

Polio Emergency Operations Plan

Context & major elements

SAGE

February 2012

WHO Executive Board Resolution

130th session

EB130.R10

Agenda item 6.10

21 January 2012

Poliomyelitis: intensification of the global eradication initiative

The Executive Board,

Having considered the report on poliomyelitis: intensification of the Global Polio Eradication Initiative,¹

RECOMMENDS to the Sixty-fifth World Health Assembly the adoption of the following resolution:²

The Sixty-fifth World Health Assembly,

Having considered the report on poliomyelitis: intensification of the Global Polio Eradication Initiative;

Recalling resolution WHA61.1 on poliomyelitis: mechanism for management of potential risks to eradication, which, inter alia, requested the Director-General to develop a new strategy to reinvigorate the fight to eradicate poliovirus and to develop appropriate strategies for managing the long-term risks of reintroduction of poliovirus and re-emergence of poliomyelitis, including the eventual cessation of use of oral poliovirus vaccine in routine immunization programmes;

Recognizing the need to make rapidly available the necessary financial resources to eradicate the remaining circulating polioviruses and to minimize the risks of reintroduction of poliovirus and re-emergence of poliomyelitis after interruption of wild poliovirus transmission;

Noting the Independent Monitoring Board's recent finding that "polio simply will not be eradicated unless it receives a higher priority – in many of the polio-affected countries, and across the world" and its recommendation that the World Health Assembly "consider a resolution to declare the persistence of polio a global health emergency";

¹ Document EB130/19.

² See document EB130/19 Add.1 for the financial and administrative implications for the Secretariat of adoption of the resolution.

"DECLARES polio eradication a programmatic emergency for global public health, requiring full strategy implementation, strong national oversight & accountability, and vaccination recommendations for travelers to & from infected areas "

21 January 2012

Timeline

15-16 Feb GPEI strategy/innovation review

17 Feb ***SAGE review of 'framework' for global plan***

March Nigeria & Pakistan expert consultations to
finalize national emergency actions plans.

Finalize international partner support/plans.

April ***SAGE review of Nigeria & Pakistan emergency
action plans & consolidated global plan***

May World Health Assembly debate on polio

Questions to SAGE

1. How should the *GPEI emergency operations plan* be strengthened to help ensure infected countries, esp. Nigeria & Pakistan, can get 'back on track' in 2012?
2. What guidance can SAGE give to national programmes (esp. Nigeria & Pakistan) as they revise/refine national emergency action plans?
3. Should new milestones be established before end-2012 and the current strategic plan?

