

GLOBAL HEALTH SECURITY AGENDA
ROADMAP
for
CÔTE D'IVOIRE

Overview and Context

The purpose of this document is to develop a roadmap for ongoing and planned Global Health Security Agenda (GHSA) activities in support of the 12 GHSA targets through 2019. The goal is to ensure coordination and partnership across all organizations to ensure that targets are met and sustainable systems and networks are established. The roadmap is organized by specific capacities under the Prevent, Detect, Respond framework, and provides a snapshot of all activities planned to support GHSA implementation in Years One (2015) to Five (2019).

This will be a living document that will change over time to reflect shifts in priorities and/or resources. This template is designed as a resource for GHSA planning and should ultimately be adapted as countries articulate how best to meet their needs for GHSA planning and implementation. This document is intended to inform and complement annual country-specific work plans.

Other contextual issues that will be addressed in this roadmap include:

- Relevant country history with GHSA
- Presence and role of donors
- Prior relevant policy and program efforts with World Health Organization (WHO) International Health Regulations (IHRs) and World Organization for animal Health (OIE) World Animal Health Information System (WAHIS) reporting
- International Organizations' presence and programs
- Regional Organizations' presence and programs (e.g. African Union)
- Non-state organizations of relevance (e.g. Institute Pasteur)
- Other key issues and sensitivities

Note

The information contained in this document is meant for planning and discussion purposes between the host-country and other GHSA partners. All activities will be carried out in a manner that is consistent with organizations requirements, budget authorities, and missions of host countries and GHSA partners. All GHSA partner country foreign assistance is subject to availability of funds and appropriations by the governmental processes of GHSA partner countries.

Global Health Security Agenda Overarching Activities

Within the context of Prevent/Detect/Respond, this overarching implementation roadmap should reflect by target the following:

- Host country's institutional structures and responsibilities, roles, responsibilities (*under host government activity*)
- U.S. Departments and Agencies providing technical assistance or support (*under US Government Activity*)
- Other donors' programs, support, etc. (*under other activity*)
- Non state organizations' activities. (*under other activity*)
- Coordination mechanisms

Prevent

Antimicrobial Resistance

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Preventing the emergence and spread of antimicrobial drug resistant organisms and emerging zoonotic diseases and strengthening international regulatory frameworks governing food safety.	Support work being coordinated by WHO, FAO, OIE to develop an integrated and global package of activities to combat antimicrobial resistance, spanning human, animal, agricultural, food and environmental aspects (i.e. a one-health approach), including: a) each country has its own national comprehensive plan to combat antimicrobial resistance; b) strengthen surveillance and laboratory capacity at the national and international level following agreed international standards developed in the framework of the Global Action plan, considering existing standards and; c) improved conservation of existing treatments and collaboration to support the sustainable development of new antibiotics, alternative treatments, preventive measures and rapid, point-of-care diagnostics, including systems to preserve new antibiotics.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	National Technical Working Group (TWG) established around One-Health concept to coordinate, monitor and implement AMR activities.	CDC, USAID	Multisectoral, Institut Pasteur de Côte d'Ivoire (IPCI)		
Year 1-2 (Sep. 2016)	Gaps in surveillance and diagnostic capacity for Antimicrobial Resistance (AMR) identified. National plan developed	CDC, USAID	Multisectoral, IPCI		
Year 3 (Sep. 2017)	Baseline established for Infection Prevention & Control (IPC) practices, Water, Sanitation and Hygiene (WASH) infrastructure, and waste management in priority animal and human health facilities. Point-prevalence of health care-associated infections assessed and documented.	CDC, USAID	Multisectoral, IPCI		
Year 3 (Sep. 2017)	Reporting of AMR results to national and multinational information/surveillance systems initiated	CDC, USAID	Multisectoral, IPCI		
YEAR 3	Multisectoral National AMR Policy and Strategy developed for addressing healthcare-associated infections (HAI) and antimicrobial resistance	CDC/USAID	Multisectoral, IPCI	GOCI interest in pursuing public private partnership (PPP) assistance	

Prevent

Year 4	Implementation of the national AMR policy and strategy for animal and human health at several HAI/AMR pilot sites.	CDC/USAID	Multisectoral, IPCI	GOCI interest in pursuing public-private partnership (PPP) assistance
Year 4 (Sep. 2018)	First cohort of Laboratory, clinical staff and veterinarians trained in IPC competencies and AMR risks and control strategies including WHO priority pathogens.	CDC	IPCI	

