



**REPÚBLICA
PORTUGUESA**

GABINETE DO MINISTRO DA SAÚDE

Exmo. Senhor
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Assunto: Requerimento nº 93/XV/1 de 1 de março de 2023 do PSD - Avaliação da resposta portuguesa a situações de emergência.

Caro João,

Relativamente ao assunto referenciado em epígrafe e depois de ouvida a Direção Geral de Saúde (DGS), encarrega-me o Sr. Ministro da Saúde de informar que para melhor entendimento do processo e dos relatórios esperados, importa referir que o *Universal Health and Preparedness Review* (UHPR) é um mecanismo piloto da Organização Mundial da Saúde (OMS) em que Portugal tem participado desde que a iniciativa foi anunciada pelo Diretor-Geral da OMS, Dr. Tedros Ghebreyesus, em novembro de 2020, contando com a participação regular dos organismos do Ministério da Saúde, particularmente da DGS, que coordenou a avaliação nacional e cuja equipa constitui o Secretariado Nacional do UHPR, a par de elementos do Ministério dos Negócios Estrangeiros.

O UHPR pretende implementar uma revisão voluntária, regular e transparente das capacidades nacionais de saúde, facilitada pela OMS, promovendo o compromisso de todos os Estados-Membro em reforçar as suas capacidades e reduzir eventuais fragilidades na cobertura universal e na preparação e resposta a emergências de saúde. O processo UHPR pretende melhorar globalmente as capacidades dos sistemas de saúde e aumentar a coerência nos investimentos, melhorando também a equidade, promovendo solidariedade e responsabilização na esfera da saúde global. Até hoje, o processo ainda se limita ao contexto de avaliação piloto realizada na República Centro-Africana, Iraque, Portugal e Tailândia.



Portugal iniciou o processo de avaliação nacional em novembro de 2021, tendo reuniões regulares com os peritos da OMS que culminaram na visita ao país de 2 a 6 de maio 2022. Nessa semana, foram realizadas entrevistas a representantes políticos (nomeadamente ao Presidente da Comissão Parlamentar de Saúde), governativos, administrativos e técnicos; foram organizados quatro exercícios de simulação e várias discussões de grupo, para aferir a capacidade do país na resposta e coordenação intersectorial; foram realizadas visitas a instituições e organismos das regiões Norte, Lisboa e Vale do Tejo e Algarve, para aferir boas práticas, desafios e limitações dos atores regionais, locais e da comunidade; foi realizada uma revisão da documentação nacional de referência (legislação, planos de preparação e resposta, entre outros); e foram apresentados os resultados preliminares e recomendações na cerimónia de encerramento. Este processo de análise teve a participação e contributos de várias áreas governativas e sectores, bem como da sociedade civil, de forma a avaliar o compromisso multissetorial e o envolvimento de toda a sociedade na preparação para emergências de saúde.

Portugal, através do Secretariado Nacional do UHPR, está a concluir a elaboração do Relatório da Avaliação Nacional com base no novo modelo partilhado pela OMS e prevê submetê-lo ao secretariado da OMS durante o mês de abril de 2023. Posteriormente, o Relatório da Avaliação Nacional ficará disponível para consulta na ligação eletrónica do UHPR e aberto a todos Estados-Membros da OMS.

Posteriormente à submissão do Relatório da Avaliação Nacional à OMS, segue-se a segunda fase do mecanismo, que consiste na avaliação do Relatório por pares, nomeadamente por peritos de outros Estados-Membro. Esta fase ainda não foi formalmente experimentada por nenhum dos países que realizaram a revisão nacional do UHPR, no entanto, é expectável que ocorra antes ou durante a próxima Assembleia Mundial da Saúde (que decorre de 21 a 30 maio 2023), sob coordenação da OMS.