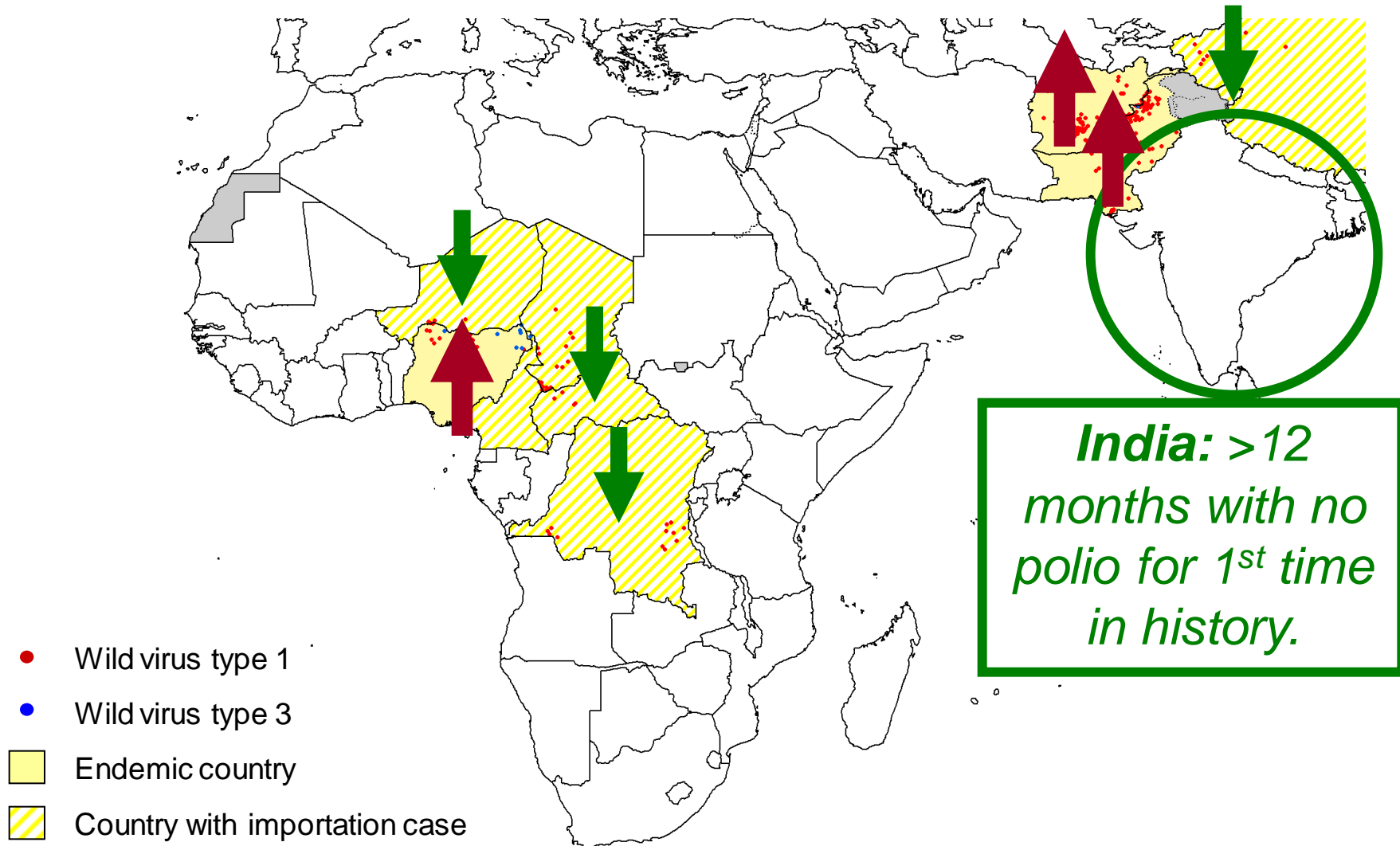
Goals

Ensure all key areas of ***Nigeria, Pakistan, Afghanistan*** are reaching necessary coverage levels by end-2012

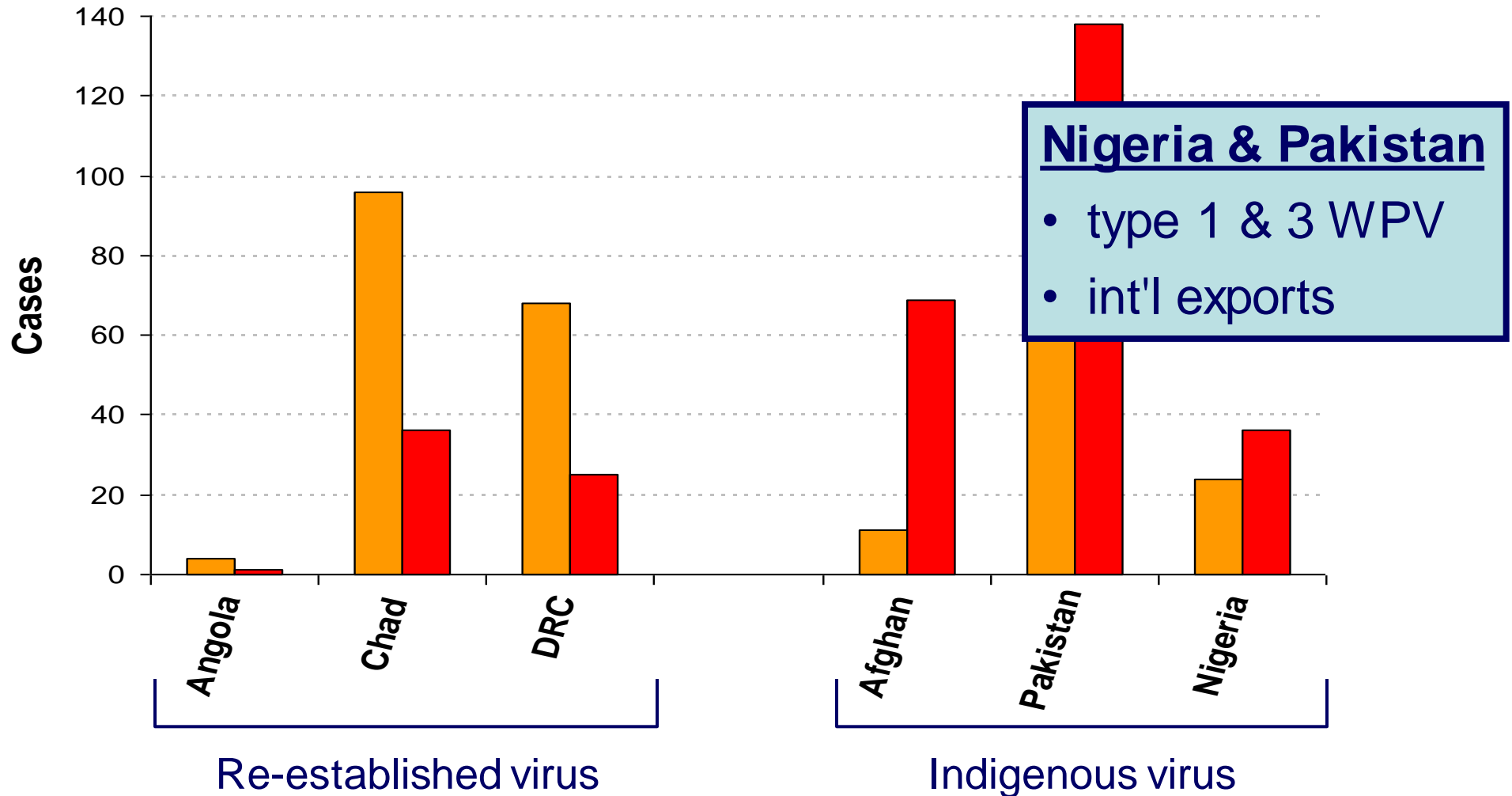
Sustain momentum in ***Chad, DR Congo, Angola*** to interrupt transmission in 2012