Year 4 (Sep. 2018)	IPC supplies consistently available in targeted healthcare facilities (via functional WASH infrastructure and reliable commodity procurement).	CDC, USAID		
Year 4 (Sep. 2018)	Evaluation conducted on antibiotic pathways/presence in human, animal, environmental fora.		Multisectoral	
Year 5 (Sep. 2019)	System to track antimicrobial usage is implemented.	CDC	MoH and IPCI to lead activity	
Year 5 (Sep. 2019)	IPC supplies universally available in healthcare facilities (via functional WASH infrastructure and reliable commodity procurement).	CDC, USAID		
Year 5 (Sep. 2019)	AMR Stewardship program established to promote conservation of existing treatments, preventative measures and rapid point of care diagnostics.	CDC	IPCI	
Year 5 (Sep. 2019)	National Implementation of the AMR policy and strategy for animal and human health, including legislative and regulatory framework for the prescription, use and traceability of antibiotics.	CDC	Multisectoral	
Year 5 (Sep. 2019)	Established national laboratory database and data management system for AMR.	CDC to offer technical assistance (TA) and initiate work on this milestone through the laboratory technical lane	MoH and IPCI focal points	

Zoonotic Diseases

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Preventing the emergence and spread of antimicrobial drug resistant organisms and emerging zoonotic diseases and strengthening international regulatory frameworks governing food safety.	Adopted measures behaviors, policies and/or practices that minimize the spillover of zoonotic diseases from lower animals into human populations.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	One-Health Stakeholders strategically identified and a mechanism for multisectoral coordination established, aligned with a common mission statement.	USAID and CDC to offer TA	Multisectoral		
Year 1-2 (Sep. 2016)	National prioritization of zoonotic diseases	USAID and CDC to offer TA	Multisectoral		
Year 1-2 (Sep. 2016)	High-risk human/animal interfaces (i.e. “value chains” land-use change, etc.) mapped.	USAID	Multisectoral		
Year 3 (Sep. 2017)	High-risk “nodes” for spillover of zoonotic threats and the behaviors and practices that enable spillover identified upon completion of mapping in year 1.	USAID	Multisectoral		
Year 3 (Sep. 2017)	Implement current policies regarding livestock practices with host government.	USAID			
Year 4 (Sep. 2018)	Surveillance systems for at least two of the five prioritized zoonoses are established to detect spillover at sentinel sites based on previously identified “nodes”.	USAID and CDC to offer TA	Multisectoral		
Year 4 (Sep. 2018)	Plan completed for institutionalizing a national multi-sectoral coordination mechanism.	USAID			
Year 5 (Sep. 2019)	Surveillance systems for all five prioritized zoonoses are established to detect spillover at sentinel sites based on previously identified “nodes”.	USAID			
Year 5 (Sep. 2019)	Plan implemented to institutionalize a national multi-sectoral coordination mechanism, addressing policy and operational needs.	USAID			

Year 5 (Sep. 2019)	Package of One Health “risk reduction” measures targeting high-risk practices and behaviors that enable spillover implemented at “nodes” identified.	USAID		
Year 5 (Sep. 2019)	Package of One Health “risk reduction” measures targeting high-risk practices and behaviors that enable spillover evaluated for scale up.	USAID		

Biosafety & Biosecurity

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Promoting national biosafety and biosecurity systems.	A whole-of-government national biosafety and biosecurity system is in place, ensuring that especially dangerous pathogens are identified, held, secured and monitored in a minimal number of facilities according to best practices; biological risk management training and educational outreach are conducted to promote a shared culture of responsibility, reduce dual use risks, mitigate biological proliferation and deliberate use threats, and ensure safe transfer of biological agents; and country-specific biosafety and biosecurity legislation, laboratory licensing, and pathogen control measures are in place as appropriate.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Baseline BS+S assessment for humans, animal, environmental health systems, including sample transport system, and dangerous pathogens inventory conducted.	CDC, DTRA(CTR/CBEP)*	Multisectoral group acknowledged this as an important gap. GOCI to determine which sectors of labs are priorities, and level of TA required.		
Year 3 (Sep. 2017)	Classification system established for pathogens and level of BS+S capacity, equipment and infrastructure in labs.	CDC, DTRA(CTR/CBEP)*	Multisectoral, IPCI		
Year 3 (Sep. 2017)	Contextualize international BS+S standards across human and animal labs.	CDC, DTRA(CTR/CBEP)*			
Year 3 (Sep. 2017)	Rapid and culture-free diagnostic practices initiated at targeted sites.	CDC, DTRA(CTR/CBEP)*	IPCI		
Year 3 (Sep. 2017)	Functional National Bio-risk Office established as the focal point for the biosecurity and biosafety program.	CDC, DTRA(CTR/CBEP)*	IPCI is mandated focal point for all laboratory capacity and laboratory capacity building for the MoH. May want to use CoAg to strengthen staff supporting BS+S.		
Year 4 (Sep. 2018)	Institutionalization of national plan, legislation, policies and procedures/guidelines based on BS+S and Biorisk Management methodologies.	CDC, DTRA(CTR/CBEP)*	Multisectoral		
Year 4 (Sep. 2018)	System for reporting BS+S failures established	CDC, DTRA(CTR/CBEP)*	IPCI		

