



# **WHO BENCHMARKS for International Health Regulations (IHR) Capacities**

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**World Health  
Organization**

WHO Benchmarks for International Health Regulations (IHR) Capacities  
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Les Pandas Roux, France

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# ACRONYMS

<b>AEFI</b>	adverse event following immunization
<b>AMR</b>	antimicrobial resistance
<b>BTWC</b>	Biological and Toxin Weapons Convention
<b>EMT</b>	emergency medical team
<b>EOC</b>	emergency operations centre
<b>FAO</b>	Food and Agriculture Organization
<b>GLASS</b>	Global Antimicrobial Resistance Surveillance System
<b>GOARN</b>	Global Outbreak Alert and Response Network
<b>IAEA</b>	International Atomic Energy Agency
<b>IHR</b>	International Health Regulations
<b>INFOSAN</b>	International Food Safety Authorities Network
<b>INTERPOL</b>	International Criminal Police Organization
<b>IPCAT</b>	infection prevention and control (IPC) assessment tool
<b>IT</b>	information technology
<b>JEE</b>	joint external evaluation
<b>MCV</b>	measles-containing vaccine
<b>NAPHS</b>	National Action Plan for Health Security
<b>NCC</b>	National Coordinating Centre
<b>NFP</b>	IHR national focal point
<b>OIE</b>	World Organisation for Animal Health
<b>OPCW</b>	Organisation for the Prohibition of Chemical Weapons
<b>PVS</b>	performance of veterinary services
<b>SOP</b>	standard operating procedure
<b>SPAR</b>	IHR self-assessment annual reporting tool
<b>VPDs</b>	vaccine-preventable diseases
<b>WASH</b>	water, sanitation and hygiene
<b>WASH FIT</b>	water and sanitation for health facility improvement tool
<b>WHA</b>	World Health Assembly
<b>WHO</b>	World Health Organization

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# INTRODUCTION

## WHAT IS THE BENCHMARK TOOL?

Benchmarking is a strategic process often used by businesses and institutes to standardize performance in relation to best practices of their sector. World Health Organization (WHO) and its partners have developed a tool with a list of benchmarks and corresponding actions that can be applied to increase the performance of countries in emergency preparedness through the development and implementation of a National Action Plan for Health Security (NAPHS). The WHO Benchmarks for International Health Regulations 2005 (IHR/IHR (2005)) Capacities are broad in nature to improve IHR capacities for health security and integrate multisectoral concerns at subnational (local and regional/provincial) and national levels. This means that if all benchmarks are achieved and sustained, the level of preparedness of the country would be optimum to prevent, detect and respond to threats and events.

## PURPOSE OF THE BENCHMARK TOOL

This document guides States Parties, partners, donors and international and national organizations on suggested actions needed to improve IHR capacities for health security. States Parties and other entities working to reduce the risk of global health threats can use these benchmarks and suggested actions to address gaps, including those identified by IHR monitoring and evaluation framework<sup>1</sup> components such as the States Party self-assessment annual

reporting tool, voluntary external evaluation such as the joint external evaluation (JEE), after-action reviews and simulation exercises. This document can help countries delineate the relevant steps they can take to reach capacity levels as defined in each benchmark.

## WHO IS THE AUDIENCE?

The main audiences for this benchmark document are:

- ✓ States Parties to the IHR, to develop activities for the NAPHS.
- ✓ Clinical agencies, civil society and specialized organizations at local, subnational, national, regional and global levels, to support the implementation of the NAPHS.
- ✓ Development partners, to confirm that their health security assistance is consistent with evolving needs and to provide objective milestones to help guide and determine the effectiveness of assistance.
- ✓ WHO Secretariat, to be able to promote and monitor consistency of IHR progress and NAPHS implementation.
- ✓ WHO country and regional offices, to be able to prioritize assistance.

<sup>1</sup> IHR monitoring and evaluation framework (<https://www.who.int/ihr/publications/WHO-WHE-CPI-2018.51/en/>, accessed 30 January 2019).

## DEVELOPMENT PROCESS OF THE TOOL

Following the recommendation of the IHR review committee on second extensions for establishing national public health capacities and on IHR Implementation, the WHO Secretariat developed the IHR monitoring and evaluation framework and through global consultations developed monitoring and evaluation tools such as the new IHR States Parties self-assessment annual reporting tool (SPAR) and the JEE.

In May 2018, as per the decision of the Seventy-first World Health Assembly decision on the implementation of the IHR five-year global strategic plan to improve public health preparedness and response, 2018–2023,<sup>2</sup> the WHO Secretariat commenced to develop the benchmark tool with suggested actions at each capacity level for the technical areas or capacities that can capture the outcome of the different monitoring and evaluation processes (such as the SPAR and the JEE), which inform the development of national action plans for health security.<sup>3</sup> These suggested actions can provide guidance to develop activities to build capacity needed to move from one capacity level to the next; stepping up from level 1 to 2, and 2 to 3 and beyond.

A preliminary draft of this document was shared with a working group of technical experts. Feedback was incorporated, and the revised tool was subsequently piloted and finalized.