Heighten ***GPEI partner*** accountability & coordination to improve sub-national outcomes in these countries.

Context: polio cases last 6 months

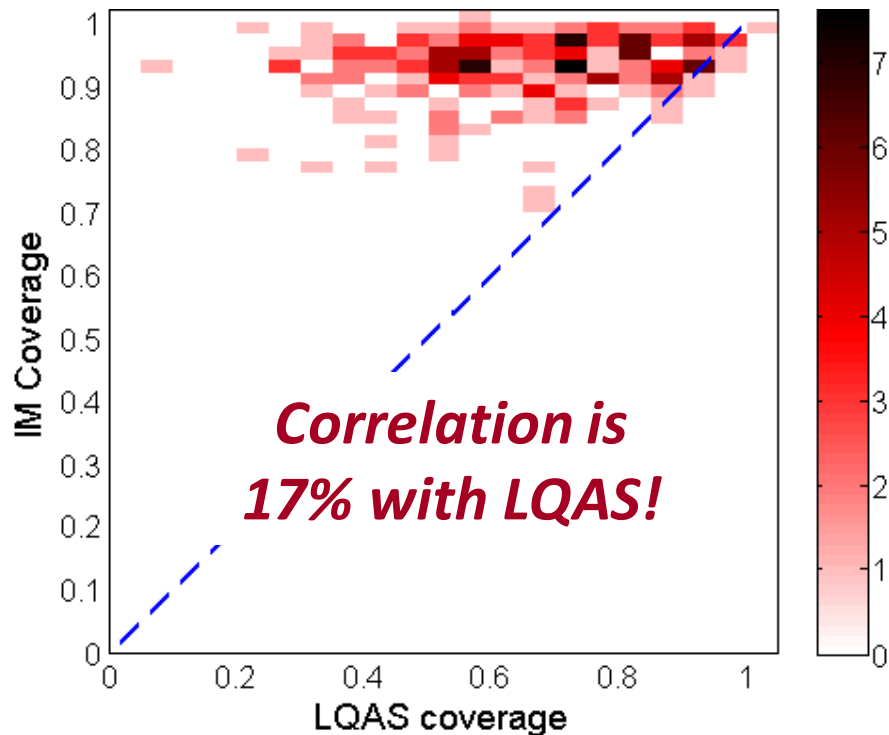


Context: increasing polio cases 2nd half 2011

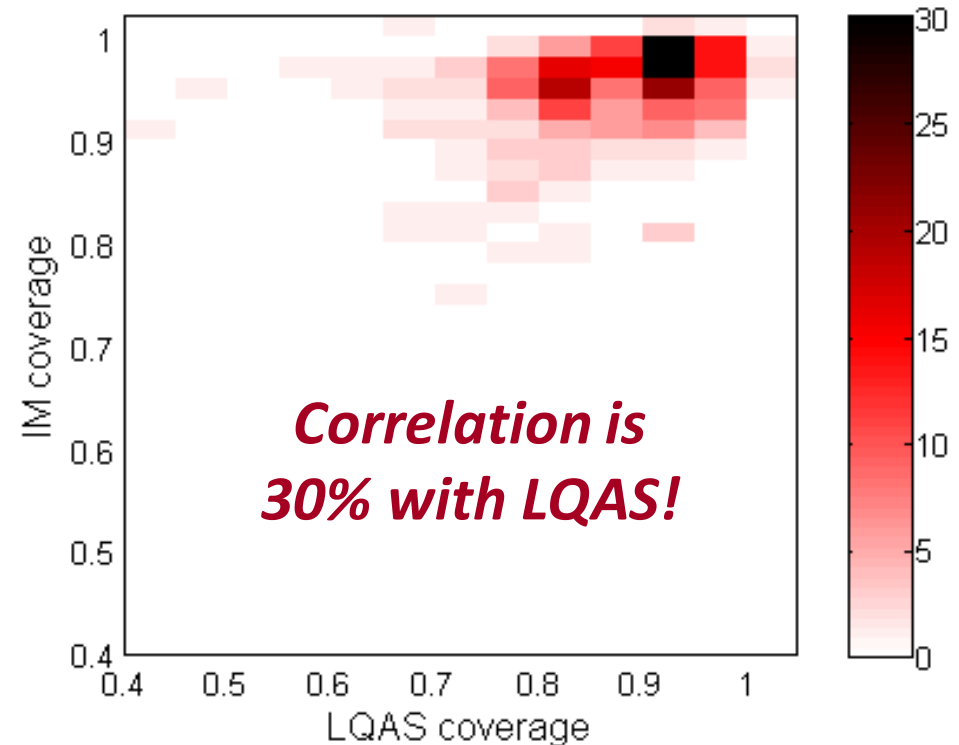


Context: poor program performance monitoring*

Nigeria: district SIA monitoring coverage



Pakistan: district SIA monitoring coverage



* analyses courtesy of the **Global Good Fund**

Operational Priorities

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graph TD; A[Operational Priorities] --- B[Immediately enhance accountability & management of core eradication strategies]; A --- C[Rapidly introduce & scale-up best practices/lessons learnt to improve strategy implementation]; A --- D[Accelerate innovation to address systemic problems];
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Immediately enhance accountability & management of **core eradication strategies**

Rapidly introduce & **scale-up best practices/lessons** learnt to improve strategy implementation

Accelerate innovation to address systemic problems

Core Strategies: intense OPV campaign schedule

Endemic

Re-established

Recurrent Importation Countries

		2012												2013											
		J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D
Endemic	Pakistan	40		100	100		30	10		100	100	30	10	30	10						100	100	30	30	
	Nigeria	100		60	100		60	100		30	20	100		30	20						100	100	30	30	
		100	100	100	60	60	30	30	60			30	30				100	100	60	60			60	60	
Re-established		100	100	50	50					50	50			100	100							10	40	10	40
		CHD 18	6	CHD 28	2		50	100	100	50	30	30					50	100	100	50			100	100	
		HD 100	100	100	100		50			50	100	100		100	100							100	100		
Recurrent Importation Countries		100	100	100		CHD 100	100		30	30						50	100	100	50				50	50	
	Sudan	100	100		50						50	50	50	50		100	100					100	100		
	South Sudan	100	100								50	50	50	50		100	100					100	100		
		61	100	100	100	50				100	100	50		100	100							100	100		
			100	100	100					100	100			100	100							100	100		
			100	100	100		CHD 75			100	100			100	100							100	100		