Year 5 (Sep. 2019)	National Bio-risk office authorized to administer and enforce BS&S oversight systems.	CDC, DTRA(CTR/CBEP)*	IPCI	
Year 5 (Sep. 2019)	Pathogen classification system reviewed and evaluated.	CDC, DTRA(CTR/CBEP)*	IPCI	
Year 5 (Sep. 2019)	Lab BS&S infrastructure upgraded in compliance with international standards	CDC, DTRA(CTR?CBEP)*		
Year 5 (Sep. 2019)	Laboratory facilities secured using sustainable bio-risk design, methods and technologies	, CDC, DTRA(CTR/CBEP)*	IPCI	
Year 5 (Sep. 2019)	Establish specimen referral network	CDC, DTRA(CTR/CBEP)*	IPCI/INHP	
Year 5 (Sep. 2019)	National consolidation of especially dangerous pathogens.	CDC, DTRA(CTR/CBEP)*		

DTRA (CTR/CBEP)*: Asterisk indicates subject to internal review.

Immunization

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Reducing the number and magnitude of infectious disease outbreaks.	A functioning national vaccine delivery system – with nationwide reach, effective distributions, access for marginalized populations, adequate cold chain, and ongoing quality control – that is able to respond to new disease threats.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Assessment of vaccine delivery logistics, focusing on targeted areas and population.	CDC to start informal assessments of routine immunization systems and preparation of recommendations to host government for further host country buy-in, USAID can support on logistics and supply chain management issues.	MoH relies on campaigns for routine immunizations like measles. May require more political engagement and advocacy in year 1.	GAVI, UNICEF	
Year 3 (Sep. 2017)	Plan developed to improve routine VPD immunization rates for targeted areas and populations in partnership with donor community.	CDC to offer TA, USAID	MoH, INHP	GAVI, UNICEF	
Year 3 (Sep. 2017)	Long-term sustainable strategy for Vaccine financing developed.	USAID	MoH, INHP	GAVI, UNICEF	
Year 4 (Sep. 2018)	Logistical improvements such as cold chain, vaccine supply, reverse cold chains, storage and specimen transport initiated based on established plan and baseline assessment.	USAID, CDC	INHP	GAVI, UNICEF	
Year 4 (Sep. 2018)	Risk communication and public awareness measures implemented for VPDs.		MoH, INHP	GAVI, UNICEF	
Year 5 (Sep. 2019)	Routine measles immunization rates Nationwide increased to 75%, focusing on low coverage districts.	CDC To provide support through CoAG with the MoH	INHP	GAVI, UNICEF	
Year 5 (Sep. 2019)	Regulatory and quality control system established for procured vaccines.	CDC	MoH, INHP	GAVI, UNICEF	
Year 5 (Sep. 2019)	Routine measles immunization rates Nationwide increased to 90%, focusing on low coverage districts. (VPD outbreak detection and response are addressed in surveillance and emergency operations)	CDC, USAID	MoH, INHP	GAVI, UNICEF	

Year 5 (Sep. 2019)	Monitoring system established for logistical and financing aspects of vaccine delivery, and epidemiological impacts (including marginalized populations).	CDC To provide support through CoAG with the MoH, and additional TA	MoH in lead	GAVI, UNICEF
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Detect

