PUBLIC HEALTH MEASURES AT PoE
MONGOLIA

Surenkhand G.
Deputy Director, National Center for Communicable Diseases (IHR NFP)

5th CAPSCA-AP meeting
19-20 April 2012
National planning on emerging disease

- The first multisectoral workshop on IHR (2005), May 2007
- National APSED implementation plan 2008-2010, July 2008
- Ministerial order to implement national plan on emerging disease 2010-2011, April, 2010
- National plan for Emerging Infectious Diseases and Public Health Emergencies 2012-2015
Event based surveillance system

- Sources of information (hotline, media, medical, non-medical)
- Event verification, risk assessment
- Response to WHO verification request
- Linked with risk communication team, RRT and MFETP
- Feedback system (weekly by e-mail, real-time by phone)
Indicator based surveillance system

- Operational nationwide
- SoPs for early warning and response updated in 2010
- Syndromic reporting system – standard case definitions used
- Weekly feedback by e-mail (national, sub-national, local, WHO, Laboratory)
- Surveillance data from animal health, food and environment agencies
- Incidence baselines and thresholds established
Public Health Emergency Preparedness and Response

- National IHR multisectoral coordinating committee
- SoPs for IHR NFP communication and coordination
- Draft Strategy to strengthen public health functions at the PoE 2011-2015
- Health care facility Acute Respiratory Disease preparedness plan
Location of Borders points

- International: 14
- Local basic: 10
- Seasonal: 15
- Transit: 7
EMERGENCY PREPAREDNESS AND RESPONSE

- Public Health Emergency contingency plan for PoE
- Conduct training, drill and exercise to test contingency plan
- Arrangement for interview, quarantine, treatment and isolation
- Specific control measures (disinfection, deratization, disinsection)
Emergency Preparedness in Chingiss Khan Airport

**National Centre for Communicable diseases (Hospital and IHR NFP)**
- Arrangements:
  - Transportation of suspect travellers
  - Treatment
  - Isolation
  - Diagnosis

**Ministry of Health**

**Chingiss Khaan airport**

**State Specialized Inspection agency:**
- Quarantine
- Conveyance inspection
- Vector control
- Disinfection, disinsection...

**Mechanisms for command, communication & coordination:**
- Event communication
- Collaborative investigation
- Coordinated response
  (e.g. screening, examination)
PoE core capacity assessment 2010

- З бомтых дундаж: 50.6
- Сэхбаатар: 60.33
- Замын Ууд: 62
- Буягт-Ухаа: 66
NEXT STEP

• Review and revise SoPs for interagency communication and coordination during emergencies
• Update Public Health Emergency contingency plan, incorporating a whole-of-society approach, risk communication and business continuity components
• Conduct multiagency table top exercise and simulation to ensure plan functionality
• Conduct IHR self-assessment 2012 and develop plan to address gaps and weaknesses
• Conduct risk assessment study to evaluate cost effectiveness of interventions (health declaration forms, temperature screening)
• Upgrade human resource capacity
• Collaborate with relevant ministries to strengthen core capacities (trained staff, equipment, safe environment for travellers) at 3 designated PoE
PUBLIC HEALTH RESPONSE AT POE DURING PANDEMIC INFLUENZA H1N1

- The public health response activated in all 23 POEs on 29 April 2009
- Health declaration forms used in 6 languages
- Temperature screening (arriving and transit passengers)
- Health advice and alerts to travellers (entry and exit passengers, PoE authority)
- Quarantine and Isolation measures activated
- Coordination with National Centre for Communicable diseases for medical service of suspected cases
- The first pandemic influenza case detected on 12 October 2009
- As of March 2011, total of 1505 lab confirmed cases and 30 deaths associated with pandemic influenza
- Public health measures at POE deactivated on Feb. 2010.

PANDEMIC RESPONSE COMMAND AND CONTROL SYSTEM

For Pandemic Phases 1-5, MOH is the main decision-making point. At Phase 6, the State (National) Emergency Committee, chaired by Deputy Prime Minister assumed control. The Committee makes decisions which are then submitted to the government (Prime Minister) for approval.

The State Emergency Committee has representation at aimag (province) and sum (district) levels. Technical responsibility for the pandemic response lies with the NCCD (IHR focal point).

Emergency Law was enacted when the Pandemic declared. the Ministry of Health reports to the State Emergency Committee to provide epidemiological information to assist decision-making.

In some aimags (provinces) a State of Emergency can declared allowing local decisions to be made for some public health interventions such as school closure and quarantine.

PoEs followed the State Emergency Committee resolutions and orders, in the consultation with NCCD for information and technical recommendations.

BORDER INSPECTION DEPARTMENT:

Head of State Specialized Inspection Agency makes decisions on PoE public health interventions based on technical recommendations of Border inspection department. Border Inspection Department make technical decision based on discussion and information received from MoH, WHO, IATA, WTO Border closure, restriction decisions will be issued by government of Mongolia.

KEY ACHIEVEMENTS

- An excellent Command and Control structure for the pandemic
- Good sharing and use of information to inform decision-making
- Coordination mechanisms improved during the emergency.

CHALLENGES

- Poor infrastructure at all PoEs
- Insufficient supplies and equipment
- Lack of trained staff
- Poor risk assessment and evidence-based decision
- No clear procedure for interagency coordination and communication