			100	100	100					100	100			100	100							100	100		
			100	100	100					100	100			100	100							100	100		
			100	100	100		CHD 100			100	100			100	100							100	100		
			100	100	100					100	100			100	100							100	100		
			100	100	100					100	100			100	100							100	100		
			100	100	100					100	100			100	100							100	100		
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			100	100	100					100	100			100	100							100	100		
			100	100	100					100	100			100	100							100	100		
	Guinea Bissau			100	100					100	100			100	100							100	100		
	Togo			100	100					100	100			100	100							100	100		
	Cape Verde			100	100					100	100			100	100							100	100		
Horn of Africa				100	100					100	100			100	100							100	100		
	Kenya			35	65	35	65			100	100			100	100							100	100		
	Yemen	100		100	100					100	100			100	100							100	100		
	Somalia		CHD 100	100	100					100	100			100	100							100	100		
	Uganda			35	65	CHD 100	35	65						35	35										
	Ethiopia			50	50									50	50	50	50								
	Djibouti			100	100									100	100										
	Eritrea			100	100	CHD 49								100	100										
Central Africa																									
	Central African Republic		100	100	100					100	100			100	100							100	100		
	Congo				100	100								100	100										
	Gabon*				100	100																			
	Cameroon		50	50	CHD 100					50	50			50	50							50	50		
	Burundi									CHD 89															
	Rwanda	11																							
	Zimbabwe						CHD 100																		
Other importation-affected countries																									
	Southeast Asia																								
	Nepal		CHD 25		100		CHD 75							CHD 75			100	100							
	Myanmar			CHD 100																					
	Bangladesh	100	100																						
Europe																									
	Russian Federation*																								
	Tajikistan				50	50	50	50																	
	Uzbekistan				50	50	50	50																	
	Georgia*				50		50																		
	Ukraine				100		100																		
	Kyrgyzstan				50	50	50	50																	
	Kazakhstan				100		100																		
	Turkmenistan				100		100																		