Laboratory Systems

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Detect Threats Early		Developing and deploying novel diagnostics and strengthen laboratory systems.	Real-time biosurveillance with a national laboratory system and effective modern point-of-care and laboratory-based diagnostics.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Assessment and prioritization of critical gaps in the SOPs, procedures, and quality practices of the NPHL system.	CDC, DoD CTR-CBEP	MoH/INHP and IPCI to lead		
Year 1-2 (Sep. 2016)	Assessment and prioritization of the critical gaps in the legal and regulatory frameworks	CDC, DoD CTR-CBEP	MoH/INHP and IPCI to lead		
Year 1-2 (Sep. 2016)	Lab-specific multi-hazard SOPs and protocols, including AMR, Zoonotics, assessed and developed.	CDC, DoD CTR-CBEP	IPCI, Multisectoral	Note: this milestone linked to EOC action package	
Year 1-2 (Sep. 2016)	Interministerial National Laboratory Network formalized (including review and update of national strategy).	DoD CTR-CBEP, CDC	Multisectoral		
Year 1-2 (Sep. 2016)	Labs identified for strengthening of diagnostic capacities against agreed upon list of priority zoonotic diseases.	USAID			
Year 3 (Sep. 2017)	National laboratory strategy, including AMR, Zoonotics, Immunization updated and finalized.	CDC, USAID	IPCI, multisectoral		
Year 3 (Sep. 2017)	Multi-tiered reporting system to ensure timely delivery of diagnostic results and surveillance data developed.	CDC, USAID	IPCI		
Year 3 (Sep. 2017)	Establishment of a national organizational infrastructure to develop and implement quality standards and guidelines for clinical, veterinary and environmental testing and referral.	CDC, USAID	IPCI, multisectoral		
Year 3 (Sep. 2017)	In-country mechanism and cadre of Biosafety cabinet certification personnel established.	CDC and DoD CTR-CBEP to offer TA	IPCI		
Year 3 (Sep. 2017)	Continued strengthening of diagnostic capacities of labs against agreed upon list of priority zoonotic diseases.	USAID			

Year 4 (Sep. 2018)	Availability of appropriate laboratory services ensured (including tiered referral system, point of care).	CDC, DoD CTR-CBEP	IPCI	
Year 4 (Sep. 2018)	Established laboratory information system and protocols to link laboratory information and epidemiological surveillance systems.	CDC	IPCI	
Year 4 (Sep. 2018)	Supply chain management and quality assurance systems introduced.	USAID		
Year 5 (Sep. 2019)	Lab information management and supply chain management (including electronic inventory system, planning, forecasting, warehouse, distribution) systems established.	CDC, USAID, DoD CTR-CBEP	IPCI	
Year 5 (Sep. 2019)	Expansion of Lab quality management system (QMS) and strengthen laboratory management towards accreditation (SLMTA).	CDC	Multisectoral	WHO
Year 5 (Sep. 2019)	Supply chain management and quality assurance systems in place.	USAID		
Year 5 (Sep. 2019)	Sustainability plan for lab commodities and maintenance developed.	CDC, DoD CTR-CBEP, USAID	IPCI	
Year 5 (Sep. 2019)	Laboratory technical capacity building for testing and reporting at all levels of the public health system is evaluated, including AMR and Zoonotics.	CDC, DoD CTR-CBEP, USAID		
Year 5 (Sep. 2019)	Accreditation of NPHL and Regional laboratories.	CDC	IPCI and MoH priority. GOCI to lead.	

Surveillance Systems

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Launching, strengthening and linking global networks for real-time biosurveillance.	Strengthened foundational indicator- and event-based surveillance systems that are able to detect events of significance for public health, animal health and health security; improved communication and collaboration across sectors and between sub-national, national and international levels of authority regarding surveillance of events of public health significance; improved country and regional capacity to analyze and link data from and between strengthened, real-time surveillance systems, including interoperable, interconnected electronic reporting systems. This can include epidemiologic, clinical, laboratory, environmental testing, product safety and quality, and bioinformatics data; and advancement in fulfilling the core capacity requirements for surveillance in accordance with the IHR and the OIE standards.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Existing information and surveillance system evaluated to, and to improve information system to determine capacity to detect events of significance for public health, animal health and health security, and to improve information systems and data sharing.	CDC, DoD CTR-CBEP, USAID	Multisectoral		
Year 3 (Sep. 2017)	National surveillance strategy for addressing animal, human, environmental health across multiple cross-cutting technical areas developed.	CDC, USAID	Multisectoral		
Year 3 (Sep. 2017)	Routine surveillance at points of entry to include maritime and land borders expanded.	CDC, USAID	Ebola screening measures currently in place, led through the Ministry of Transportation and MoH/INHP.	JICA funded thermal scanners for airport Ebola screening.	
Year 4 (Sep. 2018)	Syndromic, early-warning, and/or event based surveillance system across human, animal and environmental health established and functional.	CDC, USAID	INHP, multisectoral		