É importante referir que Portugal, além da participação no piloto, tem participado em várias iniciativas para promover o exercício, que incluem, até à data, apresentação da metodologia da Avaliação Nacional durante um evento paralelo às negociações do Tratado Pandémico (evento coorganizado com a Suíça em junho 2022) e em consultas a Estados-Membro organizadas pela OMS (dezembro 2022); reuniões bilaterais, principalmente a nível técnico, com Estados-Membro (Luxemburgo, França, Reino Unido, Eslováquia); iniciativa de criação de um *discussion paper* com os quatro países envolvidos no processo piloto, para motivar debate para a fase de revisão por pares; e participação em reuniões do *Technical*



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Advisory Group do UHPR, um grupo de peritos independentes criado para apoiar o desenvolvimento do mecanismo.

Está ainda previsto Portugal apresentar a sua experiência e metodologia numa reunião da Região das Américas da OMS (PAHO).

Portugal tem encarado o UHPR como um mecanismo importante, não só para avaliar as dimensões de cobertura universal de saúde, preparação e resposta a emergências e prioridades de políticas de saúde na abordagem “*whole-of-governement*”, mas também como uma oportunidade para integrar as principais lições da pandemia na melhoria das capacidades nacionais, contribuindo, a nível internacional como um ator relevante nos processos em curso na OMS de governança global da saúde (Organismo Intergovernamental de Negociação do Tratado Pandémico e Grupo de Reforma do Regulamento Sanitário Internacional).

Face ao exposto, a DGS, apesar da disponibilidade para prestar todos os esclarecimentos e informação necessários, só pode partilhar o Relatório da Avaliação Nacional quando o mesmo estiver finalizado.

O Governo partilha, em anexo, o relatório executivo como um dos primeiros produtos disponíveis do processo piloto UHPR.

<https://www.who.int/emergencies/operations/universal-health---preparedness-review>

Com os melhores cumprimentos, *peçoais*

A Chefe do Gabinete

Sandra Gaspar

EXECUTIVE SUMMARY

Introduction

Global health security relies on an optimal level of preparedness of all countries to prevent, detect, respond to and recover from public health emergencies. Recent and ongoing pandemic (including the COVID-19 pandemic) have resulted in tragic loss of lives and livelihoods, exacerbating pre-existing inequalities and is threatening to reverse progress made towards the achievement of health-related Sustainable Development Goals and the WHO Triple Billion targets. It has revealed a collective failure of focus and investment in prevention, preparedness and response. The international community must invest in emergency preparedness to ensure that the world is safe and prepared to respond to future pandemics and ensure global health security. The protection from global health threats and public health emergencies of international concern relies on the preparedness of all countries, which should be based on Universal Health Coverage and resilient health systems.

All Member States have the responsibility to build and maintain effective capacities and systems for prevention of and response to public health emergencies of international concern and to abide by relevant international rules.

Existing evaluation mechanisms have already resulted in engaging stakeholders beyond the health sector to identify and address country level gaps in preparedness, detection and response to public health risks. Many functional reviews have identified critical capacity gaps, and lessons are currently being learned from Intra Action Reviews. However, these processes have not resulted in countries building the necessary critical capacities, sharing experiences and resources and fostering the transfer of knowledge, technologies and innovation needed for keeping the world safe, serving the vulnerable and promoting health. It has not created the level of shared accountability and the full recognition that countries are only as strong as the weakest link. National Plans of Action for Health Security and other plans have not been fully implemented.

The Universal Health and Preparedness Review (UHPR) will seek to ensure these issues will be considered at the highest political level and recommendations will be followed up.

The UHPR is a Member States led voluntary, participatory and transparent mechanism to build public health infrastructure that will make the world safer. The UHPR aims to bring nations and stakeholders together in solidarity and mutual trust to support effective

international cooperation, foster exchange of best practices both at national and regional level, identify new and emerging issues, promote accountability and promote efficient targeting and use of investments.

The UHPR will specifically seek to:

- (i) promote peer to peer review, learning, and mutual trust;
- (ii) act as a platform to share experiences, solutions and best practices for Member States;
- (iii) lead to enhanced accountability, transparency and solutions that can be shared;
- (iv) support and advance the principles of fairness and equity that underlie the goal of health for all as a human right.

The UHPR will promote global action and bring nations and stakeholders together around the principles of mutual trust, transparency and accountability to better build national capacity for pandemic preparedness, universal health coverage and healthier populations.