Countries with poliovirus within the last 6 month hs

Countries with poliovirus bet ween 6 and 12 mont hs

Countries with no poliovirus for more than 12 mont hs

Not Conducted

*self-financing and not included in the FRR costing

Countries with poliovirus within the last 6 months

Countries with poliovirus between 6 and 12 months

Countries with no poliovirus for more than 12 months

Not Conducted

New activities proposed since January

Heightened national leadership & oversight



Ms. Shahnaz Wazir Ali
Prime Minister's Special Assistant
Pakistan

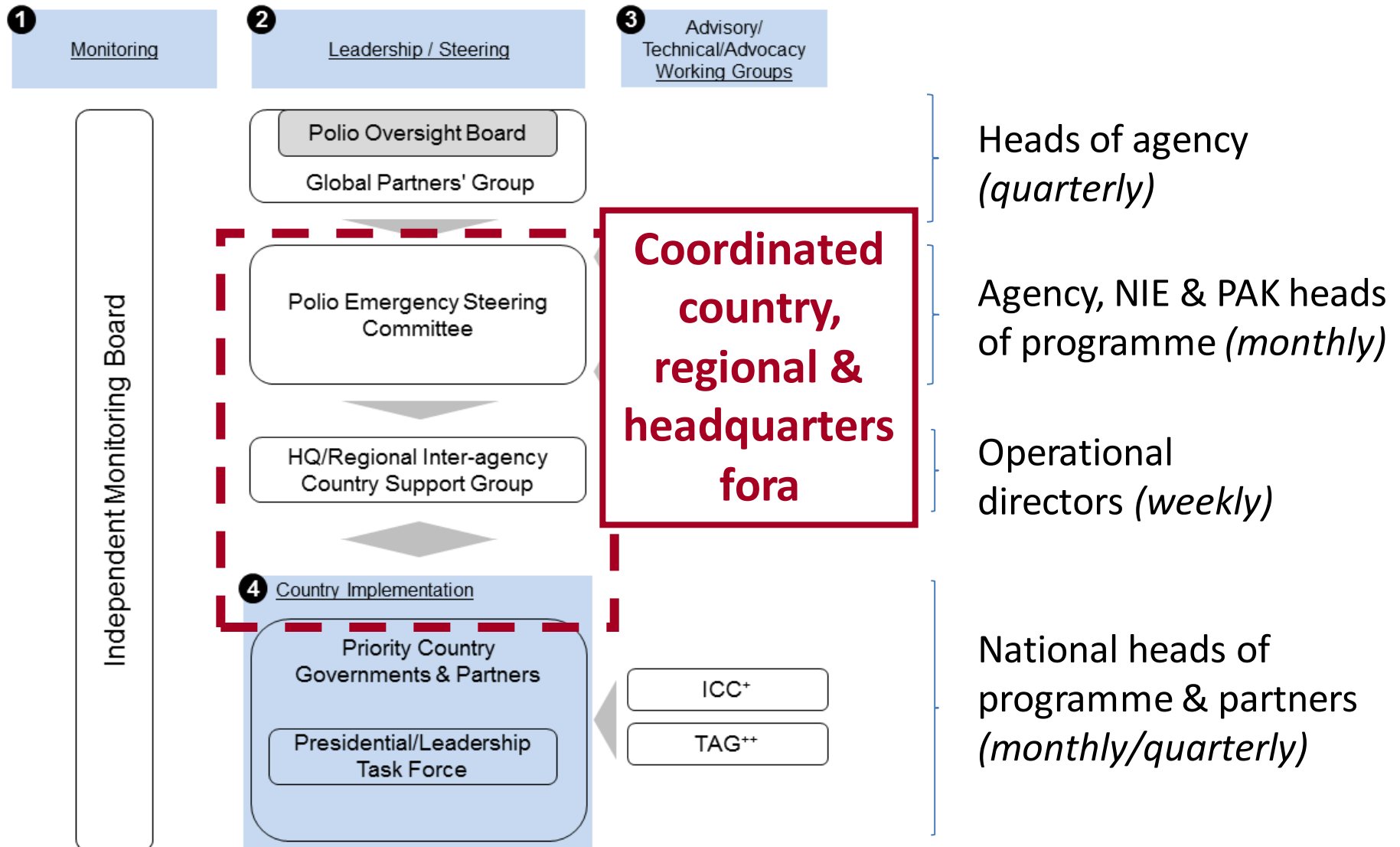


Dr Muhammad Ali Pate
Minister of State for Health
Nigeria



Dr Mamouth Nahor N'gawara
Ministre de la Santé Publique
Tchad

Heightened oversight & emergency support



⁺ Interagency Coordinating Committee

^{*} Strategic Advisory Group of Experts on Immunization

⁺⁺ Technical Advisory Group

^{**} Polio Research Committee

Activation of emergency centres/procedures

Emergency Operation Center (CDC)



