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Current major event

1st Training on Event Management System completed in EMRO

The World Health Organization Regional Office for Eastern Mediterranean (WHO/EMRO) in collaboration with WHO/HQ, conducted a training on Event Management System (EMS) in Cairo from 22-26 April 2012. This five days course was attended by 14 WHO staff from 7 WHO country offices and the Regional Office. The hand-on training targeted staff dealing with disease surveillance and public health emergency response. The purpose of this training was to introduce the EMS tool and to promote its use for recording and monitoring public health events in the country offices.

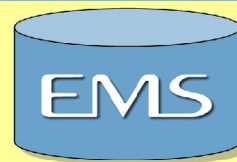
Editorial note

The WHO Event Management System (EMS) is a tool used by the organization to manage public health events which threaten international health security. The system was originally developed in the context of communicable diseases, but the model has been adopted for all hazards (chemical, biological, radio-nuclear etc) events. The system follows a standard process for managing public health events through established organizational structures at WHO HQ, regional and country offices. These structures provide the foundation for consistent, well-coordinated WHO operations in support of Member States during epidemics and other public health emergencies.

EMS was rollout in HQ in May 2009. In June 2009 the first round of trainings for expert users in HQ and Regional offices were conducted, followed by Training of Trainers sessions in August 2009. Selected staffs responsible for surveillance and event monitoring from the six regional offices were trained in two sessions as expert users and trainers on the use of the tool that same year. Since then most of the WHO regions have rolled out EMS trainings to the country offices and events entries are now initiated and

Risk communication products

- EMS feeds information to GOARN and IHR Event Information Sites



Objectives of the Workshop

- Strengthen the capacity of the WHO Country offices to be actively involved in the Event Management Group whenever its host country is affected by an event.
- To introduce and promote the entering of events in EMS and recording actions/decisions at the WHO Country offices
- Strengthen the capacities at WRO to be able to assist the Member State in assessing public health risks against Annex 2 of the IHR (2005)

monitored at the country levels in these regions. This is the first training on EMS in the Eastern Mediterranean Region. A second similar training for the staff in the remaining country offices will follow next year.

During the five days training, the participants were also introduced to the concept of risk assessment, risk analysis and risk communication as part of risk management. The rest of the training focused on event management system with a lot of time spent on hands-on practice on data entry in the system. At the end of this training, the participants will be able to use the knowledge to get actively involved in the Event Management Group whenever your host country is affected by an outbreak/event.

Update on outbreaks

in the Eastern Mediterranean Region

Hospital associated infection in Jordan; Meningococcal meningitis in Sudan; Avian Influenza (H5N1) in Egypt

Current public health events of international concern

[cumulative N° of cases (deaths), CFR %]

Avian influenza

| | |
|--------------|---------------------|
| China | [42(28), 66.7%] |
| Egypt | [167 (60), 35.9%] |
| Indonesia | [188 (156), 82.9 %] |
| Viet Nam | [123(61), 49.5%] |
| Cambodia | [20(18), 90%] |
| Bangladesh | [6(0), 0%] |
| Global total | [602(355), 59.0%] |

Measles

| | |
|-------------|---------------------|
| Afghanistan | [261 (0), 0%]# |
| Somalia | [1046 (na), na%)]# |
| Yemen | [3800(124), 3.3%] # |

Hospital Associated infection

| | |
|--------|----------------|
| Jordan | [11(1), 9.1%]# |
|--------|----------------|

Meningococcal Meningitis

| | |
|-------|------------------|
| Chad | [1043(67), 6.4%] |
| Sudan | [42(7), 16.6%] |

CFR=Case-Fatality Rate;
ILI = Influenza-like Illness
* Number of hospital visits;
Suspected cases only