



**Global Infection Prevention and  
Control Network (GIPCN)  
Infection Prevention and  
Control in Public Health  
Emergencies Working Group  
(IPC PHE WG): Progress report  
August 2022 – June 2024**



**World Health  
Organization**

## 1. Background

The Infection Prevention and Control in Public Health Emergencies Working Group (herein, IPC PHE WG) was established on 31 August 2022 (1, 2). This working group is a sub-group to the Global Infection Prevention and Control Network (GIPCN) (<https://www.who.int/groups/global-infection-prevention-and-control-network>) and is hosted by the Infection prevention and control (IPC) and water, sanitation and hygiene (WASH) team, which is part of the World Health Organization (WHO) Health Emergencies (WHE) Programme. The aim of the IPC PHE WG is to discuss on a regular basis technical and operational topics related to IPC preparedness, readiness and response in the context of public health emergencies. The IPC PHE WG can also be called upon on an *ad hoc* basis for deliberation at the outset of a public health event, contributing to response efforts, products development and dissemination. Specific objectives of the IPC PHE WG are available in the terms of reference (ToR) (Annex 1).

## 2. Purpose

The purpose of this report is to present the main IPC PHE WG activities and challenges from August 2022 to June 2024 and the 2023-2025 work plan.

## 3. Summary of membership, activities and outputs

The ToR were proposed during the first IPC PHE WG meeting held in August 2022 (2) and after receiving and incorporating feedback were endorsed in October 2022 (Annex 1). The summary of IPC PHE WG country and organizational representation is presented in Table 1 and the list of members names is available in Annex 2.

**Table 1. Representation of organizations and respective number of members of the Infection Prevention and Control Public Health Working Group, 2022/2024**

Organizations	Number of members
Asia Pacific Society of Infection Control	1
Association for Professionals in Infection Control and Epidemiology	1
European Committee on Infection Control	1
Global Outbreak Alert and Response Network	1
Hong Kong University, Faculty of Medicine	1
Infection Prevention and Control Canada	1
Institute of Epidemiology Disease Control and Research	1
International Infection Control Branch, Centers for Disease Control and Prevention	3
Ministry of Health, Uganda	1
National Centre for Infectious Diseases, Tan Tock Seng Hospital	1
Nigeria Centre for Disease Control and Prevention	1
Robert Koch Institute	2
Society of Healthcare Epidemiology of America	1
The Global Fund	1
UK Health Security Agency	2
UK Public Health Rapid Support Team	1
UNICEF	2

WHO Collaborating Centre for Reference and Research on Antimicrobial Resistance and Healthcare Associated Infections	1
World Surgical Infection Society	1

UNICEF: United Nations Children’s Fund

For the period covered in this report, ten meetings were held. A summary of agenda items and objectives for these meetings is presented in Table 2.

**Table 2. Dates, agenda items and number of participants of the Infection Prevention and Control in Public Health Working Group meetings from August 2022 to June 2024.**