Strategic Health Operations Centre (WHO)



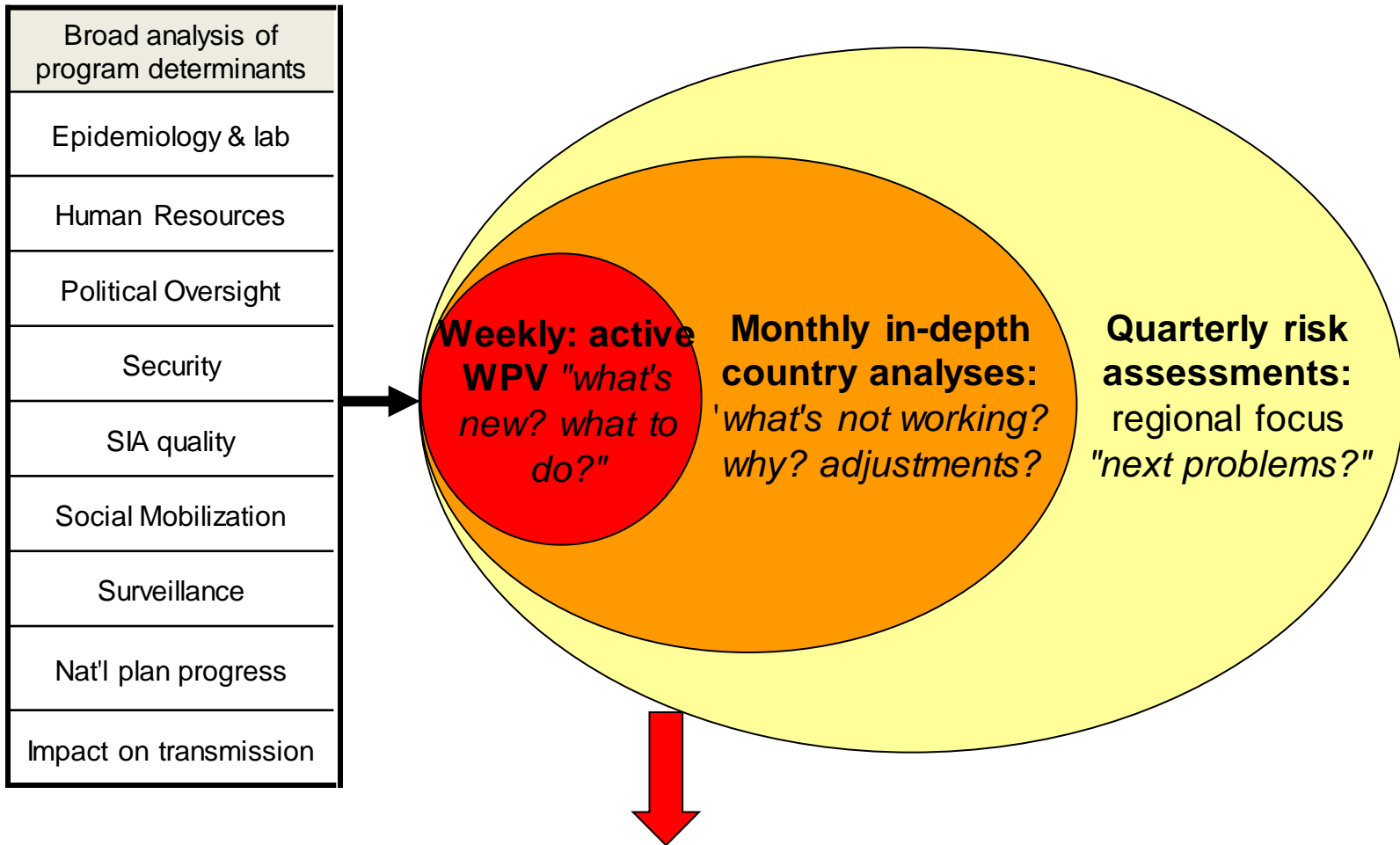
Activation of emergency centres/procedures