Methodology of the UHPR pilot

The methodology of the UHPR was adapted for the pilot mission in Portugal, including:

Phase I:

1. Compilation and analysis of the UHPR indicators between National Secretariat and WHO HQ and WHO RO team;
2. Collection of inputs from National Commission in regards to indicators and chapters of the draft national report initiated by Secretariat and WHO teams;
3. Collection of contributions of other partners through online survey on best practices, gaps, recommendations and sharing documents;
4. Elaboration of draft report to be discussed at phase II.

Phase II:

1. More than 20 high-level advocacy meetings with National Commission members, involving different legislative, political, administrative, and technical levels;
2. Organisation of four simulation exercises (at the national and subnational levels) with more than 100 participants;
3. Focus group discussions with more than 80 participants to review the draft UHPR national report, based on SWOT analysis;
4. Review of more than 140 reference documents shared by the country;

5. More than 20 key-informant interviews;
6. Field visits in three regions: Northern, Lisbon and Tagus Valley, and Algarve, with 11 sites visited;
7. At the end of the mission, the external review team presented the preliminary results and recommendations to the country during a debriefing session, followed by a press conference.

Outcomes / Added value of the UHPR Pilot Mission in Portugal

- Meetings with country high-level authorities to elevate considerations on preparedness to the highest level of government;
 - Mobilization of key stakeholders following the whole of government & whole of society approaches that will contribute to establishing and sustaining improved levels of cross-sectoral collaboration;
 - Demonstrate to the global community the country's transparency, accountability, and commitment;
 - Identification of best practices, challenges and recommendations for prioritizing interventions, mobilizing domestic, regional and global resources & addressing areas that require immediate attention in a sustainable manner;
 - Showcase Portugal's best practices to the rest of the world for engaging the country in international sharing and learning platforms, as well as bilateral and multilateral cooperation projects with member states in need; in a spirit of global solidarity.
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- **Best practices:**
 - Commitment to health and health security at the highest levels
 - High level political commitment to the UHPR – engaged with global initiatives for global health security;
 - Each of the 5 regions were allocated a high-level govt. official (Deputy Minister/State Secretary) to oversee the response to COVID-19;
 - UN and EU policies, legislations and regulations for health security, health systems and Universal Health Coverage are fully transcribed and integrated into Portuguese laws and other legal instruments
 - Strong policy, legal and normative instruments to implement EU and IHR requirements in all sectors and across the government at all jurisdictions with

- Technology and innovation
 - Efforts to apply ICT tools to improve data analysis;
 - Best use of these innovations for decision making and speed of operational response (readiness).

- **Challenges – areas needing attention:**
 - Insufficient human resources and incentives (across managerial, technical, service levels);
 - Lack of an overarching plan for Public Health Emergency Preparedness and Response (PHEPR) plans that complements other sector plans;
 - Emergency data management agility and interoperability of existing Information Technology tools need to be improved;
 - Limited and not sustainable budget and other resources for investment in health emergency preparedness
 - Funds are mainly oriented to response rather than preparedness activities;
 - Insufficient integration of public health emergency preparedness and response approach in all policies and sectors;
 - Lack of systematic and institutionalised training in Public Health emergency preparedness and response.

- **Priorities / Recommendations:**
 - Governance and Leadership
 - Review and update legislation and policies for emergency response
 - Development of legislation facilitating the rapid implementation of PH measure;
 - to better define roles and responsibilities of decision-makers, technical experts and community during public health emergencies;
 - Reflect on the alignment between mapping of health districts and administrative breakdown of districts;
 - Leverage EC/EU policies - Use existing EU instruments within the EU 4 health;
 - Multi sectoral coordination
 - Sustain and institutionalize key partnerships developed during pandemic response;
 - Reinforce One Health strategy, with active involvement of community partners;