Date	Agenda items (meeting objectives)	Number of participants
<b>31 August 2022 (hybrid)</b>	<ul style="list-style-type: none"> <li>Present ToR and discussions</li> </ul>	Members of GIPCN <sup>a</sup>
<b>12 October 2022 (online)</b>	<ul style="list-style-type: none"> <li>Endorse IPC PHE WG ToR</li> <li>Update on the Uganda EBOD outbreak (Sudan virus) with focus on IPC activities</li> <li>Discuss key IPC issues requiring rapid advice in the context of Uganda EBOD outbreak</li> </ul>	External members: 16 WHO members: 11
<b>01 Decemeber 2022 (online)</b>	<ul style="list-style-type: none"> <li>Inform about the prioritization research exercise for IPC in EBOD/MARD</li> <li>Discuss and agree on the listed research questions</li> <li>Initiate discussion about the prioritization criteria for IPC in EBOD/MARD</li> </ul>	External members: 18 WHO members: 8
<b>02 Feburary 2023 (online)</b>	<ul style="list-style-type: none"> <li>Review two sets of proposed indicators enabling prioritization of IPC intervention support during cholera outbreaks: minimal HAI surveillance, quality of care indicators</li> <li>Define the way forward for prioritization of IPC intervention support to health-care facilities, cholera treatment centres/units and oral rehydration points during large outbreaks of cholera</li> </ul>	External members: 11 WHO members: 10
<b>18 May 2023 (hybrid)</b>	<ul style="list-style-type: none"> <li>Identify gaps and define priorities/key activities of this working group for June 2023 – December 2024</li> </ul>	Members of GIPCN <sup>a</sup>
<b>15 June 2023 (online)</b>	<ul style="list-style-type: none"> <li>Inform about the upcoming Global Research and Innovation Forum</li> <li>Discuss and identify IPC research priorities in the context of epidemics and pandemics</li> </ul>	External members: 13 WHO members: 6
<b>23 August 2023 (online)</b>	<ul style="list-style-type: none"> <li>Brief IPC PHE WG on WHE IPC activities</li> <li>Discuss the IPC PHE WG work plan proposal for September 2023 – December 2024</li> <li>Present and discuss ideas for virtual consultation network</li> </ul>	External members: 11 WHO members: 14

<b>18 September 2023 (online)</b>	<ul style="list-style-type: none"> <li>• Present the current situation of NiV and summary of recommendations from organizations</li> <li>• Share experiences with NiV</li> <li>• Discuss IPC advice regarding NiV</li> </ul>	External members: 12 WHO members: 15
<b>10 April 2024 (online)</b>	<ul style="list-style-type: none"> <li>• Brief IPC PHE WG on the WHE IPC&amp; WASH activities</li> <li>• Define next steps of the IPC PHE WG 2024-2025 work plan</li> </ul>	External members: 11 WHO members: 9
<b>19 June 2024 (online)</b>	<ul style="list-style-type: none"> <li>• Present the current situation of Gaza in health facilities, including the health facility IPC rapid assessment tool</li> <li>• Brief IPC PHE WG on the newly established Public Health and Social Measures (PHSM) taxonomy, classifications and activities and consider implications for “IPC in the communities”</li> </ul>	External members: 10 WHO members: 14

<sup>a</sup>held during the meeting of the GIPCN

GIPCN: Global Infection Prevention and Control Network; WHO: World Health Organization; IPC PHE WG: Infection Prevention and Control in Public Health Emergencies Working Group; ToR: Terms of Reference; EBOD: Ebola disease; MARD: Marburg disease; HAI: Health-care-associated infection; WHE: WHO health emergencies programme; NiV: Nipah Virus

As part of the follow up from meetings held, documents were shared with members for their review and inputs. Technical thematic areas and operational documents that members contributed to included:

- Household disinfection for Ebola disease cases
- IPC Rapid assessment tool for Ebola treatment centers (Uganda)
- Minimal health-care-associated surveillance and quality-of-care indicators for cholera outbreaks
- [Infection prevention and control and water, sanitation and hygiene measures for diphtheria in health-settings: operational guide](#)
- [Infection prevention and control and water, sanitation and hygiene measures in health care settings and shelters/congregate settings in Gaza: Technical note](#)
- [Infection prevention and control and water, sanitation and hygiene measures for Crimean-Congo haemorrhagic fever in health-care settings: operational guide](#)

#### 4. Workplan 2023 – 2025

IPC PHE WG 2023-2025 activities planning was discussed among the members and other GIPCN participants during the “International meeting on the global action plan and monitoring framework for infection prevention and control” in May 2023 (2). Priorities defined for the activities up to December 2025 were organized around the four objectives of this working group, and included the following:

*Timely advice for emerging threats*

- Improve peer-to-peer communication in a safe environment for information sharing, including from frontline health and care workers, with other countries to support readiness and response;
- Develop strategies to communicate when there is a lack of certainty about emerging guidance;
- Develop advice targeted to the needs and perspectives of specific groups, such as, families, community members, and politicians.