ExD Mr Tony Lake

- 23 Jan: UNICEF Executive Director, established an inter-divisional ***Polio Emergency Coordinating Committee*** under Deputy ExD Geeta Rao Gupta
- Allows ExD to quickly identify & resolve bottlenecks using **UNICEF emergency procedures**

Real-time programme performance tracking



Operational Priorities

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Immediately enhance accountability & management of **core eradication strategies**

Rapidly introduce & **scale-up best practices/lessons learnt** to improve strategy implementation

Accelerate **innovation** to address systemic problems

Best Practices/Lessons Learnt

A) huge expansion of technical assistance

B) improved OPV campaign monitoring

C) expanded use of environmental surveillance

D) rapid scale-up of routine immunization services

E) enhanced access in conflict-affected areas

Accelerate Innovation

A) expanded age groups for outbreak response

B) GIS & GPS technologies to improve SIA quality

C) vaccination of travelers

D) new surveillance technologies (e.g. env surv)

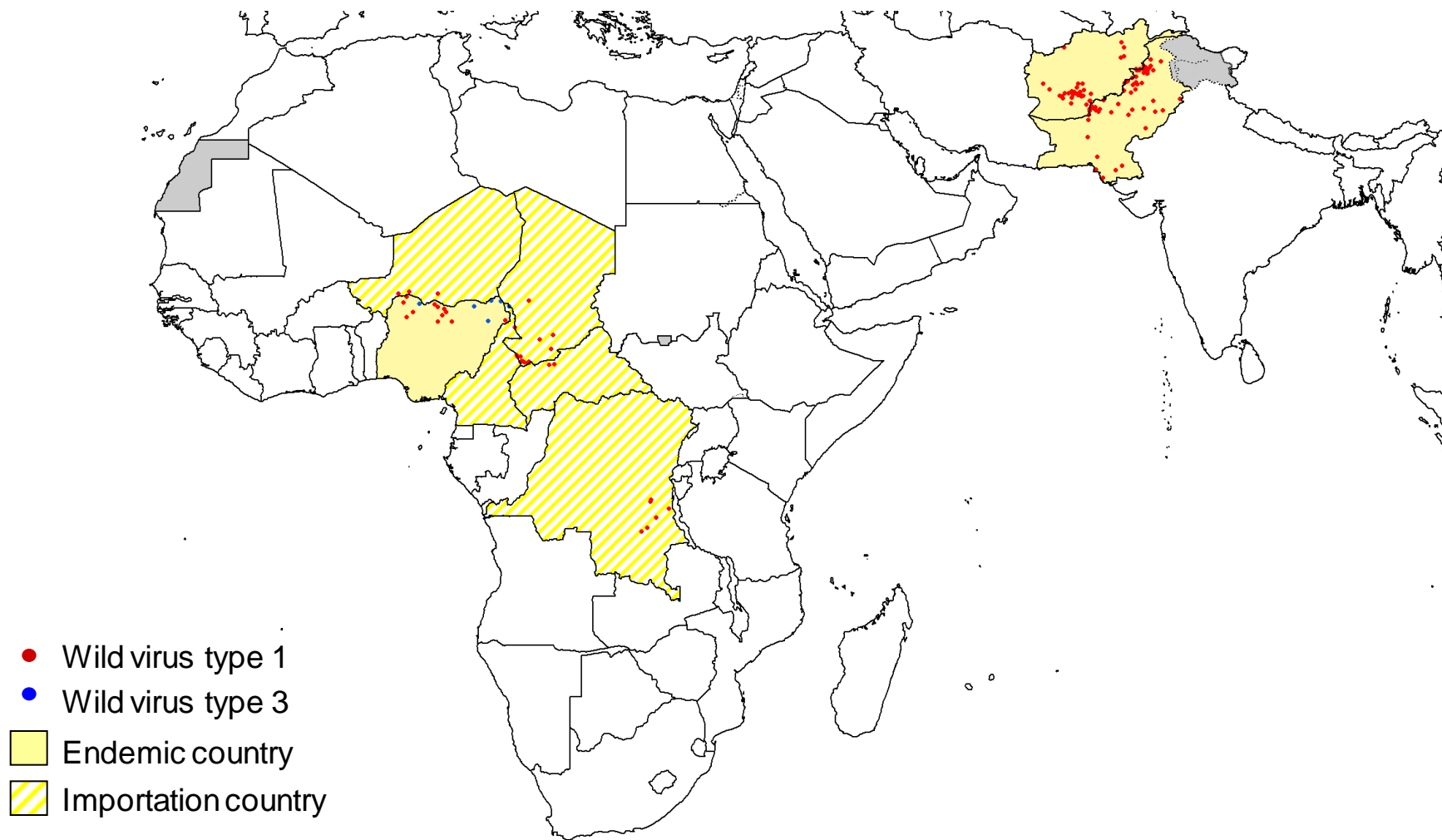
E) IPV campaigns (with or without tOPV-bOPV switch)