Surveillance Systems

Year 4 (Sep. 2018)	Public health agreements between Côte d'Ivoire and neighboring countries for cross-border information exchange, specimen sharing, and cross-border transport developed.	CDC, USAID		
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Year 5 (Sep. 2019)	Data sources from disease surveillance, laboratory information systems and Emergency Management integrated to form real-time linkages and tiered information flow.	CDC, USAID		
Year 5 (Sep. 2019)	Côte d'Ivoire is in compliance with IHR, international best practices and agreements.	CDC, USAID		
Year 5 (Sep. 2019)	Multi-sectoral surveillance data for improved analysis, reporting, dissemination and decision making is integrated at the National level.	CDC, USAID		
Year 5 (Sep. 2019)	Systems in place to continually monitor and address gaps in preparedness and port of entry/land border crossing for public health events.			

Workforce Development

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Training and deploying an effective bio-surveillance workforce.	A workforce including physicians, veterinarians, biostatisticians, laboratory scientists, and at least 1 trained field epidemiologist per 200,000 population, who can systematically cooperate to meet relevant IHR and Performance of Veterinary Services (PVS) core competencies.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Establish basic Field Epidemiology Training Program (FETP) and long-term buy-in on MoH-owned tiered FETP.	CDC	Multisectoral		
Year 1-2 (Sep. 2016)	One Health Workforce structure, as part of the multisectoral coordination mechanism, established.	USAID, CDC, DoD			
Year 3 (Sep. 2017)	Workforce training needs assessment (including One Health) conducted to establish multisectoral emergency outbreak capacities.	CDC, DoD CTR-CBEP, USAID			
Year 3 (Sep. 2017)	FETP Basic and Advanced (Years 1-5) implemented; initial inclusion of Lab and Zoonotic elements into training.	CDC	MoH engagement critical		
Year 3 (Sep. 2017)	Core-competencies and Composition of a one health workforce to prevent, detect, and respond to threats identified and agreed upon.	USAID			
Year 3 (Sep. 2017)	Cadres of animal and human health professionals provided in-service training in requisite one health skills.	USAID			
Year 4 (Sep. 2018)	FETP Basic and Advanced (Years 1-5) implemented, including support for regional epidemiology and laboratory component (FELTP).	CDC	MoH engagement critical.		
Year 4 (Sep. 2018)	National policies and regulations for One health workforce Core-competencies and Composition harmonized.	USAID			
Year 4 (Sep. 2018)	Animal and human health professionals provided in-service training in requisite one health skills.	USAID			
Year 5 (Sep. 2019)	Cadre of clinic care providers (physicians, nurses) trained in bio-surveillance and sentinel surveillance established.	CDC	MoH engagement critical		

Year 5 (Sep. 2019)	FETP Basic and Advanced (Years 1-5) implemented, including support for regional epidemiology.	CDC		
Year 5 (Sep. 2019)	OH workforce has been trained in accordance with national OH disease "detection" needs.	USAID		

Reporting

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Prevent Avoidable Epidemics		Strengthening the global norm of rapid, transparent reporting and sample sharing in the event of health emergencies of international concern.	Timely and accurate disease reporting according to WHO, OIE, and FAO requirements.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Standard reporting systems in laboratory and surveillance systems (including human and animal diseases) identified and mapped.	CDC, DoD, USAID	Multisectoral		
Year 1-2 (Sep. 2016)	National framework for sharing biological and behavioral surveillance data with in-country stakeholders across human, animal and environmental and animal sectors in place.	USAID, CDC, CTR-CBEP			
Year 3 (Sep. 2017)	Routine multi-tiered reporting of infectious and zoonotic diagnostic results established across health care facilities and laboratories.	CDC, USAID, CTR-CBEP	INHP, IPCI		
Year 3 (Sep. 2017)	Standard reporting systems in laboratory and surveillance systems implemented across the national laboratory system.	CDC, DoD CTR-CBEP			
Year 4 (Sep. 2018)	Capacity established (staffing, training, network building) for reporting potential public health events of international concern (PHEIC).	DoD CTR-CBEP, CDC, USAID			
Year 5 (Sep. 2019)	Emergency identification and reporting exercises conducted.	DoD CTR-CBEP, CDC, USAID			
Year 5 (Sep. 2019)	Reporting protocols evaluated and revised r.	DoD CTR-CBEP, CDC, USAID			