#### *Development and dissemination of rapid advice and guidance*

- Explore the potential of community engagement in IPC;
- Develop IPC standards for disaster responses;
- Improve approaches to create and validate living guidance documents as outbreaks evolve;
- Develop guidance to optimize the procurement of personal protective equipment and other supplies.

#### *Communication and collaboration across networks*

- Empower and institutionalize GIPCN focal persons;
- Build and expand relationships between the Working Group and other key stakeholders and networks, particularly those with specific expertise;
- Expand, pool and build capacity of potential deployment resources.

#### *Research priorities for emerging threats*

- Develop a research prioritization exercise with a focus on resource-limited settings;
- Develop and define standing research protocols and platforms before an event happens.

The IPC PHE WG members also participated in a IPC research prioritization exercise related to Ebola disease and Marburg disease. The report summarizing the results of this exercise will shortly be published.

In October 2023 and May 2024, the IPC PHE WG was listed in the WHO Catalogue of advisory groups, network and partnerships relevant to pandemic preparedness as one of the GIPCN working groups (3).

## 5. Challenges

A key challenge of the IPC PHE WG is the nature of public health emergencies, which often requires convening experts on short notice. This can result in experts not being readily available to meet due to competing priorities. To ensure that inputs from those who were unable to participate in these *ad hoc* meetings, organizers shared technical documents and meeting notes via email.

## Acknowledgments

WHO gratefully acknowledges the individuals and organizations who contributed to this document, in particular the IPC Public Health Emergency Working Group, for their contributions over the last year, individual names can be found in Annex 2. April Baller (WHE IPC & WASH Team lead) was responsible for coordinating IPC PHE WG, overseeing activities and reviewing this report. Maria Clara Padoveze (WHO, IPC consultant) was responsible for the secretariat of the IPC PHE WG and writing of this report.

## References

1. WHO. Global Infection Prevention and Control Network: In-person and virtual meeting, 31 August 2022. WHO: Geneva, 2022. <https://www.who.int/groups/global-infection-prevention-and-control-network> [accessed 11 Dec 2023]
2. WHO. International meeting on the global action plan and monitoring framework for infection prevention and control 16-18 May 2023. WHO: Geneva, 2023. <https://www.who.int/publications/m/item/who-global-infection-prevention-and-control-network-meeting-May-16th-18th-2023> [accessed 11 Dec 2023]

3. WHO. Catalog of Advisory Groups, Networks and Partnerships relevant to Pandemic Preparedness. WHO: Geneva, 2024. <https://www.who.int/publications/m/item/catalogue-of-advisory-groups-networks-and-partnerships-relevant-to-pandemic-preparedness-2024> [accessed 07 June 2024]

## Annex 1: IPC in public health emergencies working group terms of reference

*(As of 05 October 2022)*

### Global Infection Prevention and Control (IPC) Network (GIPCN) IPC in Public Health Emergencies (PHE) Working Group – facilitated by WHO Health Emergencies (WHE) Programme

#### Background

Experiences with recent and ongoing public health emergencies, including those related to outbreaks of coronavirus disease (COVID-19), Ebola disease (EBOD) and mpox, highlight the critical role of IPC in preparedness, readiness and response efforts for emerging and re-emerging pathogens. “The COVID- 19 pandemic has exposed many challenges and gaps in IPC in all regions and countries, including those which had the most advanced IPC programmes,” said WHO Director-General Tedros Adhanom Ghebreyesus. “It has also provided an unprecedented opportunity to take stock of the situation and rapidly scale up outbreak readiness and response through IPC practices.”