## STRUCTURE OF THE TOOL

The tool covers all 13 IHR capacities described in the SPAR and 19 technical areas described in the JEE tool that are needed to prevent, detect, assess, notify

and respond to public health risks and acute events of domestic and international concern. For each area, one to four indicators is used to assess the country's progress towards implementation of the individual capacity, as assessed at five levels. The benchmark tool reflects the amalgam between the JEE and the new annual reporting tool so that all the essential actions required for each level are captured. Where necessary, all essential actions that are not reflected in both the tools are added to corresponding capacity levels of each benchmark. Some capacities and technical areas requiring similar types of actions for incremental progress have been combined, notably IHR coordination and reporting, national laboratory system and biosafety and biosecurity.

## DEFINITIONS

For the propose of this document the following definitions are used:

### BENCHMARK

Denotes a standard or point of reference for the capacity. Setting benchmarks facilitates the development of plans to increase capacity levels (limited, developed, demonstrated and sustainable) and adopt best practices with **a target of reaching sustainable capacity for each benchmark.**

### ACTION

Denotes **a set of activities** in each capacity level of the benchmark. These actions define the steps that need to be taken to progress from one level to the next for the given benchmarks.

<sup>2</sup> *Implementation of the International Health Regulations (2005): five-year global strategic plan to improve public health preparedness and response, 2018–2023. Seventy-First World Health Assembly Provisional Agenda Item 11.2. WHA71(15) 26 May 2018 ([http://apps.who.int/gb/ebwha/pdf\\_files/WHA71/A71\(15\)-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA71/A71(15)-en.pdf), accessed 30 January 2019).*

<sup>3</sup> *Public health preparedness and response. Seventy-First World Health Assembly Provisional Agenda Item 11.2. 11 April 2018 ([http://apps.who.int/gb/ebwha/pdf\\_files/WHA71/A71\\_8-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA71/A71_8-en.pdf), accessed 30 January 2019).*

## BUILDING SYSTEM USING THE BENCHMARKS

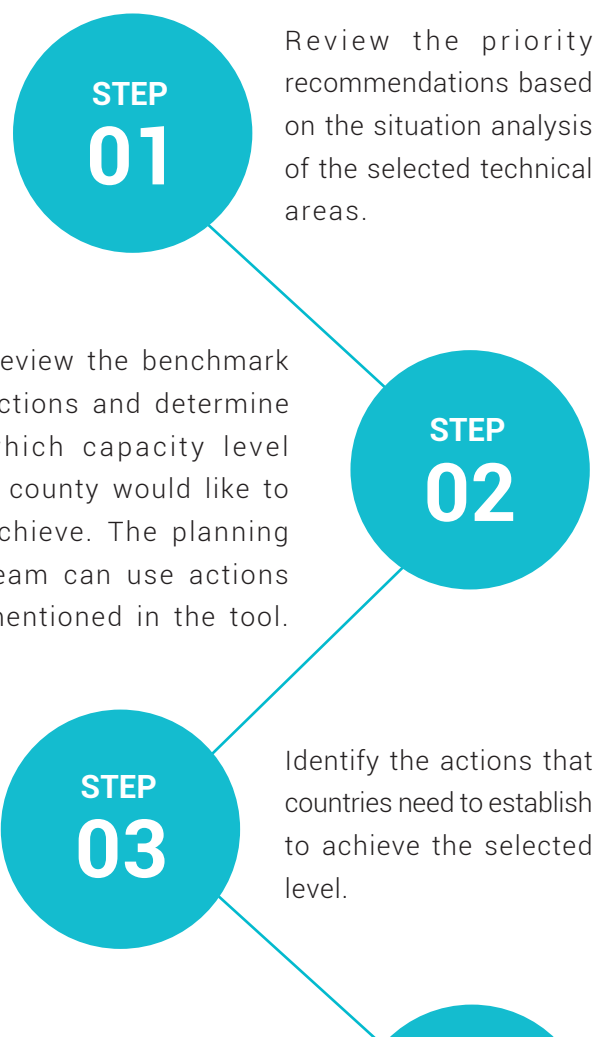
Collective and coordinated actions described in the benchmarks assist countries in strengthening a system for health security. The system consists of all organizations, people and actions whose primary intent is to promote, restore or maintain health security. These benchmark actions are necessary to strengthen health systems capacity (preparedness capacity) of countries to prevent, detect and respond to threats and events. These benchmark actions serve the following three purposes of strengthening the system. First, they allow a definition of desirable attributes – what actions are required for health security at each level of the benchmark. Second, they provide a way of defining health security priorities for countries, development partners and the WHO. Third, they provide a useful way of clarifying essential actions that require a more integrated response and recognize the interdependence of each action of the benchmarks.

## WHEN TO USE THE BENCHMARK TOOL?

The tool should be used during the planning process when a planning team is identifying and prioritizing activities for the various steps of the NAPHS framework.<sup>4</sup>

## HOW TO USE THE BENCHMARK TOOL?

The tool provides a set of actions for each level. When translating priority actions from the evaluation findings, benchmark actions can guide the development of activities in a stepwise process:



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