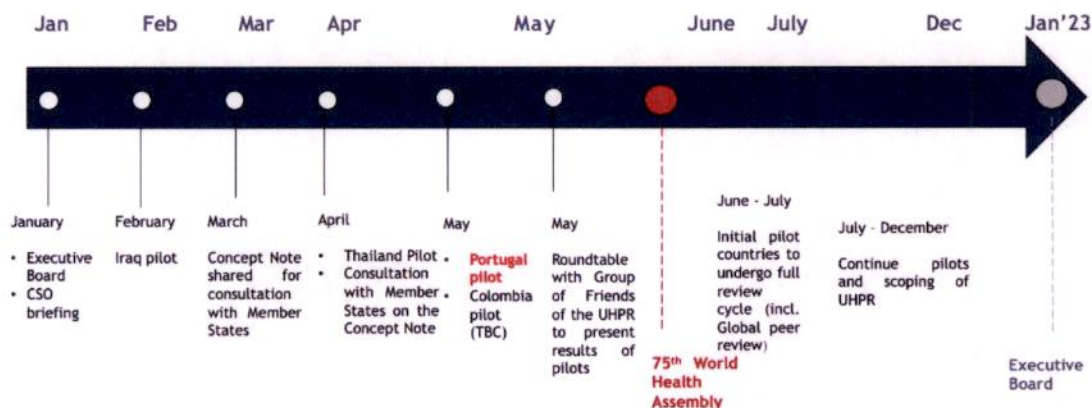
- Research & Development
 - Expand and enhance R&D-specific capacities in support of health emergency preparedness;
 - Strengthen networks across Europe in data exchange and research;
- Engagement of Communities, Risk Communications
 - Enhance risk communication at local levels;
 - Build a reliable communication network within and between organizations and with the public;
- Data and Information Sharing
 - Real time data sharing and better data integration in all sectors;
 - Improve tools to make them user friendly and needs driven;
 - Integrate data management for routine activities;
- Digital Technology and Telemedicine
 - Maintain and increase investment in innovation and digital technology;
- National Planning
 - Engage high-level decision-makers in the endorsement of the National Health Plan 2021-2030 for UHC, healthier populations and emergency preparedness;
 - Systematize development and implementation of national emergency preparedness and response plans (with clear roles and responsibilities, thresholds for activation of surge, SOPs and TORs). Anchor all within national plans (NAPHS/NHSP);
 - Reinforce national strategy of mental health during crises for management at local level;
 - Incorporate learning, M&E and routine testing of plans, surge capacity and multisectoral response within agencies;
 - Routine testing of general risk management capacity senior policy makers and administrators (simultaneous crisis management);
 - Incorporate simulation exercises within all aspects of planning;
 - Capture, document and disseminate the best practice and lessons learnt from pandemic (IAR & AAR);
 - Address challenges in the training, recruitment and career paths at the interministerial level;
 - Development and implement a strategy to integrate in the system and processes the gains made during the pandemic response;

- Increase and make more sustainable the budget lines for health emergency prevention and preparedness, based on lessons learned from COVID-19 pandemic;
- More engagement of the parliament including through the health commission for PH emergencies preparedness and response.

Next steps

After the finalization and endorsement of the report by the country, the UHPR report will be submitted to two international commissions. First to an Expert Advisory Commission (EAC) and second to a Global Peer Review Commission (GPRC).

Timeline 2022 - 2023



Both commissions will produce a report and the conclusions from these commissions will be shared, along with the country report, through Regional and Global WHO governing body mechanisms. This will help to demonstrate to the global community the country's transparency, accountability and commitment and help to raise reliable and sustainable domestic funding, as well as external funds from donors and partners that will support the implementation of recommendations.

Conclusion

This exercise highlighted the main best practices, gaps and challenges in Portugal with regard to national and subnational capacities for health security, health systems and

Universal Health Coverage. All data and information collected allows us to make recommendations to maintain best practices and address gaps and challenges.

Ultimately, the added value of this UHPR process for Portugal is that it will, in the short, medium and long term: ensure leadership and stewardship from the highest level of government, strengthen multisectoral and whole of society engagement, and make the country benefit from experts and peers' advice in identifying approaches to close gaps and areas for improvement. This transparent process will help to increase domestic funds allocated to health and to provide confidence to donors and partners investing in building health systems and strengthening preparedness and health security that may lead to greater access to funding and resources. Finally, this periodic review will contribute to ensure sustainable resources; and keep health emergency preparedness high on national, regional and global political agendas.