

INTERNATIONAL HEALTH REGULATIONS (2005)

GUIDANCE DOCUMENT FOR THE STATE PARTY SELF-ASSESSMENT ANNUAL REPORTING TOOL



World Health
Organization

GUIDANCE DOCUMENT FOR THE STATE PARTY SELF-ASSESSMENT ANNUAL REPORTING TOOL



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1. PURPOSE OF THE DOCUMENT

The main purpose of this document is to provide guidance on using the State Party Self-assessment Annual Reporting Tool, which is proposed to States Parties to fulfil their

obligations under Article 54 – Reporting and review of the IHR to report to the World Health Assembly (WHA).

2. AUDIENCE

The audiences of this guidance are the States Parties to the IHR) and the WHO Secretariat.

3. RELEVANT GOVERNING BODIES DECISIONS AND RESOLUTIONS FOR REPORTING UNDER THE IHR (2005)

The IHR represent the commitment of States Parties to collectively prepare for, and respond to events that may constitute a public health emergency of international concern according to a common set of rules. The IHR require States Parties to establish and maintain the capacity to detect, assess, notify and respond to public health risks and acute events, including those at points of entry, (Annex 1 of the Regulations). The relevance of the IHR as the legislative instrument to ensure global public health security lies in their full application, implementation, and compliance by all States Parties.

Article 54 of the IHR states that “States Parties and the Director-General shall report to the Health Assembly on the implementation of these Regulations as decided by the Health Assembly”.

In 2008, the 61st World Health Assembly, through the adoption of Resolution WHA61.2, decided that “States Parties and the Director-General shall report to the Health Assembly on the implementation of the Regulations annually, with the next report to be submitted to the Sixty-second World Health Assembly”.

Between 2010 and 2017, the IHR Monitoring Questionnaire sent to National IHR Focal Points was used at least once by all 196 States Parties to report to the WHA. The summary of results from the questionnaire has been used to report to the Assembly since the 64th WHA in 2010, and

country profiles have been made available on the WHO Global Health Observatory (GHO) data web page¹.

In 2015, the WHO Secretariat, along with States Parties, initiated the development of monitoring and evaluation approaches, focusing on national core capacities, that were consolidated, as a whole, in the IHR Monitoring and Evaluation Framework, to satisfactorily ensure mutual accountability among States Parties, while building trust and appreciation of the public health benefits resulting from the adoption of a common set of rules inspired by dialogue and transparency. The IHR Monitoring and Evaluation Framework consists of four complementary components: one mandatory; the State Party Self-assessment Annual Report, and three voluntary: joint external evaluation, after-action reviews, and simulation exercises. The State Party Self-assessment Annual Report and joint external evaluations, are based on quantitative measures, and can be regarded as a prerequisite of functional core capacities. After-action reviews and simulation exercises, are based on qualitative measures, and are aimed at gauging the functional status of core capacities. The IHR Monitoring and Evaluation Framework encourages transparency and mutual accountability between States Parties towards global public health security.

¹ - Global Health Observatory (accessed on 09 April, 2018 <http://www.who.int/gho/ihr/en/>)

4. REVISION OF THE IHR (2005) STATE PARTY SELF-ASSESSMENT ANNUAL REPORTING TOOL

In compliance with the recommendations of the *IHR Review Committee on Second Extensions for Establishing National Public Health Capacities and on IHR Implementation*, and following formal global consultations with States Parties conducted in 2015, 2016 and 2017, and 2018, the WHO Secretariat has developed the “*IHR State Party Self-assessment Annual Reporting Tool*”. WHO drafted the new self-assessment

annual reporting tool based on inputs from all WHO regional focal points. The draft version of the new tool was shared with IHR focal points of State Parties for their inputs. In March 2018², WHO convened a meeting of IHR national focal points and all WHO Regional Offices to discuss the recommended changes. These recommendations were then incorporated into a revised version of the tool.

5. PRINCIPLES APPLIED IN REVISING THE STATE PARTY SELF-ASSESSMENT ANNUAL REPORTING TOOL

The revision of the IHR State Party Self-assessment Annual Reporting Tool (proposed to States Parties for reporting to the World Health Assembly) was based on the following principles:

- It constitutes the primary tool for ensuring mutual accountability between States Parties and the WHO Secretariat when reporting to the WHA;
- It is a self-assessment tool to be used by national authorities across government sectors, and focuses on national IHR capacities across relevant sectors for the detection and response to potential public health emergencies ;
- It considers ‘access’ to IHR capacities rather than in-country presence of IHR capacities;
- It explicitly captures the status of IHR for
- It constitutes a revised interpretation of national IHR capacities detailed in Annex 1 of the Regulations, and, to the extent possible, it maintains consistency with the current IHR Monitoring Questionnaire proposed in 2010 by the WHO Secretariat;
- It based on a scale scoring system, that can be presented both, in percent and color-codes according to the level of capacity for each particular indicator;
- The score of each individual national IHR capacity continues to be based on the scores of indicators defining it;
- It is complementary with the other three voluntary components of the IHR Monitoring and Evaluation Framework;
- It attempts to increase the objectivity of the information reported by States Parties by focusing on the gathering information that

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