Performance Targets

Dates	Target for infected districts*
Jan-Jun 2012	4 SIAs, at least 2 with >80% coverage
Jul-Dec 2012	3 SIAs with >90% validated coverage
Jan-Jun 2013	4 SIAs with >90% validated coverage
Jul-Dec 2013	3 SIAs with >90% validated coverage

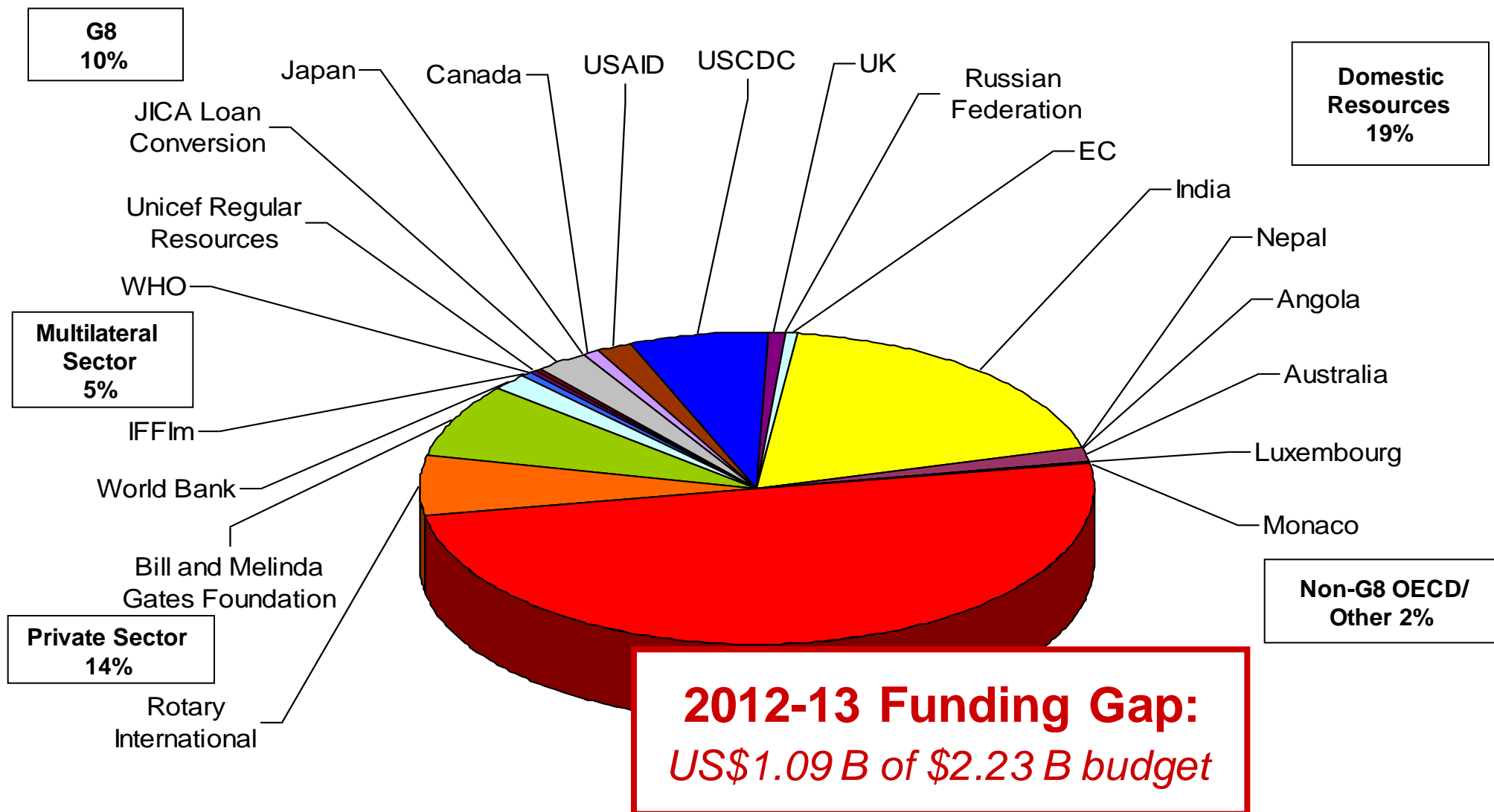
* LQAS-confirmed coverage targets

Polio today



Reported wild poliovirus cases, last 4 months

Budget & financing, 2012-13



Questions to SAGE

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