Respond

Emergency Management

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Respond Rapidly and Effectively		Developing an interconnected global network of EOCs and multi-sectoral response to biological incidents.	Every country will have a public health Emergency Operations Center (EOC) functioning according to minimum common standards; maintaining trained, functioning, multi-sectoral rapid response teams (RRTs) and “real-time” biosurveillance laboratory networks and information systems; and trained EOC staff capable of activating a coordinated emergency response within 120 minutes of the identification of a public health emergency.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	A national strategy for preparedness and response is developed, that includes risk communications, emergency operations system design, emergency management, and a One Health approach.	CDC, USAID, DoD to offer TA	Multisectoral	French Development Agency (AFD), European Commission, Public Health England, WHO in country representatives	
Year 1-2 (Sep. 2016)	The first cohort of staff is identified and trained on core emergency management competencies.	CDC/DoD	Multisectoral	WHO in country representatives	
Year 1-2 (Sep. 2016)	Complete the renovation, construction and equipping of MOPH EOC.	CDC, DoD	Multisectoral	French Development Agency (AFD), European Commission, Public Health England, WHO in country representatives	
Year 3 (Sep. 2017)	Multi-sectoral national health incident management authorities and responsibilities are designated, inclusive of human, animal, and environmental health incidents.	CDC, DoD	Multi-sectoral simulation exercise development and participation	French Development Agency (AFD), European Commission, Public Health England, WHO in country representatives	
Year 4 (Sep. 2018)	Core EOC staff and multi-sectoral rapid response teams have tested, validated, and simulated incident management systems	CDC, DoD	INHP		

Year 5 (Sep. 2019)	Functional real-time links established between the EOC and respective biosurveillance and information systems.	CDC, USAID, DoD		
Year 5 (Sep. 2019)	Evaluation of EOC functionality against GHSA 5-year target and first year national strategy documents.	CDC, DoD, USAID		French Development Agency (AFD), European Commission, Public Health England, WHO in country representatives

Linking PH and Law Enforcement

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Respond Rapidly and Effectively		Developing an interconnected global network of EOCs and multi-sectoral response to biological incidents: Promote establishment of public health EM programs, including EOCs; trained, functioning, multi-sectoral rapid response teams, with access to a real-time information system; and capacity to attribute the source of an outbreak.	In the event of a biological event of suspected or confirmed deliberate origin, a country will be able to conduct a rapid, multi-sectoral response, including the capacity to link public health and law enforcement, and to provide and/or request effective and timely international assistance, including to investigate alleged use events.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Formalized partnerships established among public health, military and law enforcement institutions.	CDC to offer TA with this through the EOC technical lane, DoD, USAID			
Year 3 (Sep. 2017)	Plan developed for integrating public health, military and law enforcement institutions in a joint response to a public health threat.	CDC, DoD.			
Year 5 (Sep. 2019)	MoUs, joint protocols and threat assessment tool developed for joint investigation.	CDC, DoD			
Year 5 (Sep. 2019)	Public health, military and law enforcement integration tested by simulation exercises.	CDC, DoD			

GHSA Goal		GHSA Objective	GHSA 5-Year Target		
Respond Rapidly and Effectively		Improving global access to medical and non-medical countermeasures during health emergencies.	A national framework for transferring (sending and receiving) medical countermeasures and public health and medical personnel among international partners during public health emergencies.		
Year	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)	
Year 1-2 (Sep. 2016)	Policies, regulatory frameworks, and SOPs currently governing MCM and personnel deployment are assessed and documented.	CDC, USAID			
Year 3 (Sep. 2017)	National framework established for deploying/receiving medical countermeasures and emergency response personnel within the country, the region and international community.	CDC, USAID			
Year 4 (Sep. 2018)	Protocols, funding and procedures established for issuing rapid MCM response.	CDC, USAID			
Year 5 (Sep. 2019)	Formalized agreements for rapid cross border deployment of personnel and materiel developed.	CDC			
Year 5 (Sep. 2019)	Formalized agreements for rapid cross border deployment of personnel and materiel are adopted, tested and validated.	CDC			