Among its core objectives, the GIPCN has assisted WHO by “enhancing global outbreak response through provision of technical advice and rapid development and dissemination of relevant recommendations/documents during emergency situations and by providing evidence-based IPC recommendations to contain outbreaks as well as contributing to WHO Emerging Diseases Clinical Assessment and Response Network’s (EDCARN) and/or Global Outbreak Alert and Response Network’s (GOARN) calls to action in the event of a global health emergency.” Given the increasing needs for planning to enable rapid responses to public health emergencies and to provide timely advice at the early stages, establishing a specific working group of the GIPCN is recommended.

#### Purpose

To establish a working group on IPC in PHE within the GIPCN that will discuss technical and management topics related to IPC preparedness, readiness and response on a regular basis and that can be called upon for immediate deliberation at the outset of the readiness and response phases of public health events, contributing to surge capacity, response efforts, product development and dissemination.

#### Objectives of the IPC in Public Health Emergencies (PHE) Working Group (WG)

Support Member States’ IPC public health emergencies response efforts through provision of:

1. Timely advice within the context of emerging or re-emerging public health threats and events, supported by information and epidemiological data collection and analysis from health care and community settings;
2. Support for the development, peer review and dissemination of rapid advice guidance and relevant derivative products, including training materials and community engagement materials;

3. Support for response efforts by facilitating communication and collaboration across existing response networks, including GOARN, EDCARN, Emergency Medical Teams (EMTs) and the global roster of IPC professionals within WHO's Global Infection Prevention and Control Network, among others;
4. Contributions to defining the immediate and longer-term IPC research priorities and implementation considerations within the context of new or re-emerging pathogens to inform the development of research protocols.

## Membership of the Infection Prevention and Control in Public Health Emergencies Working Group

The WHE IPC Public Emergencies WG will include:

A core group of members

- GIPCN members who express interest in this working group;
- Representatives from key organizations with specific roles in IPC in PHEs;
- Individual IPC professionals with expertise and field experience, particularly in resource-limited settings, which may include (but not be limited to) IPC, infectious diseases, microbiology, virology, epidemiology, laboratory medicine, occupational health and safety, public health emergency management, environmental health, behaviour and implementation science, and water, sanitation and hygiene (WASH).

Ad hoc members:

- Individuals with subject-matter expertise tailored to a particular event/threat at hand (e.g. mpox) for a coordinated and agile response; determination of membership composition and type of subject matter expertise may be tailored to a particular event to enhance operational readiness and effective response.

## Collaboration and coordination across existing networks and WGs

WHO has several established networks and committee structures with an IPC element or programmatic component. This WG will complement (not duplicate) collective efforts; the convening of the WG in response to an emerging event will include cross-representation when warranted for a coordinated approach.

## Methods of working/accountability

This WG of the GIPCN will meet at minimum quarterly and more frequently as required (as decided by the chairperson) to discuss ongoing issues related to IPC in outbreaks. Where an ongoing situation is anticipated not to be resolved in a time-limited response, an event-specific working group may be established. The WG will meet primarily virtually, using an online, web-based platform; WHO will facilitate teleconference/videoconference discussions. Notes from any group discussions and recommendations/actions arising from these will be recorded and shared by WHO on the web-based platform. Subject to the availability of funds and approvals, the working group will meet, ideally, in person once per year or whenever necessary. WHO will pay for travel to WHO-led, in-person meetings, with payouts in line with the UN-approved per diems that WHO pays for external experts.





## Lifespan and evaluation of the working group

This WG will exist until WHO and other participants deem it no longer necessary. WHO reserves the right to revise the participant list or to close the WG at any time.

The WG's work will be documented through regular reports describing engagement between WHO and participants as well as through any collaborative outputs delivered and will feed into reviews of WHO-related work.

## Disclaimer

The opinions of the WG participants may not necessarily align with those of WHO; participants may not assert that they are working for or on behalf of WHO (unless, under certain circumstances, any members are contracted to work for WHO).

## Annex 2: Infection Prevention and Control in Public Health Emergencies Working Group members

(As of 30 August 2023)

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