. Encourage, support and facilitate data gathering and priority research in areas of work relevant to monkeypox, including but not limited to disease transmission and the natural history of disease; diagnostics and innovative technologies including point-of-care tests, viral kinetics across specimen types and animal diagnostics; behavioural insights research and studies on effectiveness of interventions; exposure risk for health workers and post-exposure management; research on zoonolic transmission of monkeypox at the human-animal-environment interface, including, socio-economic and behavioural risk factors, and indications for environmental surveillance in wastewater.

https://www.who.int/publications/m/item/monkeypox-strategic-preparedness--readiness--and-response-plan-(sprp)

WHO R&D blueprint and monkeypox

One Health Joint Plan of Action to address health threats to humans, animals, plants and environment

Monkeypox - World Organisation for Animal Health



Issuance after PHEIC terminated COVID-19 pandemic, 5 May 2023 Market Views / Statement on the (1905) Emergency Committee on the COVID-19 pandemic

Statement on the fifteenth meeting of the IHR (2005) Emergency Committee on the COVID-19 pandemic

5 May 2023 | Statement | Reading time: 7 min (1792 words)

The WHO Director-General has the pleasure of transmitting the Report of the fifteenth meeting of the International Health Regulations (2005) (IHR) Emergency Committee regarding the coronavirus 2019 disease (COVID-19) pandemic, held on Thursday 4 May 2023, from 12:00 to 17:00 CET.

During the deliberative assistion, the Committee members highlighted the decreasing trend in COVID-19 deaths, the decline in COVID-19 related hospitalizations and intensive care unit admissions, and the high levels of population immunity to SARS-COV-2. The Committee's position has been evolving over the last several months. While acknowledging the remaining uncertainties posted by potential evolution of SARS-COV-2, they advised that it is time to transition to long-term management of the COVID-19 pandemic.

The WHO Director-General concurs with the advice offered by the Committee regarding the engoing COVID-19 pandemic. He determines that COVID-19 is now an established and ongoing health issue which no longer constitutes a public health emergency of international concern (PHEIC).

Temporary Recommendations issued by the WHO Director-General to all States Parties

1. Sustain the national capacity gains and prepare for future events to avoid the occurrence of a cycle of panic and neglect. States Parties should consider how to improve country readiness for future outbreaks. In alignment with WHO guidance, States Parties should update respiratory pathogen pandemic preparedness plans incorporating learnings from national and sub-national After Action Reviews. States Parties should continue to restore health programmes adversely affected by the COVID-19 pandemic.

Preparedness and resilience for Emerging Threats;
Strengthening pandemic preparedness planning for respiratory pathogens: policy brief;

- WHO COVID-19 policy briefs;
- Emergency Response Reviews

 Integrate COVID-19 vaccination into life course vaccination programmes. States Parties should maintain efforts to increase COVID-19 vaccination coverage for all people in the high-priority groups (as defined by the SAGE Roadmap of April 2023) with WHO recommended vaccines and continue to actively address vaccine acceptance and demand issues with communities.

Global COVID-19 Vaccination Strategy in a Changing World (July 2022 update);
 SAGE Roadmap (Updated March 2023);

- Good practice statement on the use of variant-containing COVID-19 vaccines
- Continued collaboration with IVAC and others to summarise VE studies, Behavioural and social drivers of vaccination: tools and practical guidance for achieving high uptake.

Tailoring to States Parties International spread of poliovirus, 12 May 2023

World Health Health Topics - Countries - New

Newsroom - Emergencies -

Risk categories

The Committee provided the Director-General with the following advice aimed at reducing the risk of international spread of WPV1 and cVDPVs, based on the risk stratification as follows:

1. States infected with WPV1, cVDPV1 or cVDPV3.

States infected with eVDPV2, with or without evidence of local transmission:
 States no longer infected by WPV1 or cVDPV, but which remain vulnerable to re-infection by WPV or eVDPV.

Criteria to assess States as no longer infected by WPV1 or cVDPV:

- Policy/rus Case: 12 months after the onset date of the most recent case PLUS one month to account for
 case detection, investigation, laboratory testing and reporting period OR when all reported AFP cases
 with onset within 12 months of last case have been tested for polio and excluded for WPVI or cVDPV,
 and environmental or other samples collected within 12 months of the last case have also tested
 nearitive, withchwer is the longer.
- Environmental or other isolation of WPV1 or cVDPV (no poliovirus case): 12 months after collection of the most recent positive environmental or other sample (such as from a healthy child) PLUS one month to account for the laboratory testing and reporting period.

These criteria may be varied for the endemic countries, where more rigorous assessment is needed in
reference to surveillance gaps.

Once a country meets these criteria as no longer infected, the country will be considered vulnerable for a further 12 months. After this period, the country will no longer be subject to Temporary Recommendations,

Beyond the second World Health Assembly after the determination

WHA68(9) Poliomyelitis

The Sixty-eighth World Health Assembly, having considered the report of the Secretariat on poliomyelitis, $^{\rm I}$

(1) endorsed the continuation of the management of the public health emergency of international concern through temporary recommendations issued by the Director-General under the International 1 WHA74(15) Implementation of the International Health Regulations (2005)¹

(2) requested ti The Seventy-fourth World Health Assembly, having considered the report by the international spree Director-General,²

Decided to endorse the continuation of the management of the public health emergency of international concern through temporary recommendations issued by the Director-General under the International Health Regulations (2005), on the advice of the IHR Emergency Committee for COVID-19, in connection with the public health emergency of international concern arising from the international spread of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

Decision paths to inform the future management of events once the PHEIC is terminated







Examples of considerations related to Standing Recommendations

COVID-19 pandemic, 15th EC meeting, 5 May 2023: "The WHO Director-General will convene an <u>IHR</u> <u>Review Committee</u> to advise on **Standing Recommendations** for the long-term management of the SARS-CoV-2 pandemic, taking into account the <u>2023-2025 COVID-19 Strategic Preparedness and</u> <u>Response Plan</u>."

Multi-country outbreak of mpox, 5th EC meeting, 11 May 2023: "The Committee emphasized the need for long-term attention and support, including financial support, particularly for countries where mpox occurs regularly, and advised that **Standing Recommendations** under the IHR would now be a more appropriate tool to manage the immediate, short and long-term public health risks posed by mpox."

International spread of poliovirus, 34th EC meeting, 2 February 2023: "The Committee recognizes the concerns regarding the lengthy duration of the polio PHEIC and the importance of exploring alternative measures, including the convening of an IHR Review Committee for polio that could advise the Director-General on possible IHR standing recommendations, and encourages further discussion regarding these alternatives."



